



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2018

OF THE CONDITION AND AFFAIRS OF THE

Ohio Mutual Insurance Company

NAIC Group Code 0963 (Current) 0963 (Prior) NAIC Company Code 10202 Employer's ID Number 34-4320350

Organized under the Laws of OHIO, State of Domicile or Port of Entry OH

Country of Domicile United States of America

Incorporated/Organized 03/05/1901 Commenced Business 03/05/1901

Statutory Home Office 1725 Hopley Avenue, Bucyrus, OH, US 44820-0111

Main Administrative Office 1725 Hopley Avenue, Bucyrus, OH, US 44820-0111

Mail Address 1725 Hopley Avenue, Bucyrus, OH, US 44820-0111

Primary Location of Books and Records 1725 Hopley Avenue, Bucyrus, OH, US 44820-0111

Internet Website Address www.omig.com

Statutory Statement Contact Charles Elmer Easum Mr., ceasum@omig.com, 419-563-0810

OFFICERS

President Mark Clarence Russell, Mr. Secretary David Anthony Siebenburgen, Mr. Treasurer David Gary Hendrix, Mr.

OTHER

Howard Lowell Barber, Mr., Vice President Sales; Chad Philip Combs, Mr., Vice President Personal Lines Underwriting; John Richard DeLucia, Mr., Vice President Claims Operations; David Alan Grove, Mr., Vice President Product Management; Gary Thomas Johnson, Mr., Vice President Commercial Lines Underwriting; Susan Elizabeth Kent, Mrs., Vice President Business Analytics; James Bradly McCormack, Mr. #, Vice President Information Systems; Marcella Slone Smith, Mrs., Vice President Human Resources

DIRECTORS OR TRUSTEES

Karen Riley Haefling, Mrs. #; Albert Michael Heister, Mr.; Susan Porter, Mrs.; John Redon Purse, Mr.; Mark Clarence Russell, Mr.; David Anthony Siebenburgen, Mr.; Randy Lee Walker, Mr.; Robert H Wheeler Jr, Mr. #; Thomas Eugene Woolley, Mr.

State of Ohio County of Crawford SS:

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

Mark Clarence Russell President and CEO

David Gary Hendrix Treasurer and CFO

Marcella Slone Smith Assistant Secretary

Subscribed and sworn to before me this day of

- a. Is this an original filing? Yes [X] No []
b. If no, 1. State the amendment number, 2. Date filed, 3. Number of pages attached

STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Ohio Mutual Insurance Company

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	75,209,930		75,209,930	70,655,052
2. Stocks:				
2.1 Preferred stocks				
2.2 Common stocks	216,988,023	26,055	216,961,968	201,942,409
3. Mortgage loans on real estate:				
3.1 First liens				
3.2 Other than first liens.....				
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)	3,158,828		3,158,828	2,973,700
4.2 Properties held for the production of income (less \$ encumbrances)				
4.3 Properties held for sale (less \$ encumbrances)				
5. Cash (\$5,803,585), cash equivalents (\$3,918,959) and short-term investments (\$)	9,722,544		9,722,544	4,106,957
6. Contract loans (including \$ premium notes)				
7. Derivatives				
8. Other invested assets				
9. Receivables for securities				
10. Securities lending reinvested collateral assets				
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Lines 1 to 11)	305,079,325	26,055	305,053,270	279,678,118
13. Title plants less \$ charged off (for Title insurers only)				
14. Investment income due and accrued	665,293		665,293	590,398
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	2,241,390	25,465	2,215,925	1,903,538
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	15,491,026		15,491,026	12,965,412
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	23,812		23,812	21,283
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts				
17. Amounts receivable relating to uninsured plans				
18.1 Current federal and foreign income tax recoverable and interest thereon				
18.2 Net deferred tax asset	1,362,918		1,362,918	1,113,459
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software	1,792,904	1,792,904		
21. Furniture and equipment, including health care delivery assets (\$)	248,634	248,634		
22. Net adjustment in assets and liabilities due to foreign exchange rates				
23. Receivables from parent, subsidiaries and affiliates				
24. Health care (\$) and other amounts receivable				
25. Aggregate write-ins for other than invested assets	234,819	234,819		
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	327,140,121	2,327,877	324,812,244	296,272,208
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Lines 26 and 27)	327,140,121	2,327,877	324,812,244	296,272,208
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)				
2501. Prepaid Expenses	234,819	234,819		
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	234,819	234,819		

STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Ohio Mutual Insurance Company

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$11,071,101)	23,135,205	22,257,506
2. Reinsurance payable on paid losses and loss adjustment expenses		
3. Loss adjustment expenses	6,057,928	5,523,764
4. Commissions payable, contingent commissions and other similar charges	1,980,771	1,882,217
5. Other expenses (excluding taxes, licenses and fees)	118,717	75,792
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	28,337	45,311
7.1 Current federal and foreign income taxes (including \$29,033 on realized capital gains (losses))	2,886,922	1,818,909
7.2 Net deferred tax liability		
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$87,582,897 and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$ for medical loss ratio rebate per the Public Health Service Act)	32,252,411	28,115,740
10. Advance premium	571,557	386,813
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)	71,288	55,313
13. Funds held by company under reinsurance treaties	151,752	170,214
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated		
16. Provision for reinsurance (including \$ certified)		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates	1,076,436	942,069
20. Derivatives		
21. Payable for securities	3,025,481	
22. Payable for securities lending		
23. Liability for amounts held under uninsured plans		
24. Capital notes \$ and interest thereon \$		
25. Aggregate write-ins for liabilities		
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	71,356,805	61,273,648
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	71,356,805	61,273,648
29. Aggregate write-ins for special surplus funds	803,949	949,578
30. Common capital stock		
31. Preferred capital stock		
32. Aggregate write-ins for other than special surplus funds		
33. Surplus notes		
34. Gross paid in and contributed surplus		
35. Unassigned funds (surplus)	252,651,490	234,048,982
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)		
36.2 shares preferred (value included in Line 31 \$)		
37. Surplus as regards policyholders (Lines 29 to 35, less 36)	253,455,439	234,998,560
38. Totals (Page 2, Line 28, Col. 3)	324,812,244	296,272,208
DETAILS OF WRITE-INS		
2501.		
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)		
2901. Sale Leaseback of Saco Building	803,949	949,578
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	803,949	949,578
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page		
3299. Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)		

STATEMENT OF INCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct (written \$ 60,418,189)	54,162,871	46,255,468	62,857,930
1.2 Assumed (written \$ 130,133,818)	120,954,384	114,092,991	153,098,382
1.3 Ceded (written \$ 139,612,496)	128,314,415	117,452,803	158,194,335
1.4 Net (written \$ 50,939,511)	46,802,840	42,895,656	57,761,977
DEDUCTIONS:			
2. Losses incurred (current accident year \$ 25,789,219):			
2.1 Direct	27,343,356	22,960,571	32,858,369
2.2 Assumed	59,778,177	55,748,731	78,799,526
2.3 Ceded	63,681,306	57,470,459	81,840,690
2.4 Net	23,440,227	21,238,843	29,817,205
3. Loss adjustment expenses incurred	4,139,657	3,574,512	5,055,343
4. Other underwriting expenses incurred	16,038,380	14,723,308	19,996,181
5. Aggregate write-ins for underwriting deductions			
6. Total underwriting deductions (Lines 2 through 5)	43,618,264	39,536,663	54,868,729
7. Net income of protected cells			
8. Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)	3,184,576	3,358,993	2,893,248
INVESTMENT INCOME			
9. Net investment income earned	1,545,866	1,179,546	1,729,116
10. Net realized capital gains (losses) less capital gains tax of \$ 29,033	111,014	12,182	15,849
11. Net investment gain (loss) (Lines 9 + 10)	1,656,880	1,191,728	1,744,965
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ 37,344 amount charged off \$ 322,697)	(285,353)	(213,640)	(335,995)
13. Finance and service charges not included in premiums	10	222,375	225,825
14. Aggregate write-ins for miscellaneous income	185,825	246,414	319,354
15. Total other income (Lines 12 through 14)	(99,518)	255,149	209,184
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	4,741,938	4,805,870	4,847,397
17. Dividends to policyholders			
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	4,741,938	4,805,870	4,847,397
19. Federal and foreign income taxes incurred	1,040,193	1,733,998	1,875,487
20. Net income (Line 18 minus Line 19)(to Line 22)	3,701,745	3,071,872	2,971,910
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year	234,998,560	217,625,996	217,625,996
22. Net income (from Line 20)	3,701,745	3,071,872	2,971,910
23. Net transfers (to) from Protected Cell accounts			
24. Change in net unrealized capital gains (losses) less capital gains tax of \$ 46,759	14,846,389	14,254,734	14,658,786
25. Change in net unrealized foreign exchange capital gain (loss)			
26. Change in net deferred income tax	296,218	392,804	(1,058,951)
27. Change in nonadmitted assets	(387,473)	(338,467)	(162,333)
28. Change in provision for reinsurance			
29. Change in surplus notes			
30. Surplus (contributed to) withdrawn from protected cells			
31. Cumulative effect of changes in accounting principles			
32. Capital changes:			
32.1 Paid in			
32.2 Transferred from surplus (Stock Dividend)			
32.3 Transferred to surplus			
33. Surplus adjustments:			
33.1 Paid in			
33.2 Transferred to capital (Stock Dividend)			
33.3 Transferred from capital			
34. Net remittances from or (to) Home Office			
35. Dividends to stockholders			
36. Change in treasury stock			
37. Aggregate write-ins for gains and losses in surplus		(118,988)	963,152
38. Change in surplus as regards policyholders (Lines 22 through 37)	18,456,879	17,261,955	17,372,564
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	253,455,439	234,887,951	234,998,560
DETAILS OF WRITE-INS			
0501.			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page			
0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)			
1401. Rental and Related Services	186,062	244,562	317,416
1402. Other Expense	(237)	1,852	1,938
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page			
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	185,825	246,414	319,354
3701. Correction of prior period error		(118,988)	(118,988)
3702. Escrow fund settlement			110,751
3703. Sale of Saco building			971,389
3798. Summary of remaining write-ins for Line 37 from overflow page			
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)		(118,988)	963,152

STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Ohio Mutual 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	48,321,495	43,455,969	58,439,257
2. Net investment income	2,032,335	1,769,376	2,458,429
3. Miscellaneous income	(99,518)	255,149	209,184
4. Total (Lines 1 to 3)	50,254,312	45,480,494	61,106,870
5. Benefit and loss related payments	22,565,057	21,930,443	30,224,322
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	19,693,505	18,391,892	25,078,507
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$ 29,033 tax on capital gains (losses)	1,213	64,071	1,264,791
10. Total (Lines 5 through 9)	42,259,775	40,386,406	56,567,620
11. Net cash from operations (Line 4 minus Line 10)	7,994,537	5,094,088	4,539,250
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	12,281,278	6,927,476	10,718,785
12.2 Stocks	409,682		
12.3 Mortgage loans			
12.4 Real estate			1,942,718
12.5 Other invested assets			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	(1)	(2)	(2)
12.7 Miscellaneous proceeds	3,025,481		
12.8 Total investment proceeds (Lines 12.1 to 12.7)	15,716,440	6,927,474	12,661,501
13. Cost of investments acquired (long-term only):			
13.1 Bonds	17,277,819	8,447,029	18,378,172
13.2 Stocks	379,823	521,579	1,525,343
13.3 Mortgage loans			
13.4 Real estate	318,834	66,210	71,157
13.5 Other invested assets			
13.6 Miscellaneous applications			
13.7 Total investments acquired (Lines 13.1 to 13.6)	17,976,476	9,034,818	19,974,672
14. Net increase (or decrease) in contract loans and premium notes			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(2,260,036)	(2,107,344)	(7,313,171)
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)	(118,914)	(672,132)	379,428
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(118,914)	(672,132)	379,428
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	5,615,587	2,314,612	(2,394,493)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	4,106,957	6,501,450	6,501,450
19.2 End of period (Line 18 plus Line 19.1)	9,722,544	8,816,062	4,106,957

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

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

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

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

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

<u>NET INCOME</u>	<u>SSAP #</u>	<u>F/S Page</u>	<u>F/S Line #</u>	<u>09/30/2018</u>	<u>12/31/2017</u>
(1) Ohio Mutual Insurance Company state basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ 3,701,745	\$ 2,971,910
(2) State Prescribed Practices that increase/(decrease) NAIC SAP:	_____	_____	_____	_____	_____
(3) State Permitted Practices that increase/(decrease) NAIC SAP:	_____	_____	_____	_____	_____
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 3,701,745	\$ 2,971,910
<u>SURPLUS</u>					
(5) Ohio Mutual Insurance Company state basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 253,455,439	\$ 234,998,560
(6) State Prescribed Practices that increase/(decrease) NAIC SAP:	_____	_____	_____	_____	_____
(7) State Permitted Practices that increase/(decrease) NAIC SAP:	_____	_____	_____	_____	_____
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 253,455,439	\$ 234,998,560

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

C. Accounting Policy – No Change

D. Going Concern

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

2. Accounting Changes and Corrections of Errors – No Change

3. Business Combinations and Goodwill – No Change

4. Discontinued Operations – No Change

5. Investments

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

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

(2) a. The Company had no securities it intended to sell for which it recognized other-than-temporary impairment losses.

b. The Company had no securities for which it lacked the ability or intent to retain an investment in for a period of time sufficient to recover the amortized cost basis.

(3) The Company had no other-than-temporary impairments within the loan backed securities portfolio for the quarter ended September 30, 2018.

(4) All temporarily impaired securities for which an other-than-temporary impairment has not been recognized in earnings as a realized loss in 2018 are as follows:

a. The aggregate amount of unrealized losses:

1. Less than 12 Months	\$ (237,105)
2. 12 Months or Longer	\$ (272,434)

b. The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months	\$ 13,366,289
2. 12 Months or Longer	\$ 5,464,794

NOTES TO FINANCIAL STATEMENTS

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

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

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

- E. The Company has no dollar repurchase agreements and/or securities lending transactions.
- F. The Company has no repurchase agreements transactions accounted for as a secured borrowing.
- G. The Company has no reverse repurchase agreements transactions accounted for as a secured borrowing.
- H. The Company has no repurchase agreements transactions accounted for as a sale.
- I. The Company has no reverse repurchase agreements transactions accounted for as a sale.
- M. The Company has no Working Capital Finance Investments.
- N. The Company has no Offsetting and Netting of Assets and Liabilities.

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

7. Investment Income – No Change

8. Derivative Instruments – No Change

9. Income Taxes – No Change

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

- A. The Company is the parent company within the Ohio Mutual Insurance Group. The Company is the sole shareholder and owner of United Ohio Insurance Company (United Ohio), Casco Indemnity Company (Casco), United Premium Budget Service Inc., Centurion Financial Inc., and Ohio United Agency Inc.
- B. The Company, United Ohio, and Casco have entered into a reinsurance pooling agreement through which underwriting activities and operating expenses are proportionately allocated. See footnote #26 for additional information on the pooling agreement.
- C. In 2018 the Company reimbursed its subsidiary, United Ohio, \$13,859,728 and received from its subsidiary, Casco, \$229,938, under the terms of the Reinsurance Pooling Agreement between the entities.
- D. As of September 30, 2018, the Company owes United Ohio \$986,644 and Casco \$365,275 under the terms of the Reinsurance Pooling Agreement. As of September 30, 2018, United Ohio owes the Company \$275,483 under the terms of the Cost Sharing Agreement.
- E. The Company has no guarantees or undertakings at September 30, 2018.
- F. The Company and its subsidiaries, United Ohio and Casco, entered into a Cost Sharing Agreement effective January 1, 2011, through which certain common costs are shared proportionally between the entities.
- G. All outstanding shares of its subsidiaries, United Ohio, Casco, United Premium Budget Services Inc., Ohio United Agency Inc. and Centurion Financial Inc. are owned by the Parent Company, Ohio Mutual Insurance Company, an insurance company domiciled in the State of Ohio.
- H. None of the Company's capital stock is owned by downstream subsidiaries.
- I. The Company owns a 100% interest in United Ohio whose carrying value is equal to or exceeds 10% of the admitted assets of the Company. The Company carries United Ohio at its statutory statement value of \$185,743,367.

Based on the Company's ownership percentage of United Ohio, the statutory statement value of United Ohio assets and liabilities as of September 30, 2018 were \$363,659,120 and \$177,915,753, respectively.

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

NOTES TO FINANCIAL STATEMENTS

M. All SCA Investments

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

SCA Entity	Percentage of SCA Ownership	Gross Amount	Admitted Amount	Nonadmitted Amount
a. SSAP No. 97 8a Entities				
NONE	N/A	-	-	-
Total SSAP No. 97 8a Entities	XXX	-	-	-
b. SSAP No. 97 8b(ii) Entities				
Centurion Financial Inc.	100.0	-	-	-
Ohio United Agency Inc.	100.0	25,053	-	25,053
United Premium Budget Service Inc.	100.0	1,002	-	1,002
Total SSAP No. 97 8b(ii) Entities	XXX	26,055	-	26,055
c. SSAP No. 97 8b(iii) Entities				
NONE	N/A	-	-	-
Total SSAP No. 97 8b(iii) Entities	XXX	-	-	-
d. SSAP No. 97 8b(iv) Entities				
NONE	N/A	-	-	-
Total SSAP No. 97 8b(iv) Entities	XXX	-	-	-
e. Total SSAP No. 97 8b Entities (except 8bi entities) (b+c+d)	XXX	26,055	-	26,055
f. Aggregate Total (a+e)	XXX	26,055	-	26,055

(2) NAIC Filing Response Information

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

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

11. Debt – No Change

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

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

14. Liabilities, Contingencies and Assessments – No Change

15. Leases – No Change

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

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

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

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans – No Change

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

20. Fair Value Measurements

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

(1) Fair Value Measurements at Reporting Date

Description	(Level 1)	(Level 2)	(Level 3)	Total
a. Assets at fair value				
Common Stock				
Industrial and Misc	\$ 12,382,789	\$ -	\$ 353,836	\$ 12,736,625
Mutual Funds	2,820,605	-	-	2,820,605
Total Common Stock	<u>\$ 15,203,394</u>	<u>\$ -</u>	<u>\$ 353,836</u>	<u>\$ 15,557,230</u>
Derivative assets	-	-	-	-
Total Assets at Fair Value	<u>\$ 15,203,394</u>	<u>\$ -</u>	<u>\$ 353,836</u>	<u>\$ 15,557,230</u>
b. Liabilities at fair value				
Derivative liabilities	\$ -	\$ -	\$ -	\$ -
Total Liabilities at Fair Value	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>

NOTES TO FINANCIAL STATEMENTS

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

	Balance at 12/31/2017	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases, issuances, sales and settlements	09/30/2018
Common Stock - Ind & Misc.	\$ 353,836	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 353,836

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

(4) As of September 30, 2018, the reporting entity's investments in Level 3, NAIC rated A, represents one security that is not traded in a public market and was valued based on a valuation provided by the NAIC Securities Valuation Office.

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

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
Bonds	\$ 74,462,363	\$ 75,209,930	\$ 315,945	\$ 74,146,418	\$ -	\$ -
Common Stocks	15,557,230	15,557,230	15,203,394	-	353,836	-
Total Financial Instruments	<u>\$ 90,019,593</u>	<u>\$ 90,767,160</u>	<u>\$ 15,519,339</u>	<u>\$ 74,146,418</u>	<u>\$ 353,836</u>	<u>\$ -</u>

D. Not Practicable to Estimate Fair Value

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

21. Other Items – No Change**22. Events Subsequent – None****23. Reinsurance – No Change****24. Retrospectively Rated Contracts and Contracts Subject to Redetermination – No Change****25. Change in Incurred Losses and Loss Adjustment Expenses**

A. The Company's portion of pooled loss reserves as of December 31, 2017 was \$27.8 million. On a pooled basis as of September 30, 2018, \$9.7 million has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Pooled reserves remaining for prior years are now \$15.3 million. There has been a \$2.8 million favorable prior-year development, on a pooled basis, from December 31, 2017 to September 30, 2018 as a result of re-estimation of unpaid claims and claim adjustment expenses principally on homeowners, farmowners, and personal auto liability lines of insurance. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims. The Company does not have any retrospectively rated policies which would be included in the favorable development.

B. No Change

26. Intercompany Pooling Arrangements

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

	09/30/2018	12/31/2017
Premium earned assumed by Ohio Mutual from United Ohio and Casco	\$ 120,921,523	\$ 153,053,427
Premium earned ceded back to United Ohio and Casco	(126,541,012)	(156,171,271)
Change in premium earned due to pooling	<u>\$ (5,619,489)</u>	<u>\$ (3,117,844)</u>
Losses incurred assumed by Ohio Mutual from United Ohio and Casco	\$ 59,778,177	\$ 78,799,527
Losses incurred ceded back to United Ohio and Casco	(63,375,430)	(80,616,889)
Change in losses incurred due to pooling	<u>\$ (3,597,253)</u>	<u>\$ (1,817,362)</u>
Net loss adjustment expenses assumed by Ohio Mutual	\$ 2,773,872	\$ 4,126,349
Net other underwriting expenses assumed by Ohio Mutual	5,273,761	8,597,479
Change in expenses incurred due to pooling	<u>\$ 8,047,633</u>	<u>\$ 12,723,828</u>
Change in income before taxes due to pooling	<u>\$ (10,069,869)</u>	<u>\$ (14,024,310)</u>

27. Structured Settlements – No Change**28. Health Care Receivables – No Change****29. Participating Policies – No Change****30. Premium Deficiency Reserves – No Change****31. High Deductibles – No Change****32. Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses – No Change**

NOTES TO FINANCIAL STATEMENTS

33. Asbestos/Environmental Reserves – No Change

34. Subscriber Savings Accounts – No Change

35. Multiple Peril Crop Insurance – No Change

36. Financial Guaranty Insurance – No Change

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

1	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? 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). 05/19/2017
- 6.4 By what department or departments?
Ohio Department of Insurance
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A [X]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [X] N/A []
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 7.2 If yes, give full information:
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

GENERAL INTERROGATORIES

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? 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 [] No [X]
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [] No [X]
- 11.2 If yes, give full and complete information relating thereto:
12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$
13. Amount of real estate and mortgages held in short-term investments: \$
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [X] No []
- 14.2 If yes, please complete the following:
- | | 1
Prior Year-End
Book/Adjusted
Carrying Value | 2
Current Quarter
Book/Adjusted
Carrying Value |
|---|--|---|
| 14.21 Bonds | \$ | \$ |
| 14.22 Preferred Stock | \$ | \$ |
| 14.23 Common Stock | \$ 186,760,308 | \$ 201,430,793 |
| 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) | \$ 186,760,308 | \$ 201,430,793 |
| 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above | \$ | \$ |
- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [] No [X]
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No []
- If no, attach a description with this statement.

STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2\$
- 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2\$
- 16.3 Total payable for securities lending reported on the liability page\$

17. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []
- 17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

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

- 17.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

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

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

- 17.4 If yes, give full information relating thereto:

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

- 17.5 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

1 Name of Firm or Individual	2 Affiliation
New England Asset Management	U.....

- 17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's assets?..... Yes [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 [] No [X]

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

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
105900	New England Asset Management	KUR85E5PS4GQFZTFC130	New England Asset Management is an SEC registered Investment Advisor	NO.....

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

- 18.2 If no, list exceptions:

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

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:

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

5. Operating Percentages:

5.1 A&H loss percent %

5.2 A&H cost containment percent %

5.3 A&H expense percent excluding cost containment expenses 4.724 %

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

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

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

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

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 []

STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Ohio Mutual Insurance Company

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

States, etc.	1 Active Status (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. AlabamaAL	N						
2. AlaskaAK	N						
3. ArizonaAZ	N						
4. ArkansasAR	N						
5. CaliforniaCA	N						
6. ColoradoCO	N						
7. ConnecticutCT	L						
8. DelawareDE	N						
9. District of ColumbiaDC	N						
10. FloridaFL	N						
11. GeorgiaGA	N						
12. HawaiiHI	N						
13. IdahoID	N						
14. IllinoisIL	N						
15. IndianaIN	L	22,470					
16. IowaIA	L						
17. KansasKS	L						
18. KentuckyKY	N						
19. LouisianaLA	N						
20. MaineME	L						
21. MarylandMD	N						
22. MassachusettsMA	N						
23. MichiganMI	N						
24. MinnesotaMN	L						
25. MississippiMS	N						
26. MissouriMO	N						
27. MontanaMT	N						
28. NebraskaNE	L						
29. NevadaNV	N						
30. New HampshireNH	L						
31. New JerseyNJ	N						
32. New MexicoNM	N						
33. New YorkNY	N						
34. North CarolinaNC	N						
35. North DakotaND	N						
36. OhioOH	L	60,395,719	48,943,643	24,223,314	23,057,228	23,074,588	19,605,753
37. OklahomaOK	N						
38. OregonOR	L						
39. PennsylvaniaPA	N						
40. Rhode IslandRI	L						
41. South CarolinaSC	N						
42. South DakotaSD	N						
43. TennesseeTN	L						
44. TexasTX	N						
45. UtahUT	N						
46. VermontVT	L						
47. VirginiaVA	L						
48. WashingtonWA	N						
49. West VirginiaWV	N						
50. WisconsinWI	L						
51. WyomingWY	N						
52. American SamoaAS	N						
53. GuamGU	N						
54. Puerto RicoPR	N						
55. U.S. Virgin IslandsVI	N						
56. Northern Mariana IslandsMP	N						
57. CanadaCAN	N						
58. Aggregate Other Alien OT	XXX						
59. Totals	XXX	60,418,189	48,943,643	24,223,314	23,057,228	23,074,588	19,605,753
DETAILS OF WRITE-INS							
58001.	XXX						
58002.	XXX						
58003.	XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX						
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX						

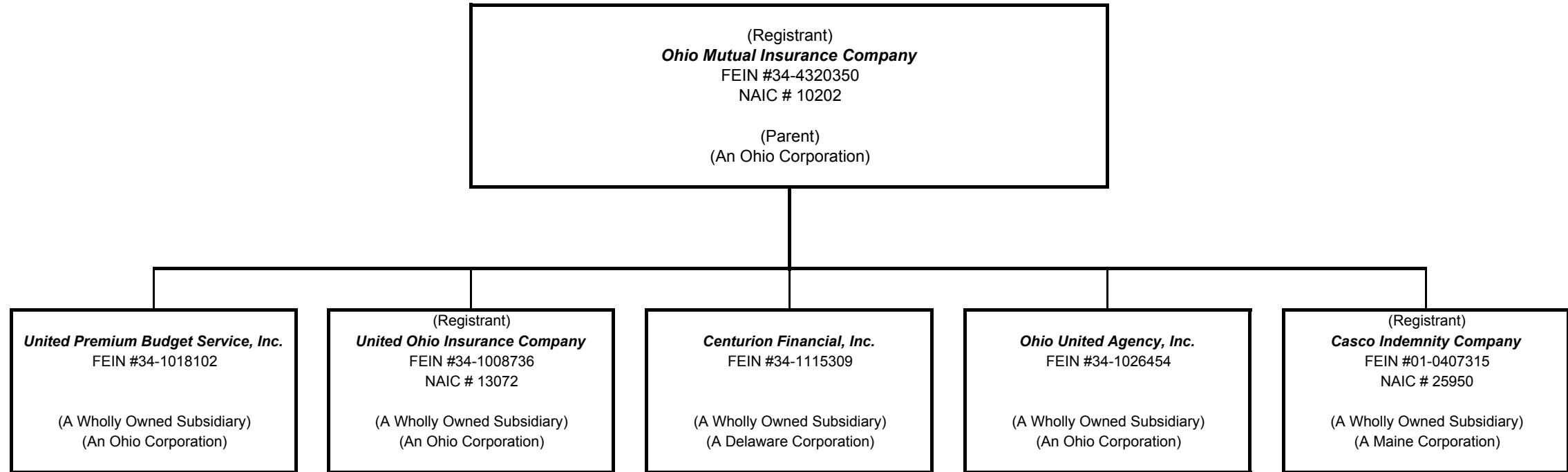
(a) Active Status Counts:

L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG15
 E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI)
 D - Domestic Surplus Lines Insurer (DSLII) - Reporting entities authorized to write surplus lines in the state of domicile.....

R - Registered - Non-domiciled RRGs
 Q - Qualified - Qualified or accredited reinsurer
 N - None of the above - Not allowed to write business in the state42

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

Ohio Mutual Insurance Group



STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Ohio Mutual Insurance Company

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
.0963	Ohio Mutual Insurance Group	10202	34-4320350				Ohio Mutual Insurance Company	OH		Ohio Mutual Insurance Company	Management			N	
.0963	Ohio Mutual Insurance Group	13072	34-1008736				United Ohio Insurance Company	OH	DS	Ohio Mutual Insurance Company	Ownership	100.000	Ohio Mutual Insurance Company	N	
.0963	Ohio Mutual Insurance Group		34-1018102				United Premium Budget Service, Inc.	OH	DS	Ohio Mutual Insurance Company	Ownership	100.000	Ohio Mutual Insurance Company	N	
.0963	Ohio Mutual Insurance Group		34-1115309				Centurion Financial, Inc.	DE	DS	Ohio Mutual Insurance Company	Ownership	100.000	Ohio Mutual Insurance Company	N	
.0963	Ohio Mutual Insurance Group		34-1026454				Ohio United Agency, Inc.	OH	DS	Ohio Mutual Insurance Company	Ownership	100.000	Ohio Mutual Insurance Company	N	
.0963	Ohio Mutual Insurance Group	25950	01-0407315				Casco Indemnity Company	ME	DS	Ohio Mutual Insurance Company	Ownership	100.000	Ohio Mutual Insurance Company	N	

NONE

Asterisk	
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STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Ohio Mutual Insurance Company

PART 1 - LOSS EXPERIENCE

Line of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire	2,016,794	447,968	22.2	25.2
2. Allied Lines				
3. Farmowners multiple peril	2,751,397	1,210,590	44.0	19.3
4. Homeowners multiple peril	12,709,014	3,954,530	31.1	45.8
5. Commercial multiple peril				
6. Mortgage guaranty				
8. Ocean marine				
9. Inland marine	11,854			9.7
10. Financial guaranty				
11.1 Medical professional liability - occurrence				
11.2 Medical professional liability - claims-made				
12. Earthquake				
13. Group accident and health				
14. Credit accident and health				
15. Other accident and health				
16. Workers' compensation				
17.1 Other liability - occurrence	184,387	33,702	18.3	11.7
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	19,142,767	11,853,709	61.9	57.9
19.3,19.4 Commercial auto liability				
21. Auto physical damage	17,282,926	9,828,971	56.9	51.1
22. Aircraft (all perils)				
23. Fidelity				
24. Surety				
26. Burglary and theft	63,732	13,886	21.8	10.4
27. Boiler and machinery				
28. Credit				
29. International				
30. Warranty				
31. Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX
32. Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX
33. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business				
35. Totals	54,162,871	27,343,356	50.5	49.6
DETAILS OF WRITE-INS				
3401.				
3402.				
3403.				
3498.	Summary of remaining write-ins for Line 34 from overflow page			
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)			

PART 2 - DIRECT PREMIUMS WRITTEN

Line of Business	1	2	3
	Current Quarter	Current Year to Date	Prior Year Year to Date
1. Fire	501,081	1,612,072	1,767,215
2. Allied Lines			
3. Farmowners multiple peril	800,683	3,377,856	2,324,857
4. Homeowners multiple peril	5,836,828	15,190,984	11,480,761
5. Commercial multiple peril			
6. Mortgage guaranty			
8. Ocean marine			
9. Inland marine	2,524	11,133	12,906
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	59,355	180,720	192,005
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	7,649,356	21,042,053	17,564,335
19.3,19.4 Commercial auto liability			
21. Auto physical damage	6,812,409	18,942,437	15,535,317
22. Aircraft (all perils)			
23. Fidelity			
24. Surety			
26. Burglary and theft	19,006	60,934	66,247
27. Boiler and machinery			
28. Credit			
29. International			
30. Warranty			
31. Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX
32. Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX
33. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business			
35. Totals	21,681,242	60,418,189	48,943,643
DETAILS OF WRITE-INS			
3401.			
3402.			
3403.			
3498.	Summary of remaining write-ins for Line 34 from overflow page		
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)		

STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Ohio Mutual Insurance Company

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1+2)	2018 Loss and LAE Payments on Claims Reported as of Prior Year-End	2018 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2018 Loss and LAE Payments (Cols. 4+5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols.7+8+9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols.4+7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5+8+9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11+12)
1. 2015 + Prior	4,074	2,828	6,902	2,377	2	2,379	2,746	12	1,899	4,657	1,049	(915)	134
2. 2016	3,008	2,987	5,995	1,566	22	1,588	2,257	15	1,257	3,529	815	(1,693)	(878)
3. Subtotals 2016 + Prior	7,082	5,815	12,897	3,943	24	3,967	5,003	27	3,156	8,186	1,864	(2,608)	(744)
4. 2017	7,142	7,742	14,884	5,535	170	5,705	3,710	74	3,353	7,137	2,103	(4,145)	(2,042)
5. Subtotals 2017 + Prior	14,224	13,557	27,781	9,478	194	9,672	8,713	101	6,509	15,323	3,967	(6,753)	(2,786)
6. 2018	XXX	XXX	XXX	XXX	16,496	16,496	XXX	5,286	8,584	13,870	XXX	XXX	XXX
7. Totals	14,224	13,557	27,781	9,478	16,690	26,168	8,713	5,387	15,093	29,193	3,967	(6,753)	(2,786)
8. Prior Year-End Surplus As Regards Policyholders	234,999										Col. 11, Line 7 As % of Col. 1 Line 7	Col. 12, Line 7 As % of Col. 2 Line 7	Col. 13, Line 7 As % of Col. 3 Line 7
											1. 27.9	2. (49.8)	3. (10.0)
													Col. 13, Line 7 As a % of Col. 1 Line 8
													4. (1.2)

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

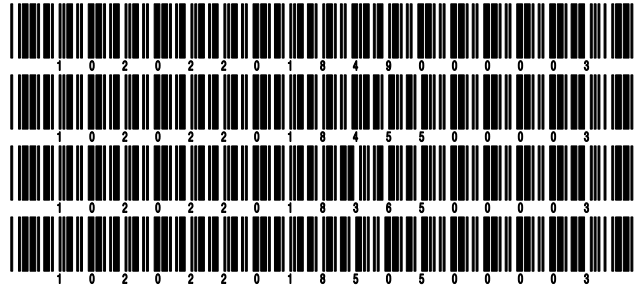
	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	NO
3. Will the Medicare Part D Coverage Supplement be filed with the state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

Explanations:

- 1.
- 2.
- 3.
- 4.

Bar Codes:

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



NONE

STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Ohio Mutual 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	2,973,700	4,106,514
2. Cost of acquired:		
2.1 Actual cost at time of acquisition	318,834	71,157
2.2 Additional investment made after acquisition		
3. Current year change in encumbrances		
4. Total gain (loss) on disposals		968,716
5. Deduct amounts received on disposals		1,942,718
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	133,706	229,969
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)	3,158,828	2,973,700
10. Deduct total nonadmitted amounts		
11. Statement value at end of current period (Line 9 minus Line 10)	3,158,828	2,973,700

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

NONE

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

NONE

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	272,623,513	249,379,150
2. Cost of bonds and stocks acquired	17,657,642	19,903,515
3. Accrual of discount	21,252	28,899
4. Unrealized valuation increase (decrease)	14,893,149	14,606,640
5. Total gain (loss) on disposals	138,219	26,384
6. Deduct consideration for bonds and stocks disposed of	12,690,960	10,718,785
7. Deduct amortization of premium	446,690	602,290
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	1,828	
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	292,197,953	272,623,513
12. Deduct total nonadmitted amounts	26,055	26,053
13. Statement value at end of current period (Line 11 minus Line 12)	292,171,898	272,597,460

STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Ohio Mutual Insurance Company

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)	68,101,145	5,752,881	1,990,172	(139,619)	68,032,748	68,101,145	71,724,235	67,710,045
2. NAIC 2 (a)	3,235,284	250,000		411	3,107,262	3,235,284	3,485,695	2,871,146
3. NAIC 3 (a)					249,303			248,810
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	71,336,429	6,002,881	1,990,172	(139,208)	71,389,313	71,336,429	75,209,930	70,830,001
PREFERRED STOCK								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds and Preferred Stock	71,336,429	6,002,881	1,990,172	(139,208)	71,389,313	71,336,429	75,209,930	70,830,001

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

S102

SCHEDULE DA - PART 1

Short-Term Investments

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

NONE

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		1,476,227
2. Cost of short-term investments acquired		13,593,750
3. Accrual of discount		
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals		
6. Deduct consideration received on disposals		15,069,977
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)		
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)		

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

NONE

Schedule DB - Part B - Verification - Futures Contracts

NONE

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

NONE

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

NONE

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

NONE

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	671,808	999,694
2. Cost of cash equivalents acquired	24,113,383	8,897,530
3. Accrual of discount	927	307
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals	(1)	(2)
6. Deduct consideration received on disposals	20,867,158	9,225,721
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)	3,918,959	671,808
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	3,918,959	671,808

STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Ohio Mutual Insurance Company

SCHEDULE A - PART 2

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

1 Description of Property	Location		4 Date Acquired	5 Name of Vendor	6 Actual Cost at Time of Acquisition	7 Amount of Encumbrances	8 Book/Adjusted Carrying Value Less Encumbrances	9 Additional Investment Made After Acquisition
	2 City	3 State						
Building	Bucyrus	OH	07/02/2018	Choreo	1,136		1,136	
Building	Bucyrus	OH	07/12/2018	SRMC	2,594		2,594	
Building	Bucyrus	OH	07/16/2018	Continental Office	2,876		2,876	
Building	Bucyrus	OH	07/23/2018	WSA Studio	51,752		51,752	
Building	Bucyrus	OH	08/09/2018	Planes Moving & Storage	1,323		1,323	
Building	Bucyrus	OH	08/22/2018	WSA Studio	2,193		2,193	
Building	Bucyrus	OH	08/30/2018	WSA Studio	12,161		12,161	
Building	Bucyrus	OH	09/11/2018	Choreo	1,200		1,200	
Building	Bucyrus	OH	09/20/2018	Allen Cabinetry	2,602		2,602	
0199999. Acquired by Purchase					77,837		77,837	
0399999 - Totals					77,837		77,837	

SCHEDULE A - PART 3

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

1 Description of Property	Location		4 Disposal Date	5 Name of Purchaser	6 Actual Cost	7 Expended for Additions, Permanent Improvements and Changes in Encumbrances	8 Book/Adjusted Carrying Value Less Encumbrances Prior Year	Change in Book/Adjusted Carrying Value Less Encumbrances					14 Book/Adjusted Carrying Value Less Encumbrances on Disposal	15 Amounts Received During Year	16 Foreign Exchange Gain (Loss) on Disposal	17 Realized Gain (Loss) on Disposal	18 Total Gain (Loss) on Disposal	19 Gross Income Earned Less Interest Incurred on Encumbrances	20 Taxes, Repairs and Expenses Incurred
	2 City	3 State						9 Current Year's Depreciation	10 Current Year's Other Than Temporary Impairment Recognized	11 Current Year's Change in Encumbrances	12 Total Change in Book/Adjusted Carrying Value (11-9-10)	13 Total Foreign Exchange Change in Book/Adjusted Carrying Value							
NONE																			
0399999 - Totals																			

E01

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

NONE

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

NONE

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

NONE

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

NONE

STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Ohio Mutual Insurance Company

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the 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 Desig- nation or Market Indicator (a)
36179T-7L-3	GOVERNMENT NATL MTG ASSOC II #MA5399		.09/26/2018	GOLDMAN SACHS		1,545,614	1,497,075	3,181	1FE
0599999. Subtotal - Bonds - U.S. Governments						1,545,614	1,497,075	3,181	XXX
3128P8-F9-7	FEDERAL HOME LN MTG CORP #C91992		.08/29/2018	SUNTRUST CAPITAL MARKETS		475,314	485,712	486	1FE
3138X0-YU-6	FEDERAL NATIONAL MTG ASSOC #AU1622		.09/26/2018	AMHERST SECURITIES GROUP INC.		1,475,240	1,487,793	1,446	1FE
31418C-YN-8	FEDERAL NATIONAL MTG ASSOC #MA3416		.08/27/2018	AMHERST SECURITIES GROUP INC.		509,136	489,719	735	1FE
3199999. Subtotal - Bonds - U.S. Special Revenues						2,459,690	2,463,224	2,667	XXX
36255J-AD-6	GM FINANCIAL SECURITIZED TERM 18-3 A3		.07/11/2018	JP MORGAN SECURITIES INC.		749,825	750,000		1FE
40573L-AG-1	HALFMOON PARENT INC		.09/06/2018	MORGAN STANLEY & CO		250,000	250,000		2FE
74456Q-BN-5	PUBLIC SERVICE ELECTRIC		.09/05/2018	MITSUBISHI UFJ SECURITIES USA INC		249,557	250,000		1FE
904764-BG-1	UNILEVER CAPITAL CORP		.09/04/2018	GOLDMAN SACHS		248,195	250,000		1FE
404280-BX-6	HSBC HOLDINGS PLC	D.	.09/05/2018	HSBC SECURITIES USA INC.		500,000	500,000		1FE
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						1,997,577	2,000,000		XXX
8399997. Total - Bonds - Part 3						6,002,881	5,960,299	5,848	XXX
8399998. Total - Bonds - Part 5						XXX	XXX	XXX	XXX
8399999. Total - Bonds						6,002,881	5,960,299	5,848	XXX
8999997. Total - Preferred Stocks - Part 3							XXX		XXX
8999998. Total - Preferred Stocks - Part 5						XXX	XXX	XXX	XXX
8999999. Total - Preferred Stocks							XXX		XXX
9799997. Total - Common Stocks - Part 3							XXX		XXX
9799998. Total - Common Stocks - Part 5						XXX	XXX	XXX	XXX
9799999. Total - Common Stocks							XXX		XXX
9899999. Total - Preferred and Common Stocks							XXX		XXX
9999999 - Totals						6,002,881	XXX	5,848	XXX

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

STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Ohio Mutual Insurance Company

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	Foreign	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 Book/Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation or Market Indicator (a)
3620AU-TE-4	GOVERNMENT NATL MTG ASSOC #740449		09/01/2018	PAYDOWN		13,338	13,338	13,876	13,347				(10)		13,338				356	11/15/2040	IFE
3620AW-TA-8	GOVERNMENT NATL MTG ASSOC #742245		09/01/2018	PAYDOWN		7,509	7,509	7,510	7,509						7,509				222	01/15/2041	IFE
3620C6-YU-3	GOVERNMENT NATL MTG ASSOC #750523		09/01/2018	PAYDOWN		886	886	922	887						886				24	11/15/2040	IFE
38373Q-GX-3	GOVERNMENT NATIONAL MORTGAGE A 03 34 PM		09/01/2018	PAYDOWN		1,896	1,896	1,957	1,902			(6)	(6)		1,896				50	04/20/2033	IFE
38373V-7A-2	GOVERNMENT NATIONAL MORTGAGE A 02 75 LA		09/01/2018	PAYDOWN		2,211	2,211	2,286	2,224			(13)	(13)		2,211				64	10/20/2032	IFE
38374T-LA-0	GOVERNMENT NATIONAL MORTGAGE A 09 15 NK		09/01/2018	PAYDOWN		849	849	872	854			(6)	(6)		849				25	12/20/2038	IFE
38376F-LH-3	GOVERNMENT NATIONAL MORTGAGE A 09 66 EJ		09/01/2018	PAYDOWN		1,566	1,566	1,633	1,576			(10)	(10)		1,566				42	07/16/2039	IFE
38376G-DN-7	GOVERNMENT NATIONAL MORTGAGE A 10 18 C		09/01/2018	PAYDOWN		969	969	1,017	974			(4)	(4)		969				28	03/16/2051	IFE
38376T-BF-8	GOVERNMENT NATIONAL MORTGAGE A 10 12 DA		09/01/2018	PAYDOWN		968	968	1,002	972			(3)	(3)		968				28	01/16/2040	IFE
38377V-2M-7	GOVERNMENT NATIONAL MORTGAGE A 11 71 QE		09/01/2018	PAYDOWN		5,299	5,299	5,548	5,344			(44)	(44)		5,299				122	09/16/2040	IFE
0599999	Subtotal - Bonds - U.S. Governments					35,491	35,491	36,623	35,589				(96)		35,491				961	XXX	XXX
313033-CB-1	CALIFORNIA ST HSG FIN AGY RSDL		09/01/2018	SINK FUND PAYMENT		5,842	5,842	5,820	5,840				2		5,842				113	02/01/2042	IFE
3128LX-C3-2	FEDERAL HOME LN MTG CORP #G01890		09/01/2018	PAYDOWN		2,780	2,780	2,913	2,799			(18)	(18)		2,780				83	10/01/2035	IFE
3128MJ-RJ-1	FEDERAL HOME LN MTG CORP #G08488		09/01/2018	PAYDOWN		6,921	6,921	7,075	6,932			(11)	(11)		6,921				161	04/01/2042	IFE
3128MM-AS-2	FEDERAL HOME LN MTG CORP #G18016		09/01/2018	PAYDOWN		1,287	1,287	1,312	1,290			(3)	(3)		1,287				42	10/01/2019	IFE
3128MM-LD-3	FEDERAL HOME LN MTG CORP #G18323		09/01/2018	PAYDOWN		2,028	2,028	2,087	2,039			(11)	(11)		2,028				59	09/01/2024	IFE
31294K-YB-5	FEDERAL HOME LN MTG CORP #E01606		09/01/2018	PAYDOWN		1,838	1,838	1,888	1,840			(1)	(1)		1,838				55	04/01/2019	IFE
3132GS-GM-5	FEDERAL HOME LN MTG CORP #007104		09/01/2018	PAYDOWN		6,198	6,198	6,335	6,205			(7)	(7)		6,198				145	04/01/2042	IFE
3132GS-K8-1	FEDERAL HOME LN MTG CORP #007219		09/01/2018	PAYDOWN		9,971	9,971	10,192	9,986			(14)	(14)		9,971				255	04/01/2042	IFE
3132MA-NN-7	FEDERAL HOME LN MTG CORP #029697		09/01/2018	PAYDOWN		4,620	4,620	4,799	4,638			(18)	(18)		4,620				107	11/01/2044	IFE
3132QL-GN-8	FEDERAL HOME LN MTG CORP #030876		09/01/2018	PAYDOWN		17,735	17,735	18,630	17,818			(83)	(83)		17,735				435	01/01/2045	IFE
3136A7-GW-6	FANNIE MAE 12 67 KA		09/01/2018	PAYDOWN		4,042	4,042	4,257	4,069			(27)	(27)		4,042				97	05/25/2041	IFE
3136A7-QU-9	FANNIE MAE 12 86 CF		09/25/2018	PAYDOWN		9,402	9,402	9,414	9,404			(2)	(2)		9,402				138	04/25/2039	IFE
3136AD-EF-2	FANNIE MAE 13 36 AG		09/01/2018	PAYDOWN		6,021	6,021	6,145	6,036			(16)	(16)		6,021				118	12/25/2036	IFE
3136AJ-BB-7	FANNIE MAE 14 27 NV		09/01/2018	PAYDOWN		4,441	4,441	4,593	4,455			(13)	(13)		4,441				89	06/25/2027	IFE
3136AK-DG-5	FANNIE MAE 14 36 QB		09/01/2018	PAYDOWN		5,086	5,086	5,204	5,099			(14)	(14)		5,086				102	09/25/2033	IFE
3136AK-P4-9	FANNIE MAE 14 54 PN		09/01/2018	PAYDOWN		4,331	4,331	4,511	4,348			(17)	(17)		4,331				102	08/25/2043	IFE
3136AL-MX-6	FANNIE MAE 14 73 PJ		09/01/2018	PAYDOWN		6,275	6,275	6,482	6,302			(27)	(27)		6,275				127	12/25/2043	IFE
31376K-GX-8	FEDERAL NATIONAL MTG ASSOC #357614		09/01/2018	PAYDOWN		1,145	1,145	1,166	1,147			(2)	(2)		1,145				38	09/01/2019	IFE
31376K-LZ-7	FEDERAL NATIONAL MTG ASSOC #357744		09/01/2018	PAYDOWN		1,445	1,445	1,426	1,440			5	5		1,445				43	04/01/2020	IFE
313789-BZ-7	FHLMC MULTIFAMILY STRUCTURED P KF03 A		09/25/2018	PAYDOWN		9,490	9,490	9,490	9,490						9,490				143	01/25/2021	IFE
31378C-R6-7	FREDDIE MAC 4374 CE		09/01/2018	PAYDOWN		5,359	5,359	5,601	5,386			(27)	(27)		5,359				123	12/15/2043	IFE
31378D-ZI-7	FREDDIE MAC 4387 KG		09/01/2018	PAYDOWN		3,411	3,411	3,602	3,463			(52)	(52)		3,411				98	02/15/2039	IFE
3138EN-2N-8	FEDERAL NATIONAL MTG ASSOC #AL6180		09/01/2018	PAYDOWN		19,170	19,170	20,577	19,279			(110)	(110)		19,170				521	01/01/2045	IFE
3138EP-WS-9	FEDERAL NATIONAL MTG ASSOC #AL6956		09/01/2018	PAYDOWN		15,934	15,934	16,569	15,966			(53)	(53)		15,934				369	06/01/2045	IFE
3138M9-PE-5	FEDERAL NATIONAL MTG ASSOC #AP5820		09/01/2018	PAYDOWN		11,248	11,248	11,843	11,284			(15)	(15)		11,248				211	11/01/2042	IFE
3138W1-GD-3	FEDERAL NATIONAL MTG ASSOC #AR3795		09/01/2018	PAYDOWN		2,651	2,651	2,729	2,656			(5)	(5)		2,651				53	02/01/2043	IFE
3138W4-M2-4	FEDERAL NATIONAL MTG ASSOC #AR6676		09/01/2018	PAYDOWN		30,529	30,529	31,655	30,610			(82)	(82)		30,529				620	02/01/2043	IFE
31393R-TE-0	FREDDIE MAC 2631 DA		09/01/2018	PAYDOWN		671	671	665	670				1		671				16	06/15/2033	IFE
31394K-L3-6	FREDDIE MAC 2682 TF		09/15/2018	PAYDOWN		4,842	4,842	4,880	4,846			(3)	(3)		4,842				73	10/15/2033	IFE
31394R-Y6-0	FREDDIE MAC 2761 QB		09/01/2018	PAYDOWN		993	993	1,016	997			(4)	(4)		993				26	12/15/2033	IFE
31396Y-SH-6	FANNIE MAE 08 17 DP		09/01/2018	PAYDOWN		1,530	1,530	1,598	1,542			(13)	(13)		1,530				49	02/25/2038	IFE
31397C-V5-5	FREDDIE MAC 3239 EF		09/15/2018	PAYDOWN		7,032	7,032	7,044	7,033			(1)	(1)		7,032				102	11/15/2036	IFE
31398C-D4-7	FREDDIE MAC 3527 DA		09/01/2018	PAYDOWN		1,045	1,045	1,083	1,053			(9)	(9)		1,045				29	04/15/2029	IFE
31398S-CH-4	FANNIE MAE 10 122 AC		09/01/2018	PAYDOWN		3,421	3,421	3,580	3,442			(22)	(22)		3,421				80	08/25/2022	IFE
31402C-V7-4	FEDERAL NATIONAL MTG ASSOC #725238		09/01/2018	PAYDOWN		867	867	812	861			6	6		867				29	03/01/2034	IFE
31402W-VS-4	FEDERAL NATIONAL MTG ASSOC #740525		09/01/2018	PAYDOWN		1,575	1,575	1,610	1,575						1,575				52	10/01/2018	IFE
3140GS-PD-8	FEDERAL NATIONAL MTG ASSOC #BH4019		09/01/2018	PAYDOWN		28,155	28,155	29,563	28,231			(76)	(76)		28,155				739	09/01/2047	IFE
31417S-AP-5	FEDERAL NATIONAL MTG ASSOC #AC5413		09/01/2018	PAYDOWN		4,557	4,557	4,718	4,585			(28)	(28)		4,557				137	10/01/2024	IFE
31418N-QV-5	FEDERAL NATIONAL MTG ASSOC #AD1367		09/01/2018	PAYDOWN		1,190	1,190	1,242	1,203			(13)	(13)		1,190				36	03/01/2025	IFE
31418P-6M-2	FEDERAL NATIONAL MTG ASSOC #AD2675		09/01/2018	PAYDOWN		1,930	1,930	2,014	1,936			(5)	(5)		1,930				58	03/01/2025	IFE
31418P-K7-9	FEDERAL NATIONAL MTG ASSOC #AD2117		09/01/2018	PAYDOWN		1,751	1,751	1,827	1,763			(12)	(12)		1,751				52	03/01/2025	IFE
575579-RS-8	MASSACHUSETTS ST BAY TRANSPRTN		07/01/2018	PREREFUNDED		5,000	5,000	5,330	5,018			(18)	(18)		5,000				250	07/01/2020	IFE
575579-SL-2	MASSACHUSETTS ST BAY TRANSPRTN		07/01/2018	PREREFUNDED		245,000	245,000	261,185	245,856			(858)	(858)		245,000				12,250	07/01/2020	IFE
60416Q-GB-4	MINNESOTA ST HSG FIN AGY HOME0		09/01/2018	SINK FUND PAYMENT		6,195	6,195	6,195	6,195						6,195				118	11/01/2044	IFE
613349-2F-5	MONTGOMERY CNTY MD HSG OPPORTU		07/01/2018	SINK FUND PAYMENT		10,000	10,000	10,746	10,090			(90)	(90)		10,000				400	01/01/2031	IFE
708796-3D																					

STATEMENT AS OF SEPTEMBER 30, 2018 OF THE Ohio Mutual Insurance Company

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22	
										11	12	13	14	15								
CUSIP Identification	Description	Foreign	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 Book/Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation or Market Indicator (a)	
3199999	Subtotal - Bonds - U.S. Special Revenues					544,954	544,954	572,835	546,862		(1,911)		(1,911)		544,954				19,321	XXX	XXX	
02587A-AG-9	AMERICAN EXPRESS CREDIT ACCT 13 1 A		07/15/2018	PAYDOWN		250,000	250,000	250,654	250,118		(118)		(118)		250,000				3,219	02/16/2021	1FE	
14314A-AH-2	CARMAX AUTO OWNER TRUST 18-1 A2B		09/15/2018	PAYDOWN		135,231	135,231	135,231							135,231				1,800	05/17/2021	1FE	
161571-GB-4	CHASE ISSUANCE TRUST 13 A7 A		09/15/2018	PAYDOWN		250,000	250,000	250,000							250,000				4,326	09/15/2020	1FE	
17305E-FF-7	CITIBANK CREDIT CARD ISSUANCE 13 A7 A7		09/10/2018	PAYDOWN		250,000	250,000	250,117	250,010		(10)		(10)		250,000				4,257	09/10/2020	1FE	
46641J-AT-3	JPMBB COMMERCIAL MORTGAGE 14 C18 A2		09/01/2018	PAYDOWN		9,860	9,860	10,156	9,945		(85)		(85)		9,860				189	02/15/2047	1FM	
61766C-AA-7	MORGAN STANLEY CAPITAL I TR 16 UBS9 A1		09/01/2018	PAYDOWN		11,139	11,139	11,138	11,139						11,139				127	03/15/2049	1FM	
69353R-ER-5	PNC BANK NA		07/20/2018	MATURITY		250,000	250,000	249,970	249,994		6		6		250,000				4,625	07/20/2018	1FE	
79548K-UV-8	SALOMON BROTHERS MORTGAGE 97 HUD1 B3		09/01/2018	PAYDOWN			545												22	12/25/2030	1FM	
89238K-AC-6	TOYOTA AUTO RECEIVABLES OWNER 17-D A2B		09/15/2018	PAYDOWN		110,517	110,517	110,517	110,517						110,517				1,392	08/17/2020	1FE	
92338J-AB-8	WF-RBS COMMERCIAL MORTGAGE TR 13 UBS1 A2		09/01/2018	PAYDOWN		142,980	142,980	147,884	143,531		(551)		(551)		142,980				2,826	03/15/2046	1FM	
3899999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					1,409,727	1,410,272	1,415,667	1,275,254		(758)		(758)		1,409,727				22,783	XXX	XXX	
8399997	Total - Bonds - Part 4					1,990,172	1,990,717	2,025,125	1,857,705		(2,765)		(2,765)		1,990,172				43,065	XXX	XXX	
8399998	Total - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8399999	Total - Bonds					1,990,172	1,990,717	2,025,125	1,857,705		(2,765)		(2,765)		1,990,172				43,065	XXX	XXX	
8999997	Total - Preferred Stocks - Part 4						XXX													XXX	XXX	
8999998	Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8999999	Total - Preferred Stocks						XXX													XXX	XXX	
9799997	Total - Common Stocks - Part 4						XXX													XXX	XXX	
9799998	Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9799999	Total - Common Stocks						XXX													XXX	XXX	
9899999	Total - Preferred and Common Stocks						XXX													XXX	XXX	
9999999	Totals					1,990,172	1,990,717	2,025,125	1,857,705		(2,765)		(2,765)		1,990,172				43,065	XXX	XXX	

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

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

NONE

Schedule DB - Part B - Section 1 - Futures Contracts Open

NONE

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

NONE

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

NONE

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

NONE

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

NONE

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

NONE

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

NONE

