



QUARTERLY STATEMENT

As of June 30, 2018
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.	

Robert E. Bornhorst	Vice President
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OTHER

DIRECTORS OR TRUSTEES

Donald E. Benschneider	Robert W. Clark #	J. MacAlpine Smith	William L. Sweet Jr.
James D. Rogers #	John M. Brooks #		

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

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature) John M. Brooks 1. (Printed Name) President (Title)	(Signature) Lisa Lyn Wesner 2. (Printed Name) Secretary (Title)	(Signature) Robert E. Bornhorst 3. (Printed Name) Treasurer (Title)
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Subscribed and sworn to before me
This _____ day of _____

a. Is this an original filing?
b. If no: 1. State the amendment number
2. Date filed
3. Number of pages attached

Yes [X] No []

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds.....	6,281,479		6,281,479	6,506,551
2. Stocks:				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....			0	
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 (\$....266,273), cash equivalents (\$....117,729) and short-term investments (\$.....0).....	384,002		384,002	331,840
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).....	6,665,481	0	6,665,481	6,838,391
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	.43,017		.43,017	.44,392
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	421,410		421,410	376,101
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....			0	
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	8,350		8,350	14,204
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.....	.28,337		.28,337	.28,337
18.2 Net deferred tax asset.....	.70,115	39,411	.30,704	.31,325
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.....	.11,708		.11,708	.20,147
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).....	9,248,418	39,411	9,209,007	9,352,897
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	9,248,418	39,411	9,209,007	9,352,897

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 \$.....169,267)	.473,472	.447,549
2. Reinsurance payable on paid losses and loss adjustment expenses	.325,145	.344,032
3. Loss adjustment expenses	.69,874	.72,832
4. Commissions payable, contingent commissions and other similar charges	.39,326	.37,801
5. Other expenses (excluding taxes, licenses and fees)	.156,003	.164,303
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	.5,265	.8,466
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 \$....100,881 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)	.842,975	.896,918
10. Advance premium		
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	.30,696	.98,158
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	.140,892	.158,148
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)	.2,383,648	.2,528,207
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	.2,383,648	.2,528,207
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)	(1,629,108)	(1,629,773)
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)	.6,825,355	.6,824,690
38. Totals (Page 2, Line 28, Col. 3)	.9,209,003	.9,352,897

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 \$....91,207)	169,912	229,383	433,130
1.2 Assumed..... (written \$....796,099)	850,043	1,099,010	2,105,476
1.3 Ceded..... (written \$....91,207)	169,912	229,383	433,130
1.4 Net..... (written \$....796,099)	850,043	1,099,010	2,105,476
DEDUCTIONS:			
2. Losses incurred (current accident year \$....530,993):			
2.1 Direct.....	20,928	314,451	339,003
2.2 Assumed.....	598,728	723,382	1,509,014
2.3 Ceded.....	20,928	314,451	339,003
2.4 Net.....	598,728	723,382	1,509,014
3. Loss adjustment expenses incurred.....	47,122	59,711	114,272
4. Other underwriting expenses incurred.....	270,018	381,103	666,225
5. Aggregate write-ins for underwriting deductions.....	0	0	0
6. Total underwriting deductions (Lines 2 through 5).....	915,868	1,164,196	2,289,511
7. Net income of protected cells.....			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7).....	(65,825)	(65,186)	(184,035)
INVESTMENT INCOME			
9. Net investment income earned.....	67,834	66,028	132,246
10. Net realized capital gains (losses) less capital gains tax of \$....0.....	(720)	(1,871)	(4,259)
11. Net investment gain (loss) (Lines 9 + 10).....	67,114	64,157	127,987
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....0).....	0	0	0
13. Finance and service charges not included in premiums.....			
14. Aggregate write-ins for miscellaneous income.....	0	0	25,000
15. Total other income (Lines 12 through 14).....	0	0	25,000
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	1,289	(1,029)	(31,048)
17. Dividends to policyholders.....			
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17).....	1,289	(1,029)	(31,048)
19. Federal and foreign income taxes incurred.....			
20. Net income (Line 18 minus Line 19) (to Line 22).....	1,289	(1,029)	(31,048)
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year.....	6,824,689	6,946,396	6,946,396
22. Net income (from Line 20).....	1,289	(1,029)	(31,048)
23. Net transfers (to) from Protected Cell accounts.....			
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$....0.....		6,341	6,341
25. Change in net unrealized foreign exchange capital gain (loss).....			
26. Change in net deferred income tax.....	(3,687)	2,770	(279,010)
27. Change in nonadmitted assets.....	3,064	4,175	182,010
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).....	666	12,257	(121,707)
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38).....	6,825,355	6,958,653	6,824,689

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. Proceeds from book of business.....			25,000
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	25,000
3701.....			
3702.....			
3703.....			
3798. Summary of remaining write-ins for Line 37 from overflow page.....	0	0	0
3799. Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	0	0	0

Statement for June 30, 2018 of the **HOME AND FARM INSURANCE COMPANY**
CASH FLOW

	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
CASH FROM OPERATIONS			
1. Premiums collected net of reinsurance.....	683,329	1,117,058	2,110,702
2. Net investment income.....	81,719	85,923	168,417
3. Miscellaneous income.....			25,000
4. Total (Lines 1 through 3).....	765,048	1,202,981	2,304,119
5. Benefit and loss related payments.....	585,838	646,447	1,518,054
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	330,074	543,743	926,037
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....			(10,000)
10. Total (Lines 5 through 9).....	915,912	1,190,190	2,434,091
11. Net cash from operations (Line 4 minus Line 10).....	(150,864)	12,791	(129,972)
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	495,314	1,062,236	1,588,311
12.2 Stocks.....		100,857	99,918
12.3 Mortgage loans.....			
12.4 Real estate.....			
12.5 Other invested assets.....			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....			
12.7 Miscellaneous proceeds.....			
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	495,314	1,163,093	1,688,229
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	283,468	1,090,957	1,543,696
13.2 Stocks.....		377	376
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).....	283,468	1,091,334	1,544,072
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).....	211,846	71,759	144,157
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).....	(8,822)	(16,671)	21,101
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	(8,822)	(16,671)	21,101
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).....	52,160	67,879	35,286
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	331,842	296,556	296,556
19.2 End of period (Line 18 plus Line 19.1).....	384,002	364,435	331,842

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

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

A. Accounting Practices

	SSAP #	F/S Page	F/S Line #	2018	2017
NET INCOME					
(1) HOME AND FARM INSURANCE COMPANY state basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ 1,289	\$ (31,047)
(2) State Prescribed Practice that are an increase/(decrease) from NAIC SAP					
				\$	\$
(3) State Permitted Practice that are an increase/(decrease) from NAIC SAP					
				\$	\$
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ 1,289	\$ (31,047)
SURPLUS					
(5) HOME AND FARM INSURANCE COMPANY state basis (Page 3, line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 6,825,355	\$ 6,824,690
(6) State Prescribed Practice that are an increase/(decrease) from NAIC SAP					
				\$	\$
(7) State Permitted Practice that are an increase/(decrease) from NAIC SAP					
				\$	\$
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 6,825,355	\$ 6,824,690

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
(2) OTTI Recognized 1st 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 2nd 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 3rd 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 4th Quarter			
j. Intent to sell	\$	\$	\$

NOTES TO FINANCIAL STATEMENTS

(2)	1 Amortized Cost Basis Before Other-than-Temporary Impairment	2 Other-than-Temporary Impairment Recognized in Loss	3 Fair Value 1 – 2
k. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis			
l. Total 4th Quarter	\$	\$	\$
m. Annual aggregate total	XXX		XXX

(3) Recognized OTTI securities

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

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

a. The aggregate amount of unrealized losses:	1. Less than 12 Months	\$ (6,245)
	2. 12 Months or Longer	\$ (14,879)
b. The aggregate related fair value of securities with unrealized losses:	1. Less than 12 Months	\$ 334,694
	2. 12 Months or Longer	\$ 403,003

(5) Information Investor Considered in Reaching Conclusion that Impairments are Not Other-Than-Temporary

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

Not applicable

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

Not applicable

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing
Repurchase Transactions – Cash Provider – Overview of Secured Borrowing Transactions

Not applicable

H. Repurchase Agreements Transactions Accounted for as a Sale
Repurchase Transaction – Cash Taker – Overview of Sale Transactions

Not applicable

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale
Repurchase Transaction – Cash Provider – Overview of Sale Transactions

Not applicable

M. Working Capital Finance Investments

Not applicable

N. 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

No significant changes

NOTES TO FINANCIAL STATEMENTS**Note 11 – Debt**

Not applicable

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

Not applicable

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

No significant changes

Note 14 – Liabilities, Contingencies and Assessments

No significant changes

Note 15 – Leases

No significant changes

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

No significant changes

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

B. Transfer and Servicing of Financial Assets

(2) Servicing Assets and Servicing Liabilities

Not applicable

(4) Securizations, Asset-Based Financing Arrangements and Similar Transfers Accounted for as Sales

Not applicable

C. Wash Sales

(1) Description of the Objectives Regarding These Transactions

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) The details by NAIC designation 3 or below, or unrated of securities sold during the period ended June 30, 2018 and reacquired within 30 days of the sale date are:

There were no securities with an NAIC designation 3 or below that were sold during the year and reacquired within 30 days of the sale.

Description	NAIC Designation	Number of Transactions	Book Value of Securities Sold	Cost of Securities Repurchased	Gain/(Loss)
			\$	\$	\$

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. Fair Value Measurements

(1) Fair Value Measurements at Reporting Date

	Level 1	Level 2	Level 3	Total	Net Asset Value (NAV) Included in Level 2
Assets at Fair Value					
	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$
Liabilities at Fair Value					
	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$

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

NOTES TO FINANCIAL STATEMENTS

	Beginning Balance at 1/1/2018	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settlem-ents	Ending Balance at 12/31/2018
a. Assets										
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
b. Liabilities										
	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

(3) Policies when Transfers Between Levels are Recognized
 (4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement
 (5) Fair Value Disclosures

B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements
 Not applicable

C. Fair Value Level
 Not applicable

D. Not Practicable to Estimate Fair Value
 Not applicable

Note 21 – Other Items

No significant changes

Note 22 – Events Subsequent

Subsequent events have been considered through August 6, 2018 for these statutory financial statements which are to be issued on August 6, 2018. There were no events occurring subsequent to the end of the quarter that merited recognition or disclosure in these statements.

Note 23 – Reinsurance

No significant changes

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination

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

Note 25 – Change in Incurred Losses and Loss Adjustment Expenses

A. Change in Incurred Losses and Loss Adjustment Expenses

Reserves as of December 31, 2017 were \$520,000. As of June 30, 2018, \$233,000 has been paid for incurred losses and loss adjusting expense attributable to insured events of prior years. Reserves remaining for prior years are now \$346,000 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore there has been a \$59,000 unfavorable prior year development since December 31, 2017 to June 30, 2018. 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.

B. Information about Significant Changes in Methodologies and Assumptions

No significant changes.

Note 26 – Intercompany Pooling Arrangements

No significant changes

Note 27 – Structured Settlements

No significant changes

Note 28 – Health Care Receivables

NOTES TO FINANCIAL STATEMENTS

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

Not applicable - This type of business is not written by the company.

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

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

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

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]

2.2 If yes, date of change:

3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
If yes, complete Schedule Y, Parts 1 and 1A.

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

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

3.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No [X]

3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

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

4.2 If yes, provide name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1	2 NAIC Company Code	3 State of Domicile
Name of Entity		

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [X] N/A []
If yes, attach an explanation.

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

6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2015

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

6.4 By what department or departments?
Indiana

6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A [X]

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

7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]

7.2 If yes, give full information:

8.1 Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Board? Yes [] No [X]

8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]

8.4 If the response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
(c) Compliance with applicable governmental laws, rules and regulations;
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
(e) Accountability for adherence to the code.

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

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

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

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

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

GENERAL INTERROGATORIES**PART 1 - COMMON INTERROGATORIES****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 []

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 11,708

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

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

PART 1 - COMMON INTERROGATORIES

19. By self-designating 5*GI securities, the reporting entity is certifying the following elements for each self-designated 5*GI security:

- a. Documentation necessary to permit a full credit analysis of the security does not exist.
- b. Issuer or obligor is current on all contracted interest and principal payments.
- c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5*GI securities?

Yes [] No [X]

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

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

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

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

3.2 If yes, give full and complete information thereto:

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

4.2 If yes, complete the following schedule:

1 Line of Business	2 Maximu m Interest	3 Disc. Rate	Total Discount				Discount Taken During Period			
			4 Unpaid Losses	5 Unpaid LAE	6 IBNR	7 Total	8 Unpaid Losses	9 Unpaid LAE	10 IBNR	11 Total
	0.000	0.000	0	0	0	0	0	0	0	
Total	XXX	XXX	0	0	0	0	0	0	0	

5.1 Operating Percentages:

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

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

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

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

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

7. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [X] No []

7.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? Yes [] No []

HOME AND FARM INSURANCE COMPANY
SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Type of Reinsurer	6 Certified Reinsurer Rating (1 through 6)	7 Effective Date of Certified Reinsurer Rating
------------------------------	----------------	------------------------	----------------------------------	---------------------------	---	--

U.S. Insurers

11551.....	35-2293075.....	Endurance Assurance Corporation.....	DE.....	Authorized.....	2.....	.....07/14/2017
19453.....	13-5616275.....	Transatlantic Reinsurance Company.....	NY.....	Authorized.....	2.....	.....09/29/2017

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

Current Year to Date - Allocated by States and Territories

States, Etc.	1 Active Status (a)	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	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.....	91,207	209,778	6,393	4,376	529,995
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
59. Totals.....		XXX.....	91,207	209,778	6,393	4,376	529,995
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
58999. Totals (Lines 58001 thru 58003+ Line 58998) (Line 58 above).....		XXX.....	0	0	0	0	0

(a) Active Status Count

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....	2	R - Registered - Non-domiciled RRGs.....	0
E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - See DSLI).....	0	Q - Qualified - Qualified or accredited reinsurer.....	0
D - Domestic Surplus Lines Insurer (DSLI) - Reporting entities authorized to write surplus lines in the state of domicile.....	0	N - None of the above - Not allowed to write business in the state.....	55

Sch. Y - Pt. 1
NONE

Sch. Y - Pt. 1A
NONE

HOME AND FARM INSURANCE COMPANY
PART 1 - LOSS EXPERIENCE

Lines of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire.....			.000	
2. Allied lines.....			.000	
3. Farmowners multiple peril.....			.000	
4. Homeowners multiple peril.....			.000	
5. Commercial multiple peril.....			.000	
6. Mortgage guaranty.....			.000	
8. Ocean marine.....			.000	
9. Inland marine.....			.000	
10. Financial guaranty.....			.000	
11.1 Medical professional liability - occurrence.....			.000	
11.2 Medical professional liability - claims-made.....			.000	
12. Earthquake.....			.000	
13. Group accident and health.....			.000	
14. Credit accident and health.....			.000	
15. Other accident and health.....			.000	
16. Workers' compensation.....			.000	
17.1 Other liability-occurrence.....	169,913	20,928	12.317	137.087
17.2 Other liability-claims made.....			.000	
17.3 Excess workers' compensation.....			.000	
18.1 Products liability-occurrence.....			.000	
18.2 Products liability-claims made.....			.000	
19.1, 19.2 Private passenger auto liability.....			.000	
19.3, 19.4 Commercial auto liability.....			.000	
21. Auto physical damage.....			.000	
22. Aircraft (all perils).....			.000	
23. Fidelity.....			.000	
24. Surety.....			.000	
26. Burglary and theft.....			.000	
27. Boiler and machinery.....			.000	
28. Credit.....			.000	
29. International.....			.000	
30. Warranty.....			.000	
31. Reinsurance-nonproportional assumed property.....	XXX.....	XXX.....	XXX.....	XXX.....
32. Reinsurance-nonproportional assumed liability.....	XXX.....	XXX.....	XXX.....	XXX.....
33. Reinsurance-nonproportional assumed financial lines.....	XXX.....	XXX.....	XXX.....	XXX.....
34. Aggregate write-ins for other lines of business.....	0	0	.000	
35. Totals.....	169,913	20,928	12.317	137.087

DETAILS OF WRITE-INS

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

PART 2 - DIRECT PREMIUMS WRITTEN

Lines of Business	1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1. Fire.....			
2. Allied lines.....			
3. Farmowners multiple peril.....			
4. Homeowners multiple peril.....			
5. Commercial multiple peril.....			
6. Mortgage guaranty.....			
8. Ocean marine.....			
9. Inland marine.....			
10. Financial guaranty.....			
11.1 Medical professional liability - occurrence.....			
11.2 Medical professional liability - claims made.....			
12. Earthquake.....			
13. Group accident and health.....			
14. Credit accident and health.....			
15. Other accident and health.....			
16. Workers' compensation.....			
17.1 Other liability-occurrence.....	(2,123)	.91,207	209,778
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.....	(2,123)	.91,207	209,778

DETAILS OF WRITE-INS

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

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

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

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

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

Explanation:

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

Bar Code:

HOME AND FARM INSURANCE COMPANY
Overflow Page for Write-Ins

NONE

Statement for June 30, 2018 of the **HOME AND FARM INSURANCE COMPANY**
SCHEDULE A - VERIFICATION

Real Estate

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

NONE

SCHEDULE B - VERIFICATION

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	.....0	.....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 depreciation.....	.....
9. Total foreign exchange change in book/adjusted carrying value.....	.....
10. Deduct current year's other-than-temporary impairment recognized.....	.....
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10).....	.....0	.....0
12. Deduct total nonadmitted amounts.....	.....
13. Statement value at end of current period (Line 11 minus Line 12).....	.....0	.....0

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	.....6,507,478	.....6,680,392
2. Cost of bonds and stocks acquired.....	.....282,544	.....1,544,072
3. Accrual of discount.....	.....2,875	.....2,357
4. Unrealized valuation increase (decrease).....	.....(720)	.....(4,261)
5. Total gain (loss) on disposals.....	.....495,312	.....1,689,210
6. Deduct consideration for bonds and stocks disposed of.....	.....15,385	.....35,480
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. Total investment income recognized as a result of prepayment penalties and/or acceleration fees.....	.....
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10).....	.....6,281,480	.....6,507,478
12. Deduct total nonadmitted amounts.....	.....
13. Statement value at end of current period (Line 11 minus Line 12).....	.....6,281,480	.....6,507,478

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).....	5,565,257	185,650	251,763	44,971	5,565,257	5,544,115		5,666,240
2. NAIC 2 (a).....	838,784		50,083	(51,336)	838,784	737,365		840,314
3. NAIC 3 (a).....						0		
4. NAIC 4 (a).....						0		
5. NAIC 5 (a).....						0		
6. NAIC 6 (a).....						0		
7. Total Bonds.....	6,404,041	185,650	301,846	(6,365)	6,404,041	6,281,480	0	6,506,554
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.....	6,404,041	185,650	301,846	(6,365)	6,404,041	6,281,480	0	6,506,554

(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 \$.....0; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0.

SCHEDULE DA - PART 1

Short-Term Investments

	1 Book/Adjusted Carrying Value	Par Value	2 Total Cost	3 Accrued Interest	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999.....XXX.....	.....	.....	.....	.....

NONE**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.....	.....0	.....27,163
2. Cost of short-term investments acquired.....	.....	.....1,042,812
3. Accrual of discount.....	.....	.....
4. Unrealized valuation increase (decrease).....	.....	.....
5. Total gain (loss) on disposals.....	.....	.....
6. Deduct consideration received on disposals.....	.....	.....1,069,975
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).....	.....0	.....0
11. Deduct total nonadmitted amounts.....	.....	.....
12. Statement value at end of current period (Line 10 minus Line 11).....	.....0	.....0

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

SCHEDULE E - PART 2 - VERIFICATION

Cash Equivalents

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	69,398	
2. Cost of cash equivalents acquired.....	461,145	418,915
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....	412,814	349,517
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).....	117,729	69,398
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	117,729	69,398

Sch. A - Pt. 2
NONE

Sch. A - Pt. 3
NONE

Sch. B - Pt. 2
NONE

Sch. B - Pt. 3
NONE

Sch. BA - Pt. 2
NONE

Sch. BA - Pt. 3
NONE

SCHEDULE D - PART 3

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

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation or Market Indicator (a)
Bonds - U.S. Government									
912828	4S 6 US TREASURY N/B.....		05/31/2018.....	BMO.....		185,650	185,000	.14	1.....
0599999.	Total - Bonds - U.S. Government.....					185,650	185,000	.14	XXX.....
8399997.	Total - Bonds - Part 3.....					185,650	185,000	.14	XXX.....
8399999.	Total - Bonds.....					185,650	185,000	.14	XXX.....
9999999.	Total - Bonds, Preferred and Common Stocks.....					185,650	XXX	.14	XXX.....

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

QE04

SCHEDULE D - PART 4

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

1 CUSIP Identification	2 Description	3 For eign	4 Disposal Date	5 Name of Purchaser	6 Number of Shares of Stock	7 Consideration	8 Par Value	9 Actual Cost	10 Prior Year Book/Adjusted Carrying Value	Change in Book/Adjusted Carrying Value					16 Book/Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest / Stock Dividends Received During Year	21 Stated Contractual Maturity Date	22 NAIC Designation or Market Indicator (a)	
										11 Unrealized Valuation Increase (Decrease)	12 Current Year's (Amortization) / Accretion	13 Current Year's Other-Than- Temporary Impairment Recognized	14 Total Change in B./A.C.V. (11+12-13)	15 Total Foreign Exchange Change in B./A.C.V.								
Bonds - U.S. Government																						
36290S CK 5	GNMA #615774		.. 06/01/2018.	MBS PMT.			408	408	398	408				0		408			0	7	09/15/2018.	1.....
38376G ZU 7	GNMA 2011-9 C.		.. 06/01/2018.	MBS PMT.			619	619	645	620			(2)	(2)		619			0	9	09/16/2041.	1.....
38378B RW 1	GNMA 2012-44 AD.		.. 06/01/2018.	MBS PMT.			14,577	14,577	15,352	14,602			(24)	(24)		14,577			0	181	04/16/2041.	1.....
38378T AL 4	GNMA 2013-71 LA.		.. 06/01/2018.	MBS PMT.			913	913	937	915			(2)	(2)		913			0	12	10/20/2042.	1.....
912828 2C 3	US TREASURY N/B.		.. 05/31/2018.	NOMURA SECURITIES COMPANY LTD			24,926	25,000	24,982	24,994			4	4		24,998		(72)	(72)	141	08/31/2018.	1.....
0599999.	Total - Bonds - U.S. Government.						41,443	41,517	42,314	41,539	0	(24)	0	(24)	0	41,515	0	(72)	(72)	350	XXX	XXX
Bonds - U.S. Special Revenue and Special Assessment																						
3128KT D8 0	FHLMC A62827		.. 06/01/2018.	MBS PMT.			28	28	28	28				0		28			0	1	06/01/2037.	1.....
3128M5 GU 8	FHLMC G03511		.. 06/01/2018.	MBS PMT.			6	6	6	6				0		6			0	0	10/01/2037.	1.....
3128MB XH 5	FHLMC G13180		.. 06/01/2018.	MBS PMT.			223	223	222	223				0		223			0	5	06/01/2023.	1.....
3128MC FJ 9	FHLMC G13569		.. 06/01/2018.	MBS PMT.			672	672	692	673			(1)	(1)		672			0	13	04/01/2024.	1.....
3128MC GH 2	FHLMC G13600		.. 06/01/2018.	MBS PMT.			346	346	354	346				0		346			0	7	06/01/2024.	1.....
3128MJ V2 3	FHLMC G08632		.. 06/01/2018.	MBS PMT.			2,272	2,272	2,383	2,277			(5)	(5)		2,272			0	33	03/01/2045.	1.....
3128MJ XK 1	FHLMC G08681		.. 06/01/2018.	MBS PMT.			2,432	2,432	2,536	2,436			(4)	(4)		2,432			0	36	12/01/2045.	1.....
3128MM KX 0	FHLMC G18309		.. 06/01/2018.	MBS PMT.			250	250	254	250				0		250			0	5	05/01/2024.	1.....
3128PQ NX 5	FHLMC J11306		.. 06/01/2018.	MBS PMT.			472	472	484	473				0		472			0	7	12/01/2024.	1.....
3128PR JW 0	FHLMC J12077		.. 06/01/2018.	MBS PMT.			342	342	356	343			(1)	(1)		342			0	6	04/01/2025.	1.....
3128PS L9 6	FHLMC J13052		.. 06/01/2018.	MBS PMT.			1,194	1,194	1,227	1,196			(1)	(1)		1,194			0	18	09/01/2025.	1.....
3132L6 AK 7	FHLMC V80910		.. 06/01/2018.	MBS PMT.			1,542	1,542	1,640	1,546			(5)	(5)		1,542			0	25	12/01/2043.	1.....
3136A1 X8 3	FNMA 2011-115 KE		.. 06/01/2018.	MBS PMT.			688	688	697	688				0		688			0	7	10/25/2039.	1.....
3136AB LF 8	FNMA 2012-148 KB		.. 06/01/2018.	MBS PMT.			2,484	2,484	2,520	2,485			(1)	(1)		2,484			0	20	03/25/2042.	1.....
3136AG DN 9	FNMA 2013-97 EK		.. 06/01/2018.	MBS PMT.			1,402	1,402	1,446	1,404			(2)	(2)		1,402			0	18	11/25/2028.	1.....
3136AG QM 7	FNMA 2013-M13 A.		.. 04/30/2018.	MBS PMT.			1,656	1,656	1,652	1,656			1	1		1,656			0	9	05/25/2018.	1.....
3136AP EE 8	FNMA 2015-47 GA.		.. 06/01/2018.	MBS PMT.			2,324	2,324	2,387	2,327			(3)	(3)		2,324			0	30	06/25/2044.	1.....
31371L AB 5	FNMA #Z54802		.. 06/01/2018.	MBS PMT.			110	110	112	110				0		110			0	2	07/01/2018.	1.....
31371L AP 4	FNMA #Z54814		.. 06/01/2018.	MBS PMT.			134	134	135	134				0		134			0	2	07/01/2018.	1.....
31371L BH 1	FNMA #Z54840		.. 06/01/2018.	MBS PMT.			255	255	259	255				0		255			0	4	08/01/2018.	1.....
31371L DY 2	FNMA #Z54919		.. 06/01/2018.	MBS PMT.			168	168	165	168				0		168			0	3	09/01/2018.	1.....
3137BD CQ 7	FHLMC 4377 LC.		.. 06/01/2018.	MBS PMT.			1,453	1,453	1,506	1,456			(3)	(3)		1,453			0	18	04/15/2039.	1.....
3138EG HR 8	FNMA #AL0239		.. 06/01/2018.	MBS PMT.			1,401	1,401	1,403	1,401				0		1,401			0	22	04/01/2041.	1.....
3138YR 6Y 9	FNMA #AZ0886		.. 06/01/2018.	MBS PMT.			2,139	2,139	2,218	2,143			(4)	(4)		2,139			0	27	07/01/2030.	1.....
31398K A5 9	FHLMC 3589 PA.		.. 06/01/2018.	MBS PMT.			80	80	82	80				0		80			0	1	09/15/2039.	1.....
31402F B5 3	FNMA #727360		.. 06/01/2018.	MBS PMT.			102	102	104	102				0		102			0	2	08/01/2018.	1.....
31402H RC 7	FNMA #729583		.. 06/01/2018.	MBS PMT.			172	172	172	172				0		172			0	3	07/01/2018.	1.....
31410G 5Q 2	FNMA #889255		.. 06/01/2018.	MBS PMT.			206	206	207	206				0		206			0	4	03/01/2023.	1.....
31414F GG 0	FNMA #964699		.. 06/01/2018.	MBS PMT.			256	256	262	256				0		256			0	7	08/01/2023.	1.....
31416W 6G 2	FNMA #AB1770		.. 06/01/2018.	MBS PMT.			738	738	708	737			1	1		738			0	9	11/01/2025.	1.....
31417S BP 4	FNMA #AC5445		.. 06/01/2018.	MBS PMT.			558	558	603	559			(1)	(1)		558			0	12	11/01/2039.	1.....
31417Y TC 1	FNMA #MA0546		.. 06/01/2018.	MBS PMT.			788	788	816	790			(2)	(2)		788			0	12	10/01/2025.	1.....
3199999.	Total - Bonds - U.S. Special Revenue and Special Assessments.						26,893	26,893	27,636	26,926	0	(31)	0	(31)	0	26,893	0	0	0	368	XXX	XXX

SCHEDULE D - PART 4

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

1 CUSIP Identification	2 Description	3 F o r e i g n Disposal Date	4 Name of Purchaser	5 Number of Shares of Stock	6 Consideration	7 Par Value	8 Actual Cost	9 Prior Year Book/Adjusted Carrying Value	Change in Book/Adjusted Carrying Value					16 Book/Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Change in B./A.C.V. on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest / Stock Dividends Received During Year	21 Stated Contractual Maturity Date	22 NAIC Designation or Market Indicator (a)	
									11 Unrealized Valuation Increase (Decrease)	12 Current Year's (Amortization) / Accretion	13 Current Year's Other-Than-Temporary Impairment Recognized	14 Total Change in B./A.C.V. (11+12-13)	15 Total Foreign Exchange Change in B./A.C.V.								
Bonds - Industrial and Miscellaneous																					
23242M AD 3	CWL 2006-S3 A4.....	..	06/01/2018.	MBS PMT.....		.....1,160	.....1,160	.....593	.....840		.....320		.....320		.....1,160			.....0	.....38	01/25/2029.	1FM.....
58772P AD 0	MBART 2015-1 A3.....	..	06/16/2018.	MBS PMT.....		.....7,147	.....7,147	.....7,146	.....7,145		.....2		.....2		.....7,147			.....0	.....41	12/16/2019.	1FE.....
760759 AL 4	REPUBLIC SVCS INC.....	..	04/12/2018.	GOLDMAN SACHS.....		.....50,038	.....50,000	.....53,100	.....50,349		.....(266)		.....(266)		.....50,083			.....(46)	.....(46)	05/15/2018.	2FE.....
808513 AJ 4	SCHWAB (CHARLES) CORP.....	..	05/31/2018.	TD.....		.....99,995	.....100,000	.....100,912	.....100,293		.....(253)		.....(253)		.....100,040			.....(46)	.....(46)	07/25/2018.	1FE.....
89114Q B6 4	TORONTO-DOMINION BK.....	..	06/26/2018.	TD.....		.....74,963	.....75,000	.....75,194	.....75,068		.....(59)		.....(59)		.....75,009			.....(46)	.....(46)	07/23/2018.	1FE.....
3899999.	Total - Bonds - Industrial and Miscellaneous.....					.....233,303	.....233,307	.....236,945	.....233,695	.....0	.....(256)	.....0	.....(256)	.....0	.....233,439	.....0	.....(138)	.....(138)	.....3,948	XXX	XXX
8399997.	Total - Bonds - Part 4.....					.....301,639	.....301,717	.....306,895	.....302,160	.....0	.....(311)	.....0	.....(311)	.....0	.....301,847	.....0	.....(210)	.....(210)	.....4,666	XXX	XXX
8399999.	Total - Bonds.....					.....301,639	.....301,717	.....306,895	.....302,160	.....0	.....(311)	.....0	.....(311)	.....0	.....301,847	.....0	.....(210)	.....(210)	.....4,666	XXX	XXX
9999999.	Total - Bonds, Preferred and Common Stocks.....					.....301,639	XXX	.....306,895	.....302,160	.....0	.....(311)	.....0	.....(311)	.....0	.....301,847	.....0	.....(210)	.....(210)	.....4,666	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 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	

Open Depositories

Unity National Bank.....	Piqua, OH							XXX
Unity National Bank.....	Piqua, OH					3,154		28
Unity National Bank.....	Piqua, OH .....		.243		280,142		271,173	266,245
019999. Total Open Depositories.....	XXX	XXX	.243	.0	283,296		271,173	266,273
039999. Total Cash on Deposit.....	XXX	XXX	.243	.0	283,296		271,173	266,273
059999. Total Cash.....	XXX	XXX	.243	.0	283,296		271,173	266,273

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due & Accrued	9 Amount Received During Year
Exempt Money Market Mutual Funds as Identified by the SVO								
31846V 20 3	FIRST AMERN GOVT OBLIG FD.....		06/29/2018	1.324		117,729		.380
8599999. Total - Exempt Money Market Mutual Funds as Identified by the SVO						117,729	0	.380
8899999. Total - Cash Equivalents						117,729	0	.380