



QUARTERLY STATEMENT

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

HOME AND FARM INSURANCE COMPANY

NAIC Group Code.....46, 46 (Current Period) (Prior Period)	NAIC Company Code..... 17639	Employer's ID Number..... 35-1630739
Organized under the Laws of OH	State of Domicile or Port of Entry OH	Country of Domicile US
Incorporated/Organized..... January 29, 1985	Commenced Business..... March 5, 1985	
Statutory Home Office	One Heritage Place..... Piqua OH US 45356 (Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	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)
Mail Address	One Heritage Place..... Piqua OH US 45356 (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	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)
Internet Web Site Address	N/A	
Statutory Statement Contact	Robert E. Bornhorst (Name) rob.bornhorst@buckeye-ins.com (E-Mail Address)	937-778-5000 (Area Code) (Telephone Number) (Extension) 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.	

OTHER

Robert E. Bornhorst	Vice President
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DIRECTORS OR TRUSTEES

Donald E. Benschneider	Richard J. Seitz	J. MacAlpine Smith	William L. Sweet Jr.
Ralph F. Thiele			

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

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 [] _____ _____ _____
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HOME AND FARM INSURANCE COMPANY
ASSETS

	Current Statement Date			4
	1	2	3	December 31 Prior Year Net Admitted Assets
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	
1. Bonds.....	6,672,735		6,672,735	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 (\$.....203,927), cash equivalents (\$.....0) and short-term investments (\$.....63,433).....	267,360		267,360	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).....	6,940,095	0	6,940,095	6,976,945
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	32,985		32,985	47,440
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	505,840		505,840	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.....	17,260		17,260	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.....	356,010	221,034	134,976	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.....	65,736		65,736	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).....	9,956,263	221,034	9,735,229	9,745,813
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	9,956,263	221,034	9,735,229	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 \$238,696).....	464,144	430,338
2.	Reinsurance payable on paid losses and loss adjustment expenses.....	488,354	364,245
3.	Loss adjustment expenses.....	68,768	67,459
4.	Commissions payable, contingent commissions and other similar charges.....	62,583	160,515
5.	Other expenses (excluding taxes, licenses and fees).....	166,637	181,497
6.	Taxes, licenses and fees (excluding federal and foreign income taxes).....	14,295	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 \$194,657 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).....	1,025,514	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).....	124,451	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.....	173,678	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).....	2,888,424	2,799,417
27.	Protected cell liabilities.....		
28.	Total liabilities (Lines 26 and 27).....	2,888,424	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).....	(1,607,660)	(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).....	6,846,803	6,946,395
38.	Totals (Page 2, Line 28, Col. 3).....	9,735,227	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
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct..... (written \$.....302,447).....	335,001	362,661	480,932
1.2 Assumed..... (written \$.....1,637,193).....	1,623,060	1,571,282	2,091,311
1.3 Ceded..... (written \$.....302,447).....	335,001	362,661	480,932
1.4 Net..... (written \$.....1,637,193).....	1,623,060	1,571,282	2,091,311
DEDUCTIONS:			
2. Losses incurred (current accident year \$.....1,074,787):			
2.1 Direct.....	335,641	108,014	96,773
2.2 Assumed.....	1,209,342	1,038,654	1,330,381
2.3 Ceded.....	335,641	108,014	96,773
2.4 Net.....	1,209,342	1,038,654	1,330,381
3. Loss adjustment expenses incurred.....	82,442	110,212	139,210
4. Other underwriting expenses incurred.....	541,019	577,935	762,253
5. Aggregate write-ins for underwriting deductions.....	0	0	0
6. Total underwriting deductions (Lines 2 through 5).....	1,832,803	1,726,801	2,231,844
7. Net income of protected cells.....			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7).....	(209,743)	(155,519)	(140,533)
INVESTMENT INCOME			
9. Net investment income earned.....	99,833	112,073	146,940
10. Net realized capital gains (losses) less capital gains tax of \$.....0.....	(2,673)	8,207	12,438
11. Net investment gain (loss) (Lines 9 + 10).....	97,160	120,280	159,378
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....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).....	(112,583)	(35,239)	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).....	(112,583)	(35,239)	18,845
19. Federal and foreign income taxes incurred.....		777	777
20. Net income (Line 18 minus Line 19) (to Line 22).....	(112,583)	(36,016)	18,068
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year.....	6,946,396	6,938,758	6,938,757
22. Net income (from Line 20).....	(112,583)	(36,016)	18,068
23. Net transfers (to) from Protected Cell accounts.....			
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$.....0.....	9,608	15,336	5,666
25. Change in net unrealized foreign exchange capital gain (loss).....			
26. Change in net deferred income tax.....	(67)	(31,275)	(343)
27. Change in nonadmitted assets.....	3,451	37,090	(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).....	(99,591)	(14,865)	7,639
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38).....	6,846,805	6,923,893	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

HOME AND FARM INSURANCE COMPANY
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.....	1,653,436		2,128,917
2. Net investment income.....	139,431		218,279
3. Miscellaneous income.....			
4. Total (Lines 1 through 3).....	1,792,867	0	2,347,196
5. Benefit and loss related payments.....	1,060,522		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.....	740,120		908,255
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....			22,810
10. Total (Lines 5 through 9).....	1,800,642	0	2,227,556
11. Net cash from operations (Line 4 minus Line 10).....	(7,775)	0	119,640
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	1,333,807		2,091,781
12.2 Stocks.....	100,857		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).....	1,434,664	0	2,098,675
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	1,444,833		2,637,650
13.2 Stocks.....	377		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).....	1,445,210	0	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).....	(10,546)	0	(543,715)
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).....	(10,873)		26,205
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	(10,873)	0	26,205
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	(29,194)	0	(397,870)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	296,556		694,426
19.2 End of period (Line 18 plus Line 19.1).....	267,362	0	296,556

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

20.0001			
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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
NET INCOME					
(1) HOME AND FARM INSURANCE COMPANY state basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ (112,583)	\$ 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	\$ (112,583)	\$ 18,068
SURPLUS					
(5) HOME AND FARM INSURANCE COMPANY state basis (Page 3, line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 6,846,803	\$ 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	\$ 6,846,803	\$ 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
OTTI Recognized 1 st Quarter			
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 st Quarter	\$	\$	\$
OTTI Recognized 2 nd Quarter			
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 nd Quarter	\$	\$	\$
OTTI Recognized 3 rd Quarter			
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 rd Quarter	\$	\$	\$
OTTI Recognized 4 th Quarte			
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

	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
CUSIP						
	\$	\$	\$	\$	\$	
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	\$ (2,322)
	2. 12 Months or Longer	(3,183)
b. The aggregate related fair value of securities with unrealized losses:	1. Less than 12 Months	\$ 425,427
	2. 12 Months or Longer	223,911

(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

NOTES TO FINANCIAL STATEMENTS

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

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 reaquired 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	Settle- ments	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

NOTES TO FINANCIAL STATEMENTS

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination

F. Risk Sharing Provisions of the Affordable Care Act

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

Note 25 – Change in Incurred Losses and Loss Adjustment Expenses

Reserves as of December 31, 2016 were \$499,000. As of September 30, 2017, \$362,000 has been paid for incurred losses and loss adjusting expense attributable to insured events of prior years. Reserves remaining for prior years are now \$256,000 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore there has been a \$119,000 unfavorable prior year development since December 31, 2016 to September 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.

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?
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 [☒ X] No [☐]
- 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 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	3
Name of Entity	NAIC Company Code	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 [☒ 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	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	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:

\$65,736

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:

\$0

13.

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
\$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?

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:

1	2	3	Total Discount				Discount Taken During Period			
			4	5	6	7	8	9	10	11
Line of Business	Maximu m Interest	Disc. Rate	Unpaid Losses	Unpaid LAE	IBNR	Total	Unpaid Losses	Unpaid LAE	IBNR	Total
	0.000	0.000	0	0	0	0	0	0	0	0
Total	XXX	XXX	0	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	2	3	4	5	6	7
NAIC Company Code	ID Number	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurer	Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating
U.S. Insurers						
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

HOME AND FARM INSURANCE COMPANY
SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

		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
States, Etc.								
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.....N...						
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...	302,447		18,076		522,592	
16.	Iowa.....	IA.....N...						
17.	Kansas.....	KS.....N...						
18.	Kentucky.....	KY.....N...						
19.	Louisiana.....	LA.....N...						
20.	Maine.....	ME.....N...						
21.	Maryland.....	MD.....N...						
22.	Massachusetts.....	MA.....N...						
23.	Michigan.....	MI.....N...						
24.	Minnesota.....	MN.....N...						
25.	Mississippi.....	MS.....N...						
26.	Missouri.....	MO.....N...						
27.	Montana.....	MT.....N...						
28.	Nebraska.....	NE.....N...						
29.	Nevada.....	NV.....N...						
30.	New Hampshire.....	NH.....N...						
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...						
37.	Oklahoma.....	OK.....N...						
38.	Oregon.....	OR.....N...						
39.	Pennsylvania.....	PA.....N...						
40.	Rhode Island.....	RI.....N...						
41.	South Carolina.....	SC.....N...						
42.	South Dakota.....	SD.....N...						
43.	Tennessee.....	TN.....N...						
44.	Texas.....	TX.....N...						
45.	Utah.....	UT.....N...						
46.	Vermont.....	VT.....N...						
47.	Virginia.....	VA.....N...						
48.	Washington.....	WA.....N...						
49.	West Virginia.....	WV.....N...						
50.	Wisconsin.....	WI.....N...						
51.	Wyoming.....	WY.....N...						
52.	American Samoa.....	AS.....N...						
53.	Guam.....	GU.....N...						
54.	Puerto Rico.....	PR.....N...						
55.	US Virgin Islands.....	VI.....N...						
56.	Northern Mariana Islands.....	MP.....N...						
57.	Canada.....	CAN.....N...						
58.	Aggregate Other Alien.....	OT.....XXX.	0	0	0	0	0	0
59.	Totals.....	(a).....2	302,447	0	18,076	0	522,592	0

DETAILS OF WRITE-INS

58001.	XXX.						
58002.	XXX.						
58003.	XXX.						
58998. Summary of remaining write-ins for Line 58 from overflow page....	XXX.	0	0	0	0	0	0
58999. Totals (Lines 58001 thru 58003+ Line 58998) (Line 58 above).....	XXX.	0	0	0	0	0	0

(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.

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			Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire.....			0.000	
2. Allied lines.....			0.000	
3. Farmowners multiple peril.....			0.000	
4. Homeowners multiple peril.....			0.000	
5. Commercial multiple peril.....			0.000	
6. Mortgage guaranty.....			0.000	
8. Ocean marine.....			0.000	
9. Inland marine.....			0.000	
10. Financial guaranty.....			0.000	
11.1. Medical professional liability - occurrence.....			0.000	
11.2. Medical professional liability - claims-made.....			0.000	
12. Earthquake.....			0.000	
13. Group accident and health.....			0.000	
14. Credit accident and health.....			0.000	
15. Other accident and health.....			0.000	
16. Workers' compensation.....			0.000	
17.1 Other liability-occurrence.....	335,001	335,641	100.191	
17.2 Other liability-claims made.....			0.000	
17.3 Excess workers' compensation.....			0.000	
18.1 Products liability-occurrence.....			0.000	
18.2 Products liability-claims made.....			0.000	
19.1, 19.2 Private passenger auto liability.....			0.000	
19.3, 19.4 Commercial auto liability.....			0.000	
21. Auto physical damage.....			0.000	
22. Aircraft (all perils).....			0.000	
23. Fidelity.....			0.000	
24. Surety.....			0.000	
26. Burglary and theft.....			0.000	
27. Boiler and machinery.....			0.000	
28. Credit.....			0.000	
29. International.....			0.000	
30. Warranty.....			0.000	
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	0.000	
35. Totals.....	335,001	335,641	100.191	
DETAILS OF WRITE-INS				
3401.			0.000	
3402.			0.000	
3403.			0.000	
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0.000	XXX
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34).....	0	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.....	92,669	302,447	
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
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.....	0	0	0
35. Totals.....	92,669	302,447	0
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

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

HOME AND FARM INSURANCE COMPANY
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.....	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	2
	Year to Date	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

NONE

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.....	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
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	2
	Year to Date	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.....	1,445,213	2,642,390
3. Accrual of discount.....	1,715	5,043
4. Unrealized valuation increase (decrease).....	9,608	8,584
5. Total gain (loss) on disposals.....	(2,673)	12,429
6. Deduct consideration for bonds and stocks disposed of.....	1,434,660	2,098,639
7. Deduct amortization of premium.....	26,858	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).....	6,672,737	6,680,392
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	6,672,737	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

	1	2	3	4	5	6	7	8
NAIC Designation	Book/Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book/Adjusted Carrying Value End of First Quarter	Book/Adjusted Carrying Value End of Second Quarter	Book/Adjusted Carrying Value End of Third Quarter	Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a).....	5,769,648	618,371	565,434	(6,483)	5,645,532	5,769,648	5,816,102	5,758,798
2. NAIC 2 (a).....	919,318	53,321	50,802	(1,767)	921,021	919,318	920,070	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.....	6,688,966	671,692	616,236	(8,250)	6,566,553	6,688,966	6,736,172	6,613,964
PREFERRED STOCK								
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.....	6,688,966	671,692	616,236	(8,250)	6,566,553	6,688,966	6,736,172	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 \$.....63,434; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0.

QSI02

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.....	63,434	XXX.....	63,434		188

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.....	1,042,812	2,368,762
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....	1,006,542	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).....	63,433	27,163
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	63,433	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	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)
Bonds - U.S. Government										
912828 S7 6	US TREASURY N/B.....			07/24/2017.....	BANK OF AMERICA.....		122,163	125,000	680	1.....
0599999	Total - Bonds - U.S. Government.....						122,163	125,000	680	XXX.....
Bonds - Industrial and Miscellaneous										
06053F AA 7	BANK OF AMER CORP.....			08/04/2017.....	MKTX.....		53,321	50,000	85	2FE.....
20826F AD 8	CONOCOPHILLIPS.....			08/04/2017.....	STIFEL NICOLAUS & CO, INC.....		77,437	75,000	586	1FE.....
064159 HM 1	BANK OF NOVA SCOTIA.....			09/25/2017.....	CANTOR FITZGERALD & CO.....		100,955	100,000	34	1FE.....
3899999	Total - Bonds - Industrial and Miscellaneous.....						231,713	225,000	705	XXX.....
8399997	Total - Bonds - Part 3.....						353,876	350,000	1,385	XXX.....
8399999	Total - Bonds.....						353,876	350,000	1,385	XXX.....
9999999	Total - Bonds, Preferred and Common Stocks.....						353,876	XXX	1,385	XXX.....

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

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			F o r e i g n	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	Current Year's 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)
Bonds - U.S. Government																							
36290S	CK	5	GNMA #615774.....	..	09/01/2017.	MBS PMT.....		704	704	686	703		1		1		704			0	19	09/15/2018.	1.....
38376G	ZU	7	GNMA 2011-9 C.....	..	09/01/2017.	MBS PMT.....		6,563	6,563	6,838	6,638		(75)		(75)		6,563			0	137	09/16/2041.	1.....
38378T	AL	4	GNMA 2013-71 LA.....	..	09/01/2017.	MBS PMT.....		1,407	1,407	1,445	1,411		(4)		(4)		1,407			0	29	10/20/2042.	1.....
0599999.	Total - Bonds - U.S. Government.....							8,674	8,674	8,969	8,752	0	(78)	0	(78)	0	8,674	0	0	0	185	XXX	XXX
Bonds - U.S. Political Subdivisions of States																							
164231	JP	8	CHEROKEE CNTY GA SCH SYS.....	..	08/01/2017.	PREREFUNDED.....		75,000	75,000	75,315	75,021		(21)		(21)		75,000			0	2,850	08/01/2018.	1FE.....
2499999.	Total - Bonds - U.S. Political Subdivisions of States.....							75,000	75,000	75,315	75,021	0	(21)	0	(21)	0	75,000	0	0	0	2,850	XXX	XXX
Bonds - U.S. Special Revenue and Special Assessment																							
3128KT	D8	0	FHLMC A62827.....	..	09/01/2017.	MBS PMT.....		23	23	24	23				0		23			0	1	06/01/2037.	1.....
3128M5	GU	8	FHLMC G03511.....	..	09/01/2017.	MBS PMT.....		7	7	7	7				0		7			0		10/01/2037.	1.....
3128MB	XH	5	FHLMC G13180.....	..	09/01/2017.	MBS PMT.....		290	290	288	290				0		290			0	11	06/01/2023.	1.....
3128MC	FJ	9	FHLMC G13569.....	..	09/01/2017.	MBS PMT.....		837	837	861	839		(2)		(2)		837			0	26	04/01/2024.	1.....
3128MC	GH	2	FHLMC G13600.....	..	09/01/2017.	MBS PMT.....		448	448	459	449		(1)		(1)		448			0	13	06/01/2024.	1.....
3128MJ	V2	3	FHLMC G08632.....	..	09/01/2017.	MBS PMT.....		3,066	3,066	3,215	3,082		(15)		(15)		3,066			0	71	03/01/2045.	1.....
3128MJ	XK	1	FHLMC G08681.....	..	09/01/2017.	MBS PMT.....		2,960	2,960	3,087	2,973		(13)		(13)		2,960			0	69	12/01/2045.	1.....
3128MM	KX	0	FHLMC G18309.....	..	09/01/2017.	MBS PMT.....		295	295	300	296		(1)		(1)		295			0	9	05/01/2024.	1.....
3128PQ	NX	5	FHLMC J11306.....	..	09/01/2017.	MBS PMT.....		914	914	936	915		(1)		(1)		914			0	26	12/01/2024.	1.....
3128PR	JW	0	FHLMC J12077.....	..	09/01/2017.	MBS PMT.....		308	308	321	309		(1)		(1)		308			0	9	04/01/2025.	1.....
3128PS	L9	6	FHLMC J13052.....	..	09/01/2017.	MBS PMT.....		841	841	864	843		(2)		(2)		841			0	19	09/01/2025.	1.....
3132L6	AK	7	FHLMC V80910.....	..	09/01/2017.	MBS PMT.....		1,727	1,727	1,838	1,738		(11)		(11)		1,727			0	47	12/01/2043.	1.....
3136A1	X8	3	FNMA 2011-115 KE.....	..	09/01/2017.	MBS PMT.....		706	706	716	707		(1)		(1)		706			0	12	10/25/2039.	1.....
3136AB	LF	8	FNMA 2012-148 KB.....	..	09/01/2017.	MBS PMT.....		2,451	2,451	2,486	2,454		(3)		(3)		2,451			0	33	03/25/2042.	1.....
3136AG	DN	9	FNMA 2013-97 EK.....	..	09/01/2017.	MBS PMT.....		1,402	1,402	1,446	1,406		(4)		(4)		1,402			0	28	11/25/2028.	1.....
3136AG	QM	7	FNMA 2013-M13 A.....	..	09/01/2017.	MBS PMT.....		12,089	12,089	12,059	12,084		5		5		12,089			0	133	05/25/2018.	1.....
3136AP	EE	8	FNMA 2015-47 GA.....	..	09/01/2017.	MBS PMT.....		1,840	1,840	1,890	1,845		(5)		(5)		1,840			0	37	06/25/2044.	1.....
31371L	AB	5	FNMA #254802.....	..	09/01/2017.	MBS PMT.....		241	241	247	242				0		241			0	7	07/01/2018.	1.....
31371L	AP	4	FNMA #254814.....	..	09/01/2017.	MBS PMT.....		252	252	254	253				0		252			0	7	07/01/2018.	1.....
31371L	BH	1	FNMA #254840.....	..	09/01/2017.	MBS PMT.....		402	402	408	403				0		402			0	11	08/01/2018.	1.....
31371L	DY	2	FNMA #254919.....	..	09/01/2017.	MBS PMT.....		287	287	282	286				0		287			0	8	09/01/2018.	1.....
3137A6	TB	8	FHLMC 3812 LV.....	..	09/01/2017.	MBS PMT.....		9,681	9,681	10,395	9,797		(116)		(116)		9,681			0	258	04/15/2022.	1.....
3137B0	3W	2	FHLMC K502 A2.....	..	07/26/2017.	MBS PMT.....		4,716	4,716	4,747	4,722		(6)		(6)		4,716			0	39	08/25/2017.	1.....
3137BD	CQ	7	FHLMC 4377 LC.....	..	09/01/2017.	MBS PMT.....		1,786	1,786	1,851	1,795		(9)		(9)		1,786			0	35	04/15/2039.	1.....
3138EG	HR	8	FNMA #AL0239.....	..	09/01/2017.	MBS PMT.....		1,904	1,904	1,907	1,904				0		1,904			0	52	04/01/2041.	1.....
3138YR	6Y	9	FNMA #AZ0886.....	..	09/01/2017.	MBS PMT.....		2,529	2,529	2,623	2,540		(10)		(10)		2,529			0	51	07/01/2030.	1.....
31398K	A5	9	FHLMC 3589 PA.....	..	09/01/2017.	MBS PMT.....		318	318	328	319		(1)		(1)		318			0	9	09/15/2039.	1.....
31402F	B5	3	FNMA #727360.....	..	09/01/2017.	MBS PMT.....		280	280	284	280				0		280			0	10	08/01/2018.	1.....
31402H	RC	7	FNMA #729583.....	..	09/01/2017.	MBS PMT.....		290	290	289	290				0		290			0	9	07/01/2018.	1.....
31410G	5Q	2	FNMA #889255.....	..	09/01/2017.	MBS PMT.....		222	222	224	222				0		222			0	8	03/01/2023.	1.....
31414F	GG	0	FNMA #964699.....	..	09/01/2017.	MBS PMT.....		218	218	224	218				0		218			0	8	08/01/2023.	1.....
31416W	6G	2	FNMA #AB1770.....	..	09/01/2017.	MBS PMT.....		964	964	925	961		4		4		964			0	19	11/01/2025.	1.....
31417S	BP	4	FNMA #AC5445.....	..	09/01/2017.	MBS PMT.....		677	677	732	683		(6)		(6)		677			0	22	11/01/2039.	1.....

QE05

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		F o r e i g n	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	Current Year's 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)
31417Y TC 1	FNMA #MA0546.....		..	09/01/2017.	MBS PMT.....		1,130	1,130	1,170	1,135		(5)		(5)		1,130			0	26	10/01/2025.	1.....
3199999.	Total - Bonds - U.S. Special Revenue and Special Assessments.....						56,101	56,101	57,687	56,310	0	(204)	0	(204)	0	56,101	0	0	0	1,123	XXX	XXX
Bonds - Industrial and Miscellaneous																						
23242M AD 3	CWL 2006-S3 A4.....		..	09/25/2017.	MBS PMT.....		26	26	17	25				0		26			0	1	01/25/2029.	1FM.....
36159L CK 0	GEDFT 2014-1 A.....		..	07/21/2017.	MBS PMT.....		50,000	50,000	49,820	49,949		51		51		50,000			0	385	07/20/2019.	1FE.....
58772P AD 0	MBART 2015-1 A3.....		..	09/18/2017.	MBS PMT.....		10,129	10,129	10,128	10,124		5		5		10,129			0	90	12/16/2019.	1FE.....
65473D AD 4	NALT 2015-A A3.....		..	08/15/2017.	MBS PMT.....		8,141	8,141	8,140	8,150		(9)		(9)		8,141			0	68	06/15/2018.	1FE.....
92343V BP 8	VERIZON COMMUNICATIONS.....		..	09/22/2017.	CALL at 100.000.....		50,000	50,000	52,493	51,387		(585)		(585)		50,802		(802)	(802)	2,846	09/14/2018.	2FE.....
98160V AD 3	WOLS 2015-A A3.....		..	09/15/2017.	MBS PMT.....		13,500	13,500	13,497	13,492		8		8		13,500			0	148	10/15/2018.	1FE.....
3899999.	Total - Bonds - Industrial and Miscellaneous.....						131,796	131,796	134,095	133,127	0	(530)	0	(530)	0	132,598	0	(802)	(802)	3,538	XXX	XXX
8399997.	Total - Bonds - Part 4.....						271,571	271,571	276,066	273,210	0	(833)	0	(833)	0	272,373	0	(802)	(802)	7,696	XXX	XXX
8399999.	Total - Bonds.....						271,571	271,571	276,066	273,210	0	(833)	0	(833)	0	272,373	0	(802)	(802)	7,696	XXX	XXX
9999999.	Total - Bonds, Preferred and Common Stocks.....						271,571	XXX	276,066	273,210	0	(833)	0	(833)	0	272,373	0	(802)	(802)	7,696	XXX	XXX

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

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

Open Depositories

Fifth Third Bank (K).....	Piqua, OH.....							XXX
MainSource Bank.....	Troy, OH.....				763	763	763	XXX
Unity National Bank.....	Piqua, OH.....							XXX
MainSource Bank.....	Troy, OH.....				15,000	15,000	15,000	XXX
Unity National Bank.....	Piqua, OH.....							XXX
Unity National Bank.....	Piqua, OH.....		142		168,752	144,799	156,380	XXX
Fifth Third Bank (S).....	Piqua, OH.....							XXX
MainSource Bank.....	Troy, OH.....		1		31,857	31,820	31,784	XXX
0199999. Total Open Depositories.....	XXX	XXX	143	0	216,372	192,382	203,927	XXX
0399999. Total Cash on Deposit.....	XXX	XXX	143	0	216,372	192,382	203,927	XXX
0599999. Total Cash.....	XXX	XXX	143	0	216,372	192,382	203,927	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year

NONE