



ANNUAL STATEMENT

For the Year Ended December 31, 2018
of the Condition and Affairs of the

WAYNE MUTUAL INSURANCE COMPANY

NAIC Group Code.....	4678, 4678	NAIC Company Code.....	16799	Employer's ID Number.....	34-0606100
	(Current Period) (Prior Period)				
Organized under the Laws of OH		State of Domicile or Port of Entry OH		Country of Domicile	US
Incorporated/Organized.....	January 10, 1910	Commenced Business.....	March 1, 1910		
Statutory Home Office	3873 CLEVELAND ROAD .. WOOSTER .. OH .. US .. 44691				
	(Street and Number) (City or Town, State, Country and Zip Code)				
Main Administrative Office	3873 CLEVELAND ROAD .. WOOSTER .. OH .. US .. 44691			330-345-8100	
	(Street and Number) (City or Town, State, Country and Zip Code)			(Area Code) (Telephone Number)	
Mail Address	3873 CLEVELAND ROAD .. WOOSTER .. OH .. US .. 44691				
	(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)				
Primary Location of Books and Records	3873 CLEVELAND ROAD .. WOOSTER .. OH .. US .. 44691			330-345-8100	
	(Street and Number) (City or Town, State, Country and Zip Code)			(Area Code) (Telephone Number)	
Internet Web Site Address	www.wayneinsgroup.com				
Statutory Statement Contact	TOD JAMES CARMONY			330-345-8100-324	
	(Name)			(Area Code) (Telephone Number) (Extension)	
	TOD_CARMONY@WAYNEINSGROUP.COM			330-345-1321	
	(E-Mail Address)			(Fax Number)	

OFFICERS

Name	Title	Name	Title
1. TOD JAMES CARMONY	PRESIDENT	2. DAVID EDWARD TSCHANTZ	TREASURER
3. MORRIS STUTZMAN	SECRETARY	4.	
OTHER			
TIMOTHY JOHN SUPPES	VICE PRESIDENT	DAVID EDWARD TSCHANTZ	VICE PRESIDENT
NORMAN HERBERT LEWIS	VICE PRESIDENT		

DIRECTORS OR TRUSTEES

SCOTT LEE PREISING	MORRIS STUTZMAN	GREGORY TODD BUEHLER	TOD JAMES CARMONY
DONALD ALVIN RAMSEYER	DAVID EDWARD TSCHANTZ	METTA FREEMAN MCCOY	

State of..... OHIO
County of..... WAYNE

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

(Signature)	(Signature)	(Signature)
TOD JAMES CARMONY	DAVID EDWARD TSCHANTZ	MORRIS STUTZMAN
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
PRESIDENT	TREASURER	SECRETARY
(Title)	(Title)	(Title)
Subscribed and sworn to before me	a. Is this an original filing?	Yes [X] No []
This _____ day of _____ 2019	b. If no	1. State the amendment number
		2. Date filed
		3. Number of pages attached

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code.....4678 NAIC Company Code....16799

BUSINESS IN GRAND TOTAL DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire.....	605,405	603,199		298,123	132,344	133,310	330,501	6,411	9,707	8,818	1,897,432	158,100
2.1 Allied lines.....		7,323										
2.2 Multiple peril crop.....												
2.3 Federal flood.....												
2.4 Private crop.....												
2.5 Private flood.....												
3. Farmowners multiple peril.....	5,664,966	5,168,259		2,725,983	2,697,537	2,490,718	543,450	82,652	84,841	20,186	813,093	67,750
4. Homeowners multiple peril.....	13,853,555	12,607,682		7,295,986	5,402,818	5,107,649	1,591,142	165,303	183,089	60,959	1,988,402	165,680
5.1 Commercial multiple peril (non-liability portion).....	4,030,211	3,951,418		2,015,566	1,023,628	1,461,721	1,056,355	109,056	132,902	61,297	578,457	48,199
5.2 Commercial multiple peril (liability portion).....	1,873,304	1,797,800		927,840	1,089,455	722,330	557,086				268,875	22,404
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....	71,222	55,847		36,431	18,264	17,264			(287)		10,222	852
10. Financial guaranty.....												
11. Medical professional liability.....												
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A&H (b).....												
15.8 Federal employees health benefits plan premium.....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....	2,814,714	2,832,412		1,092,652	637,186	624,966	1,129,525	22,131	37,474	46,458	403,996	33,662
17.2 Other liability-claims-made.....												
17.3 Excess workers' compensation.....												
18. Products liability.....												
19.1 Private passenger auto no-fault (personal injury protection).....												
19.2 Other private passenger auto liability.....	8,555,591	8,189,413		3,418,175	4,813,034	5,109,994	4,181,237	65,637	125,854	156,882	1,227,985	102,320
19.3 Commercial auto no-fault (personal injury protection).....												
19.4 Other commercial auto liability.....	1,218,632	1,095,254		623,609	302,243	941,678	829,073	965	26,214	25,249	174,910	14,574
21.1 Private passenger auto physical damage.....	9,364,922	8,667,540		3,798,944	5,167,191	5,115,276	246,736	52,532	54,893	10,151	1,344,148	111,999
21.2 Commercial auto physical damage.....	317,018	284,301		160,880	327,759	337,659	18,635				45,502	3,791
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....		1,752										
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	48,369,540	45,262,200	0	22,394,189	21,611,459	22,062,565	10,483,740	504,687	654,687	390,000	8,753,022	729,331

DETAILS OF WRITE-INS

3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$....629,716.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)



NAIC Group Code....4678 NAIC Company Code....16799

BUSINESS IN THE STATE OF OHIO DURING THE YEAR

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
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2.1 Allied lines.....		7,323										
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3. Farmowners multiple peril.....	5,664,966	5,168,259		2,725,983	2,697,537	2,490,718	543,450	82,652	84,841	20,186	813,093	67,750
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5.2 Commercial multiple peril (liability portion).....	1,873,304	1,797,800		927,840	1,089,455	722,330	557,086				268,875	22,404
6. Mortgage guaranty.....												
8. Ocean marine.....												
9. Inland marine.....	71,222	55,847		36,431	18,264	17,264			(287)		10,222	852
10. Financial guaranty.....												
11. Medical professional liability.....												
12. Earthquake.....												
13. Group accident and health (b).....												
14. Credit A&H (group and individual).....												
15.1 Collectively renewable A&H (b).....												
15.2 Non-cancelable A&H (b).....												
15.3 Guaranteed renewable A&H (b).....												
15.4 Non-renewable for stated reasons only (b).....												
15.5 Other accident only.....												
15.6 Medicare Title XVIII exempt from state taxes or fees.....												
15.7 All other A&H (b).....												
15.8 Federal employees health benefits plan premium.....												
16. Workers' compensation.....												
17.1 Other liability-occurrence.....	2,814,714	2,832,412		1,092,652	637,186	624,966	1,129,525	22,131	37,474	46,458	403,996	33,662
17.2 Other liability-claims-made.....												
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19.1 Private passenger auto no-fault (personal injury protection).....												
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19.4 Other commercial auto liability.....	1,218,632	1,095,254		623,609	302,243	941,678	829,073	965	26,214	25,249	174,910	14,574
21.1 Private passenger auto physical damage.....	9,364,922	8,667,540		3,798,944	5,167,191	5,115,276	246,736	52,532	54,893	10,151	1,344,148	111,999
21.2 Commercial auto physical damage.....	317,018	284,301		160,880	327,759	337,659	18,635				45,502	3,791
22. Aircraft (all perils).....												
23. Fidelity.....												
24. Surety.....												
26. Burglary and theft.....		1,752										
27. Boiler and machinery.....												
28. Credit.....												
30. Warranty.....												
34. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0	0	0	0	0
35. TOTALS (a).....	48,369,540	45,262,200	0	22,394,189	21,611,459	22,062,565	10,483,740	504,687	654,687	390,000	8,753,022	729,331

DETAILS OF WRITE-INS

3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0	0
3499. TOTALS (Lines 3401 through 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$....629,716.

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products.....0 and number of persons insured under indemnity only products.....0.

WAYNE MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 1

Assumed Reinsurance as of December 31, Current Year (\$000 Omitted)

1 ID Number	2 NAIC Company Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On			9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held by or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE	8 Cols. 6 + 7							
Affiliates - U.S. Non-Pool - Other														
34-0605195..	10255.....	WASHINGTON MUTUAL INSURANCE ASSOCIATION.....	OH.....	10,338	.....	.....1,084	1,084	.....	.....3,890	5,447	.....	.....	.....	.....
34-4296150..	10281.....	MARION MUTUAL INSURANCE ASSOCIATION.....	OH.....	1,776	.....	.....297	297	.....	.....624	751	.....	.....	.....	.....
0399999.	Affiliates - U.S. Non-Pool - Other.....			12,114	0	1,381	1,381	0	4,514	6,198	0	0	0	0
0499999.	Affiliates - U.S. Non-Pool - Total.....			12,114	0	1,381	1,381	0	4,514	6,198	0	0	0	0
0899999.	Total Affiliates.....			12,114	0	1,381	1,381	0	4,514	6,198	0	0	0	0
Other U. S. Unaffiliated Insurers														
AA-9995035	00000.....	MUTUAL REINSURANCE BUREAU.....	IL.....	165	.....	.....	.....0	.....	.....	.....	.....	.....	.....	.....
34-0432730..	10264.....	NORTON MUTUAL FIRE ASSOCIATION.....	OH.....	500	.....	.....3	3	.....	.....(5)	260	.....	.....	.....	.....
0999999.	Other U. S. Unaffiliated Insurers.....			665	0	3	3	0	(5)	260	0	0	0	0
9999999.	Totals.....			12,779	0	1,384	1,384	0	4,509	6,458	0	0	0	0

WAYNE MUTUAL INSURANCE COMPANY
SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effectd or (Canceled) during Current Year

1	2	3	4	5	6
ID Number	NAIC Company Code	Name of Company	Date of Contract	Original Premium	Reinsurance Premium

NONE

WAYNE MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

1	2	3	4	5	6	Reinsurance Recoverable on								16	Reinsurance Payable		19	20	
						7	8	9	10	11	12	13	14		15	17			18
ID Number	NAIC Company Code	Name of Reinsurer	Domi-ciliary Juris-diction	Special Code	Reinsurance Premiums Ceded	Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commissions	Col. 7 through 14 Totals	Amount in Dispute Included in Column 15	Ceded Balances Payable	Other Amounts Due to Reinsurers	Net Amount Recoverable from Reinsurers (Cols. 15 - [17 + 18])	Funds Held by Company Under Reinsurance Treaties
Authorized Other U.S. Unaffiliated Insurers																			
06-1182357.	22730...	Allied World Insurance Company.....	NH...		168									0		(1)		1	
36-2661954.	10103...	American Agricultural Insurance Company.....	IN.....		288	30	1	25		29				85		56		29	
51-0434766.	20370...	AXIS Reinsurance Company.....	NY.....		84	8		7		7				22		15		7	
47-0574325.	32603...	Berkley Insurance Company.....	DE.....		172	11		9		11				31		31		0	
39-0712210.	18767...	Church Mutual Insurance Company.....	WI.....		44	8								8				8	
42-0234980.	21415...	Employers Mutual Casualty Company.....	IA.....		156	20		10		12				42		23		19	
35-2293075.	11551...	Endurance Assurance Corporation.....	DE.....		23									0		3		(3)	
22-2005057.	26921...	Everest Reinsurance Company.....	DE.....							1				1				1	
38-1316179.	21555...	Farm Bureau Mutual Insurance Company of Michigan.....	MI.....		44	8								8				8	
42-0245840.	13897...	Farmers Mutual Hail Insurance Company Of Iowa.....	IA.....		64	7		6		7				20		13		7	
61-0392792.	22993...	Kentucky Farm Bureau Mutual Insurance Company.....	KY.....		44	8								8				8	
06-1481194.	10829...	Markel Global Reinsurance Company.....	DE.....		46									0		6		(6)	
31-4259550.	14621...	Motorists Mutual Insurance Company.....	OH.....		44	8								8				8	
23-1641984.	10219...	QBE Reinsurance Corporation.....	PA.....							2				2				2	
52-1952955.	10357...	Renaissance Reinsurance U.S. Inc.....	MD.....		29	3		3		2				8		6		2	
43-0613000.	23388...	Shelter Mutual Insurance Company.....	MO.....		56									0				0	
13-1675535.	25364...	Swiss Reinsurance America Corporation.....	NY.....		455	31	1	27		29				88		85		3	
13-2918573.	42439...	The Toa Reinsurance Company Of America.....	DE.....		458	47	1	40		49				137		100		37	
05-0316605.	21482...	Factory Mutual Insurance Company.....	RI.....			6								6				6	
0999999.	Total Authorized Other U.S. Unaffiliated Insurers.....				2,175	195	3	127	0	149	0	0	0	474	0	337	0	137	0
Authorized Other Non-U.S. Insurers																			
AA-1120337.	00000...	Aspen Insurance UK Limited.....	GBR..		30	1		1		1				3		5		(2)	
AA-1340125.	00000...	Hannover Rück SE.....	DEU..		86	5		5		6				16		15		1	
AA-1126566.	00000...	Lloyd's Underwriter Syndicate No. 0566.....	GBR..		40									0		4		(4)	
AA-1126780.	00000...	Lloyd's Underwriter Syndicate No. 0780.....	GBR..		20									0		2		(2)	
1299999.	Total Authorized Other Non-U.S. Insurers.....				176	6	0	6	0	7	0	0	0	19	0	26	0	(7)	0
1499999.	Total Authorized Excluding Protected Cells.....				2,351	201	3	133	0	156	0	0	0	493	0	363	0	130	0
Unauthorized Other Non-U.S. Insurers																			
AA-1560350.	00000...	Farm Mutual Reinsurance Plan Inc.....	CAN..		277									0		1		(1)	1
AA-3190060.	00000...	Hannover Re (Bermuda) Limited.....	BMU..		225									0		(2)		2	
AA-1340004.	00000...	R+V Versicherung AG.....	DEU..		393									0		(3)		3	
2699999.	Total Unauthorized Other Non-U.S. Insurers.....				895	0	0	0	0	0	0	0	0	0	0	(4)	0	4	1
2899999.	Total Unauthorized Excluding Protected Cells.....				895	0	0	0	0	0	0	0	0	0	0	(4)	0	4	1
4399999.	Total Authorized, Unauthorized and Certified Excluding Protected Cells.....				3,246	201	3	133	0	156	0	0	0	493	0	359	0	134	1
9999999.	Totals (Sum of 4399999 and 4499999).....				3,246	201	3	133	0	156	0	0	0	493	0	359	0	134	1

WAYNE MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Credit Risk)

ID Number from Col. 1	Name of Reinsurer from Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15 - 27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17 + 18 + 20; Not in Excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29 - 30)	32 Total Collateral (Cols. 21 + 22 + 24; Not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31 - 32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Uncollateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
Authorized Other U.S. Unaffiliated Insurers																	
06-1182357.	Allied World Insurance Company.....					(1)	1	0	0	0	(1)	1	0	1	3	0	0
36-2661954.	American Agricultural Insurance Company.....					56	29	0	85	102	56	46	0	46	4	0	2
51-0434766.	AXIS Reinsurance Company.....					15	7	0	22	26	15	11	0	11	2	0	0
47-0574325.	Berkley Insurance Company.....					31	0	0	31	37	31	6	0	6	2	0	0
39-0712210.	Church Mutual Insurance Company.....					0	8	0	8	10	0	10	0	10	3	0	0
42-0234980.	Employers Mutual Casualty Company.....					23	19	0	42	50	23	27	0	27	3	0	1
35-2293075.	Endurance Assurance Corporation.....					0	0	0	0	0	0	0	0	0	3	0	0
22-2005057.	Everest Reinsurance Company.....					0	1	0	1	1	0	1	0	1	2	0	0
38-1316179.	Farm Bureau Mutual Insurance Company of Michigan.....					0	8	0	8	10	0	10	0	10	5	0	1
42-0245840.	Farmers Mutual Hail Insurance Company Of Iowa.....					13	7	0	20	24	13	11	0	11	4	0	1
61-0392792.	Kentucky Farm Bureau Mutual Insurance Company.....					0	8	0	8	10	0	10	0	10	3	0	0
06-1481194.	Markel Global Reinsurance Company.....					0	0	0	0	0	0	0	0	0	3	0	0
31-4259550.	Motorists Mutual Insurance Company.....					0	8	0	8	10	0	10	0	10	3	0	0
23-1641984.	QBE Reinsurance Corporation.....					0	2	0	2	2	0	2	0	2	3	0	0
52-1952955.	Renaissance Reinsurance U.S. Inc.....					6	2	0	8	10	6	4	0	4	3	0	0
43-0613000.	Shelter Mutual Insurance Company.....					0	0	0	0	0	0	0	0	0	3	0	0
13-1675535.	Swiss Reinsurance America Corporation.....					85	3	0	88	106	85	21	0	21	2	0	1
13-2918573.	The Toa Reinsurance Company Of America.....					100	37	0	137	164	100	64	0	64	2	0	3
05-0316605.	Factory Mutual Insurance Company.....					0	6	0	6	7	0	7	0	7	2	0	0
0999999.	Total Authorized Other U.S. Unaffiliated Insurers.....	0	0	XXX	0	328	146	0	474	569	328	241	0	241	XXX	0	11
Authorized Other Non-U.S. Insurers																	
AA-1120337.	Aspen Insurance UK Limited.....					3	0	0	3	4	4	0	0	0	3	0	0
AA-1340125.	Hannover Rück SE.....					15	1	0	16	19	15	4	0	4	2	0	0
AA-1126566.	Lloyd's Underwriter Syndicate No. 0566.....					0	0	0	0	0	0	0	0	0	3	0	0
AA-1126780.	Lloyd's Underwriter Syndicate No. 0780.....					0	0	0	0	0	0	0	0	0	3	0	0
1299999.	Total Authorized Other Non-U.S. Insurers.....	0	0	XXX	0	18	1	0	19	23	19	4	0	4	XXX	0	0
1499999.	Total Authorized Excluding Protected Cells.....	0	0	XXX	0	346	147	0	493	592	347	245	0	245	XXX	0	11
Unauthorized Other Non-U.S. Insurers																	
AA-1560350.	Farm Mutual Reinsurance Plan Inc.....					0	0	0	0	0	0	0	0	0	4	0	0
AA-3190060.	Hannover Re (Bermuda) Limited.....					(2)	2	0	0	0	(2)	2	0	2	2	0	0
AA-1340004.	R+V Versicherung AG.....					(3)	3	0	0	0	(3)	3	0	3	2	0	0
2699999.	Total Unauthorized Other Non-U.S. Insurers.....	0	0	XXX	0	(5)	5	0	0	0	(5)	5	0	5	XXX	0	0
2899999.	Total Unauthorized Excluding Protected Cells.....	0	0	XXX	0	(5)	5	0	0	0	(5)	5	0	5	XXX	0	0
4399999.	Total Authorized, Unauthorized & Certified Excl Prot Cells.....	0	0	XXX	0	341	152	0	493	592	342	250	0	250	XXX	0	12
9999999.	Totals (Sum of 4399999 and 4499999).....	0	0	XXX	0	341	152	0	493	592	342	250	0	250	XXX	0	12

WAYNE MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

(Aging of Ceded Reinsurance)

ID Number from Col. 1	Name of Reinsurer from Col. 3	37 Current	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses					44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols. 43 - 44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue (Col. 42 / Col. 43)	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47 / (Cols. 46 + 48))	51 Percentage More Than 120 Days Overdue (Col. 41 / Col. 43)	52 Is the Amount in Col. 50 Less than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50	
			Overdue															43 Total Due Cols. 37 + 42 (In Total Should Equal Cols. 7 + 8)
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue (Cols. 38 + 39 + 40 +41)											
Authorized Other U.S. Unaffiliated Insurers																		
06-1182357.	Allied World Insurance Company.....						0	0		0	0		0.0	0.0	0.0	YES...	0	
36-2661954.	American Agricultural Insurance Company.....	31					0	31		31	0		0.0	0.0	0.0	YES...	0	
51-0434766.	AXIS Reinsurance Company.....	8					0	8		8	0		0.0	0.0	0.0	YES...	0	
47-0574325.	Berkley Insurance Company.....	11					0	11		11	0		0.0	0.0	0.0	YES...	0	
39-0712210.	Church Mutual Insurance Company.....	8					0	8		8	0		0.0	0.0	0.0	YES...	0	
42-0234980.	Employers Mutual Casualty Company.....	20					0	20		20	0		0.0	0.0	0.0	YES...	0	
35-2293075.	Endurance Assurance Corporation.....						0	0		0	0		0.0	0.0	0.0	YES...	0	
22-2005057.	Everest Reinsurance Company.....						0	0		0	0		0.0	0.0	0.0	YES...	0	
38-1316179.	Farm Bureau Mutual Insurance Company of Michigan.....	8					0	8		8	0		0.0	0.0	0.0	YES...	0	
42-0245840.	Farmers Mutual Hail Insurance Company Of Iowa.....	7					0	7		7	0		0.0	0.0	0.0	YES...	0	
61-0392792.	Kentucky Farm Bureau Mutual Insurance Company.....	8					0	8		8	0		0.0	0.0	0.0	YES...	0	
06-1481194.	Markel Global Reinsurance Company.....						0	0		0	0		0.0	0.0	0.0	YES...	0	
31-4259550.	Motorists Mutual Insurance Company.....	8					0	8		8	0		0.0	0.0	0.0	YES...	0	
23-1641984.	QBE Reinsurance Corporation.....						0	0		0	0		0.0	0.0	0.0	YES...	0	
52-1952955.	Renaissance Reinsurance U.S. Inc.....	3					0	3		3	0		0.0	0.0	0.0	YES...	0	
43-0613000.	Shelter Mutual Insurance Company.....						0	0		0	0		0.0	0.0	0.0	YES...	0	
13-1675535.	Swiss Reinsurance America Corporation.....	32					0	32		32	0		0.0	0.0	0.0	YES...	0	
13-2918573.	The Toa Reinsurance Company Of America.....	48					0	48		48	0		0.0	0.0	0.0	YES...	0	
05-0316605.	Factory Mutual Insurance Company.....	6					0	6		6	0		0.0	0.0	0.0	YES...	0	
0999999.	Total Authorized Other U.S. Unaffiliated Insurers.....	198	0	0	0	0	0	198	0	0	198	0	0.0	0.0	0.0	...XXX.	0	
Authorized Other Non-U.S. Insurers																		
AA-1120337.	Aspen Insurance UK Limited.....	1					0	1		1	0		0.0	0.0	0.0	YES...	0	
AA-1340125.	Hannover Rück SE.....	5					0	5		5	0		0.0	0.0	0.0	YES...	0	
AA-1126566.	Lloyd's Underwriter Syndicate No. 0566.....						0	0		0	0		0.0	0.0	0.0	YES...	0	
AA-1126780.	Lloyd's Underwriter Syndicate No. 0780.....						0	0		0	0		0.0	0.0	0.0	YES...	0	
1299999.	Total Authorized Other Non-U.S. Insurers.....	6	0	0	0	0	0	6	0	0	6	0	0.0	0.0	0.0	...XXX.	0	
1499999.	Total Authorized Excluding Protected Cells.....	204	0	0	0	0	0	204	0	0	204	0	0.0	0.0	0.0	...XXX.	0	
Unauthorized Other Non-U.S. Insurers																		
AA-1560350.	Farm Mutual Reinsurance Plan Inc.....						0	0		0	0		0.0	0.0	0.0	YES...	0	
AA-3190060.	Hannover Re (Bermuda) Limited.....						0	0		0	0		0.0	0.0	0.0	YES...	0	
AA-1340004.	R+V Versicherung AG.....						0	0		0	0		0.0	0.0	0.0	YES...	0	
2699999.	Total Unauthorized Other Non-U.S. Insurers.....	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	...XXX.	0	
2899999.	Total Unauthorized Excluding Protected Cells.....	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	...XXX.	0	
4399999.	Total Authorized, Unauthorized & Certified Excl Prot Cells.....	204	0	0	0	0	0	204	0	0	204	0	0.0	0.0	0.0	...XXX.	0	
9999999.	Totals (Sum of 4399999 and 4499999).....	204	0	0	0	0	0	204	0	0	204	0	0.0	0.0	0.0	...XXX.	0	

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Provision for Reinsurance for Certified Reinsurer)

ID Number from Col. 1	Name of Reinsurer from Col. 3	Provision for Certified Reinsurance														Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col. 68; Not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68			
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Cols. 19 - 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, Not to Exceed 100%)	20% of Recoverable on Paid Losses & LAE over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24 Not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67			
Authorized Other U.S. Unaffiliated Insurers																			
06-1182357.	Allied World Insurance Company.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
36-2661954.	American Agricultural Insurance Company.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
51-0434766.	AXIS Reinsurance Company.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
47-0574325.	Berkley Insurance Company.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
39-0712210.	Church Mutual Insurance Company.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
42-0234980.	Employers Mutual Casualty Company.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
35-2293075.	Endurance Assurance Corporation.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
22-2005057.	Everest Reinsurance Company.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
38-1316179.	Farm Bureau Mutual Insurance Company of Michigan.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
42-0245840.	Farmers Mutual Hail Insurance Company Of Iowa.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
61-0392792.	Kentucky Farm Bureau Mutual Insurance Company.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
06-1481194.	Markel Global Reinsurance Company.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
31-4259550.	Motorists Mutual Insurance Company.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
23-1641984.	QBE Reinsurance Corporation.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
52-1952955.	Renaissance Reinsurance U.S. Inc.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
43-0613000.	Shelter Mutual Insurance Company.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
13-1675535.	Swiss Reinsurance America Corporation.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
13-2918573.	The Toa Reinsurance Company Of America.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
05-0316605.	Factory Mutual Insurance Company.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
0999999.	Total Authorized Other U.S. Unaffiliated Insurers.....				XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
Authorized Other Non-U.S. Insurers																			
AA-1120337.	Aspen Insurance UK Limited.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
AA-1340125.	Hannover Rück SE.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
AA-1126566.	Lloyd's Underwriter Syndicate No. 0566.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
AA-1126780.	Lloyd's Underwriter Syndicate No. 0780.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
1299999.	Total Authorized Other Non-U.S. Insurers.....				XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
1499999.	Total Authorized Excluding Protected Cells.....				XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
Unauthorized Other Non-U.S. Insurers																			
AA-1560350.	Farm Mutual Reinsurance Plan Inc.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
AA-3190060.	Hannover Re (Bermuda) Limited.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
AA-1340004.	R+V Versicherung AG.....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
2699999.	Total Unauthorized Other Non-U.S. Insurers.....				XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
2899999.	Total Unauthorized Excluding Protected Cells.....				XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
4399999.	Total Authorized, Unauthorized & Certified Excl Prot Cells.....				.0	.0	.0	XXX.	XXX.	.0	.0	.0	.0	.0	.0	.0	.0	.0	
9999999.	Totals (Sum of 4399999 and 4499999).....				.0	.0	.0	XXX.	XXX.	.0	.0	.0	.0	.0	.0	.0	.0	.0	

WAYNE MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)

(Total Provision for Reinsurance)

ID Number from Col. 1	Name of Reinsurer from Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized Reinsurance		Total Provision for Reinsurance			
			71	72	73	74	75	76	77	78
			Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col 16)	Complete if Col. 52 = "Yes"; Otherwise Enter 0. 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	Complete if Col. 52 = "No"; Otherwise Enter 0. Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. 140 + 411 * 20%)	Provision for Amounts Ceded to Authorized Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)

Authorized Other U.S. Unaffiliated Insurers

06-1182357.	Allied World Insurance Company.....	0	XXX	XXX	0	0	0	XXX	XXX	0
36-2661954.	American Agricultural Insurance Company.....	0	XXX	XXX	0	0	0	XXX	XXX	0
51-0434766.	AXIS Reinsurance Company.....	0	XXX	XXX	0	0	0	XXX	XXX	0
47-0574325.	Berkley Insurance Company.....	0	XXX	XXX	0	0	0	XXX	XXX	0
39-0712210.	Church Mutual Insurance Company.....	0	XXX	XXX	0	0	0	XXX	XXX	0
42-0234980.	Employers Mutual Casualty Company.....	0	XXX	XXX	0	0	0	XXX	XXX	0
35-2293075.	Endurance Assurance Corporation.....	0	XXX	XXX	0	0	0	XXX	XXX	0
22-2005057.	Everest Reinsurance Company.....	0	XXX	XXX	0	0	0	XXX	XXX	0
38-1316179.	Farm Bureau Mutual Insurance Company of Michigan.....	0	XXX	XXX	0	0	0	XXX	XXX	0
42-0245840.	Farmers Mutual Hail Insurance Company Of Iowa.....	0	XXX	XXX	0	0	0	XXX	XXX	0
61-0392792.	Kentucky Farm Bureau Mutual Insurance Company.....	0	XXX	XXX	0	0	0	XXX	XXX	0
06-1481194.	Markel Global Reinsurance Company.....	0	XXX	XXX	0	0	0	XXX	XXX	0
31-4259550.	Motorists Mutual Insurance Company.....	0	XXX	XXX	0	0	0	XXX	XXX	0
23-1641984.	QBE Reinsurance Corporation.....	0	XXX	XXX	0	0	0	XXX	XXX	0
52-1952955.	Renaissance Reinsurance U.S. Inc.....	0	XXX	XXX	0	0	0	XXX	XXX	0
43-0613000.	Shelter Mutual Insurance Company.....	0	XXX	XXX	0	0	0	XXX	XXX	0
13-1675535.	Swiss Reinsurance America Corporation.....	0	XXX	XXX	0	0	0	XXX	XXX	0
13-2918573.	The Toa Reinsurance Company Of America.....	0	XXX	XXX	0	0	0	XXX	XXX	0
05-0316605.	Factory Mutual Insurance Company.....	0	XXX	XXX	0	0	0	XXX	XXX	0
0999999.	Total Authorized Other U.S. Unaffiliated Insurers.....	0	XXX	XXX	0	0	0	XXX	XXX	0

Authorized Other Non-U.S. Insurers

AA-1120337.	Aspen Insurance UK Limited.....	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1340125.	Hannover Rück SE.....	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126566.	Lloyd's Underwriter Syndicate No. 0566.....	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126780.	Lloyd's Underwriter Syndicate No. 0780.....	0	XXX	XXX	0	0	0	XXX	XXX	0
1299999.	Total Authorized Other Non-U.S. Insurers.....	0	XXX	XXX	0	0	0	XXX	XXX	0
1499999.	Total Authorized Excluding Protected Cells.....	0	XXX	XXX	0	0	0	XXX	XXX	0

Unauthorized Other Non-U.S. Insurers

AA-1560350.	Farm Mutual Reinsurance Plan Inc.....	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190060.	Hannover Re (Bermuda) Limited.....	0	2	0	XXX	XXX	XXX	0	XXX	0
AA-1340004.	R+V Versicherung AG.....	0	3	0	XXX	XXX	XXX	0	XXX	0
2699999.	Total Unauthorized Other Non-U.S. Insurers.....	0	5	0	XXX	XXX	XXX	0	XXX	0
2899999.	Total Unauthorized Excluding Protected Cells.....	0	5	0	XXX	XXX	XXX	0	XXX	0
4399999.	Total Authorized, Unauthorized & Certified Excl Prot Cells.....	0	5	0	0	0	0	0	0	0
9999999.	Totals (Sum of 4399999 and 4499999).....	0	5	0	0	0	0	0	0	0

SCHEDULE F - PART 4

Issuing or Confirming Banks for Letters of Credit from Schedule F, Part 3 (\$000 Omitted)

1	2	3	4	5
Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
				0

NONE

WAYNE MUTUAL INSURANCE COMPANY
SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

A. Report the five largest provisional commission rates included in the cedant's reinsurance treaties. The commission rate to be reported is by contract with ceded premium in excess of \$50,000.

1 Name of Reinsurer	2 Commission Rate	3 Ceded Premium
1.		
2.		
3.		
4.		
5.		

B. Report the five largest reinsurance recoverables reported in Column 15, due from any one reinsurer (based on the total recoverables, Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

1 Name of Reinsurer	2 Total Recoverables	3 Ceded Premiums	4 Affiliated YES or NO
6. The Toa Reinsurance Company Of America.....	137	458	NO.....
7. Swiss Reinsurance America Corporation.....	88	455	NO.....
8. American Agricultural Insurance Company.....	85	288	NO.....
9. Employers Mutual Casualty Company.....	42	156	NO.....
10. Berkley Insurance Company.....	31	172	NO.....

NOTE: Disclosure of the five largest provisional commission rates should exclude mandatory pools and joint underwriting associations.

WAYNE MUTUAL INSURANCE COMPANY
SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	77,035,549		77,035,549
2. Premiums and considerations (Line 15).....	14,313,795		14,313,795
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1).....	204,432	(204,432)	0
4. Funds held by or deposited with reinsured companies (Line 16.2).....			0
5. Other assets.....	1,789,195		1,789,195
6. Net amount recoverable from reinsurers.....		(444,199)	(444,199)
7. Protected cell assets (Line 27).....			0
8. Totals (Line 28).....	93,342,971	(648,631)	92,694,340
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3).....	12,619,195	(288,265)	12,330,930
10. Taxes, expenses, and other obligations (Lines 4 through 8).....	3,611,504		3,611,504
11. Unearned premiums (Line 9).....	28,852,273		28,852,273
12. Advance premiums (Line 10).....	544,454		544,454
13. Dividends declared and unpaid (Line 11.1 and 11.2).....			0
14. Ceded reinsurance premiums payable (net of ceding commissions) (Line 12).....	359,290	(359,290)	0
15. Funds held by company under reinsurance treaties (Line 13).....	1,076	(1,076)	0
16. Amounts withheld or retained by company for account of others (Line 14).....	(62,971)		(62,971)
17. Provision for reinsurance (Line 16).....			0
18. Other liabilities.....	159,273		159,273
19. Total liabilities excluding protected cell business (Line 26).....	46,084,094	(648,631)	45,435,463
20. Protected cell liabilities (Line 27).....			0
21. Surplus as regards policyholders (Line 37).....	47,258,877	XXX	47,258,877
22. Totals (Line 38).....	93,342,971	(648,631)	92,694,340

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements?..Yes [] No [X]

If yes, give full explanation:

Sch. H - Pt. 1
NONE

Sch. H - Pt. 2
NONE

Sch. H - Pt. 3
NONE

Sch. H - Pt. 4
NONE

Sch. H - Pt. 5
NONE

SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....								0	XXX.....
2. 2009.....	7,854.....	764.....	7,090.....	5,360.....	864.....	129.....	18.....	528.....	68.....	60.....	5,067.....	1,438.....
3. 2010.....	8,432.....	941.....	7,491.....	4,765.....	392.....	129.....	4.....	442.....	6.....	18.....	4,934.....	1,148.....
4. 2011.....	9,160.....	1,008.....	8,152.....	7,092.....	198.....	161.....	1.....	564.....	5.....	31.....	7,613.....	1,571.....
5. 2012.....	10,328.....	1,585.....	8,743.....	6,822.....	1,776.....	153.....	7.....	627.....	6.....	98.....	5,813.....	1,688.....
6. 2013.....	11,765.....	1,418.....	10,347.....	6,630.....	721.....	229.....	29.....	422.....	15.....	38.....	6,516.....	984.....
7. 2014.....	12,686.....	1,143.....	11,543.....	5,339.....	651.....	137.....	2.....	405.....	9.....	29.....	5,219.....	929.....
8. 2015.....	13,411.....	1,173.....	12,238.....	5,414.....	810.....	194.....	17.....	402.....	9.....	105.....	5,174.....	761.....
9. 2016.....	14,438.....	1,161.....	13,277.....	3,107.....	1.....	226.....		417.....	2.....	47.....	3,747.....	770.....
10. 2017.....	15,326.....	1,300.....	14,026.....	7,882.....	502.....	244.....	18.....	593.....	16.....	116.....	8,183.....	1,260.....
11. 2018.....	17,787.....	1,594.....	16,193.....	6,733.....	674.....	183.....	22.....	375.....		55.....	6,595.....	977.....
12. Totals.....	XXX.....	XXX.....	XXX.....	59,144.....	6,589.....	1,785.....	118.....	4,775.....	136.....	597.....	58,861.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	116.....	.....	.....38.....	3.....	.....	.....	.....3.....	.....	.....2.....	.....	.....	.....156.....	2.....
2. 2009.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0.....	.....
3. 2010.....	.....	.....	.....	.....	.....	.....	.....	.....	.....1.....	.....	.....	.....1.....	1.....
4. 2011.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0.....	.....
5. 2012.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0.....	.....
6. 2013.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0.....	1.....
7. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0.....	.....
8. 2015.....	65.....	.....	.....22.....	1.....	.....	.....	.....1.....	.....	.....1.....	.....	.....	.....88.....	2.....
9. 2016.....	2.....	.....	.....1.....	.....	.....	.....	.....	.....	.....1.....	.....	.....	.....4.....	2.....
10. 2017.....	120.....	.....	.....178.....	50.....	.....	.....	.....12.....	.....	.....14.....	.....	.....3.....	274.....	23.....
11. 2018.....	1,005.....	3.....	588.....	6.....	.....	.....	.....65.....	.....	.....106.....	.....	.....14.....	1,755.....	171.....
12. Totals...	1,308.....	3.....	827.....	60.....	0.....	0.....	81.....	0.....	125.....	0.....	17.....	2,278.....	202.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....XXX.....	151.....	5.....
2. 2009.	6,017.....	950.....	5,067.....	76.6.....	124.3.....	71.5.....	.....	.....	.....	.....0.....	0.....
3. 2010.	5,337.....	402.....	4,935.....	63.3.....	42.7.....	65.9.....	.....	.....	.....	.....0.....	1.....
4. 2011.	7,817.....	204.....	7,613.....	85.3.....	20.2.....	93.4.....	.....	.....	.....	.....0.....	0.....
5. 2012.	7,602.....	1,789.....	5,813.....	73.6.....	112.9.....	66.5.....	.....	.....	.....	.....0.....	0.....
6. 2013.	7,281.....	765.....	6,516.....	61.9.....	53.9.....	63.0.....	.....	.....	.....	.....0.....	0.....
7. 2014.	5,881.....	662.....	5,219.....	46.4.....	57.9.....	45.2.....	.....	.....	.....	.....0.....	0.....
8. 2015.	6,099.....	837.....	5,262.....	45.5.....	71.4.....	43.0.....	.....	.....	.....	.....86.....	2.....
9. 2016.	3,754.....	3.....	3,751.....	26.0.....	0.3.....	28.3.....	.....	.....	.....	.....3.....	1.....
10. 2017.	9,043.....	586.....	8,457.....	59.0.....	45.1.....	60.3.....	.....	.....	.....	.....248.....	26.....
11. 2018.	9,055.....	705.....	8,350.....	50.9.....	44.2.....	51.6.....	.....	.....	.....	.....1,584.....	171.....
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	2,072.....	206.....

SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....								0	XXX.....
2. 2009.....	4,256.....	188.....	4,068.....	3,070.....	189.....	64.....		277.....	5.....	175.....	3,217.....	771.....
3. 2010.....	4,560.....	186.....	4,374.....	2,476.....	3.....	23.....		319.....		142.....	2,815.....	827.....
4. 2011.....	4,894.....	193.....	4,701.....	2,068.....	16.....	29.....		271.....		99.....	2,352.....	718.....
5. 2012.....	4,887.....	207.....	4,680.....	3,507.....	441.....	24.....	6.....	321.....	(1).....	113.....	3,406.....	769.....
6. 2013.....	5,000.....	170.....	4,830.....	2,781.....		28.....		350.....		99.....	3,159.....	714.....
7. 2014.....	5,241.....	137.....	5,104.....	2,995.....		75.....		431.....		86.....	3,501.....	862.....
8. 2015.....	5,879.....	173.....	5,706.....	2,690.....		34.....		525.....	(1).....	127.....	3,250.....	897.....
9. 2016.....	6,643.....	191.....	6,452.....	3,450.....		32.....		567.....	(1).....	73.....	4,050.....	996.....
10. 2017.....	7,410.....	214.....	7,196.....	3,273.....		41.....		519.....		82.....	3,833.....	1,043.....
11. 2018.....	8,249.....	239.....	8,010.....	3,049.....	150.....	26.....		445.....		64.....	3,370.....	1,008.....
12. Totals.....	XXX.....	XXX.....	XXX.....	29,359.....	799.....	376.....	6.....	4,025.....	2.....	1,060.....	32,953.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
2. 2009.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
3. 2010.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
4. 2011.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
5. 2012.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
6. 2013.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
7. 2014.....	50	.....	.....8	.....	.....	.....	.....1	.....	.....3	.....	.....2	62	4
8. 2015.....	57	.....	.....10	1	.....	.....	.....1	.....	.....3	.....	.....10	70	5
9. 2016.....	313	.....	.....54	4	.....	.....	.....7	.....	.....18	.....	.....13	388	28
10. 2017.....	855	.....	.....260	13	.....	.....	.....36	.....	.....67	.....	.....42	1,205	102
11. 2018.....	1,840	10	734	52	.....	.....	.....112	.....	.....150	.....	.....71	2,774	228
12. Totals...	3,115	10	1,066	70	0	0	157	0	241	0	138	4,499	367

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Inter- Company Pooling Participation Percentage	35	36
										Losses Unpaid	Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....XXX.....	0	0
2. 2009.	3,411.....	194.....	3,217.....	80.1.....	103.2.....	79.1.....	.....	.....	.....	.....0	0
3. 2010.	2,818.....	3.....	2,815.....	61.8.....	1.6.....	64.4.....	.....	.....	.....	.....0	0
4. 2011.	2,368.....	16.....	2,352.....	48.4.....	8.3.....	50.0.....	.....	.....	.....	.....0	0
5. 2012.	3,852.....	446.....	3,406.....	78.8.....	215.5.....	72.8.....	.....	.....	.....	.....0	0
6. 2013.	3,159.....	0.....	3,159.....	63.2.....	0.0.....	65.4.....	.....	.....	.....	.....0	0
7. 2014.	3,563.....	0.....	3,563.....	68.0.....	0.0.....	69.8.....	.....	.....	.....	.....58.....	4.....
8. 2015.	3,320.....	0.....	3,320.....	56.5.....	0.0.....	58.2.....	.....	.....	.....	.....66.....	4.....
9. 2016.	4,441.....	3.....	4,438.....	66.9.....	1.6.....	68.8.....	.....	.....	.....	.....363.....	25.....
10. 2017.	5,051.....	13.....	5,038.....	68.2.....	6.1.....	70.0.....	.....	.....	.....	.....1,102.....	103.....
11. 2018.	6,356.....	212.....	6,144.....	77.1.....	88.7.....	76.7.....	.....	.....	.....	.....2,512.....	262.....
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	4,101.....	398.....

SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....								0	XXX.....
2. 2009.....	160.....	8.....	152.....	14.....				4.....		1.....	18.....	8.....
3. 2010.....	205.....	9.....	196.....	94.....		1.....		7.....			102.....	21.....
4. 2011.....	254.....	10.....	244.....	72.....		1.....		8.....		2.....	81.....	18.....
5. 2012.....	312.....	13.....	299.....	340.....	106.....	1.....		9.....			244.....	21.....
6. 2013.....	369.....	14.....	355.....	77.....		5.....		9.....		2.....	91.....	23.....
7. 2014.....	442.....	12.....	430.....	40.....				10.....			50.....	22.....
8. 2015.....	574.....	18.....	556.....	179.....		2.....		16.....			197.....	32.....
9. 2016.....	717.....	22.....	695.....	124.....		1.....		23.....			148.....	41.....
10. 2017.....	883.....	27.....	856.....	159.....		2.....		27.....			188.....	64.....
11. 2018.....	1,104.....	34.....	1,070.....	203.....		1.....		22.....		5.....	226.....	47.....
12. Totals.....	XXX.....	XXX.....	XXX.....	1,302.....	106.....	14.....	0.....	135.....	0.....	10.....	1,345.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded						Direct and Assumed	Ceded
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
2. 2009.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
3. 2010.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
4. 2011.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
5. 2012.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
6. 2013.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
7. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
8. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	4	.....	.....	.....4	2
9. 2016.....	.....	.....	.....	.....	.....	.....	.....	.....	2	.....	.....	.....2	1
10. 2017.....	15	.....	.....5	.....	.....	.....	.....3	.....	7	.....	.....	.....30	3
11. 2018.....	678	119	131	.....	.....	.....	.....22	.....	26	.....	.....	.....738	12
12. Totals...	693	119	136	0	0	0	25	0	39	0	0	774	18

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Inter- Company Pooling Participation Percentage	35	36
										Losses Unpaid	Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....XXX.....	0	0
2. 2009.	18.....	0.....	18.....	11.3.....	0.0.....	11.8.....	.....	.....	.....	.....0	0
3. 2010.	102.....	0.....	102.....	49.8.....	0.0.....	52.0.....	.....	.....	.....	.....0	0
4. 2011.	81.....	0.....	81.....	31.9.....	0.0.....	33.2.....	.....	.....	.....	.....0	0
5. 2012.	350.....	106.....	244.....	112.2.....	815.4.....	81.6.....	.....	.....	.....	.....0	0
6. 2013.	91.....	0.....	91.....	24.7.....	0.0.....	25.6.....	.....	.....	.....	.....0	0
7. 2014.	50.....	0.....	50.....	11.3.....	0.0.....	11.6.....	.....	.....	.....	.....0	0
8. 2015.	201.....	0.....	201.....	35.0.....	0.0.....	36.2.....	.....	.....	.....	.....0	4
9. 2016.	150.....	0.....	150.....	20.9.....	0.0.....	21.6.....	.....	.....	.....	.....0	2
10. 2017.	218.....	0.....	218.....	24.7.....	0.0.....	25.5.....	.....	.....	.....	.....20	10
11. 2018.	1,083.....	119.....	964.....	98.1.....	350.0.....	90.1.....	.....	.....	.....	.....690	48
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	710	64

WAYNE MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 1D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....								0	XXX.....
2. 2009.....			0								0	
3. 2010.....			0								0	
4. 2011.....			0								0	
5. 2012.....			0								0	
6. 2013.....			0								0	
7. 2014.....			0								0	
8. 2015.....			0								0	
9. 2016.....			0								0	
10. 2017.....			0								0	
11. 2018.....			0								0	
12. Totals.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....												0	
2. 2009.....												0	
3. 2010.....												0	
4. 2011.....												0	
5. 2012.....												0	
6. 2013.....												0	
7. 2014.....												0	
8. 2015.....												0	
9. 2016.....												0	
10. 2017.....												0	
11. 2018.....												0	
12. Totals...	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27	28	29 Direct and Assumed	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
		Ceded	Net		Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	0	0
2. 2009.	0	0	0	0.0	0.0	0.0				0	0
3. 2010.	0	0	0	0.0	0.0	0.0				0	0
4. 2011.	0	0	0	0.0	0.0	0.0				0	0
5. 2012.	0	0	0	0.0	0.0	0.0				0	0
6. 2013.	0	0	0	0.0	0.0	0.0				0	0
7. 2014.	0	0	0	0.0	0.0	0.0				0	0
8. 2015.	0	0	0	0.0	0.0	0.0				0	0
9. 2016.	0	0	0	0.0	0.0	0.0				0	0
10. 2017.	0	0	0	0.0	0.0	0.0				0	0
11. 2018.	0	0	0	0.0	0.0	0.0				0	0
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0

SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....								0	XXX.....
2. 2009.....	1,981.....	190.....	1,791.....	867.....	39.....	26.....	1.....	56.....	6.....	54.....	903.....	170.....
3. 2010.....	2,287.....	264.....	2,023.....	1,268.....	6.....	35.....	2.....	63.....	4.....	2.....	1,354.....	182.....
4. 2011.....	2,560.....	285.....	2,275.....	1,229.....	8.....	63.....		75.....	3.....	1.....	1,356.....	224.....
5. 2012.....	2,953.....	403.....	2,550.....	1,682.....	154.....	65.....	1.....	98.....		17.....	1,690.....	306.....
6. 2013.....	3,474.....	407.....	3,067.....	1,137.....		258.....		88.....		5.....	1,483.....	216.....
7. 2014.....	3,899.....	371.....	3,528.....	1,214.....		47.....		94.....		56.....	1,355.....	217.....
8. 2015.....	4,345.....	384.....	3,961.....	1,862.....		74.....		85.....		84.....	2,021.....	191.....
9. 2016.....	4,896.....	398.....	4,498.....	1,634.....	149.....	81.....	4.....	93.....		20.....	1,655.....	195.....
10. 2017.....	5,334.....	431.....	4,903.....	1,709.....	4.....	81.....		104.....		10.....	1,890.....	268.....
11. 2018.....	5,762.....	456.....	5,306.....	1,213.....		63.....		77.....		1.....	1,353.....	220.....
12. Totals.....	XXX.....	XXX.....	XXX.....	13,815.....	360.....	793.....	8.....	833.....	13.....	250.....	15,060.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded						Direct and Assumed	Ceded
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
2. 2009.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
3. 2010.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
4. 2011.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
5. 2012.....	5	.....	.....1	.....	.....	.....	.....	.....	.....	.....	.....	.....6	1
6. 2013.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
7. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
8. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
9. 2016.....	6	.....	.....2	.....	.....	.....	.....	.....	.....	.....	.....	.....8	2
10. 2017.....	64	.....	.....47	1	.....	.....	.....8	.....	.....13	.....	.....1	131	6
11. 2018.....	953	.....	.....535	10	.....	.....	.....53	.....	.....81	.....	.....2	1,612	35
12. Totals...	1,028	0	585	11	0	0	61	0	94	0	3	1,757	44

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Inter- Company Pooling Participation Percentage	35	36
										Losses Unpaid	Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....XXX.....	0	0
2. 2009.	949.....	46.....	903.....	47.9.....	24.2.....	50.4.....	.....	.....	.....	.....0	0
3. 2010.	1,366.....	12.....	1,354.....	59.7.....	4.5.....	66.9.....	.....	.....	.....	.....0	0
4. 2011.	1,367.....	11.....	1,356.....	53.4.....	3.9.....	59.6.....	.....	.....	.....	.....0	0
5. 2012.	1,851.....	155.....	1,696.....	62.7.....	38.5.....	66.5.....	.....	.....	.....	.....6	0
6. 2013.	1,483.....	0.....	1,483.....	42.7.....	0.0.....	48.4.....	.....	.....	.....	.....0	0
7. 2014.	1,355.....	0.....	1,355.....	34.8.....	0.0.....	38.4.....	.....	.....	.....	.....0	0
8. 2015.	2,021.....	0.....	2,021.....	46.5.....	0.0.....	51.0.....	.....	.....	.....	.....0	0
9. 2016.	1,816.....	153.....	1,663.....	37.1.....	38.4.....	37.0.....	.....	.....	.....	.....8	0
10. 2017.	2,026.....	5.....	2,021.....	38.0.....	1.2.....	41.2.....	.....	.....	.....	.....110	21
11. 2018.	2,975.....	10.....	2,965.....	51.6.....	2.2.....	55.9.....	.....	.....	.....	.....1,478	134
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	1,602	155

Sch. P - Pt. 1F - Sn. 1
NONE

Sch. P - Pt. 1F - Sn. 2
NONE

Sch. P - Pt. 1G
NONE

SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....								0	XXX.....
2. 2009.....	677.....	134.....	543.....	345.....		7.....		12.....			364.....	39.....
3. 2010.....	685.....	147.....	538.....	58.....		3.....		6.....			67.....	28.....
4. 2011.....	1,745.....	183.....	1,562.....	256.....		15.....	2.....	9.....		3.....	278.....	27.....
5. 2012.....	1,712.....	196.....	1,516.....	315.....		11.....		6.....			332.....	25.....
6. 2013.....	1,809.....	217.....	1,592.....	1,386.....	800.....	7.....		14.....	1.....		606.....	30.....
7. 2014.....	1,973.....	250.....	1,723.....	284.....		13.....		9.....			306.....	23.....
8. 2015.....	2,084.....	301.....	1,783.....	187.....		28.....		12.....			227.....	29.....
9. 2016.....	2,376.....	351.....	2,025.....	192.....	14.....	40.....	32.....	17.....		4.....	203.....	46.....
10. 2017.....	2,799.....	425.....	2,374.....	655.....	252.....	7.....		15.....			425.....	50.....
11. 2018.....	2,849.....	465.....	2,384.....	87.....		2.....		12.....			101.....	39.....
12. Totals.....	XXX.....	XXX.....	XXX.....	3,765.....	1,066.....	133.....	34.....	112.....	1.....	7.....	2,909.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
2. 2009.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
3. 2010.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
4. 2011.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....
5. 2012.....	27.....	.....	.....17.....	.....	.....	.....	.....1.....	.....	.....2.....	.....	.....	.....47.....	1.....
6. 2013.....	15.....	.....	.....9.....	.....	.....	.....	.....1.....	.....	.....3.....	.....	.....	.....28.....	1.....
7. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....3.....	.....	.....	.....3.....	1.....
8. 2015.....	11.....	.....	.....7.....	.....	.....	.....	.....	.....	.....5.....	.....	.....	.....23.....	2.....
9. 2016.....	156.....	.....	.....97.....	2.....	.....	.....	.....5.....	.....	.....5.....	.....	.....	.....261.....	2.....
10. 2017.....	128.....	.....	.....214.....	3.....	.....	.....	.....19.....	.....	.....15.....	.....	.....	.....373.....	6.....
11. 2018.....	210.....	.....	.....239.....	10.....	.....	.....	.....21.....	.....	.....38.....	.....	.....	.....498.....	15.....
12. Totals...	547.....	0.....	583.....	15.....	0.....	0.....	47.....	0.....	71.....	0.....	0.....	1,233.....	28.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....XXX.....	0	0
2. 2009.	364.....	0.....	364.....	53.8.....	0.0.....	67.0.....	.....	.....	.....	.....0	0
3. 2010.	67.....	0.....	67.....	9.8.....	0.0.....	12.5.....	.....	.....	.....	.....0	0
4. 2011.	280.....	2.....	278.....	16.0.....	1.1.....	17.8.....	.....	.....	.....	.....0	0
5. 2012.	379.....	0.....	379.....	22.1.....	0.0.....	25.0.....	.....	.....	.....	.....44.....	3
6. 2013.	1,435.....	801.....	634.....	79.3.....	369.1.....	39.8.....	.....	.....	.....	.....24.....	4
7. 2014.	309.....	0.....	309.....	15.7.....	0.0.....	17.9.....	.....	.....	.....	.....0.....	3
8. 2015.	250.....	0.....	250.....	12.0.....	0.0.....	14.0.....	.....	.....	.....	.....18.....	5
9. 2016.	512.....	48.....	464.....	21.5.....	13.7.....	22.9.....	.....	.....	.....	.....251.....	10
10. 2017.	1,053.....	255.....	798.....	37.6.....	60.0.....	33.6.....	.....	.....	.....	.....339.....	34
11. 2018.	609.....	10.....	599.....	21.4.....	2.2.....	25.1.....	.....	.....	.....	.....439.....	59
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	1,115.....	118.....

SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	
	Direct and Assumed	Ceded	Net (Cols. 1 - 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	Salvage and Subrogation Received	Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
1. Prior.....	XXX.....	XXX.....	XXX.....								0	XXX.....
2. 2009.....			0								0	
3. 2010.....			0								0	
4. 2011.....			0								0	
5. 2012.....			0								0	
6. 2013.....			0								0	
7. 2014.....			0								0	
8. 2015.....			0								0	
9. 2016.....			0								0	
10. 2017.....			0								0	
11. 2018.....			0								0	
12. Totals.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....					NONE							0	.....
2. 2009.....												0	.....
3. 2010.....												0	.....
4. 2011.....												0	.....
5. 2012.....												0	.....
6. 2013.....												0	.....
7. 2014.....												0	.....
8. 2015.....												0	.....
9. 2016.....												0	.....
10. 2017.....												0	.....
11. 2018.....												0	.....
12. Totals...	0	0	0	0								0	0

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Inter- Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....XXX.....	0	0
2. 2009.	0	0	0	0.0	0.0	0.0	.....	.....	.....	.....0	0
3. 2010.	0	0	0	0.0	0.0	0.0	.....	.....	.....	.....0	0
4. 2011.	0	0	0	0.0	0.0	0.0	.....	.....	.....	.....0	0
5. 2012.	0	0	0	0.0	0.0	0.0	.....	.....	.....	.....0	0
6. 2013.	0	0	0	0.0	0.0	0.0	.....	.....	.....	.....0	0
7. 2014.	0	0	0	0.0	0.0	0.0	.....	.....	.....	.....0	0
8. 2015.	0	0	0	0.0	0.0	0.0	.....	.....	.....	.....0	0
9. 2016.	0	0	0	0.0	0.0	0.0	.....	.....	.....	.....0	0
10. 2017.	0	0	0	0.0	0.0	0.0	.....	.....	.....	.....0	0
11. 2018.	0	0	0	0.0	0.0	0.0	.....	.....	.....	.....0	0
12. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0

WAYNE MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 1I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY AND THEFT)

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	(13)				6			(7)	XXX.....
2. 2017.....	12,306	80	12,226	4,429		14		369			4,812	XXX.....
3. 2018.....	14,165	80	14,085	4,773		6		233		4	5,012	XXX.....
4. Totals....	XXX.....	XXX.....	XXX.....	9,189	0	20	0	608	0	4	9,817	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	1											1	1
2. 2017.....	49		10				1		1			61	4
3. 2018.....	1,405		299				8		13		4	1,725	100
4. Totals...	1,455	0	309	0	0	0	9	0	14	0	4	1,787	105

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	Inter-Company Pooling Participation Percentage	35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	1	0
2. 2017.	4,873	0	4,873	39.6	0.0	39.9				59	2
3. 2018.	6,737	0	6,737	47.6	0.0	47.8				1,704	21
4. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	1,764	23

WAYNE MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$000 omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	(78)		4		6		79	(68)	XXX.....
2. 2017.....	7,565	426	7,139	4,777		55		1,426		510	6,258	2,522
3. 2018.....	9,008	378	8,630	5,356		34		1,544		477	6,934	2,751
4. Totals....	XXX.....	XXX.....	XXX.....	10,055	0	93	0	2,976	0	1,066	13,124	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	7		(1)						1		59	7	6
2. 2017.....	15		(8)				1		1		60	9	17
3. 2018.....	355		(103)				9		14		106	275	219
4. Totals...	377	0	(112)	0	0	0	10	0	16	0	225	291	242

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	6	1
2. 2017.	6,267	0	6,267	82.8	0.0	87.8				7	2
3. 2018.	7,209	0	7,209	80.0	0.0	83.5				252	23
4. Totals	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	265	26

Sch. P - Pt. 1K
NONE

Sch. P - Pt. 1L
NONE

Sch. P - Pt. 1M
NONE

Sch. P - Pt. 1N
NONE

Sch. P - Pt. 1O
NONE

Sch. P - Pt. 1P
NONE

Sch. P - Pt. 1R - Sn. 1
NONE

Sch. P - Pt. 1R - Sn. 2
NONE

Sch. P - Pt. 1S
NONE

Sch. P - Pt. 1T
NONE

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1	2	3	4	5	6	7	8	9	10	11	12
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	One Year	Two Year
1. Prior.....	264	263	222	220	218	264	289	333	319	326	7	(7)
2. 2009.....	4,941	4,612	4,588	4,607	4,607	4,607	4,607	4,607	4,607	4,607	.0	0
3. 2010.....	XXX	4,806	4,493	4,497	4,498	4,498	4,498	4,498	4,498	4,498	.0	0
4. 2011.....	XXX	XXX	7,003	6,882	7,098	7,068	7,044	7,049	7,049	7,054	.5	5
5. 2012.....	XXX	XXX	XXX	5,372	5,248	5,239	5,256	5,261	5,192	5,192	.0	(69)
6. 2013.....	XXX	XXX	XXX	XXX	6,074	6,023	6,058	6,227	6,109	6,109	.0	(118)
7. 2014.....	XXX	XXX	XXX	XXX	XXX	5,031	4,941	4,852	4,845	4,823	(22)	(29)
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	5,496	4,859	5,110	4,868	(242)	9
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,686	3,368	3,335	(33)	(351)
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,314	7,866	(448)	XXX
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,869	XXX	XXX
12. Totals											(733)	(560)

SCHEDULE P - PART 2B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	1,392	1,221	1,297	1,278	1,277	1,276	1,275	1,275	1,275	1,275	.0	0
2. 2009.....	3,532	3,353	2,936	2,897	2,915	2,913	2,912	2,952	2,955	2,945	(10)	(7)
3. 2010.....	XXX	3,597	2,820	2,577	2,584	2,570	2,560	2,556	2,555	2,496	(59)	(60)
4. 2011.....	XXX	XXX	2,655	2,251	2,081	2,093	2,082	2,082	2,081	2,081	.0	(1)
5. 2012.....	XXX	XXX	XXX	3,300	3,164	3,115	3,121	3,091	3,084	3,084	.0	(7)
6. 2013.....	XXX	XXX	XXX	XXX	2,732	2,745	2,760	2,838	2,810	2,809	(1)	(29)
7. 2014.....	XXX	XXX	XXX	XXX	XXX	3,588	3,318	3,398	3,140	3,129	(11)	(269)
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	3,581	3,244	2,806	2,791	(15)	(453)
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,076	4,053	3,852	(201)	(224)
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,628	4,452	(176)	XXX
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,549	XXX	XXX
12. Totals											(473)	(1,050)

SCHEDULE P - PART 2C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....	2										.0	0
2. 2009.....	15	14	14	14	14	14	14	14	14	14	.0	0
3. 2010.....	XXX	88	95	99	95	95	95	95	95	95	.0	0
4. 2011.....	XXX	XXX	87	83	73	73	73	73	73	73	.0	0
5. 2012.....	XXX	XXX	XXX	283	245	235	235	235	235	235	.0	0
6. 2013.....	XXX	XXX	XXX	XXX	126	87	67	82	82	82	.0	0
7. 2014.....	XXX	XXX	XXX	XXX	XXX	104	44	41	40	40	.0	(1)
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	150	187	160	181	.21	(6)
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	177	139	125	(14)	(52)
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	209	184	(25)	XXX
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	916	XXX	XXX
12. Totals											(18)	(59)

SCHEDULE P - PART 2D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)

1. Prior.....											.0	0
2. 2009.....											.0	0
3. 2010.....	XXX										.0	0
4. 2011.....	XXX	XXX									.0	0
5. 2012.....	XXX	XXX	XXX								.0	0
6. 2013.....	XXX	XXX	XXX	XXX							.0	0
7. 2014.....	XXX	XXX	XXX	XXX	XXX						.0	0
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX					.0	0
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				.0	0
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	XXX
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											.0	0

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	9	(90)	(90)	(90)	(90)	(90)	(90)	(90)	(90)	(90)	.0	0
2. 2009.....	803	805	802	803	853	853	853	853	853	853	.0	0
3. 2010.....	XXX	1,379	1,279	1,273	1,273	1,287	1,296	1,295	1,295	1,295	.0	0
4. 2011.....	XXX	XXX	1,329	1,337	1,259	1,278	1,278	1,278	1,284	1,284	.0	6
5. 2012.....	XXX	XXX	XXX	1,579	1,657	1,575	1,573	1,580	1,585	1,598	13	18
6. 2013.....	XXX	XXX	XXX	XXX	1,385	1,377	1,387	1,395	1,395	1,395	.0	0
7. 2014.....	XXX	XXX	XXX	XXX	XXX	1,222	1,043	1,183	1,303	1,261	(42)	78
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	2,039	2,190	1,932	1,936	.4	(254)
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,601	1,799	1,570	(229)	(31)
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,239	1,904	(335)	XXX
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,807	XXX	XXX
12. Totals											(589)	(183)

SCHEDULE P - PART 2F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1	2	3	4	5	6	7	8	9	10	11	12
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	One Year	Two Year
1. Prior.....											0	0
2. 2009.....											0	0
3. 2010.....	XXX										0	0
4. 2011.....	XXX	XXX									0	0
5. 2012.....	XXX	XXX	XXX								0	0
6. 2013.....	XXX	XXX	XXX	XXX							0	0
7. 2014.....	XXX	XXX	XXX	XXX	XXX						0	0
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....											0	0
2. 2009.....											0	0
3. 2010.....	XXX										0	0
4. 2011.....	XXX	XXX									0	0
5. 2012.....	XXX	XXX	XXX								0	0
6. 2013.....	XXX	XXX	XXX	XXX							0	0
7. 2014.....	XXX	XXX	XXX	XXX	XXX						0	0
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER & MACHINERY)

1. Prior.....											0	0
2. 2009.....											0	0
3. 2010.....	XXX										0	0
4. 2011.....	XXX	XXX									0	0
5. 2012.....	XXX	XXX	XXX								0	0
6. 2013.....	XXX	XXX	XXX	XXX							0	0
7. 2014.....	XXX	XXX	XXX	XXX	XXX						0	0
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											0	0

SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	65	42	225	195	195	195	195	199	195	195	0	(4)
2. 2009.....	215	242	352	352	352	352	352	354	352	352	0	(2)
3. 2010.....	XXX	250	68	61	61	61	61	64	61	61	0	(3)
4. 2011.....	XXX	XXX	326	383	238	262	262	265	269	269	0	4
5. 2012.....	XXX	XXX	XXX	558	411	375	415	405	380	371	(9)	(34)
6. 2013.....	XXX	XXX	XXX	XXX	1,193	1,065	747	698	664	618	(46)	(80)
7. 2014.....	XXX	XXX	XXX	XXX	XXX	579	406	356	297	297	0	(59)
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	508	436	226	233	7	(203)
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	517	274	442	168	(75)
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,127	768	(359)	XXX
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	549	XXX	XXX
12. Totals											(239)	(456)

SCHEDULE P - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....											0	0
2. 2009.....											0	0
3. 2010.....	XXX										0	0
4. 2011.....	XXX	XXX									0	0
5. 2012.....	XXX	XXX	XXX								0	0
6. 2013.....	XXX	XXX	XXX	XXX							0	0
7. 2014.....	XXX	XXX	XXX	XXX	XXX						0	0
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX					0	0
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				0	0
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0	XXX
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											0	0

WAYNE MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										Development	
	1	2	3	4	5	6	7	8	9	10	11	12
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	One Year	Two Year
1. Prior.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	1,246	805	775	(30)	(471)
2. 2017.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	4,911	4,503	(408)	...XXX.....
3. 2018.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	6,491	...XXX.....	...XXX.....
4. Totals											(438)	(471)

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	282	142	64	(78)	(218)
2. 2017.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	4,905	4,840	(65)	...XXX.....
3. 2018.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	5,651	...XXX.....	...XXX.....
4. Totals											(143)	(218)

SCHEDULE P - PART 2K - FIDELITY/SURETY

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	NONE							0	0
2. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			0	XXX.....
3. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	XXX.....
4. Totals												0	0

SCHEDULE P - PART 2L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	NONE							0	0
2. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			0	XXX.....	
3. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....	
4. Totals											0	0	

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	0
2. 2009.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	0
3. 2010.....	...XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	0
4. 2011.....	...XXX.....	...XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	0
5. 2012.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....	.....	.....	.....	.....	.....0	0
6. 2013.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....	.....	.....	.....	.....0	0
7. 2014.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....	.....	.....	.....0	0
8. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....	.....	.....0	0
9. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....	.....0	0
10. 2017.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....0	...XXX.....
11. 2018.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	XXX	...XXX.....	...XXX.....
12. Totals											0	0

Sch. P - Pt. 2N
NONE

Sch. P - Pt. 2O
NONE

Sch. P - Pt. 2P
NONE

Sch. P - Pt. 2R - Sn. 1
NONE

Sch. P - Pt. 2R - Sn. 2
NONE

Sch. P - Pt. 2S
NONE

Sch. P - Pt. 2T
NONE

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018		
1. Prior.....	000.....	(18).....	77.....	86.....	86.....	123.....	137.....	172.....	172.....	172.....	14,903.....	1,905.....
2. 2009.....	3,906.....	4,594.....	4,588.....	4,607.....	4,607.....	4,607.....	4,607.....	4,607.....	4,607.....	4,607.....	1,124.....	314.....
3. 2010.....	XXX.....	4,083.....	4,413.....	4,497.....	4,498.....	4,498.....	4,498.....	4,498.....	4,498.....	4,498.....	910.....	237.....
4. 2011.....	XXX.....	XXX.....	5,941.....	6,610.....	6,961.....	7,022.....	7,044.....	7,049.....	7,049.....	7,054.....	1,245.....	326.....
5. 2012.....	XXX.....	XXX.....	XXX.....	4,492.....	5,171.....	5,176.....	5,193.....	5,193.....	5,192.....	5,192.....	1,295.....	393.....
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	4,991.....	5,820.....	5,929.....	5,952.....	6,109.....	6,109.....	715.....	268.....
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3,731.....	4,767.....	4,794.....	4,823.....	4,823.....	673.....	256.....
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	4,050.....	4,736.....	4,803.....	4,781.....	551.....	208.....
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,861.....	3,317.....	3,332.....	581.....	187.....
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	6,366.....	7,606.....	904.....	333.....
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	6,220.....	562.....	244.....

SCHEDULE P - PART 3B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	000.....	885.....	1,223.....	1,261.....	1,260.....	1,276.....	1,275.....	1,275.....	1,275.....	1,275.....	11,272.....	1,280.....
2. 2009.....	1,438.....	2,442.....	2,843.....	2,882.....	2,909.....	2,913.....	2,912.....	2,922.....	2,925.....	2,945.....	636.....	135.....
3. 2010.....	XXX.....	1,371.....	2,143.....	2,330.....	2,513.....	2,506.....	2,496.....	2,496.....	2,496.....	2,496.....	673.....	154.....
4. 2011.....	XXX.....	XXX.....	1,169.....	1,786.....	1,918.....	2,089.....	2,082.....	2,082.....	2,081.....	2,081.....	594.....	124.....
5. 2012.....	XXX.....	XXX.....	XXX.....	1,421.....	2,445.....	2,868.....	2,990.....	3,085.....	3,084.....	3,084.....	639.....	130.....
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	1,320.....	2,083.....	2,651.....	2,753.....	2,810.....	2,809.....	610.....	104.....
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,660.....	2,531.....	2,699.....	3,013.....	3,070.....	709.....	149.....
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,639.....	2,504.....	2,730.....	2,724.....	741.....	151.....
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,844.....	3,097.....	3,482.....	807.....	161.....
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,965.....	3,314.....	807.....	134.....
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,925.....	667.....	113.....

SCHEDULE P - PART 3C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....	000.....										6.....	1.....
2. 2009.....	10.....	14.....	14.....	14.....	14.....	14.....	14.....	14.....	14.....	14.....	7.....	1.....
3. 2010.....	XXX.....	23.....	72.....	72.....	95.....	95.....	95.....	95.....	95.....	95.....	15.....	6.....
4. 2011.....	XXX.....	XXX.....	62.....	73.....	73.....	73.....	73.....	73.....	73.....	73.....	17.....	1.....
5. 2012.....	XXX.....	XXX.....	XXX.....	25.....	234.....	235.....	235.....	235.....	235.....	235.....	17.....	4.....
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	34.....	54.....	56.....	82.....	82.....	82.....	16.....	7.....
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	38.....	40.....	40.....	40.....	40.....	17.....	5.....
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	41.....	131.....	133.....	181.....	23.....	7.....
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	99.....	124.....	125.....	33.....	7.....
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	111.....	161.....	43.....	18.....
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	204.....	32.....	3.....

**SCHEDULE P - PART 3D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior.....	000.....											
2. 2009.....												
3. 2010.....	XXX.....											
4. 2011.....	XXX.....	XXX.....										
5. 2012.....	XXX.....	XXX.....	XXX.....									
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	000.....	(90).....	(90).....	(90).....	(90).....	(90).....	(90).....	(90).....	(90).....	(90).....	1,122.....	264.....
2. 2009.....	527.....	791.....	802.....	803.....	853.....	853.....	853.....	853.....	853.....	853.....	116.....	54.....
3. 2010.....	XXX.....	1,192.....	1,265.....	1,273.....	1,273.....	1,287.....	1,289.....	1,295.....	1,295.....	1,295.....	122.....	60.....
4. 2011.....	XXX.....	XXX.....	1,081.....	1,243.....	1,255.....	1,278.....	1,278.....	1,278.....	1,284.....	1,284.....	157.....	67.....
5. 2012.....	XXX.....	XXX.....	XXX.....	1,393.....	1,507.....	1,575.....	1,573.....	1,580.....	1,585.....	1,592.....	200.....	105.....
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	911.....	1,326.....	1,329.....	1,395.....	1,395.....	1,395.....	147.....	69.....
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	876.....	1,004.....	1,036.....	1,036.....	1,261.....	159.....	58.....
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,426.....	1,735.....	1,932.....	1,936.....	122.....	69.....
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	920.....	1,314.....	1,562.....	131.....	62.....
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,476.....	1,786.....	163.....	99.....
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,276.....	116.....	69.....

SCHEDULE P - PART 3F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
1. Prior.....	000.....											
2. 2009.....												
3. 2010.....	XXX.....											
4. 2011.....	XXX.....	XXX.....										
5. 2012.....	XXX.....	XXX.....	XXX.....									
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

SCHEDULE P - PART 3F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....	000.....											
2. 2009.....												
3. 2010.....	XXX.....											
4. 2011.....	XXX.....	XXX.....										
5. 2012.....	XXX.....	XXX.....	XXX.....									
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

SCHEDULE P - PART 3G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior.....	000.....										XXX.....	XXX.....
2. 2009.....											XXX.....	XXX.....
3. 2010.....	XXX.....										XXX.....	XXX.....
4. 2011.....	XXX.....	XXX.....									XXX.....	XXX.....
5. 2012.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	XXX.....
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

SCHEDULE P - PART 3H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	000.....	22.....	24.....	195.....	195.....	195.....	195.....	195.....	195.....	195.....	395.....	169.....
2. 2009.....	48.....	166.....	352.....	352.....	352.....	352.....	352.....	352.....	352.....	352.....	31.....	8.....
3. 2010.....	XXX.....	26.....	58.....	61.....	61.....	61.....	61.....	61.....	61.....	61.....	13.....	15.....
4. 2011.....	XXX.....	XXX.....	176.....	221.....	238.....	262.....	262.....	262.....	269.....	269.....	19.....	8.....
5. 2012.....	XXX.....	XXX.....	XXX.....	214.....	304.....	310.....	324.....	325.....	326.....	326.....	12.....	12.....
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	91.....	126.....	523.....	593.....	593.....	593.....	22.....	7.....
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	150.....	221.....	282.....	297.....	297.....	15.....	7.....
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	65.....	157.....	189.....	215.....	17.....	10.....
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	120.....	179.....	186.....	24.....	20.....
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	125.....	410.....	24.....	20.....
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	89.....	17.....	7.....

SCHEDULE P - PART 3H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....	000.....											
2. 2009.....												
3. 2010.....	XXX.....											
4. 2011.....	XXX.....	XXX.....										
5. 2012.....	XXX.....	XXX.....	XXX.....									
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

WAYNE MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Containment Expenses Reported at Year End (\$000 omitted)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018		
1. Prior.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...000.....	787	774	...XXX.....	...XXX.....
2. 2017.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	3,864	4,443	...XXX.....	...XXX.....
3. 2018.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	4,779	...XXX.....	...XXX.....

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...000.....	132	58	18,916	2,313
2. 2017.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	4,600	4,832	2,242	263
3. 2018.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	5,390	2,316	216

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...000.....	.....	.....	...XXX.....	...XXX.....
2. 2017.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	...XXX.....	...XXX.....
3. 2018.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	...XXX.....	...XXX.....

SCHEDULE P - PART 3L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...000.....	.....	.....	...XXX.....	...XXX.....
2. 2017.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	...XXX.....	...XXX.....
3. 2018.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	...XXX.....	...XXX.....

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior.....	...000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	...XXX.....	...XXX.....
2. 2009.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	...XXX.....	...XXX.....
3. 2010.....	...XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	...XXX.....	...XXX.....
4. 2011.....	...XXX.....	...XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	...XXX.....	...XXX.....
5. 2012.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....	.....	.....	.....	.....	...XXX.....	...XXX.....
6. 2013.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....	.....	.....	.....	...XXX.....	...XXX.....
7. 2014.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....	.....	.....	...XXX.....	...XXX.....
8. 2015.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....	.....	...XXX.....	...XXX.....
9. 2016.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	.....	...XXX.....	...XXX.....
10. 2017.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	.....	...XXX.....	...XXX.....
11. 2018.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	...XXX.....	.....	...XXX.....	...XXX.....

Sch. P - Pt. 3N
NONE

Sch. P - Pt. 3O
NONE

Sch. P - Pt. 3P
NONE

Sch. P - Pt. 3R - Sn. 1
NONE

Sch. P - Pt. 3R - Sn. 2
NONE

Sch. P - Pt. 3S
NONE

Sch. P - Pt. 3T
NONE

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....	40	34	14	13	11	20	31	44	31	38
2. 2009.....	192	4	.....	.....	.....	.....	.....	.....	.....	.....
3. 2010.....	XXX.....	186	20	.....	.....	.....	.....	.....	.....	.....
4. 2011.....	XXX.....	XXX.....	200	37	12	6	.....	.....	.....	.....
5. 2012.....	XXX.....	XXX.....	XXX.....	177	18	10	13	18	.....	.....
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	188	50	27	75	.....	.....
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	361	64	23	5	.....
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	536	106	65	22
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	387	48	1
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	729	140
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	647

SCHEDULE P - PART 4B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

1. Prior.....	289	49	17	4	4	.....	.....	.....	.....	.....
2. 2009.....	598	175	21	3	1	.....	.....	.....5	5	.....
3. 2010.....	XXX.....	670	194	49	16	14	14	10	9	.....
4. 2011.....	XXX.....	XXX.....	652	130	36	1	.....	.....	.....	.....
5. 2012.....	XXX.....	XXX.....	XXX.....	690	195	54	28	1	.....	.....
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	620	187	23	14	.....	.....
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	789	255	127	21	9
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	760	259	12	10
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	672	204	57
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	842	283
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	794

SCHEDULE P - PART 4C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2009.....	1	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2010.....	XXX.....	1	.....	.....2	.....	.....	.....	.....	.....	.....
4. 2011.....	XXX.....	XXX.....	1	1	.....	.....	.....	.....	.....	.....
5. 2012.....	XXX.....	XXX.....	XXX.....	58	6	.....	.....	.....	.....	.....
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	55	26	6	.....	.....	.....
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	60	4	1	.....	.....
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	76	33	12	.....
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	52	9	.....
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	65	8
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	153

**SCHEDULE P - PART 4D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2009.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2010.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2011.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2012.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	9	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2009.....	60	5	.....	.....	.....	.....	.....	.....	.....	.....
3. 2010.....	XXX.....	63	5	.....	.....	.....	.....2	.....	.....	.....
4. 2011.....	XXX.....	XXX.....	64	16	1	.....	.....	.....	.....	.....
5. 2012.....	XXX.....	XXX.....	XXX.....	52	52	.....	.....	.....	.....	.....1
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	220	37	18	.....	.....	.....
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	264	25	46	67	.....
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	299	186	.....	.....
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	323	146	2
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	398	54
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	578

SCHEDULE P - PART 4F - SECTION 1 - MEDICAL PROFESSIONAL LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....										
2. 2009.....										
3. 2010.....	XXX									
4. 2011.....	XXX	XXX								
5. 2012.....	XXX	XXX	XXX							
6. 2013.....	XXX	XXX	XXX	XXX						
7. 2014.....	XXX	XXX	XXX	XXX	XXX					
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE

1. Prior.....										
2. 2009.....										
3. 2010.....	XXX									
4. 2011.....	XXX	XXX								
5. 2012.....	XXX	XXX	XXX							
6. 2013.....	XXX	XXX	XXX	XXX						
7. 2014.....	XXX	XXX	XXX	XXX	XXX					
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SCHEDULE P - PART 4G - SPECIAL LIABILITY (OCEAN MARINE,
AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)**

1. Prior.....										
2. 2009.....										
3. 2010.....	XXX									
4. 2011.....	XXX	XXX								
5. 2012.....	XXX	XXX	XXX							
6. 2013.....	XXX	XXX	XXX	XXX						
7. 2014.....	XXX	XXX	XXX	XXX	XXX					
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	25	3	76					2		
2. 2009.....	57	15						1		
3. 2010.....	XXX	64	6					2		
4. 2011.....	XXX	XXX	116	132				2		
5. 2012.....	XXX	XXX	XXX	269	40	21	53	46	21	18
6. 2013.....	XXX	XXX	XXX	XXX	371	322	130	60	27	10
7. 2014.....	XXX	XXX	XXX	XXX	XXX	349	165	46		
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	346	204	14	7
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	328	59	100
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	578	230
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	250

SCHEDULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE

1. Prior.....										
2. 2009.....										
3. 2010.....	XXX									
4. 2011.....	XXX	XXX								
5. 2012.....	XXX	XXX	XXX							
6. 2013.....	XXX	XXX	XXX	XXX						
7. 2014.....	XXX	XXX	XXX	XXX	XXX					
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	215.....	11.....	.....
2. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	204.....	11.....
3. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	307.....

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	(105).....	(7).....	(1).....
2. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	(97).....	(7).....
3. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	(94).....

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....
2. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....
3. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....

NONE

SCHEDULE P - PART 4L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....
2. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....
3. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....

NONE

SCHEDULE P - PART 4M - INTERNATIONAL

1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2009.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2010.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2011.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2012.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....

NONE

Sch. P - Pt. 4N
NONE

Sch. P - Pt. 4O
NONE

Sch. P - Pt. 4P
NONE

Sch. P - Pt. 4R - Sn. 1
NONE

Sch. P - Pt. 4R - Sn. 2
NONE

Sch. P - Pt. 4S
NONE

Sch. P - Pt. 4T
NONE

SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....	298	6	4	1						
2. 2009.....	964	1,120	1,121	1,124	1,124	1,124	1,124	1,124	1,124	1,124
3. 2010.....	XXX.....	778	899	904	905	907	909	910	910	910
4. 2011.....	XXX.....	XXX.....	1,063	1,234	1,243	1,244	1,245	1,245	1,245	1,245
5. 2012.....	XXX.....	XXX.....	XXX.....	1,111	1,287	1,291	1,294	1,294	1,295	1,295
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	522	705	713	714	715	715
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	536	659	668	671	673
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	413	538	549	551
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	453	578	581
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	737	904
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	562

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....	8	5	3	2	8	8	3	2	1	2
2. 2009.....	133	6			1	1			1	
3. 2010.....	XXX.....	104	4	1	2	2	1	1		1
4. 2011.....	XXX.....	XXX.....	160	10	3	2			1	
5. 2012.....	XXX.....	XXX.....	XXX.....	165	5	2	1	1		
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	166	9	3	2	1	1
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	116	7	2		
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	107	6	1	2
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	115	4	2
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	151	23
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	171

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....	164	7	2		6		(2)			
2. 2009.....	1,353	1,436	1,435	1,438	1,439	1,439	1,438	1,438	1,439	1,438
3. 2010.....	XXX.....	1,085	1,140	1,142	1,144	1,146	1,147	1,148	1,147	1,148
4. 2011.....	XXX.....	XXX.....	1,475	1,566	1,571	1,572	1,571	1,571	1,572	1,571
5. 2012.....	XXX.....	XXX.....	XXX.....	1,587	1,682	1,685	1,688	1,688	1,688	1,688
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	892	979	984	984	984	984
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	857	921	926	927	929
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	681	750	758	761
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	714	768	770
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,163	1,260
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	977

SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....	273	76	11	3		1				
2. 2009.....	407	585	629	633	634	636	636	636	636	636
3. 2010.....	XXX.....	434	635	660	671	673	673	673	673	673
4. 2011.....	XXX.....	XXX.....	392	556	585	592	594	594	594	594
5. 2012.....	XXX.....	XXX.....	XXX.....	413	593	629	635	639	639	639
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	393	568	597	605	609	610
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	482	657	689	706	709
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	482	695	739	741
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	544	762	807
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	569	807
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	667

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....	70	14	3	2	2					
2. 2009.....	139	46	8	3	2	1	1	1	1	
3. 2010.....	XXX.....	184	33	14	5	1	1	1	1	
4. 2011.....	XXX.....	XXX.....	153	33	6	1				
5. 2012.....	XXX.....	XXX.....	XXX.....	142	43	10	3	1		
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	125	31	9	3		
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	155	44	21	8	4
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	173	55	9	5
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	192	62	28
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	216	102
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	228

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....	165	47	2	2		(1)				
2. 2009.....	602	741	772	771	771	772	772	772	772	771
3. 2010.....	XXX.....	664	806	824	828	826	827	827	827	827
4. 2011.....	XXX.....	XXX.....	605	699	715	717	718	718	718	718
5. 2012.....	XXX.....	XXX.....	XXX.....	608	741	763	767	769	769	769
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	562	682	702	709	713	714
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	699	823	847	859	862
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	718	861	895	897
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	805	953	996
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	854	1,043
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,008

SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018
1. Prior.....		1								
2. 2009.....	4	7	7	7	7	7	7	7	7	7
3. 2010.....	XXX	7	13	13	15	15	15	15	15	15
4. 2011.....	XXX	XXX	12	15	17	17	17	17	17	17
5. 2012.....	XXX	XXX	XXX	11	16	17	17	17	17	17
6. 2013.....	XXX	XXX	XXX	XXX	9	15	15	16	16	16
7. 2014.....	XXX	XXX	XXX	XXX	XXX	16	17	17	17	17
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	17	20	22	23
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25	31	33
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35	43
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	32

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018
1. Prior.....	1									
2. 2009.....	3									
3. 2010.....	XXX	4	3	2						
4. 2011.....	XXX	XXX	5	3						
5. 2012.....	XXX	XXX	XXX	2	1					
6. 2013.....	XXX	XXX	XXX	XXX	4	2	1			
7. 2014.....	XXX	XXX	XXX	XXX	XXX	2				
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	6	3	2	2
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10	2	1
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10	3
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018
1. Prior.....										
2. 2009.....	7	8	8	8	8	8	8	8	8	8
3. 2010.....	XXX	14	19	20	21	21	21	21	21	21
4. 2011.....	XXX	XXX	17	18	18	18	18	18	18	18
5. 2012.....	XXX	XXX	XXX	15	20	21	21	21	21	21
6. 2013.....	XXX	XXX	XXX	XXX	15	20	23	23	23	23
7. 2014.....	XXX	XXX	XXX	XXX	XXX	20	22	22	22	22
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	26	27	28	32
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36	40	41
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	56	64
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	47

SCHEDULE P - PART 5D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018
1. Prior.....										
2. 2009.....										
3. 2010.....	XXX									
4. 2011.....	XXX	XXX								
5. 2012.....	XXX	XXX	XXX							
6. 2013.....	XXX	XXX	XXX	XXX						
7. 2014.....	XXX	XXX	XXX	XXX	XXX					
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018
1. Prior.....										
2. 2009.....										
3. 2010.....	XXX									
4. 2011.....	XXX	XXX								
5. 2012.....	XXX	XXX	XXX							
6. 2013.....	XXX	XXX	XXX	XXX						
7. 2014.....	XXX	XXX	XXX	XXX	XXX					
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1 2009	2 2010	3 2011	4 2012	5 2013	6 2014	7 2015	8 2016	9 2017	10 2018
1. Prior.....										
2. 2009.....										
3. 2010.....	XXX									
4. 2011.....	XXX	XXX								
5. 2012.....	XXX	XXX	XXX							
6. 2013.....	XXX	XXX	XXX	XXX						
7. 2014.....	XXX	XXX	XXX	XXX	XXX					
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....	49	3	2							
2. 2009.....	88	114	115	115	116	116	116	116	116	116
3. 2010.....	XXX.....	93	117	120	120	121	122	122	122	122
4. 2011.....	XXX.....	XXX.....	116	156	157	157	157	157	157	157
5. 2012.....	XXX.....	XXX.....	XXX.....	161	190	195	200	200	200	200
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	95	120	145	147	147	147
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	124	154	157	158	159
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	94	116	120	122
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	101	128	131
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	116	163
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	116

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....	3									
2. 2009.....	21	4		1						
3. 2010.....	XXX.....	29	3	2	1	1	1			
4. 2011.....	XXX.....	XXX.....	26	4	1					
5. 2012.....	XXX.....	XXX.....	XXX.....	27	5	1				1
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	28	5	1		1	
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	25	4	2	1	
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	24	3		
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	29	5	2
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	49	6
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	35

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....	25	2	3							
2. 2009.....	143	169	169	170	170	170	170	170	170	170
3. 2010.....	XXX.....	164	177	181	180	182	183	182	182	182
4. 2011.....	XXX.....	XXX.....	194	221	221	223	223	223	224	224
5. 2012.....	XXX.....	XXX.....	XXX.....	273	296	299	304	304	305	306
6. 2013.....	XXX.....	XXX.....	XXX.....	XXX.....	168	189	215	216	217	216
7. 2014.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	188	212	216	217	217
8. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	167	178	188	191
9. 2016.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	173	192	195
10. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	231	268
11. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	220

Sch. P - Pt. 5F - Sn. 1A
NONE

Sch. P - Pt. 5F - Sn. 2A
NONE

Sch. P - Pt. 5F - Sn. 3A
NONE

Sch. P - Pt. 5F - Sn. 1B
NONE

Sch. P - Pt. 5F - Sn. 2B
NONE

Sch. P - Pt. 5F - Sn. 3B
NONE

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Closed with Loss Payment Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....	10	1	1	1						
2. 2009.....	23	28	31	31	31	31	31	31	31	31
3. 2010.....	XXX	5	11	13	13	13	13	13	13	13
4. 2011.....	XXX	XXX	13	16	17	19	19	19	19	19
5. 2012.....	XXX	XXX	XXX	6	10	10	12	12	12	12
6. 2013.....	XXX	XXX	XXX	XXX	11	18	21	22	22	22
7. 2014.....	XXX	XXX	XXX	XXX	XXX	9	13	15	15	15
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	10	16	17	17
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13	22	24
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18	24
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	Number of Claims Outstanding Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....	6	3	1					2		
2. 2009.....	10	3						1		
3. 2010.....	XXX	13	2					1		
4. 2011.....	XXX	XXX	13	5	2			1	1	
5. 2012.....	XXX	XXX	XXX	16	6	6	4	4	2	1
6. 2013.....	XXX	XXX	XXX	XXX	19	11	3	2	1	1
7. 2014.....	XXX	XXX	XXX	XXX	XXX	27	8	6	2	1
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	21	10	3	2
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21	6	2
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22	6
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Number of Claims Reported Direct and Assumed at Year End									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....	4	(1)	6					2		
2. 2009.....	36	38	38	38	38	38	38	39	39	39
3. 2010.....	XXX	25	25	26	26	26	26	27	27	28
4. 2011.....	XXX	XXX	31	27	26	26	26	27	28	27
5. 2012.....	XXX	XXX	XXX	26	23	24	24	25	25	25
6. 2013.....	XXX	XXX	XXX	XXX	33	33	30	30	30	30
7. 2014.....	XXX	XXX	XXX	XXX	XXX	38	27	27	24	23
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	35	33	30	29
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	46	43	46
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	49	50
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	39

Sch. P - Pt. 5H - Sn. 1B
NONE

Sch. P - Pt. 5H - Sn. 2B
NONE

Sch. P - Pt. 5H - Sn. 3B
NONE

Sch. P - Pt. 5R - Sn. 1A
NONE

Sch. P - Pt. 5R - Sn. 2A
NONE

Sch. P - Pt. 5R - Sn. 3A
NONE

Sch. P - Pt. 5R - Sn. 1B
NONE

Sch. P - Pt. 5R - Sn. 2B
NONE

Sch. P - Pt. 5R - Sn. 3B
NONE

Sch. P - Pt. 5T - Sn. 1
NONE

Sch. P - Pt. 5T - Sn. 2
NONE

Sch. P - Pt. 5T - Sn. 3
NONE

SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	
1. Prior.....										.0	
2. 2009.....	160	160	160	160	160	160	160	160	160	160	
3. 2010.....	XXX	205	205	205	205	205	205	205	205	205	
4. 2011.....	XXX	XXX	254	254	254	254	254	254	254	254	
5. 2012.....	XXX	XXX	XXX	312	312	312	312	312	312	312	
6. 2013.....	XXX	XXX	XXX	XXX	370	370	370	370	370	370	
7. 2014.....	XXX	XXX	XXX	XXX	XXX	442	442	442	442	442	
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	574	574	574	574	
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	717	717	717	
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	883	883	
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,104	1,104
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,104
13. Earned Prems.(P-Pt 1)	160	205	254	312	369	442	574	717	883	1,104	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	
1. Prior.....										.0	
2. 2009.....	.8	.8	.8	.8	.8	.8	.8	.8	.8	.8	
3. 2010.....	XXX	.9	.9	.9	.9	.9	.9	.9	.9	.9	
4. 2011.....	XXX	XXX	10	10	10	10	10	10	10	10	
5. 2012.....	XXX	XXX	XXX	13	13	13	13	13	13	13	
6. 2013.....	XXX	XXX	XXX	XXX	14	14	14	14	14	14	
7. 2014.....	XXX	XXX	XXX	XXX	XXX	12	12	12	12	12	
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	18	18	18	18	
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22	22	22	
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27	27	
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	34	34
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	34
13. Earned Prems.(P-Pt 1)	.8	.9	10	13	14	12	18	22	27	34	XXX

**SCHEDULE P - PART 6D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)**

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	
1. Prior.....										.0	
2. 2009.....										.0	
3. 2010.....	XXX									.0	
4. 2011.....	XXX	XXX								.0	
5. 2012.....	XXX	XXX	XXX							.0	
6. 2013.....	XXX	XXX	XXX	XXX						.0	
7. 2014.....	XXX	XXX	XXX	XXX	XXX					.0	
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX				.0	
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		.0	
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
13. Earned Prems.(P-Pt 1)											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	
1. Prior.....										.0	
2. 2009.....										.0	
3. 2010.....	XXX									.0	
4. 2011.....	XXX	XXX								.0	
5. 2012.....	XXX	XXX	XXX							.0	
6. 2013.....	XXX	XXX	XXX	XXX						.0	
7. 2014.....	XXX	XXX	XXX	XXX	XXX					.0	
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX				.0	
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			.0	
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		.0	
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0	
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.0
13. Earned Prems.(P-Pt 1)											XXX

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	
1. Prior.....										.0	
2. 2009.....	1,981	1,981	1,981	1,981	1,981	1,981	1,981	1,981	1,981	1,981	
3. 2010.....	XXX	2,287	2,287	2,287	2,287	2,287	2,287	2,287	2,287	2,287	
4. 2011.....	XXX	XXX	2,560	2,560	2,560	2,560	2,560	2,560	2,560	2,560	
5. 2012.....	XXX	XXX	XXX	2,953	2,953	2,953	2,953	2,953	2,953	2,953	
6. 2013.....	XXX	XXX	XXX	XXX	3,475	3,475	3,475	3,475	3,475	3,475	
7. 2014.....	XXX	XXX	XXX	XXX	XXX	3,899	3,899	3,899	3,899	3,899	
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	4,345	4,345	4,345	4,345	
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,896	4,896	4,896	
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,334	5,334	
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,762	5,762
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,762
13. Earned Prems.(P-Pt 1)	1,981	2,287	2,560	2,953	3,474	3,899	4,345	4,896	5,334	5,762	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	
1. Prior.....										.0	
2. 2009.....	190	190	190	190	190	190	190	190	190	190	
3. 2010.....	XXX	264	264	264	264	264	264	264	264	264	
4. 2011.....	XXX	XXX	285	285	285	285	285	285	285	285	
5. 2012.....	XXX	XXX	XXX	403	403	403	403	403	403	403	
6. 2013.....	XXX	XXX	XXX	XXX	407	407	407	407	407	407	
7. 2014.....	XXX	XXX	XXX	XXX	XXX	371	371	371	371	371	
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	384	384	384	384	
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	398	398	398	
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	431	431	
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	456	456
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	456
13. Earned Prems.(P-Pt 1)	190	264	285	403	407	371	384	398	431	456	XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Direct and Assumed at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	
1. Prior.....										.0	
2. 2009.....	677	677	677	677	677	677	677	677	677	677	
3. 2010.....	XXX	685	685	685	685	685	685	685	685	685	
4. 2011.....	XXX	XXX	1,745	1,745	1,745	1,745	1,745	1,745	1,745	1,745	
5. 2012.....	XXX	XXX	XXX	1,712	1,712	1,712	1,712	1,712	1,712	1,712	
6. 2013.....	XXX	XXX	XXX	XXX	1,811	1,811	1,811	1,811	1,811	1,811	
7. 2014.....	XXX	XXX	XXX	XXX	XXX	1,973	1,973	1,973	1,973	1,973	
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	2,084	2,084	2,084	2,084	
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,376	2,376	2,376	
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,799	2,799	
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,849	2,849
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,849
13. Earned Prems.(P-Pt 1)	677	685	1,745	1,712	1,809	1,973	2,084	2,376	2,799	2,849	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	Cumulative Premiums Earned Ceded at Year End (\$000 omitted)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	
1. Prior.....										.0	
2. 2009.....	134	134	134	134	134	134	134	134	134	134	
3. 2010.....	XXX	147	147	147	147	147	147	147	147	147	
4. 2011.....	XXX	XXX	183	183	183	183	183	183	183	183	
5. 2012.....	XXX	XXX	XXX	196	196	196	196	196	196	196	
6. 2013.....	XXX	XXX	XXX	XXX	216	216	216	216	216	216	
7. 2014.....	XXX	XXX	XXX	XXX	XXX	250	250	250	250	250	
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX	301	301	301	301	
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	351	351	351	
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	425	425	
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	465	465
12. Total.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	465
13. Earned Prems.(P-Pt 1)	134	147	183	196	217	250	301	351	425	465	XXX

Sch. P - Pt. 6H - Sn. 1B
NONE

Sch. P - Pt. 6H - Sn. 2B
NONE

Sch. P - Pt. 6M - Sn. 1
NONE

Sch. P - Pt. 6M - Sn. 2
NONE

Sch. P - Pt. 6N - Sn. 1
NONE

Sch. P - Pt. 6N - Sn. 2
NONE

Sch. P - Pt. 6O - Sn. 1
NONE

Sch. P - Pt. 6O - Sn. 2
NONE

Sch. P - Pt. 6R - Sn. 1A
NONE

Sch. P - Pt. 6R - Sn. 2A
NONE

Sch. P - Pt. 6R - Sn. 1B
NONE

Sch. P - Pt. 6R - Sn. 2B
NONE

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS

(\$000 Omitted)

SECTION 1

	1	2	3	4	5	6
	Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
Schedule P - Part 1						
1. Homeowners/farmowners.....	2,278		0.0	17,936		0.0
2. Private passenger auto liability/medical.....	4,499		0.0	8,376		0.0
3. Commercial auto/truck liability/medical.....	774		0.0	1,193		0.0
4. Workers' compensation.....			0.0			0.0
5. Commercial multiple peril.....	1,757		0.0	5,461		0.0
6. Medical professional liability - occurrence.....			0.0			0.0
7. Medical professional liability - claims-made.....			0.0			0.0
8. Special liability.....			0.0			0.0
9. Other liability - occurrence.....	1,233		0.0	2,366		0.0
10. Other liability - claims-made.....			0.0			0.0
11. Special property.....	1,787		0.0	13,211		0.0
12. Auto physical damage.....	291		0.0	9,360		0.0
13. Fidelity/surety.....			0.0			0.0
14. Other.....			0.0			0.0
15. International.....			0.0			0.0
16. Reinsurance - nonproportional assumed property.....	XXX	XXX	XXX	XXX	XXX	XXX
17. Reinsurance - nonproportional assumed liability.....	XXX	XXX	XXX	XXX	XXX	XXX
18. Reinsurance - nonproportional assumed financial lines.....	XXX	XXX	XXX	XXX	XXX	XXX
19. Products liability - occurrence.....			0.0			0.0
20. Products liability - claims-made.....			0.0			0.0
21. Financial guaranty/mortgage guaranty.....			0.0			0.0
22. Warranty.....			0.0			0.0
23. Totals.....	12,619	0	0.0	57,903	0	0.0

SECTION 2

Years in Which Policies Were Issued	Incurred Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....										
2. 2009.....										
3. 2010.....	XXX									
4. 2011.....	XXX	XXX								
5. 2012.....	XXX	XXX	XXX							
6. 2013.....	XXX	XXX	XXX	XXX						
7. 2014.....	XXX	XXX	XXX	XXX	XXX					
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued	Bulk and Incurred But Not Reported Reserves for Losses and Defense and Cost Containment Expenses at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....										
2. 2009.....										
3. 2010.....	XXX									
4. 2011.....	XXX	XXX								
5. 2012.....	XXX	XXX	XXX							
6. 2013.....	XXX	XXX	XXX	XXX						
7. 2014.....	XXX	XXX	XXX	XXX	XXX					
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (continued)

SECTION 4

Years in Which Policies Were Issued	Net Earned Premiums Reported at Year End (\$000 omitted)										
	1	2	3	4	5	6	7	8	9	10	
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	
1. Prior.....				NONE							
2. 2009.....											
3. 2010.....	XXX										
4. 2011.....	XXX	XXX									
5. 2012.....	XXX	XXX	XXX								
6. 2013.....	XXX	XXX	XXX	XXX							
7. 2014.....	XXX	XXX	XXX	XXX	XXX						
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

SECTION 5

Years in Which Policies Were Issued	Net Reserve for Premium Adjustments and Accrued Retrospective Premiums at Year End (\$000 omitted)														
	1	2	3	4	5	6	7	8	9	10					
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018					
1. Prior.....				NONE											
2. 2009.....															
3. 2010.....	XXX														
4. 2011.....	XXX	XXX													
5. 2012.....	XXX	XXX	XXX												
6. 2013.....	XXX	XXX	XXX								XXX				
7. 2014.....	XXX	XXX	XXX								XXX	XXX			
8. 2015.....	XXX	XXX	XXX								XXX	XXX	XXX		
9. 2016.....	XXX	XXX	XXX								XXX	XXX	XXX	XXX	
10. 2017.....	XXX	XXX	XXX								XXX	XXX	XXX	XXX	XXX
11. 2018.....	XXX	XXX	XXX								XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS

(\$000 Omitted)

SECTION 1

	1	2	3	4	5	6
	Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
Schedule P - Part 1						
1. Homeowners/farmowners.....	2,278		0.0	17,936		0.0
2. Private passenger auto liability/medical.....	4,499		0.0	8,376		0.0
3. Commercial auto/truck liability/medical.....	774		0.0	1,193		0.0
4. Workers' compensation.....			0.0			0.0
5. Commercial multiple peril.....	1,757		0.0	5,461		0.0
6. Medical professional liability - occurrence.....			0.0			0.0
7. Medical professional liability - claims-made.....			0.0			0.0
8. Special liability.....			0.0			0.0
9. Other liability - occurrence.....	1,233		0.0	2,366		0.0
10. Other liability - claims-made.....			0.0			0.0
11. Special property.....	1,787		0.0	13,211		0.0
12. Auto physical damage.....	291		0.0	9,360		0.0
13. Fidelity/surety.....			0.0			0.0
14. Other.....			0.0			0.0
15. International.....			0.0			0.0
16. Reinsurance - nonproportional assumed property.....			0.0			0.0
17. Reinsurance - nonproportional assumed liability.....			0.0			0.0
18. Reinsurance - nonproportional assumed financial lines.....			0.0			0.0
19. Products liability - occurrence.....			0.0			0.0
20. Products liability - claims-made.....			0.0			0.0
21. Financial guaranty/mortgage guaranty.....			0.0			0.0
22. Warranty.....			0.0			0.0
23. Totals	12,619	0	0.0	57,903	0	0.0

SECTION 2

Years in Which Policies Were Issued	Incurred Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....										
2. 2009.....										
3. 2010.....	XXX									
4. 2011.....	XXX	XXX								
5. 2012.....	XXX	XXX	XXX							
6. 2013.....	XXX	XXX	XXX	XXX						
7. 2014.....	XXX	XXX	XXX	XXX	XXX					
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued	Bulk and Incurred But Not Reported Reserves for Losses and Defense and Cost Containment Expenses at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....										
2. 2009.....										
3. 2010.....	XXX									
4. 2011.....	XXX	XXX								
5. 2012.....	XXX	XXX	XXX							
6. 2013.....	XXX	XXX	XXX	XXX						
7. 2014.....	XXX	XXX	XXX	XXX	XXX					
8. 2015.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2016.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2017.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

Annual Statement for the year 2018 of the

WAYNE MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (continued)

SECTION 4

Years in Which Policies Were Issued	Net Earned Premiums Reported At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....										
2. 2009.....										
3. 2010.....	.XXX									
4. 2011.....	.XXX	.XXX								
5. 2012.....	.XXX	.XXX	.XXX							
6. 2013.....	.XXX	.XXX	.XXX	.XXX						
7. 2014.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2017.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2018.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

SECTION 5

Years in Which Policies Were Issued	Net Reserve For Premium Adjustments And Accrued Retrospective Premiums At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....										
2. 2009.....										
3. 2010.....	.XXX									
4. 2011.....	.XXX	.XXX								
5. 2012.....	.XXX	.XXX	.XXX							
6. 2013.....	.XXX	.XXX	.XXX	.XXX						
7. 2014.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2017.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2018.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

SECTION 6

Years in Which Policies Were Issued	Incurred Adjustable Commissions Reported At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....										
2. 2009.....										
3. 2010.....	.XXX									
4. 2011.....	.XXX	.XXX								
5. 2012.....	.XXX	.XXX	.XXX							
6. 2013.....	.XXX	.XXX	.XXX	.XXX						
7. 2014.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2017.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2018.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

SECTION 7

Years in Which Policies Were Issued	Reserves For Commission Adjustments At Year End (\$000 Omitted)									
	1	2	3	4	5	6	7	8	9	10
	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
1. Prior.....										
2. 2009.....										
3. 2010.....	.XXX									
4. 2011.....	.XXX	.XXX								
5. 2012.....	.XXX	.XXX	.XXX							
6. 2013.....	.XXX	.XXX	.XXX	.XXX						
7. 2014.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2015.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2016.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2017.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2018.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

WAYNE MUTUAL INSURANCE COMPANY
SCHEDULE P INTERROGATORIES

1.

The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims-Made insurance policies. EREs provided for reasons other than DDR are not be included.
- 1.1

Does the company issue Medical Professional Liability Claims-Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost?
If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions.

Yes [] No [X]
- 1.2

What is the total amount of the reserve for that provision (DDR reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)?

.....
- 1.3

Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65?

Yes [] No []
- 1.4

Does the company report any DDR reserve as loss or loss adjustment expense reserve?

Yes [] No []
- 1.5

If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2?

Yes [] No [] N/A[X]
- 1.6

If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1	2
		Section 1: Occurrence	Section 2: Claims-Made
1.601	Prior.....	.....	.....
1.602	2009.....	.....	.....
1.603	2010.....	.....	.....
1.604	2011.....	.....	.....
1.605	2012.....	.....	.....
1.606	2013.....	.....	.....
1.607	2014.....	.....	.....
1.608	2015.....	.....	.....
1.609	2016.....	.....	.....
1.610	2017.....	.....	.....
1.611	2018.....	.....	.....
1.612	Totals.....	0	0

2.

The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement?

Yes [X] No []
3.

The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this statement?

Yes [X] No []
4.

Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10?

Yes [] No [X]

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33.

Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.

Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.

5.

What were the net premiums in force at the end of the year for: (in thousands of dollars)

5.1 Fidelity
5.2 Surety

.....
.....
6.

Claim count information is reported per claim or per claimant. (Indicate which).
If not the same in all years, explain in Interrogatory 7.

PER CLAIM
- 7.1

The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses?

Yes [] No [X]
- 7.2

An extended statement may be attached.

WAYNE MUTUAL INSURANCE COMPANY
SCHEDULE T - PART 2
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

		Direct Business Only				
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts
States, Etc.						6 Totals
1.	Alabama.....AL					0
2.	Alaska.....AK					0
3.	Arizona.....AZ					0
4.	Arkansas.....AR					0
5.	California.....CA					0
6.	Colorado.....CO					0
7.	Connecticut.....CT					0
8.	Delaware.....DE					0
9.	District of Columbia.....DC					0
10.	Florida.....FL					0
11.	Georgia.....GA					0
12.	Hawaii.....HI					0
13.	Idaho.....ID					0
14.	Illinois.....IL					0
15.	Indiana.....IN					0
16.	Iowa.....IA					0
17.	Kansas.....KS					0
18.	Kentucky.....KY					0
19.	Louisiana.....LA					0
20.	Maine.....ME					0
21.	Maryland.....MD					0
22.	Massachusetts.....MA					0
23.	Michigan.....MI					0
24.	Minnesota.....MN					0
25.	Mississippi.....MS					0
26.	Missouri.....MO					0
27.	Montana.....MT					0
28.	Nebraska.....NE					0
29.	Nevada.....NV					0
30.	New Hampshire.....NH					0
31.	New Jersey.....NJ					0
32.	New Mexico.....NM					0
33.	New York.....NY					0
34.	North Carolina.....NC					0
35.	North Dakota.....ND					0
36.	Ohio.....OH					0
37.	Oklahoma.....OK					0
38.	Oregon.....OR					0
39.	Pennsylvania.....PA					0
40.	Rhode Island.....RI					0
41.	South Carolina.....SC					0
42.	South Dakota.....SD					0
43.	Tennessee.....TN					0
44.	Texas.....TX					0
45.	Utah.....UT					0
46.	Vermont.....VT					0
47.	Virginia.....VA					0
48.	Washington.....WA					0
49.	West Virginia.....WV					0
50.	Wisconsin.....WI					0
51.	Wyoming.....WY					0
52.	American Samoa.....AS					0
53.	Guam.....GU					0
54.	Puerto Rico.....PR					0
55.	US Virgin Islands.....VI					0
56.	Northern Mariana Islands...MP					0
57.	Canada.....CAN					0
58.	Aggregate Other Alien.....OT					0
59.	Totals.....	0	0	0	0	0

WAYNE 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)	*
Members															
.....	WAYNE INSURANCE GROUP	10255...	34-0605195..	.....	.....	.....	WASHINGTON MUTUAL INSURANCE ASSOC	OH.....	IA.....	WASHINGTON MUTUAL INSURANCE ASSOC	BOARD.....	.....	WAYNE MUTUAL INSURANCE COMPANY...	N.....	.....
.....	WAYNE INSURANCE GROUP	10281...	34-4296150..	.....	.....	.....	MARION MUTUAL INSURANCE ASSOC.....	OH.....	IA.....	MARION MUTUAL INSURANCE ASSOC.....	BOARD.....	.....	WAYNE MUTUAL INSURANCE COMPANY...	N.....	.....
.....	WAYNE INSURANCE GROUP	.....	34-1104946..	.....	.....	.....	WAYNE INSURANCE AGENCY.....	OH.....	DS.....	WAYNE MUTUAL INSURANCE COMPANY...	OWNERSHIP....	100.000	WAYNE MUTUAL INSURANCE COMPANY...	Y.....	.....
.....	WAYNE INSURANCE GROUP	.....	45-5175777..	.....	.....	.....	WING INSURANCE SERVICES.....	OH.....	DS.....	WASHINGTON MUTUAL INSURANCE ASSOC	OWNERSHIP....	100.000	WAYNE MUTUAL INSURANCE COMPANY...	N.....	.....
.....	WAYNE INSURANCE GROUP	.....	34-0606100..	.....	.....	.....	WAYNE MUTUAL INSURANCE COMPANY.....	OH.....	IA.....	WAYNE MUTUAL INSURANCE COMPANY...	OWNERSHIP....	100.000	WAYNE MUTUAL INSURANCE COMPANY...	N.....	.....
.....	WAYNE INSURANCE GROUP	.....	34-1937232..	.....	.....	.....	SUMMIT IT SOLUTIONS INC.....	OH.....	DS.....	WAYNE MUTUAL INSURANCE COMPANY...	OWNERSHIP....	100.000	WAYNE MUTUAL INSURANCE COMPANY...	Y.....	.....

SCHEDULE Y

PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
10255.....	34-0605195.....	WASHINGTON MUTUAL INSURANCE ASSOCIATION.....	.....	.....	.....	.....	.....1,287	2,539	.....	.....	.....3,826	(147)
10281.....	34-4296150.....	MARION MUTUAL INSURANCE ASSOCIATION.....	.....	.....	.....	.....	.....310	1,046	.....	.....	.....1,356	(23)
.....	34-1937232.....	SUMMIT IT SOLUTIONS INC.....	.....	.....	.....	.....	.....39	.....	.....	.....	.....39	11
9999999.	Control Totals.....	.....	.....0	0	0	0	1,636	3,585	XXX	0	5,221	(159)

Annual Statement for the year 2018 of the

WAYNE MUTUAL INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED 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.

MARCH FILING		Responses
1.	Will an actuarial opinion be filed by March 1?	YES
2.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3.	Will the confidential Risk-Based Capital Report be filed with the NAIC by March 1?	YES
4.	Will the confidential Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?	YES
APRIL FILING		
5.	Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6.	Will the Management's Discussion and Analysis be filed by April 1?	YES
7.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
MAY FILING		
8.	Will this company be included in a combined annual statement that is filed with the NAIC by May 1?	NO
JUNE FILING		
9.	Will an audited financial report be filed by June 1?	YES
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
AUGUST FILING		
11.	Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	NO

The following supplemental reports are required to be filed as part of your statement filing **if your company is engaged in the type of business covered by the supplement. 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.

MARCH FILING		
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
14.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
15.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
16.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
17.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
18.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
19.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
20.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
21.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES
22.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	YES
23.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
25.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
26.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
27.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
28.	Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?	NO
APRIL FILING		
29.	Will the Credit Insurance Experience Exhibit be filed with state of domicile and the NAIC by April 1?	NO
30.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
31.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
32.	Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
33.	Will the regulator-only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO
34.	Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	NO
35.	Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
36.	Will the Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (if required) be filed with state of domicile and the NAIC by April 1?	NO
AUGUST FILING		
37.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO

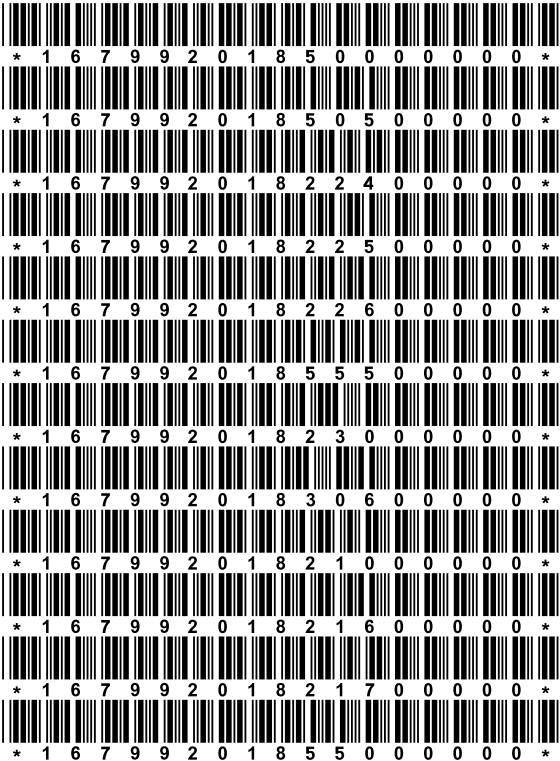
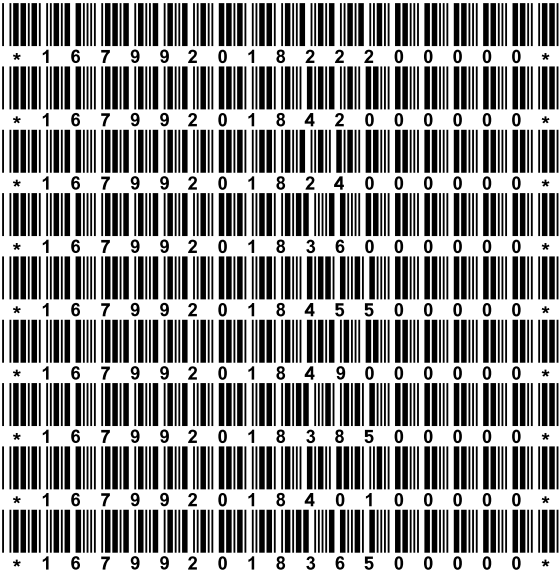
WAYNE MUTUAL INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED 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.

EXPLANATION:

BAR CODE:

1.
2.
3.
4.
5.
6.
7.
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9.
10.
11.
12. The data for this supplement is not required to be filed.
13. The data for this supplement is not required to be filed.
14. The data for this supplement is not required to be filed.
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32. The data for this supplement is not required to be filed.
33. The data for this supplement is not required to be filed.
34. The data for this supplement is not required to be filed.



WAYNE MUTUAL INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED 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.

35. The data for this supplement is not required to be filed.



36. The data for this supplement is not required to be filed.



37. The data for this supplement is not required to be filed.



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NONE**

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