PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2019
OF THE CONDITION AND AFFAIRS OF THE

Ohio Mutual Insurance Company

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

Organized under the Laws of OHIO, State of Domicile or Port of Entry OH
Country of Domicile United States of America

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

Statutory Home Office 1725 Hopley Avenue (Street and Number), Bucyrus, OH, US 44820-0111 (City or Town, State, Country and Zip Code)

Main Administrative Office 1725 Hopley Avenue (Street and Number)
Bucyrus, OH, US 44820-0111 (City or Town, State, Country and Zip Code), 419-562-3011 (Area Code) (Telephone Number)

Mail Address 1725 Hopley Avenue (Street and Number or P.O. Box), Bucyrus, OH, US 44820-0111 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 1725 Hopley Avenue (Street and Number)
Bucyrus, OH, US 44820-0111 (City or Town, State, Country and Zip Code), 419-562-3011 (Area Code) (Telephone Number)

Internet Website Address www.omig.com

Statutory Statement Contact Charles Elmer Easum Mr. (Name), 419-563-0810 (Area Code) (Telephone Number)
ceasum@omig.com (E-mail Address), 877-753-0580 (FAX Number)

OFFICERS

President Mark Clarence Russell, Mr.
Secretary Randy Lee Walker, Mr. #
Treasurer David Gary Hendrix, Mr.

OTHER

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

DIRECTORS OR TRUSTEES

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

State of Ohio
County of Crawford SS:

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

Mark Clarence Russell	David Gary Hendrix	Marcella Slone Smith
President and CEO	Treasurer and CFO	Assistant Secretary

Subscribed and sworn to before me this
_____ day of _____

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963 BUSINESS IN THE STATE OF Connecticut DURING THE YEAR 2019 NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4. Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(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 accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												
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												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

NONE

(a) Finance and service charges not included in Lines 1 to 35 $

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963 BUSINESS IN THE STATE OF Indiana DURING THE YEAR 2019 NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4. Private crop												
2.5 Private flood												
3. Farmowners multiple peril	116,561	78,634		63,702							23,652	1,716
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(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 accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												
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	4,621	762		3,859							770	68
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	2,521	377		2,144							420	37
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)	123,703	79,773		69,705							24,842	1,821
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 $

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963 BUSINESS IN THE STATE OF Maine DURING THE YEAR 2019 NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4. Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(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 accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												
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												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

NONE

(a) Finance and service charges not included in Lines 1 to 35 $

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963 BUSINESS IN THE STATE OF New Hampshire DURING THE YEAR 2019 NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4. Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(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 accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												
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												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

NONE

(a) Finance and service charges not included in Lines 1 to 35 $

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963 BUSINESS IN THE STATE OF Ohio DURING THE YEAR 2019 NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	2,571,962	2,562,513		1,452,966	860,872	937,992	142,257	7,097	(42,011)	1,929	352,192	37,854
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4. Private crop												
2.5 Private flood												
3. Farmowners multiple peril	5,836,629	5,187,774		2,652,695	1,730,817	1,849,956	1,181,023	12,207	24,525	21,329	1,092,149	85,903
4. Homeowners multiple peril	23,177,872	21,886,776		11,991,974	13,003,169	13,954,912	3,638,625	240,433	274,709	119,303	3,893,271	341,129
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	13,726	13,843		5,569	699	(4,188)					2,499	202
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(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 accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence	230,233	234,280		115,535	16,831	12,290	39,400	4,752	6,401	4,330	31,525	3,389
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	30,318,861	29,621,334		12,899,789	15,869,184	14,519,593	17,382,369	463,139	(82,727)	1,398,218	4,236,588	446,229
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	27,816,242	26,951,000		11,740,856	16,309,694	16,646,285	1,934,590	129,221	147,898	44,607	3,910,994	409,396
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft	74,790	77,544		37,124	4,107	(1,612)	893				10,262	1,101
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)	90,040,315	86,535,064		40,896,508	47,795,373	47,915,228	24,319,157	856,849	328,795	1,589,716	13,529,480	1,325,203
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 $ (25)

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963 BUSINESS IN THE STATE OF Rhode Island DURING THE YEAR 2019 NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4. Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(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 accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												
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												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

NONE

(a) Finance and service charges not included in Lines 1 to 35 $

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963 BUSINESS IN THE STATE OF Tennessee DURING THE YEAR 2019 NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4. Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(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 accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												
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												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

NONE

(a) Finance and service charges not included in Lines 1 to 35 $

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963 BUSINESS IN THE STATE OF Vermont DURING THE YEAR 2019 NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4. Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(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 accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												
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												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

NONE

(a) Finance and service charges not included in Lines 1 to 35 $

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963 BUSINESS IN THE STATE OF Virginia DURING THE YEAR 2019 NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4. Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(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 accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												
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												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

NONE

(a) Finance and service charges not included in Lines 1 to 35 $

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963 BUSINESS IN THE STATE OF Wisconsin DURING THE YEAR 2019 NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4. Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine												
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(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 accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence												
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												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

NONE

(a) Finance and service charges not included in Lines 1 to 35 $

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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2019 NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	2,571,962	2,562,513		1,452,966	860,872	937,992	142,257	7,097	(42,011)	1,929	352,192	37,854
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4. Private crop												
2.5 Private flood												
3. Farmowners multiple peril	5,953,190	5,266,408		2,716,397	1,730,817	1,849,956	1,181,023	12,207	24,525	21,329	1,115,801	87,619
4. Homeowners multiple peril	23,177,872	21,886,776		11,991,974	13,003,169	13,954,912	3,638,625	240,433	274,709	119,303	3,893,271	341,129
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	13,726	13,843		5,569	699	(4,188)					2,499	202
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake												
13. Group accident and health (b)												
14. Credit accident and health (group and individual)												
15.1 Collectively renewable accident and health (b)												
15.2 Non-cancelable accident and health(b)												
15.3 Guaranteed renewable accident and health(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 accident and health (b)												
15.8 Federal employees health benefits plan premium (b)												
16. Workers' compensation												
17.1 Other Liability - occurrence	230,233	234,280		115,535	16,831	12,290	39,400	4,752	6,401	4,330	31,525	3,389
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	30,323,482	29,622,096		12,903,648	15,869,184	14,519,593	17,382,369	463,139	(82,727)	1,398,218	4,237,358	446,297
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	27,818,763	26,951,377		11,743,000	16,309,694	16,646,285	1,934,590	129,221	147,898	44,607	3,911,414	409,433
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft	74,790	77,544		37,124	4,107	(1,612)	893				10,262	1,101
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
34. Aggregate write-ins for other lines of business												
35. TOTALS (a)	90,164,018	86,614,837		40,966,213	47,795,373	47,915,228	24,319,157	856,849	328,795	1,589,716	13,554,322	1,327,024
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)												

(a) Finance and service charges not included in Lines 1 to 35 $ (25)

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

SCHEDULE F - PART 1

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

1	2	3	4	5	Reinsurance On		8	9	10	11	12	13	14	15
					6	7								
ID Number	NAIC Company Code	Name of Reinsured	Domiciliary Jurisdiction	Assumed Premium	Paid Losses and Loss Adjustment Expenses	Known Case Losses and LAE	Cols. 6 + 7	Contingent Commissions Payable	Assumed Premiums Receivable	Unearned Premium	Funds Held By or Deposited With Reinsured Companies	Letters of Credit Posted	Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	Amount of Assets Pledged or Collateral Held in Trust
34-1008736	13072	UNITED OHIO INSURANCE COMPANY	OH	163,372		36,371	36,371			76,946				
01-0407315	25950	CASCO INDEMNITY COMPANY	ME	12,857		1,945	1,945			6,874				
0199999. Affiliates - U.S. Intercompany Pooling				176,229		38,316	38,316			83,820				
0499999. Total - U.S. Non-Pool														
0799999. Total - Other (Non-U.S.)														
0899999. Total - Affiliates				176,229		38,316	38,316			83,820				
AA-9995035	00000	MUTUAL REINSURANCE BUREAU	IL	46										
1199999. Total Pools, Associations or Other Similar Facilities - Voluntary Pools				46										
1299999. Total - Pools and Associations				46										
9999999 Totals				176,275		38,316	38,316			83,820				

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

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

NONE

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	Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	Funds Held by Company Under Reinsurance Treaties
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	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	Columns 7 through 14 Totals	Amount in Dispute included in Column 15	Ceded Balances Payable	Other Amounts Due to Reinsurers		
34-1008736	13072	UNITED OHIO INSURANCE COMPANY	OH		171,517			34,822		26,857		80,844		142,523				142,523	
01-0407315	25950	CASCO INDEMNITY COMPANY	ME		21,110			4,286		3,305		9,950		17,541				17,541	
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling					192,627			39,108		30,162		90,794		160,064				160,064	
0499999. Total Authorized - Affiliates - U.S. Non-Pool																			
0799999. Total Authorized - Affiliates - Other (Non-U.S.)																			
0899999. Total Authorized - Affiliates					192,627			39,108		30,162		90,794		160,064				160,064	
95-4387273	19489	ALLIED WORLD ASSURANCE COMPANY	DE		140											1		(1)	
36-2661954	10103	AMERICAN AGRICULTURAL INSURANCE COMPANY	IN		52							16		16		1		15	
06-1430254	10348	ARCH REINSURANCE COMPANY	DE																
47-0574325	32603	BERKLEY INSURANCE COMPANY	DE		40							12		12				12	
42-0234980	21415	EMPLOYERS MUTUAL CASUALTY CO	IA		43							13		13				13	
22-2005057	26921	EVEREST REINSURANCE COMPANY	DE		21														
05-0316605	21482	FACTORY MUTUAL INSURANCE COMPANY	RI		348	24		8				169		201		18		183	
42-0245840	13897	FARMERS MUTUAL HAIL INSURANCE COMPANY	IA		25							8		8				8	
13-2673100	22039	GENERAL REINSURANCE CORPORATION	DE		317	59	1	79		275		150		564		28		536	135
06-0384680	11452	HARTFORD STEAM BOILER INSPECTION & INS	CT					5						5				5	
13-4924125	10227	MUNICH REINSURANCE AMERICA, INC	DE																
47-0698507	23680	ODYSSEY REINSURANCE COMPANY	CT		57														
52-1952955	10357	RENAISSANCE REINSURANCE US INC	MD																
35-6021485	12416	PROTECTIVE INSURANCE COMPANY	IN		43														
43-0613000	23388	SHELTER MUTUAL INSURANCE COMPANY	MO		38														
13-1675535	25364	SWISS REINSURANCE AMERICA CORPORATION	NY		81							16		16		1		15	
13-2918573	42439	THE TOA REINSURANCE COMPANY OF AMERICA	DE		26							8		8				8	
13-3031176	38636	PARTNER REINSURANCE COMPANY OF THE U.S.	NY		8							3		3				3	
23-1641984	10219	QBE REINSURANCE CORPORATION	PA		7														
13-1290712	20583	XL REINSURANCE AMERICA	NY																
0999999. Total Authorized - Other U.S. Unaffiliated Insurers					1,246	83	1	92		275		395		846		49		797	135
AA-9991222	32573	OHIO FAIR PLAN UNDERWRITING ASSOCIATION	OH		8							4		4		2		2	
1099999. Total Authorized - Pools - Mandatory Pools					8							4		4		2		2	
AA-9995035	00000	MUTUAL REINSURANCE BUREAU	IL		192											1		(1)	
1199999. Total Authorized - Pools - Voluntary Pools					192											1		(1)	
AA-1126033	00000	LLOYD'S SYNDICATE #0033	GBR		21														
AA-1126435	00000	LLOYD'S SYNDICATE #0435	GBR																
AA-1126623	00000	LLOYD'S SYNDICATE #0623	GBR		8														
AA-1120157	00000	LLOYD'S SYNDICATE #1729	GBR																
AA-1120106	00000	LLOYD'S SYNDICATE #1969	GBR		6														
AA-1128001	00000	LLOYD'S SYNDICATE #2001	GBR		46														
AA-1128003	00000	LLOYD'S SYNDICATE #2003	GBR		160											1		(1)	
AA-1120071	00000	LLOYD'S SYNDICATE #2007	GBR		30														
AA-1128010	00000	LLOYD'S SYNDICATE #2010	GBR		65														
AA-1120158	00000	LLOYD'S SYNDICATE #2014	GBR		15														
AA-1128623	00000	LLOYD'S SYNDICATE #2623	GBR		38														
AA-1120085	00000	LLOYD'S SYNDICATE # 1274	GBR		10														
AA-1127206	00000	LLOYD'S SYNDICATE # 1206	GBR		33														
AA-1128791	00000	LLOYD'S SYNDICATE #2791	GBR		64														
AA-1120181	00000	LLOYD'S SYNDICATE #5886	GBR		100											1		(1)	
1299999. Total Authorized - Other Non-U.S. Insurers					596											2		(2)	
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)					194,669	83	1	39,200		30,437		91,193		160,914		54		160,860	135
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool																			

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	Domiciliary Jurisdiction	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 Commis-sions	Columns 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
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)																			
2299999. Total Unauthorized - Affiliates																			
AA-1120337	00000	ASPEN INSURANCE UK LIMITED	GBR		6							2		2				2	
AA-3194161	00000	CATLIN INSURANCE COMPANY LTD	BMU		92														
AA-3194122	00000	DAVINCI REINSURANCE LTD	BMU		52														
AA-3190875	00000	HISCOX INSURANCE COMPANY	BMU		39														
AA-1460019	00000	MS AMLIN AG																	
AA-3190339	00000	RENAISSANCE REINSURANCE, LTD	BMU		90							3		3		1		2	
AA-1340192	00000	R&V VERSICHERUNG AG	DEU		228											1		(1)	
2699999. Total Unauthorized - Other Non-U.S. Insurers					507							5		5		2		3	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					507							5		5		2		3	
3299999. Total Certified - Affiliates - U.S. Non-Pool																			
CR-1340125	00000	HANNOVER RUCKVERSICHERUNGS AG	DEU		18							6		6				6	
3499999. Total Certified - Affiliates - Other (Non-U.S.) - Other					18							6		6				6	
3599999. Total Certified - Affiliates - Other (Non-U.S.)					18							6		6				6	
3699999. Total Certified - Affiliates					18							6		6				6	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)					18							6		6				6	
4399999. Total Authorized, Unauthorized and Certified Excluding Protected Cells (Sum of 1499999, 2899999 and 4299999)					195,194	83	1	39,200		30,437		91,204		160,925		56		160,869	135
4499999. Total Protected Cells (Sum of 1399999, 2799999 and 4199999)																			
9999999 Totals					195,194	83	1	39,200		30,437		91,204		160,925		56		160,869	135

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	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
		Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29-30)	Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
34-1008736	UNITED OHIO INSURANCE COMPANY						142,523		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
01-0407315	CASCO INDEMNITY COMPANY						17,541		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling				XXX			160,064		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999. Total Authorized - Affiliates - U.S. Non-Pool				XXX					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999. Total Authorized - Affiliates - Other (Non-U.S.)				XXX											XXX		
0899999. Total Authorized - Affiliates				XXX			160,064								XXX		
95-4387273	ALLIED WORLD ASSURANCE COMPANY														3		
36-2661954	AMERICAN AGRICULTURAL INSURANCE COMPANY					1	15		16	19	1	18		18	3		1
06-1430254	ARCH REINSURANCE COMPANY														2		
47-0574325	BERKLEY INSURANCE COMPANY						12		12	14		14		14	2		1
42-0234980	EMPLOYERS MUTUAL CASUALTY CO						13		13	16		16		16	3		1
22-2005057	EVEREST REINSURANCE COMPANY														2		
05-0316605	FACTORY MUTUAL INSURANCE COMPANY					18	183		201	241	18	223		223	2		9
42-0245840	FARMERS MUTUAL HAIL INSURANCE COMPANY						8		8	10		10		10	4		1
13-2673100	GENERAL REINSURANCE CORPORATION					163	401		564	677	163	514		514	1		18
06-0384680	HARTFORD STEAM BOILER INSPECTION & INS						5		5	6		6		6	1		
13-4924125	MUNICH REINSURANCE AMERICA, INC														2		
47-0698507	ODYSSEY REINSURANCE COMPANY														3		
52-1952955	RENAISSANCE REINSURANCE US INC														2		
35-6021485	PROTECTIVE INSURANCE COMPANY														3		
43-0613000	SHELTER MUTUAL INSURANCE COMPANY														3		
13-1675535	SWISS REINSURANCE AMERICA CORPORATION					1	15		16	19	1	18		18	2		1
13-2918573	THE TOA REINSURANCE COMPANY OF AMERICA						8		8	10		10		10	3		
13-3031176	PARTNER REINSURANCE COMPANY OF THE U.S.						3		3	4		4		4	2		
23-1641984	QBE REINSURANCE CORPORATION														3		
13-1290712	XL REINSURANCE AMERICA														2		
0999999. Total Authorized - Other U.S. Unaffiliated Insurers				XXX		183	663		846	1,015	183	832		832	XXX		32
AA-9991222	OHIO FAIR PLAN UNDERWRITING ASSOCIATION					2	2		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1099999. Total Authorized - Pools - Mandatory Pools				XXX		2	2		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9995035	MUTUAL REINSURANCE BUREAU														3		
1199999. Total Authorized - Pools - Voluntary Pools				XXX											XXX		
AA-1126033	LLOYD'S SYNDICATE #0033														3		
AA-1126435	LLOYD'S SYNDICATE #0435														3		
AA-1126623	LLOYD'S SYNDICATE #0623														3		
AA-1120157	LLOYD'S SYNDICATE #1729														3		
AA-1120106	LLOYD'S SYNDICATE #1969														3		
AA-1128001	LLOYD'S SYNDICATE #2001														3		
AA-1128003	LLOYD'S SYNDICATE #2003														3		
AA-1120071	LLOYD'S SYNDICATE #2007														3		
AA-1128010	LLOYD'S SYNDICATE #2010														3		
AA-1120158	LLOYD'S SYNDICATE #2014														3		
AA-1128623	LLOYD'S SYNDICATE #2623														3		

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	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
		Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29-30)	Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
AA-1120085	LLOYD'S SYNDICATE # 1274														3		
AA-1127206	LLOYD'S SYNDICATE # 1206														3		
AA-1128791	LLOYD'S SYNDICATE #2791														3		
AA-1120181	LLOYD'S SYNDICATE #5886														3		
1299999. Total Authorized - Other Non-U.S. Insurers				XXX											XXX		
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)				XXX		185	160,729		846	1,015	183	832		832	XXX		32
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool				XXX					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX											XXX		
2299999. Total Unauthorized - Affiliates				XXX											XXX		
AA-1120337	ASPEN INSURANCE UK LIMITED				2	2			2	2		2	2		3		
AA-3194161	CATLIN INSURANCE COMPANY LTD														3		
AA-3194122	DAVINCI REINSURANCE LTD														3		
AA-3190875	HISCOX INSURANCE COMPANY														3		
AA-1460019	MS AMLIN AG														3		
AA-3190339	RENAISSANCE REINSURANCE, LTD				2	3			3	4	1	3	2	1	2		
AA-1340192	R&V VERSICHERUNG AG														2		
2699999. Total Unauthorized - Other Non-U.S. Insurers				XXX	4	5			5	6	1	5	4	1	XXX		
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)				XXX	4	5			5	6	1	5	4	1	XXX		
3299999. Total Certified - Affiliates - U.S. Non-Pool				XXX					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
CR-1340125	HANNOVER RUCKVERSICHERUNGS AG				6	6			6	7		7	6	1	2		
3499999. Total Certified - Affiliates - Other (Non-U.S.) - Other				XXX	6	6			6	7		7	6	1	XXX		
3599999. Total Certified - Affiliates - Other (Non-U.S.)				XXX	6	6			6	7		7	6	1	XXX		
3699999. Total Certified - Affiliates				XXX	6	6			6	7		7	6	1	XXX		
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)				XXX	6	6			6	7		7	6	1	XXX		
4399999. Total Authorized, Unauthorized and Certified Excluding Protected Cells (Sum of 1499999, 2899999 and 4299999)				XXX	10	196	160,729		857	1,028	184	844	10	834	XXX		32
4499999. Total Protected Cells (Sum of 1399999, 2799999 and 4199999)				XXX											XXX		
9999999 Totals				XXX	10	196	160,729		857	1,028	184	844	10	834	XXX		32

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	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44	45	46	47	48	49	50	51	52	53
		37	Overdue					43										
			38	39	40	41	42											
		Current	1 - 29 Days	30 - 90 Days	91 - 120 Days	Over 120 Days	Total Overdue Cols. 38+39 +40+41	Total Due Cols. 37+42 (In total should equal Cols. 7+8)	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	Amounts Received Prior 90 Days	Percentage Overdue Col. 42/Col. 43	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46+48])	Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	Is the Amount in Col. 50 Less Than 20%? (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
34-1008736	UNITED OHIO INSURANCE COMPANY																YES	
01-0407315	CASCO INDEMNITY COMPANY																YES	
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling																	XXX	
0499999. Total Authorized - Affiliates - U.S. Non-Pool																	XXX	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)																	XXX	
0899999. Total Authorized - Affiliates																	XXX	
95-4387273	ALLIED WORLD ASSURANCE COMPANY																YES	
36-2661954	AMERICAN AGRICULTURAL INSURANCE COMPANY																YES	
06-1430254	ARCH REINSURANCE COMPANY																YES	
47-0574325	BERKLEY INSURANCE COMPANY																YES	
42-0234980	EMPLOYERS MUTUAL CASUALTY CO																YES	
22-2005057	EVEREST REINSURANCE COMPANY																YES	
05-0316605	FACTORY MUTUAL INSURANCE COMPANY	24						24			24						YES	
42-0245840	FARMERS MUTUAL HAIL INSURANCE COMPANY																YES	
13-2673100	GENERAL REINSURANCE CORPORATION	60						60			60						YES	
06-0384680	HARTFORD STEAM BOILER INSPECTION & INS																YES	
13-4924125	MUNICH REINSURANCE AMERICA, INC																YES	
47-0698507	ODYSSEY REINSURANCE COMPANY																YES	
52-1952955	RENAISSANCE REINSURANCE US INC																YES	
35-6021485	PROTECTIVE INSURANCE COMPANY																YES	
43-0613000	SHELTER MUTUAL INSURANCE COMPANY																YES	
13-1675535	SWISS REINSURANCE AMERICA CORPORATION																YES	
13-2918573	THE TOA REINSURANCE COMPANY OF AMERICA																YES	
13-3031176	PARTNER REINSURANCE COMPANY OF THE U.S.																YES	
23-1641984	QBE REINSURANCE CORPORATION																YES	
13-1290712	XL REINSURANCE AMERICA																YES	
0999999. Total Authorized - Other U.S. Unaffiliated Insurers		84						84			84						XXX	
AA-9991222	OHIO FAIR PLAN UNDERWRITING ASSOCIATION																YES	
1099999. Total Authorized - Pools - Mandatory Pools																	XXX	
AA-9995035	MUTUAL REINSURANCE BUREAU																YES	
1199999. Total Authorized - Pools - Voluntary Pools																	XXX	
AA-1126033	LLOYD'S SYNDICATE #0033																YES	
AA-1126435	LLOYD'S SYNDICATE #0435																YES	
AA-1126623	LLOYD'S SYNDICATE #0623																YES	
AA-1120157	LLOYD'S SYNDICATE #1729																YES	
AA-1120106	LLOYD'S SYNDICATE #1969																YES	
AA-1128001	LLOYD'S SYNDICATE #2001																YES	
AA-1128003	LLOYD'S SYNDICATE #2003																YES	
AA-1120071	LLOYD'S SYNDICATE #2007																YES	
AA-1128010	LLOYD'S SYNDICATE #2010																YES	
AA-1120158	LLOYD'S SYNDICATE #2014																YES	
AA-1128623	LLOYD'S SYNDICATE #2623																YES	

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	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44	45	46	47	48	49	50	51	52	53
		37	Overdue					43										
			38	39	40	41	42											
		Current	1 - 29 Days	30 - 90 Days	91 - 120 Days	Over 120 Days	Total Overdue Cols. 38+39 +40+41	Total Due Cols. 37+42 (In total should equal Cols. 7+8)	Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	Amounts Received Prior 90 Days	Percentage Overdue Col. 42/Col. 43	Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46+48])	Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	Is the Amount in Col. 50 Less Than 20%? (Yes or No)	Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
AA-1120085	LLOYD'S SYNDICATE # 1274																YES	
AA-1127206	LLOYD'S SYNDICATE # 1206																YES	
AA-1128791	LLOYD'S SYNDICATE #2791																YES	
AA-1120181	LLOYD'S SYNDICATE #5886																YES	
1299999. Total Authorized - Other Non-U.S. Insurers																	XXX	
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		84						84			84						XXX	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool																	XXX	
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)																	XXX	
2299999. Total Unauthorized - Affiliates																	XXX	
AA-1120337	ASPEN INSURANCE UK LIMITED																YES	
AA-3194161	CATLIN INSURANCE COMPANY LTD																YES	
AA-3194122	DAVINCI REINSURANCE LTD																YES	
AA-3190875	HISCOX INSURANCE COMPANY																YES	
AA-1460019	MS AMLIN AG																YES	
AA-3190339	RENAISSANCE REINSURANCE, LTD																YES	
AA-1340192	R&V VERSICHERUNG AG																YES	
2699999. Total Unauthorized - Other Non-U.S. Insurers																	XXX	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)																	XXX	
3299999. Total Certified - Affiliates - U.S. Non-Pool																	XXX	
CR-1340125	HANNOVER RUCKVERSICHERUNGS AG																YES	
3499999. Total Certified - Affiliates - Other (Non-U.S.) - Other																	XXX	
3599999. Total Certified - Affiliates - Other (Non-U.S.)																	XXX	
3699999. Total Certified - Affiliates																	XXX	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																	XXX	
4399999. Total Authorized, Unauthorized and Certified Excluding Protected Cells (Sum of 1499999, 2899999 and 4299999)		84						84			84						XXX	
4499999. Total Protected Cells (Sum of 1399999, 2799999 and 4199999)																	XXX	
9999999 Totals		84						84			84						XXX	

SCHEDULE F - PART 3 (Continued)

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

		Provision for Certified Reinsurance															
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0			69
														66	67	68	
ID Number From Col. 1	Name of Reinsurer From Col. 3	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 (Col. 19 - Col. 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	Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
34-1008736	UNITED OHIO INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
01-0407315	CASCO INDEMNITY COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999. Total Authorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999. Total Authorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0899999. Total Authorized - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
95-4387273	ALLIED WORLD ASSURANCE COMPANY	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
06-1430254	ARCH REINSURANCE COMPANY	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
42-0234980	EMPLOYERS MUTUAL CASUALTY CO	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
05-0316605	FACTORY MUTUAL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
42-0245840	FARMERS MUTUAL HAIL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-2673100	GENERAL REINSURANCE CORPORATION	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
06-0384680	HARTFORD STEAM BOILER INSPECTION & INS	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13-4924125	MUNICH REINSURANCE AMERICA, INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
47-0698507	ODYSSEY REINSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
52-1952955	RENAISSANCE REINSURANCE US INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
35-6021485	PROTECTIVE INSURANCE COMPANY	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
13-1675535	SWISS REINSURANCE AMERICA CORPORATION	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
13-3031176	PARTNER REINSURANCE COMPANY OF THE U.S.	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
13-1290712	XL REINSURANCE AMERICA	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
AA-9991222	OHIO FAIR PLAN UNDERWRITING ASSOCIATION	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1099999. Total Authorized - Pools - Mandatory Pools				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-9995035	MUTUAL REINSURANCE BUREAU	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1199999. Total Authorized - Pools - Voluntary Pools				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126033	LLOYD'S SYNDICATE #0033	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126435	LLOYD'S SYNDICATE #0435	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1126623	LLOYD'S SYNDICATE #0623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120157	LLOYD'S SYNDICATE #1729	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120106	LLOYD'S SYNDICATE #1969	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128001	LLOYD'S SYNDICATE #2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128003	LLOYD'S SYNDICATE #2003	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120071	LLOYD'S SYNDICATE #2007	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128010	LLOYD'S SYNDICATE #2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120158	LLOYD'S SYNDICATE #2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0			69
														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 (Col. 19 - Col. 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	Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
AA-1128623	LLOYD'S SYNDICATE #2623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120085	LLOYD'S SYNDICATE # 1274	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1127206	LLOYD'S SYNDICATE # 1206	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1128791	LLOYD'S SYNDICATE #2791	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120181	LLOYD'S SYNDICATE #5886	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 (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2299999. Total Unauthorized - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1120337	ASPEN INSURANCE UK LIMITED	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3194161	CATLIN INSURANCE COMPANY LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3194122	DAVINCI REINSURANCE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190875	HISCOX INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1460019	MS AMLIN AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-3190339	RENAISSANCE REINSURANCE, LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
AA-1340192	R&V VERSICHERUNG AG	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 (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3299999. Total Certified - Affiliates - U.S. Non-Pool				XXX				XXX	XXX								
CR-1340125	HANNOVER RUCKVERSICHERUNGS AG	2	07/01/2015	10.0		6	1	100.0	100.0		6						
3499999. Total Certified - Affiliates - Other (Non-U.S.) - Other				XXX		6	1	XXX	XXX		6						
3599999. Total Certified - Affiliates - Other (Non-U.S.)				XXX		6	1	XXX	XXX		6						
3699999. Total Certified - Affiliates				XXX		6	1	XXX	XXX		6						
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)				XXX		6	1	XXX	XXX		6						
4399999. Total Authorized, Unauthorized and Certified Excluding Protected Cells (Sum of 1499999, 2899999 and 4299999)				XXX		6	1	XXX	XXX		6						
4499999. Total Protected Cells (Sum of 1399999, 2799999 and 4199999)				XXX				XXX	XXX								
9999999 Totals				XXX		6	1	XXX	XXX		6						

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	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized Reinsurance		Total Provision for Reinsurance			
			71	72	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75	76	77	78
		20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	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)	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%])	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. [40 + 41] * 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)
34-1008736	UNITED OHIO INSURANCE COMPANY		XXX	XXX				XXX	XXX	
01-0407315	CASCO INDEMNITY COMPANY		XXX	XXX				XXX	XXX	
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling			XXX	XXX				XXX	XXX	
0499999. Total Authorized - Affiliates - U.S. Non-Pool			XXX	XXX				XXX	XXX	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)			XXX	XXX				XXX	XXX	
0899999. Total Authorized - Affiliates			XXX	XXX				XXX	XXX	
95-4387273	ALLIED WORLD ASSURANCE COMPANY		XXX	XXX				XXX	XXX	
36-2661954	AMERICAN AGRICULTURAL INSURANCE COMPANY		XXX	XXX				XXX	XXX	
06-1430254	ARCH REINSURANCE COMPANY		XXX	XXX				XXX	XXX	
47-0574325	BERKLEY INSURANCE COMPANY		XXX	XXX				XXX	XXX	
42-0234980	EMPLOYERS MUTUAL CASUALTY CO		XXX	XXX				XXX	XXX	
22-2005057	EVEREST REINSURANCE COMPANY		XXX	XXX				XXX	XXX	
05-0316605	FACTORY MUTUAL INSURANCE COMPANY		XXX	XXX				XXX	XXX	
42-0245840	FARMERS MUTUAL HAIL INSURANCE COMPANY		XXX	XXX				XXX	XXX	
13-2673100	GENERAL REINSURANCE CORPORATION		XXX	XXX				XXX	XXX	
06-0384680	HARTFORD STEAM BOILER INSPECTION & INS		XXX	XXX				XXX	XXX	
13-4924125	MUNICH REINSURANCE AMERICA, INC		XXX	XXX				XXX	XXX	
47-0698507	ODYSSEY REINSURANCE COMPANY		XXX	XXX				XXX	XXX	
52-1952955	RENAISSANCE REINSURANCE US INC		XXX	XXX				XXX	XXX	
35-6021485	PROTECTIVE INSURANCE COMPANY		XXX	XXX				XXX	XXX	
43-0613000	SHELTER MUTUAL INSURANCE COMPANY		XXX	XXX				XXX	XXX	
13-1675535	SWISS REINSURANCE AMERICA CORPORATION		XXX	XXX				XXX	XXX	
13-2918573	THE TOA REINSURANCE COMPANY OF AMERICA		XXX	XXX				XXX	XXX	
13-3031176	PARTNER REINSURANCE COMPANY OF THE U.S.		XXX	XXX				XXX	XXX	
23-1641984	QBE REINSURANCE CORPORATION		XXX	XXX				XXX	XXX	
13-1290712	XL REINSURANCE AMERICA		XXX	XXX				XXX	XXX	
0999999. Total Authorized - Other U.S. Unaffiliated Insurers			XXX	XXX				XXX	XXX	
AA-9991222	OHIO FAIR PLAN UNDERWRITING ASSOCIATION		XXX	XXX				XXX	XXX	
1099999. Total Authorized - Pools - Mandatory Pools			XXX	XXX				XXX	XXX	
AA-9995035	MUTUAL REINSURANCE BUREAU		XXX	XXX				XXX	XXX	
1199999. Total Authorized - Pools - Voluntary Pools			XXX	XXX				XXX	XXX	
AA-1126033	LLOYD'S SYNDICATE #0033		XXX	XXX				XXX	XXX	
AA-1126435	LLOYD'S SYNDICATE #0435		XXX	XXX				XXX	XXX	
AA-1126623	LLOYD'S SYNDICATE #0623		XXX	XXX				XXX	XXX	
AA-1120157	LLOYD'S SYNDICATE #1729		XXX	XXX				XXX	XXX	
AA-1120106	LLOYD'S SYNDICATE #1969		XXX	XXX				XXX	XXX	
AA-1128001	LLOYD'S SYNDICATE #2001		XXX	XXX				XXX	XXX	
AA-1128003	LLOYD'S SYNDICATE #2003		XXX	XXX				XXX	XXX	
AA-1120071	LLOYD'S SYNDICATE #2007		XXX	XXX				XXX	XXX	
AA-1128010	LLOYD'S SYNDICATE #2010		XXX	XXX				XXX	XXX	
AA-1120158	LLOYD'S SYNDICATE #2014		XXX	XXX				XXX	XXX	

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	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized Reinsurance		Total Provision for Reinsurance			
			71	72	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75	76	77	78
		20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	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)	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%])	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. [40 + 41] * 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)
AA-1128623	LLOYD'S SYNDICATE #2623		XXX	XXX				XXX	XXX	
AA-1120085	LLOYD'S SYNDICATE # 1274		XXX	XXX				XXX	XXX	
AA-1127206	LLOYD'S SYNDICATE # 1206		XXX	XXX				XXX	XXX	
AA-1128791	LLOYD'S SYNDICATE #2791		XXX	XXX				XXX	XXX	
AA-1120181	LLOYD'S SYNDICATE #5886		XXX	XXX				XXX	XXX	
1299999. Total Authorized - Other Non-U.S. Insurers			XXX	XXX				XXX	XXX	
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			XXX	XXX				XXX	XXX	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool					XXX	XXX	XXX		XXX	
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)					XXX	XXX	XXX		XXX	
2299999. Total Unauthorized - Affiliates					XXX	XXX	XXX		XXX	
AA-1120337	ASPEN INSURANCE UK LIMITED				XXX	XXX	XXX		XXX	
AA-3194161	CATLIN INSURANCE COMPANY LTD				XXX	XXX	XXX		XXX	
AA-3194122	DAVINCI REINSURANCE LTD				XXX	XXX	XXX		XXX	
AA-3190875	HISCOX INSURANCE COMPANY				XXX	XXX	XXX		XXX	
AA-1460019	MS AMLIN AG				XXX	XXX	XXX		XXX	
AA-3190339	RENAISSANCE REINSURANCE, LTD				XXX	XXX	XXX		XXX	
AA-1340192	R&V VERSICHERUNG AG				XXX	XXX	XXX		XXX	
2699999. Total Unauthorized - Other Non-U.S. Insurers					XXX	XXX	XXX		XXX	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					XXX	XXX	XXX		XXX	
3299999. Total Certified - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	XXX		
CR-1340125	HANNOVER RUCKVERSICHERUNGS AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3499999. Total Certified - Affiliates - Other (Non-U.S.) - Other		XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3599999. Total Certified - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3699999. Total Certified - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX		
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX		
4399999. Total Authorized, Unauthorized and Certified Excluding Protected Cells (Sum of 1499999, 2899999 and 4299999)										
4499999. Total Protected Cells (Sum of 1399999, 2799999 and 4199999)										
9999999 Totals										

SCHEDULE F - PART 4

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

1 Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	2 Letters of Credit Code	3 American Bankers Association (ABA) Routing Number	4 Issuing or Confirming Bank Name	5 Letters of Credit Amount
			NONE	
Total				

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.	FACTORY MUTUAL INSURANCE COMPANY	35.000	347,612
2.			
3.			
4.			
5.			

B. Report the five largest reinsurance recoverables reported in Schedule F, Part 3, Column 15, due from any one reinsurer (based on the total recoverables, Schedule F, Part 3,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
6.	GENERAL REINSURANCE CORPORATION	563,491	317,213	Yes [ ] No [X]
7.	FACTORY MUTUAL INSURANCE COMPANY	200,921	347,612	Yes [ ] No [X]
8.	AMERICAN AGRICULTURAL INSURANCE COMPANY	16,220	52,214	Yes [ ] No [X]
9.	SWISS REINSURANCE AMERICA CORPORATION	16,220	81,441	Yes [ ] No [X]
10.	EMPLOYERS MUTUAL CASUALTY CO	13,371	43,041	Yes [ ] No [X]

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

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)	331,096,526		331,096,526
2.	Premiums and considerations (Line 15)	18,272,810		18,272,810
3.	Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	84,024	(84,024)	
4.	Funds held by or deposited with reinsured companies (Line 16.2)			
5.	Other assets	1,653,551		1,653,551
6.	Net amount recoverable from reinsurers		160,729,866	160,729,866
7.	Protected cell assets (Line 27)			
8.	Totals (Line 28)	351,106,911	160,645,842	511,752,753
	LIABILITIES (Page 3)			
9.	Losses and loss adjustment expenses (Lines 1 through 3)	31,519,047	69,637,026	101,156,073
10.	Taxes, expenses, and other obligations (Lines 4 through 8)	3,072,220		3,072,220
11.	Unearned premiums (Line 9)	33,581,406	91,200,119	124,781,525
12.	Advance premiums (Line 10)	528,375		528,375
13.	Dividends declared and unpaid (Line 11.1 and 11.2)			
14.	Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	55,892	(55,892)	
15.	Funds held by company under reinsurance treaties (Line 13)	135,411	(135,411)	
16.	Amounts withheld or retained by company for account of others (Line 14)			
17.	Provision for reinsurance (Line 16)			
18.	Other liabilities	1,786,276		1,786,276
19.	Total liabilities excluding protected cell business (Line 26)	70,678,627	160,645,842	231,324,469
20.	Protected cell liabilities (Line 27)			
21.	Surplus as regards policyholders (Line 37)	280,428,284	XXX	280,428,284
22.	Totals (Line 38)	351,106,911	160,645,842	511,752,753

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

If yes, give full explanation: Ohio Mutual Insurance Company and its wholly owned subsidiaries, United Ohio Insurance Company and Casco Indemnity Company, entered into a pooling agreement whereby all underwriting results are pooled and then split 27% to Ohio Mutual, 65% to United Ohio, and 8% to Casco Indemnity.

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

	Total		Group Accident and Health		Credit Accident and Health (Group and Individual)		Collectively Renewable		Other Individual Contracts									
									Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other	
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
PART 1. - ANALYSIS OF UNDERWRITING OPERATIONS																		
1. Premiums written	674	XXX		XXX		XXX		XXX	674	XXX		XXX		XXX		XXX		XXX
2. Premiums earned	795	XXX		XXX		XXX		XXX	795	XXX		XXX		XXX		XXX		XXX
3. Incurred claims																		
4. Cost containment expenses																		
5. Incurred claims and cost containment expenses (Lines 3 and 4)																		
6. Increase in contract reserves																		
7. Commissions (a)	110	13.8							110	13.8								
8. Other general insurance expenses	94	11.8							94	11.8								
9. Taxes, licenses and fees																		
10. Total other expenses incurred	204	25.7							204	25.7								
11. Aggregate write-ins for deductions																		
12. Gain from underwriting before dividends or refunds	591	74.3							591	74.3								
13. Dividends or refunds																		
14. Gain from underwriting after dividends or refunds	591	74.3							591	74.3								
DETAILS OF WRITE-INS																		
1101.																		
1102.																		
1103.																		
1198. Summary of remaining write-ins for Line 11 from overflow page																		
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)																		

(a) Includes $ ..... reported as "Contract, membership and other fees retained by agents."

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

	1	2	3	4	Other Individual Contracts				
			Credit Accident and Health (Group and Individual)		5	6	7	8	9
	Total	Group Accident and Health		Collectively Renewable	Non-Cancelable	Guaranteed Renewable	Non-Renewable for Stated Reasons Only	Other Accident Only	All Other
PART 2. - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums	232				232				
2. Advance premiums									
3. Reserve for rate credits									
4. Total premium reserves, current year	232				232				
5. Total premium reserves, prior year	353				353				
6. Increase in total premium reserves	(121)				(121)				
B. Contract Reserves:									
1. Additional reserves (a)									
2. Reserve for future contingent benefits									
3. Total contract reserves, current year									
4. Total contract reserves, prior year.									
5. Increase in contract reserves									
C. Claim Reserves and Liabilities:									
1. Total current year									
2. Total prior year									
3. Increase									

PART 3. - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES									
1. Claims paid during the year:									
1.1 On claims incurred prior to current year									
1.2 On claims incurred during current year									
2. Claim reserves and liabilities, December 31, current year:									
2.1 On claims incurred prior to current year									
2.2 On claims incurred during current year									
3. Test:									
3.1 Line 1.1 and 2.1									
3.2 Claim reserves and liabilities, December 31, prior year									
3.3 Line 3.1 minus Line 3.2									

NONE

PART 4. - REINSURANCE									
A. Reinsurance Assumed:									
1. Premiums written	2,496				2,496				
2. Premiums earned									
3. Incurred claims									
4. Commissions									
B. Reinsurance Ceded:									
1. Premiums written	1,822				1,822				
2. Premiums earned									
3. Incurred claims									
4. Commissions									

(a) Includes $ ..... premium deficiency reserve.

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred Claims				
2. Beginning claim reserves and liabilities				
3. Ending claim reserves and liabilities				
4. Claims paid				
B. Assumed Reinsurance:				
5. Incurred Claims				
6. Beginning claim reserves and liabilities				
7. Ending claim reserves and liabilities				
8. Claims paid				
C. Ceded Reinsurance:				
9. Incurred Claims				
10. Beginning claim reserves and liabilities				
11. Ending claim reserves and liabilities				
12. Claims paid				
D. Net:				
13. Incurred Claims				
14. Beginning claim reserves and liabilities				
15. Ending claim reserves and liabilities				
16. Claims paid				
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred claims and cost containment expenses				
18. Beginning reserves and liabilities				
19. Ending reserves and liabilities				
20. Paid claims and cost containment expenses				

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
				Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded	10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
1. Prior	XXX	XXX	XXX							1		XXX
2. 2010	11,733	713	11,020	6,050	93	167		591		73	6,715	2,051
3. 2011	12,368	998	11,370	10,733	2,153	249	76	907		49	9,660	1,714
4. 2012	13,221	1,667	11,554	13,627	6,617	560	313	1,138		59	8,395	1,796
5. 2013	14,164	1,243	12,921	8,383	348	157	1	964		124	9,155	1,100
6. 2014	15,125	1,489	13,636	6,152	38	114		741		185	6,969	787
7. 2015	15,575	1,334	14,241	5,409	48	152		595		112	6,108	725
8. 2016	15,883	1,362	14,521	5,750	281	159	1	680		127	6,307	685
9. 2017	16,326	1,372	14,954	8,043	544	188	3	784		93	8,468	864
10. 2018	17,458	1,421	16,037	6,374	42	170		679		94	7,181	762
11. 2019	19,049	1,311	17,738	7,673	125	130	1	683		46	8,360	938
12. Totals	XXX	XXX	XXX	78,194	10,289	2,046	395	7,762		963	77,318	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded	Salvage and Subrog-ation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstand-ing Direct and Assumed
1. Prior	14											14	1
2. 2010	4		2									6	1
3. 2011	1		1									2	
4. 2012	30		15				2					47	1
5. 2013	8		4									12	1
6. 2014	2		5									7	1
7. 2015	99	2	48	2			5					148	2
8. 2016	21	1	8	1			8		1			36	1
9. 2017	86	3	71	3			30		2			183	5
10. 2018	296	1	137	8			50		24			498	10
11. 2019	1,311	65	799	66			109		184			2,272	85
12. Totals	1,872	72	1,090	80			204		211			3,225	108

	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	14	
2. 2010	6,814	93	6,721	58.1	13.0	61.0			27.0	6	
3. 2011	11,891	2,229	9,662	96.1	223.3	85.0			27.0	2	
4. 2012	15,372	6,930	8,442	116.3	415.7	73.1			27.0	45	2
5. 2013	9,516	349	9,167	67.2	28.1	70.9			27.0	12	
6. 2014	7,014	38	6,976	46.4	2.6	51.2			27.0	7	
7. 2015	6,308	52	6,256	40.5	3.9	43.9			27.0	143	5
8. 2016	6,627	284	6,343	41.7	20.9	43.7			27.0	27	9
9. 2017	9,204	553	8,651	56.4	40.3	57.9			27.0	151	32
10. 2018	7,730	51	7,679	44.3	3.6	47.9			27.0	424	74
11. 2019	10,889	257	10,632	57.2	19.6	59.9			27.0	1,979	293
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	2,810	415

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
				Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
	1	2	3	4	5	6	7	8	9	10	11	
	Direct and Assumed	Ceded	Net (1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
1. Prior	XXX	XXX	XXX	(5)						9	(5)	XXX
2. 2010	13,406	523	12,883	8,683	604	520	56	770	12	409	9,301	2,490
3. 2011	12,499	159	12,340	7,170	28	455		556		297	8,153	1,364
4. 2012	11,219	104	11,115	7,064	197	410	12	517		335	7,782	1,044
5. 2013	10,707	76	10,631	6,438	18	263		502		213	7,185	1,024
6. 2014	11,135	54	11,081	7,268		290		607		239	8,165	993
7. 2015	11,569	64	11,505	7,464	39	272		849		332	8,546	970
8. 2016	12,347	65	12,282	7,846	6	229		877		237	8,946	970
9. 2017	13,670	86	13,584	7,767	15	122		858		287	8,732	1,010
10. 2018	15,657	74	15,583	7,160		82		813		218	8,055	1,203
11. 2019	17,357	69	17,288	4,690		38		596		82	5,324	1,212
12. Totals	XXX	XXX	XXX	71,545	907	2,681	68	6,945	12	2,658	80,184	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrog-ation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstand-ing Direct and Assumed
1. Prior													
2. 2010	7	1	3	1								8	
3. 2011	7		4				1					12	
4. 2012	3		2				1					6	
5. 2013	8		9				3		2			22	1
6. 2014	110		61	4			13		6			186	3
7. 2015	101		56	5			23		8			183	5
8. 2016	312		115	8			46		33			498	11
9. 2017	613		591	6			99		63			1,360	31
10. 2018	1,685		1,338	41			292		169			3,443	105
11. 2019	3,904		2,708	76			377		613			7,526	412
12. Totals	6,750	1	4,887	141			855		894			13,244	568

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Inter-Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2010	9,983	674	9,309	74.5	128.9	72.3			27.0	8	
3. 2011	8,193	28	8,165	65.5	17.6	66.2			27.0	11	1
4. 2012	7,997	209	7,788	71.3	201.0	70.1			27.0	5	1
5. 2013	7,225	18	7,207	67.5	23.7	67.8			27.0	17	5
6. 2014	8,355	4	8,351	75.0	7.4	75.4			27.0	167	19
7. 2015	8,773	44	8,729	75.8	68.8	75.9			27.0	152	31
8. 2016	9,458	14	9,444	76.6	21.5	76.9			27.0	419	79
9. 2017	10,113	21	10,092	74.0	24.4	74.3			27.0	1,198	162
10. 2018	11,539	41	11,498	73.7	55.4	73.8			27.0	2,982	461
11. 2019	12,926	76	12,850	74.5	110.1	74.3			27.0	6,536	990
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	11,495	1,749

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
				Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			
	1	2	3	4	5	6	7	8	9	10	11	Number of Claims Reported Direct and Assumed
	Direct and Assumed	Ceded	Net (1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	
1. Prior	XXX	XXX	XXX									XXX
2. 2010	2,655	216	2,439	1,556	143	110	2	136		13	1,657	256
3. 2011	2,919	184	2,735	954		124		118		18	1,196	176
4. 2012	3,310	196	3,114	1,679	130	127	8	174		18	1,842	179
5. 2013	3,781	206	3,575	2,357	179	307	18	245		26	2,712	188
6. 2014	4,295	229	4,066	3,558	339	343	11	343		26	3,894	230
7. 2015	4,420	256	4,164	2,735	418	168	7	251		44	2,729	255
8. 2016	4,586	293	4,293	2,247	159	142	5	244		11	2,469	231
9. 2017	4,779	352	4,427	1,810	4	90		258		54	2,154	240
10. 2018	4,986	198	4,788	1,288		39		233		19	1,560	234
11. 2019	5,177	112	5,065	982		13		148		13	1,143	211
12. Totals	XXX	XXX	XXX	19,166	1,372	1,463	51	2,150		242	21,356	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrog-ation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstand-ing Direct and Assumed
1. Prior													
2. 2010													
3. 2011													
4. 2012													
5. 2013	13		7				4		28			52	
6. 2014	38		33	5			55		11			132	1
7. 2015	207	1	97	1			43		9			354	2
8. 2016	413	27	212	9			89		6			684	4
9. 2017	287		296	13			118		29			717	6
10. 2018	360		621	31			167		61			1,178	14
11. 2019	1,261	100	1,509	241			174		264			2,867	49
12. Totals	2,579	128	2,775	300			650		408			5,984	76

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Inter-Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2010	1,802	145	1,657	67.9	67.1	67.9			27.0		
3. 2011	1,196		1,196	41.0		43.7			27.0		
4. 2012	1,980	138	1,842	59.8	70.4	59.2			27.0		
5. 2013	2,961	197	2,764	78.3	95.6	77.3			27.0	20	32
6. 2014	4,381	355	4,026	102.0	155.0	99.0			27.0	66	66
7. 2015	3,510	427	3,083	79.4	166.8	74.0			27.0	302	52
8. 2016	3,353	200	3,153	73.1	68.3	73.4			27.0	589	95
9. 2017	2,888	17	2,871	60.4	4.8	64.9			27.0	570	147
10. 2018	2,769	31	2,738	55.5	15.7	57.2			27.0	950	228
11. 2019	4,351	341	4,010	84.0	304.5	79.2			27.0	2,429	438
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	4,926	1,058

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
				Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	
	1	2	3	4	5	6	7	8	9			
	Direct and Assumed	Ceded	Net (1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
1. Prior	XXX	XXX	XXX									XXX
2. 2010												
3. 2011												
4. 2012												
5. 2013												
6. 2014												
7. 2015												
8. 2016												
9. 2017												
10. 2018												
11. 2019												
12. Totals	XXX	XXX	XXX									XXX

NONE

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrog-ation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstand-ing Direct and Assumed
1. Prior													
2. 2010													
3. 2011													
4. 2012													
5. 2013													
6. 2014													
7. 2015													
8. 2016													
9. 2017													
10. 2018													
11. 2019													
12. Totals													

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	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Inter-Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2010											
3. 2011											
4. 2012											
5. 2013											
6. 2014											
7. 2015											
8. 2016											
9. 2017											
10. 2018											
11. 2019											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

NONE

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
				Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
	1	2	3	4	5	6	7	8	9	10	11	
	Direct and Assumed	Ceded	Net (1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
1. Prior	XXX	XXX	XXX									XXX
2. 2010	3,962	514	3,448	2,002	75	309	2	189		19	2,423	561
3. 2011	4,298	553	3,745	3,043	721	287	24	297		51	2,882	326
4. 2012	4,812	637	4,175	2,683	670	210	27	306		39	2,502	334
5. 2013	5,720	713	5,007	3,716	662	581	31	415		33	4,019	296
6. 2014	6,675	863	5,812	3,382	261	603	19	404		33	4,109	316
7. 2015	6,939	863	6,076	2,605	186	651	17	281		47	3,334	300
8. 2016	7,318	898	6,420	2,653	144	395		321		33	3,225	280
9. 2017	7,563	915	6,648	2,469	185	250	1	281		63	2,814	260
10. 2018	7,729	748	6,981	1,969	66	198	2	267		22	2,366	233
11. 2019	8,180	706	7,474	1,924	49	77	1	201		9	2,152	209
12. Totals	XXX	XXX	XXX	26,446	3,019	3,561	124	2,962		349	29,826	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrog-ation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstand-ing Direct and Assumed
1. Prior													
2. 2010	14		7				5					26	1
3. 2011													
4. 2012	5		3				1					9	
5. 2013	94		47	10			39		3			173	1
6. 2014	150	1	59	19			75		9			273	4
7. 2015	133		117	23			152		8			387	6
8. 2016	292		155	49			214		8			620	14
9. 2017	405		264	30			325		7			971	15
10. 2018	413	7	441	115			556		40			1,328	19
11. 2019	822	7	1,036	143			579		244			2,531	41
12. Totals	2,328	15	2,129	389			1,946		319			6,318	101

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Inter-Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2010	2,526	77	2,449	63.8	15.0	71.0			27.0	21	5
3. 2011	3,627	745	2,882	84.4	134.7	77.0			27.0		
4. 2012	3,208	697	2,511	66.7	109.4	60.1			27.0	8	1
5. 2013	4,895	703	4,192	85.6	98.6	83.7			27.0	131	42
6. 2014	4,682	300	4,382	70.1	34.8	75.4			27.0	189	84
7. 2015	3,947	226	3,721	56.9	26.2	61.2			27.0	227	160
8. 2016	4,038	193	3,845	55.2	21.5	59.9			27.0	398	222
9. 2017	4,001	216	3,785	52.9	23.6	56.9			27.0	639	332
10. 2018	3,884	190	3,694	50.3	25.4	52.9			27.0	732	596
11. 2019	4,883	200	4,683	59.7	28.3	62.7			27.0	1,708	823
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	4,053	2,265

Schedule P - Part 1F - Section 1 - Medical Professional Liability - Occurrence

N O N E

Schedule P - Part 1F - Section 2 - Medical Professional Liability - Claims-Made

N O N E

Schedule P - Part 1G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

N O N E

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
				Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	
	1	2	3	4	5	6	7	8	9			
	Direct and Assumed	Ceded	Net (1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
1. Prior	XXX	XXX	XXX									XXX
2. 2010	1,528	594	934	375	180	56	2	47		4	296	91
3. 2011	1,626	660	966	363	55	77	13	37		2	409	47
4. 2012	1,765	761	1,004	173		22		27		2	222	52
5. 2013	1,888	823	1,065	1,026	541	106		89		1	680	48
6. 2014	1,952	893	1,059	875	622	76	8	114		1	435	44
7. 2015	1,987	890	1,097	448	243	27		38		1	270	33
8. 2016	1,849	901	948	527	243	31		39			354	32
9. 2017	1,689	935	754	374	207	14		60			241	18
10. 2018	1,753	1,002	751	449	377	17	3	45		1	131	15
11. 2019	1,858	1,112	746	17		2		36			55	10
12. Totals	XXX	XXX	XXX	4,627	2,468	428	26	532		12	3,093	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrog-ation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstand-ing Direct and Assumed
1. Prior													
2. 2010													
3. 2011													
4. 2012	51		25				16					92	
5. 2013													
6. 2014	10		5				2					17	1
7. 2015	3		1				3					7	1
8. 2016	4		48	1			8		7			66	1
9. 2017	30		50	1			26		6			111	1
10. 2018	23	6	827	691			87		13			253	2
11. 2019	20	3	338	170			17		28			230	4
12. Totals	141	9	1,294	863			159		54			776	10

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Inter-Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2010	478	182	296	31.3	30.6	31.7			27.0		
3. 2011	477	68	409	29.3	10.3	42.3			27.0		
4. 2012	314		314	17.8		31.3			27.0	76	16
5. 2013	1,221	541	680	64.7	65.7	63.8			27.0		
6. 2014	1,082	630	452	55.4	70.5	42.7			27.0	15	2
7. 2015	520	243	277	26.2	27.3	25.3			27.0	4	3
8. 2016	664	244	420	35.9	27.1	44.3			27.0	51	15
9. 2017	560	208	352	33.2	22.2	46.7			27.0	79	32
10. 2018	1,461	1,077	384	83.3	107.5	51.1			27.0	153	100
11. 2019	458	173	285	24.7	15.6	38.2			27.0	185	45
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	563	213

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
				Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	
	1	2	3	4	5	6	7	8	9			
	Direct and Assumed	Ceded	Net (1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
1. Prior	XXX	XXX	XXX									XXX
2. 2010												
3. 2011												
4. 2012												
5. 2013												
6. 2014												
7. 2015												
8. 2016												
9. 2017												
10. 2018												
11. 2019												
12. Totals	XXX	XXX	XXX									XXX

NONE

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrog-ation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstand-ing Direct and Assumed
1. Prior													
2. 2010													
3. 2011													
4. 2012													
5. 2013													
6. 2014													
7. 2015													
8. 2016													
9. 2017													
10. 2018													
11. 2019													
12. Totals													

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	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Inter-Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2010											
3. 2011											
4. 2012											
5. 2013											
6. 2014											
7. 2015											
8. 2016											
9. 2017											
10. 2018											
11. 2019											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

NONE

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
				Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	
	1 Direct and Assumed	2 Ceded	3 Net (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)	Number of Claims Reported Direct and Assumed
1. Prior	XXX	XXX	XXX	2		4				1	6	XXX
2. 2018	5,533	325	5,208	1,517		62		160		31	1,739	XXX
3. 2019	5,466	250	5,216	1,902		33		167		34	2,102	XXX
4. Totals	XXX	XXX	XXX	3,421		99		327		66	3,847	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded	Salvage and Subrog-ation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstand-ing Direct and Assumed
1. Prior	1		2				1					4	
2. 2018	15		7				3		3			28	
3. 2019	234		158	4			18		28			434	16
4. Totals	250		167	4			22		31			466	16

	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	3	1
2. 2018	1,767		1,767	31.9		33.9			27.0	22	6
3. 2019	2,540	4	2,536	46.5	1.6	48.6			27.0	388	46
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	413	53

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
				Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			
	1	2	3	4	5	6	7	8	9	10	11	Number of Claims Reported Direct and Assumed
	Direct and Assumed	Ceded	Net (1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	
1. Prior	XXX	XXX	XXX	(32)	1	13				80	(20)	XXX
2. 2018	14,381	280	14,101	9,000		84		1,054		1,556	10,138	3
3. 2019	16,283	241	16,042	9,802		79		950		1,034	10,831	218
4. Totals	XXX	XXX	XXX	18,770	1	176		2,004		2,670	20,949	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			Number of Claims Outstanding Direct and Assumed
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	
1. Prior			6	2			3					7	
2. 2018	9		23	6			4		8			38	3
3. 2019	742	3	565	9			28		97			1,420	218
4. Totals	751	3	594	17			35		105			1,465	221

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter-Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX	4	3
2. 2018	10,182	6	10,176	70.8	2.1	72.2			27.0	26	12
3. 2019	12,263	12	12,251	75.3	5.0	76.4			27.0	1,295	125
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	1,325	140

SCHEDULE P - PART 1K - FIDELITY/SURETY

($000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
				Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	
	1	2	3	4	5	6	7	8	9			
	Direct and Assumed	Ceded	Net (1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
1. Prior	XXX	XXX	XXX									XXX
2. 2018												XXX
3. 2019												XXX
4. Totals	XXX	XXX	XXX									XXX

NONE

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrog-ation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstand-ing Direct and Assumed
1. Prior													
2. 2018													
3. 2019													
4. Totals													

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	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Inter-Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX			XXX			XXX		
2. 2018											
3. 2019											
4. Totals	XXX	XXX	XXX			XXX			XXX		

NONE

SCHEDULE P - PART 1L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

($000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
				Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	
	1	2	3	4	5	6	7	8	9			
	Direct and Assumed	Ceded	Net (1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
1. Prior	XXX	XXX	XXX									XXX
2. 2018	1		1									XXX
3. 2019	1		1									XXX
4. Totals	XXX	XXX	XXX									XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrog-ation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstand-ing Direct and Assumed
1. Prior													
2. 2018													
3. 2019													
4. Totals													

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Inter-Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2018									27.0		
3. 2019									27.0		
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

Schedule P - Part 1M - International

N O N E

Schedule P - Part 1N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 1O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

SCHEDULE P - PART 1R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

($000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
				Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	
	1	2	3	4	5	6	7	8	9			
	Direct and Assumed	Ceded	Net (1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	Number of Claims Reported Direct and Assumed
1. Prior	XXX	XXX	XXX									XXX
2. 2010	60	1	59	3		3					6	48
3. 2011	51		51	8		4		2			14	3
4. 2012	49		49	6				1			7	1
5. 2013	52		52	8		5		2			15	2
6. 2014	57		57	1		3					4	2
7. 2015	57		57									1
8. 2016	52		52	2		1					3	1
9. 2017	54		54			1					1	
10. 2018	54		54	4		1					5	2
11. 2019	50		50									
12. Totals	XXX	XXX	XXX	32		18		5			55	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrog-ation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstand-ing Direct and Assumed
1. Prior													
2. 2010													
3. 2011													
4. 2012													
5. 2013													
6. 2014													
7. 2015													
8. 2016									1			1	
9. 2017	21		11				1					33	
10. 2018			2				1					3	
11. 2019			1						2			3	
12. Totals	21		14				2		3			40	

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Inter-Company Pooling Participation Percentage	Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2010	6		6	10.0		10.2			27.0		
3. 2011	14		14	27.5		27.5			27.0		
4. 2012	7		7	14.3		14.3			27.0		
5. 2013	15		15	28.8		28.8			27.0		
6. 2014	4		4	7.0		7.0			27.0		
7. 2015									27.0		
8. 2016	4		4	7.7		7.7			27.0		1
9. 2017	34		34	63.0		63.0			27.0	32	1
10. 2018	8		8	14.8		14.8			27.0	2	1
11. 2019	3		3	6.0		6.0			27.0	1	2
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	35	5

Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made

N O N E

Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 1T - Warranty

N O N E

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 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019	11 One Year	12 Two Year
1. Prior	537	472	484	375	376	376	388	384	376	376		(8)
2. 2010	6,790	6,323	6,192	6,160	6,128	6,124	6,124	6,130	6,130	6,130		
3. 2011	XXX	9,451	8,998	8,940	8,759	8,759	8,755	8,754	8,755	8,755		1
4. 2012	XXX	XXX	7,589	7,372	7,334	7,359	7,332	7,328	7,308	7,304	(4)	(24)
5. 2013	XXX	XXX	XXX	8,793	8,316	8,198	8,193	8,195	8,197	8,203	6	8
6. 2014	XXX	XXX	XXX	XXX	7,037	6,461	6,303	6,247	6,230	6,235	5	(12)
7. 2015	XXX	XXX	XXX	XXX	XXX	6,028	5,704	5,600	5,674	5,661	(13)	61
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	6,458	5,861	5,830	5,662	(168)	(199)
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,308	7,922	7,865	(57)	(443)
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,251	6,976	(275)	XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,765	XXX	XXX
										12. Totals	(506)	(616)

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

1. Prior	4,738	4,087	3,927	3,712	3,640	3,577	3,511	3,504	3,500	3,490	(10)	(14)
2. 2010	9,356	9,285	9,090	8,951	8,714	8,562	8,572	8,550	8,549	8,551	2	1
3. 2011	XXX	8,774	8,313	8,042	7,779	7,742	7,697	7,616	7,621	7,609	(12)	(7)
4. 2012	XXX	XXX	8,379	8,017	7,594	7,515	7,330	7,310	7,291	7,271	(20)	(39)
5. 2013	XXX	XXX	XXX	7,358	7,417	7,220	6,842	6,861	6,739	6,703	(36)	(158)
6. 2014	XXX	XXX	XXX	XXX	8,102	8,017	7,992	7,765	7,710	7,738	28	(27)
7. 2015	XXX	XXX	XXX	XXX	XXX	9,156	8,867	8,016	7,854	7,872	18	(144)
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	9,503	8,922	8,560	8,534	(26)	(388)
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,818	9,251	9,171	(80)	(647)
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,533	10,516	(1,017)	XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,641	XXX	XXX
										12. Totals	(1,153)	(1,423)

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

1. Prior	1,196	696	672	626	631	598	598	598	598	598		
2. 2010	2,313	1,992	1,818	1,663	1,549	1,549	1,781	1,521	1,521	1,521		
3. 2011	XXX	1,866	1,485	1,234	1,126	1,071	1,090	1,084	1,078	1,078		(6)
4. 2012	XXX	XXX	1,832	1,868	1,886	1,789	1,666	1,711	1,670	1,668	(2)	(43)
5. 2013	XXX	XXX	XXX	1,999	1,814	1,823	2,326	2,222	2,240	2,491	251	269
6. 2014	XXX	XXX	XXX	XXX	3,317	3,503	3,485	3,614	3,560	3,672	112	58
7. 2015	XXX	XXX	XXX	XXX	XXX	2,813	2,849	2,716	2,606	2,823	217	107
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	2,448	2,592	2,876	2,903	27	311
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,793	2,729	2,584	(145)	(209)
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,721	2,444	(277)	XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,598	XXX	XXX
										12. Totals	183	487

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

1. Prior												
2. 2010												
3. 2011	XXX											
4. 2012	XXX	XXX										
5. 2013	XXX	XXX	XXX									
6. 2014	XXX	XXX	XXX	XXX								
7. 2015	XXX	XXX	XXX	XXX								
8. 2016	XXX	XXX	XXX	XXX	XXX							
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals		

NONE

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior	1,038	1,023	730	692	683	776	867	891	848	848		(43)
2. 2010	2,443	2,407	2,409	2,194	2,236	2,299	2,312	2,246	2,253	2,260	7	14
3. 2011	XXX	2,654	2,771	2,675	2,691	2,629	2,645	2,637	2,585	2,585		(52)
4. 2012	XXX	XXX	2,910	2,402	2,237	2,255	2,318	2,258	2,261	2,205	(56)	(53)
5. 2013	XXX	XXX	XXX	3,773	3,942	3,959	3,620	3,609	3,811	3,774	(37)	165
6. 2014	XXX	XXX	XXX	XXX	3,240	3,261	3,697	3,623	3,945	3,969	24	346
7. 2015	XXX	XXX	XXX	XXX	XXX	2,986	3,021	3,315	3,622	3,432	(190)	117
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	3,322	3,370	3,325	3,516	191	146
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,617	3,273	3,497	224	(120)
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,254	3,387	133	XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,238	XXX	XXX
										12. Totals	296	520

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 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019	11 One Year	12 Two Year
1. Prior												
2. 2010												
3. 2011	XXX											
4. 2012	XXX	XXX										
5. 2013	XXX	XXX	XXX									
6. 2014	XXX	XXX	XXX	XXX								
7. 2015	XXX	XXX	XXX	XXX	XXX							
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals		

NONE

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

1. Prior												
2. 2010												
3. 2011	XXX											
4. 2012	XXX	XXX										
5. 2013	XXX	XXX	XXX									
6. 2014	XXX	XXX	XXX	XXX								
7. 2015	XXX	XXX	XXX	XXX	XXX							
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals		

NONE

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

1. Prior												
2. 2010												
3. 2011	XXX											
4. 2012	XXX	XXX										
5. 2013	XXX	XXX	XXX									
6. 2014	XXX	XXX	XXX	XXX								
7. 2015	XXX	XXX	XXX	XXX	XXX							
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals		

NONE

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

1. Prior	456	346	290	280	342	326	325	318	318	314	(4)	(4)
2. 2010	237	387	343	385	255	247	249	249	249	249		
3. 2011	XXX	295	486	437	458	385	379	372	372	372		
4. 2012	XXX	XXX	279	364	263	284	292	294	288	287	(1)	(7)
5. 2013	XXX	XXX	XXX	495	510	655	703	734	610	591	(19)	(143)
6. 2014	XXX	XXX	XXX	XXX	504	560	392	336	317	338	21	2
7. 2015	XXX	XXX	XXX	XXX	XXX	417	374	256	319	239	(80)	(17)
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	576	506	463	374	(89)	(132)
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	475	351	286	(65)	(189)
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	315	326	11	XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	221	XXX	XXX
										12. Totals	(226)	(490)

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

1. Prior												
2. 2010												
3. 2011	XXX											
4. 2012	XXX	XXX										
5. 2013	XXX	XXX	XXX									
6. 2014	XXX	XXX	XXX	XXX								
7. 2015	XXX	XXX	XXX	XXX	XXX							
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals		

NONE

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 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019	11 One Year	12 Two Year
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	437	269	266	(3)	(171)
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,752	1,604	(148)	XXX
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,341	XXX	XXX
										4. Totals	(151)	(171)

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	883	433	355	(78)	(528)
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,808	9,114	(694)	XXX
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,204	XXX	XXX
										4. Totals	(772)	(528)

SCHEDULE P - PART 2K - FIDELITY/SURETY

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										4. Totals		

NONE

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

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										4. Totals		

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior												
2. 2010												
3. 2011	XXX											
4. 2012	XXX	XXX										
5. 2013	XXX	XXX	XXX									
6. 2014	XXX	XXX	XXX	XXX								
7. 2015	XXX	XXX	XXX	XXX	XXX							
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals		

NONE

Schedule P - Part 2N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 2O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 2P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

SCHEDULE P - PART 2R - SECTION 1 - PRODUCTS 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 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019	11 One Year	12 Two Year
1. Prior	59	30	24	22	22	22	22	22	22	22		
2. 2010	12	5	5	6	6	6	6	6	6	6		
3. 2011	XXX	38	22	19	12	12	12	12	12	12		
4. 2012	XXX	XXX	13	12	6	6	6	6	6	6		
5. 2013	XXX	XXX	XXX	19	20	14	13	13	13	13		
6. 2014	XXX	XXX	XXX	XXX	16	29	4	4	4	4		
7. 2015	XXX	XXX	XXX	XXX	XXX	1						
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	1	2	2	3	1	1
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX		1	34	33	34
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	8		XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	XXX	XXX
										12. Totals	34	35

SCHEDULE P - PART 2R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

1. Prior												
2. 2010												
3. 2011	XXX											
4. 2012	XXX	XXX										
5. 2013	XXX	XXX	XXX									
6. 2014	XXX	XXX	XXX	XXX								
7. 2015	XXX	XXX	XXX	XXX	XXX							
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										12. Totals		

NONE

SCHEDULE P - PART 2S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										4. Totals		

NONE

SCHEDULE P - PART 2T - WARRANTY

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
										4. Totals		

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) 1 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019	11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
1. Prior	000	259	296	333	344	344	360	362	362	362	36	
2. 2010	5,076	5,972	6,086	6,120	6,124	6,124	6,124	6,124	6,124	6,124	1,007	1,043
3. 2011	XXX	7,446	8,515	8,701	8,735	8,743	8,751	8,752	8,753	8,753	1,507	207
4. 2012	XXX	XXX	5,927	6,921	7,127	7,181	7,242	7,244	7,257	7,257	1,614	181
5. 2013	XXX	XXX	XXX	6,427	8,001	8,079	8,174	8,181	8,183	8,191	925	174
6. 2014	XXX	XXX	XXX	XXX	5,413	6,196	6,217	6,229	6,227	6,228	643	143
7. 2015	XXX	XXX	XXX	XXX	XXX	4,257	5,315	5,445	5,508	5,513	583	140
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	4,807	5,476	5,542	5,627	559	125
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,135	7,540	7,684	715	144
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,242	6,502	620	132
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,677	691	162

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

1. Prior	000	1,982	2,970	3,214	3,437	3,472	3,503	3,501	3,495	3,490	3,589	
2. 2010	3,905	6,492	7,354	8,052	8,363	8,454	8,526	8,544	8,542	8,543	1,464	1,026
3. 2011	XXX	3,748	5,673	6,580	7,154	7,495	7,561	7,580	7,598	7,597	1,126	238
4. 2012	XXX	XXX	3,065	5,099	6,322	6,965	7,119	7,235	7,265	7,265	889	155
5. 2013	XXX	XXX	XXX	2,653	4,904	5,907	6,451	6,572	6,640	6,683	888	135
6. 2014	XXX	XXX	XXX	XXX	3,195	5,336	6,652	7,274	7,441	7,558	857	133
7. 2015	XXX	XXX	XXX	XXX	XXX	3,602	5,757	6,955	7,497	7,697	820	145
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	3,580	6,207	7,330	8,069	798	161
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,926	6,415	7,874	815	164
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,459	7,242	920	178
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,728	691	109

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

1. Prior	000	213	428	537	573	598	598	598	598	598	70	
2. 2010	445	848	1,262	1,460	1,471	1,477	1,516	1,521	1,521	1,521	144	112
3. 2011	XXX	447	659	856	979	1,017	1,057	1,078	1,078	1,078	150	26
4. 2012	XXX	XXX	524	836	1,306	1,400	1,542	1,639	1,668	1,668	149	30
5. 2013	XXX	XXX	XXX	606	1,110	1,288	1,564	2,046	2,092	2,467	163	25
6. 2014	XXX	XXX	XXX	XXX	938	1,831	2,433	3,017	3,378	3,551	207	22
7. 2015	XXX	XXX	XXX	XXX	XXX	881	1,335	1,761	2,337	2,478	224	29
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	771	1,447	2,104	2,225	199	28
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	832	1,489	1,896	202	32
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	807	1,327	190	30
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	995	145	17

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

1. Prior	000											
2. 2010												
3. 2011	XXX											
4. 2012	XXX	XXX										
5. 2013	XXX	XXX	XXX									
6. 2014	XXX	XXX	XXX	XXX								
7. 2015	XXX	XXX	XXX	XXX								
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior	000	441	518	585	624	719	845	891	848	848	40	
2. 2010	1,034	1,561	1,949	2,032	2,086	2,162	2,176	2,227	2,231	2,234	279	281
3. 2011	XXX	1,465	1,990	2,191	2,391	2,494	2,543	2,585	2,585	2,585	266	60
4. 2012	XXX	XXX	1,460	1,960	2,028	2,143	2,171	2,184	2,194	2,196	276	58
5. 2013	XXX	XXX	XXX	1,563	2,392	2,726	3,268	3,419	3,506	3,604	239	56
6. 2014	XXX	XXX	XXX	XXX	1,694	2,363	2,685	3,105	3,450	3,705	251	61
7. 2015	XXX	XXX	XXX	XXX	XXX	1,274	1,817	2,141	2,752	3,053	241	53
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	1,674	2,371	2,595	2,904	215	51
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,634	2,311	2,533	196	49
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,527	2,099	177	37
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,951	144	24

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 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019		
1. Prior	000											
2. 2010												
3. 2011	XXX											
4. 2012	XXX	XXX										
5. 2013	XXX	XXX	XXX									
6. 2014	XXX	XXX	XXX	XXX								
7. 2015	XXX	XXX	XXX	XXX	XXX							
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

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

1. Prior	000											
2. 2010												
3. 2011	XXX											
4. 2012	XXX	XXX										
5. 2013	XXX	XXX	XXX									
6. 2014	XXX	XXX	XXX	XXX								
7. 2015	XXX	XXX	XXX	XXX	XXX							
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

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

1. Prior	000										XXX	XXX
2. 2010											XXX	XXX
3. 2011	XXX										XXX	XXX
4. 2012	XXX	XXX									XXX	XXX
5. 2013	XXX	XXX	XXX								XXX	XXX
6. 2014	XXX	XXX	XXX	XXX							XXX	XXX
7. 2015	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

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

1. Prior	000	116	178	193	206	289	289	314	314	314	15	
2. 2010	58	114	169	202	240	242	249	249	249	249	46	45
3. 2011	XXX	85	124	313	335	372	372	372	372	372	34	13
4. 2012	XXX	XXX	89	163	188	192	194	194	195	195	38	14
5. 2013	XXX	XXX	XXX	68	176	256	320	432	591	591	35	13
6. 2014	XXX	XXX	XXX	XXX	88	166	212	243	303	321	31	12
7. 2015	XXX	XXX	XXX	XXX	XXX	36	109	191	230	232	22	10
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	38	104	282	315	25	6
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	49	148	181	13	4
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27	86	10	3
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19	5	1

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

1. Prior	000											
2. 2010												
3. 2011	XXX											
4. 2012	XXX	XXX										
5. 2013	XXX	XXX	XXX									
6. 2014	XXX	XXX	XXX	XXX								
7. 2015	XXX	XXX	XXX	XXX	XXX							
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

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 COST CONTAINMENT EXPENSES REPORTED AT YEAR END ($000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019		
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	256	262	XXX	XXX
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,332	1,579	XXX	XXX
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,935	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	368	348		
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,580	9,084		
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,881		

SCHEDULE P - PART 3K - FIDELITY/SURETY

NONE

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

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

NONE

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SCHEDULE P - PART 3M - INTERNATIONAL

NONE

1. Prior	000										XXX	XXX
2. 2010											XXX	XXX
3. 2011	XXX										XXX	XXX
4. 2012	XXX	XXX									XXX	XXX
5. 2013	XXX	XXX	XXX								XXX	XXX
6. 2014	XXX	XXX	XXX	XXX							XXX	XXX
7. 2015	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

Schedule P - Part 3N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 3O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

SCHEDULE P - PART 3R - SECTION 1 - PRODUCTS 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 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019		
1. Prior	000	14	22	22	22	22	22	22	22	22	1	
2. 2010	3	3	3	6	6	6	6	6	6	6	22	26
3. 2011	XXX	9	9	12	12	12	12	12	12	12	3	
4. 2012	XXX	XXX	2	6	6	6	6	6	6	6	1	
5. 2013	XXX	XXX	XXX	7	7	13	13	13	13	13	2	
6. 2014	XXX	XXX	XXX	XXX	4	4	4	4	4	4	1	1
7. 2015	XXX	XXX	XXX	XXX	XXX						1	
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX		2	2	3	1	
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX		1	1		
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	5	2	
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

SCHEDULE P - PART 3R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

1. Prior	000											
2. 2010												
3. 2011	XXX											
4. 2012	XXX	XXX										
5. 2013	XXX	XXX	XXX									
6. 2014	XXX	XXX	XXX	XXX								
7. 2015	XXX	XXX	XXX	XXX	XXX							
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

SCHEDULE P - PART 3S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000			XXX	XXX
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

NONE

SCHEDULE P - PART 3T - WARRANTY

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000				
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

NONE

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END ($000 OMITTED)

Years in Which Losses Were Incurred	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	173	131	65	15	11	11	10	8		
2. 2010	1,052	272	83	37	4			2	2	2
3. 2011	XXX	977	285	117	11	4	1	1	1	1
4. 2012	XXX	XXX	777	161	87	57	32	31	18	17
5. 2013	XXX	XXX	XXX	873	228	42	8	5	5	4
6. 2014	XXX	XXX	XXX	XXX	806	155	47	6	1	5
7. 2015	XXX	XXX	XXX	XXX	XXX	600	156	62	64	51
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	770	173	122	15
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	757	166	98
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	775	179
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	842

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

1. Prior	1,684	748	336	174	62	17	3	1		
2. 2010	2,145	1,166	688	419	174	42	11		1	2
3. 2011	XXX	1,996	946	539	231	150	87	9	9	5
4. 2012	XXX	XXX	2,036	973	454	240	113	35	21	3
5. 2013	XXX	XXX	XXX	1,776	1,086	547	119	111	40	12
6. 2014	XXX	XXX	XXX	XXX	1,796	826	496	161	93	70
7. 2015	XXX	XXX	XXX	XXX	XXX	2,034	1,066	278	97	74
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	2,119	1,004	282	153
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,606	1,060	684
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,632	1,589
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,009

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

1. Prior	818	160	77	30	23					
2. 2010	1,161	621	337	185	37	27	224			
3. 2011	XXX	1,143	675	188	101	19	13	6		
4. 2012	XXX	XXX	777	513	342	171	39	31	1	
5. 2013	XXX	XXX	XXX	867	402	189	318	71	45	11
6. 2014	XXX	XXX	XXX	XXX	1,213	753	401	252	59	83
7. 2015	XXX	XXX	XXX	XXX	XXX	1,011	533	339	99	139
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	807	597	575	292
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,118	643	401
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,341	757
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,442

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

1. Prior										
2. 2010										
3. 2011	XXX									
4. 2012	XXX	XXX								
5. 2013	XXX	XXX	XXX							
6. 2014	XXX	XXX	XXX	XXX						
7. 2015	XXX	XXX	XXX	XXX	XXX					
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior	502	342	117	56	26	28	2			
2. 2010	780	492	370	107	90	74	74	7	10	12
3. 2011	XXX	690	556	238	173	80	68	52		
4. 2012	XXX	XXX	1,007	312	115	72	126	48	62	4
5. 2013	XXX	XXX	XXX	1,261	884	653	206	98	132	76
6. 2014	XXX	XXX	XXX	XXX	927	422	421	198	256	115
7. 2015	XXX	XXX	XXX	XXX	XXX	1,076	656	481	448	246
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	1,013	653	403	320
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,283	659	559
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,125	882
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,472

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

BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END ($000 OMITTED)

Years in Which Losses Were Incurred	1	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior										
2. 2010										
3. 2011	XXX									
4. 2012	XXX	XXX								
5. 2013	XXX	XXX	XXX							
6. 2014	XXX	XXX	XXX	XXX						
7. 2015	XXX	XXX	XXX	XXX	XXX					
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior										
2. 2010										
3. 2011	XXX									
4. 2012	XXX	XXX								
5. 2013	XXX	XXX	XXX							
6. 2014	XXX	XXX	XXX	XXX						
7. 2015	XXX	XXX	XXX	XXX	XXX					
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior										
2. 2010										
3. 2011	XXX									
4. 2012	XXX	XXX								
5. 2013	XXX	XXX	XXX							
6. 2014	XXX	XXX	XXX	XXX						
7. 2015	XXX	XXX	XXX	XXX	XXX					
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior	218	95	42	21	50	1				
2. 2010	109	190	110	143	8	5				
3. 2011	XXX	66	146	41	64	12	7			
4. 2012	XXX	XXX	126	159	35	39	46	48	42	41
5. 2013	XXX	XXX	XXX	330	129	174	144	154	16	
6. 2014	XXX	XXX	XXX	XXX	292	299	108	34	4	7
7. 2015	XXX	XXX	XXX	XXX	XXX	282	204	58	86	4
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	411	240	141	55
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	292	157	75
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	249	223
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	185

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

1. Prior										
2. 2010										
3. 2011	XXX									
4. 2012	XXX	XXX								
5. 2013	XXX	XXX	XXX							
6. 2014	XXX	XXX	XXX	XXX						
7. 2015	XXX	XXX	XXX	XXX	XXX					
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	131	11	3
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	157	10
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	172

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	398	35	7
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	520	21
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	584

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2019	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. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4M - INTERNATIONAL

1. Prior										
2. 2010										
3. 2011	XXX									
4. 2012	XXX	XXX								
5. 2013	XXX	XXX	XXX							
6. 2014	XXX	XXX	XXX	XXX						
7. 2015	XXX	XXX	XXX	XXX	XXX					
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

Schedule P - Part 4N - Reinsurance - Nonproportional Assumed Property

N O N E

Schedule P - Part 4O - Reinsurance - Nonproportional Assumed Liability

N O N E

Schedule P - Part 4P - Reinsurance - Nonproportional Assumed Financial Lines

N O N E

SCHEDULE P - PART 4R - SECTION 1 - PRODUCTS 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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	46	9	2							
2. 2010	9	2	2							
3. 2011	XXX	25	11	3						
4. 2012	XXX	XXX	5	6						
5. 2013	XXX	XXX	XXX	8	9	1				
6. 2014	XXX	XXX	XXX	XXX	7	24				
7. 2015	XXX	XXX	XXX	XXX	XXX	1				
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX			12
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	3
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

SCHEDULE P - PART 4R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

1. Prior										
2. 2010										
3. 2011	XXX									
4. 2012	XXX	XXX								
5. 2013	XXX	XXX	XXX							
6. 2014	XXX	XXX	XXX	XXX						
7. 2015	XXX	XXX	XXX	XXX	XXX					
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4T - WARRANTY

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	164	16	11	4	5					
2. 2010	879	993	1,002	1,006	1,007	1,007	1,007	1,007	1,007	1,007
3. 2011	XXX	1,343	1,492	1,500	1,505	1,506	1,507	1,507	1,507	1,507
4. 2012	XXX	XXX	1,460	1,594	1,604	1,608	1,612	1,612	1,613	1,614
5. 2013	XXX	XXX	XXX	769	907	917	923	924	924	925
6. 2014	XXX	XXX	XXX	XXX	539	628	639	641	642	643
7. 2015	XXX	XXX	XXX	XXX	XXX	488	566	579	582	583
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	459	545	554	559
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	604	701	715
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	511	620
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	691

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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	17	6	3	2	1	1	1	1	1	1
2. 2010	80	9	3	1	1			1	1	1
3. 2011	XXX	108	11	4	2	1	1			
4. 2012	XXX	XXX	92	15	9	6	3	3	1	1
5. 2013	XXX	XXX	XXX	114	10	3	2	2	2	1
6. 2014	XXX	XXX	XXX	XXX	73	8	3	2	1	1
7. 2015	XXX	XXX	XXX	XXX	XXX	77	13	4	2	2
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	80	11	6	1
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	88	12	5
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	95	10
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	85

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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	270	6	8	3	4					
2. 2010	1,979	2,042	2,047	2,050	2,051	2,050	2,050	2,051	2,051	2,051
3. 2011	XXX	1,625	1,707	1,710	1,713	1,714	1,715	1,714	1,714	1,714
4. 2012	XXX	XXX	1,706	1,788	1,794	1,795	1,796	1,796	1,795	1,796
5. 2013	XXX	XXX	XXX	1,029	1,089	1,094	1,099	1,100	1,100	1,100
6. 2014	XXX	XXX	XXX	XXX	737	776	784	786	786	787
7. 2015	XXX	XXX	XXX	XXX	XXX	683	715	722	724	725
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	641	678	685	685
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	815	856	864
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	716	762
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	938

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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	400	3,478	57	28	15	6	2	2	1	
2. 2010	725	1,341	1,409	1,444	1,456	1,460	1,462	1,464	1,464	1,464
3. 2011	XXX	754	996	1,076	1,104	1,119	1,124	1,125	1,126	1,126
4. 2012	XXX	XXX	521	792	848	870	882	886	889	889
5. 2013	XXX	XXX	XXX	595	805	853	874	882	885	888
6. 2014	XXX	XXX	XXX	XXX	514	742	813	841	853	857
7. 2015	XXX	XXX	XXX	XXX	XXX	517	721	786	811	820
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	478	720	770	798
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	545	755	815
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	632	920
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	691

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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	151	72	28	15	8	4	1			
2. 2010	420	111	38	12	7	4	2			
3. 2011	XXX	440	105	40	15	6	1	1	1	
4. 2012	XXX	XXX	363	105	35	14	5	2	1	
5. 2013	XXX	XXX	XXX	343	79	27	8	5	2	1
6. 2014	XXX	XXX	XXX	XXX	388	112	33	13	6	3
7. 2015	XXX	XXX	XXX	XXX	XXX	398	117	32	11	5
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	427	95	36	11
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	352	94	31
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	421	105
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	412

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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	520	4,239	17	18	8	2	(1)	1	1	
2. 2010	2,003	2,459	2,468	2,481	2,489	2,490	2,490	2,490	2,490	2,490
3. 2011	XXX	1,353	1,323	1,351	1,356	1,363	1,363	1,364	1,365	1,364
4. 2012	XXX	XXX	966	1,039	1,036	1,039	1,042	1,043	1,045	1,044
5. 2013	XXX	XXX	XXX	1,011	1,007	1,013	1,017	1,022	1,022	1,024
6. 2014	XXX	XXX	XXX	XXX	970	974	975	986	992	993
7. 2015	XXX	XXX	XXX	XXX	XXX	991	968	960	966	970
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	995	964	966	970
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	990	1,001	1,010
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,159	1,203
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,212

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	2	3	4	5	6	7	8	9	10
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	36	62	4	2	1	1				
2. 2010	87	127	137	141	142	143	144	144	144	144
3. 2011	XXX	98	134	142	147	148	150	150	150	150
4. 2012	XXX	XXX	92	128	139	143	146	148	149	149
5. 2013	XXX	XXX	XXX	103	144	151	156	161	162	163
6. 2014	XXX	XXX	XXX	XXX	125	178	191	200	205	207
7. 2015	XXX	XXX	XXX	XXX	XXX	143	193	211	219	224
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	127	178	195	199
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	130	187	202
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	129	190
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	145

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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	16	6	4	2	1					
2. 2010	49	13	5	1	1	1				
3. 2011	XXX	43	12	5	2	1				
4. 2012	XXX	XXX	51	17	7	3	1	1		
5. 2013	XXX	XXX	XXX	48	16	13	8	2	2	
6. 2014	XXX	XXX	XXX	XXX	65	25	14	7	3	1
7. 2015	XXX	XXX	XXX	XXX	XXX	73	31	13	6	2
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	64	20	6	4
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	57	21	6
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	55	14
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	49

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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	50	61	2							
2. 2010	238	250	253	253	255	256	256	256	256	256
3. 2011	XXX	157	171	173	175	175	176	176	176	176
4. 2012	XXX	XXX	161	173	176	176	177	179	179	179
5. 2013	XXX	XXX	XXX	165	183	188	189	188	189	188
6. 2014	XXX	XXX	XXX	XXX	203	222	226	229	230	230
7. 2015	XXX	XXX	XXX	XXX	XXX	228	249	252	254	255
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	207	225	229	231
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	206	238	240
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	202	234
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	211

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

N O N E

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

N O N E

Schedule P-Part 5D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 3

N O N E

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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	81	19	10	3	3	2	2	1		
2. 2010	213	256	267	272	274	277	278	279	279	279
3. 2011	XXX	180	239	249	258	262	265	266	266	266
4. 2012	XXX	XXX	199	255	266	271	274	275	276	276
5. 2013	XXX	XXX	XXX	153	202	215	228	234	237	239
6. 2014	XXX	XXX	XXX	XXX	154	212	228	241	248	251
7. 2015	XXX	XXX	XXX	XXX	XXX	143	202	221	232	241
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	137	190	204	215
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	142	182	196
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	128	177
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	144

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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	20	18	4	5	4	3	2			
2. 2010	45	54	8	5	5	2	2	1	1	1
3. 2011	XXX		19	13	6	3	2			
4. 2012	XXX	XXX	45	13	7	3	2	1		
5. 2013	XXX	XXX	XXX	53	21	19	9	5	3	1
6. 2014	XXX	XXX	XXX	XXX	65	31	24	14	7	4
7. 2015	XXX	XXX	XXX	XXX	XXX	67	36	26	16	6
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	56	28	19	14
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	48	23	15
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	53	19
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	41

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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	150	20	(4)	4	2	1	1	(1)		
2. 2010	520	587	555	558	560	560	561	561	561	561
3. 2011	XXX	221	314	321	324	325	327	326	326	326
4. 2012	XXX	XXX	282	322	330	332	334	334	334	334
5. 2013	XXX	XXX	XXX	239	272	288	292	295	296	296
6. 2014	XXX	XXX	XXX	XXX	258	297	310	315	316	316
7. 2015	XXX	XXX	XXX	XXX	XXX	239	282	296	300	300
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	225	264	273	280
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	217	250	260
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	204	233
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	209

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 3A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 3B

N O N E

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in 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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	26	8	3	2	1	1				
2. 2010	27	38	42	44	46	46	46	46	46	46
3. 2011	XXX	22	29	31	33	34	34	34	34	34
4. 2012	XXX	XXX	21	33	36	37	38	38	38	38
5. 2013	XXX	XXX	XXX	18	25	30	32	33	35	35
6. 2014	XXX	XXX	XXX	XXX	15	23	28	29	30	31
7. 2015	XXX	XXX	XXX	XXX	XXX	11	17	21	22	22
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	12	18	24	25
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9	11	13
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	10
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5

SECTION 2A

Years in 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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	12	5	3	2	1	1				
2. 2010	14	8	5	2						
3. 2011	XXX	13	5	3	1					
4. 2012	XXX	XXX	16	6	2	1				
5. 2013	XXX	XXX	XXX	14	9	6		1	1	
6. 2014	XXX	XXX	XXX	XXX	17	9	1	3	2	1
7. 2015	XXX	XXX	XXX	XXX	XXX	9		2	1	1
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	3	9	3	1
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	2	1
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	2
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4

SECTION 3A

Years in 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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	50	2	3	1		1	(1)			
2. 2010	80	89	91	90	91	91	91	91	91	91
3. 2011	XXX	43	47	47	47	47	47	47	47	47
4. 2012	XXX	XXX	46	51	51	52	52	52	52	52
5. 2013	XXX	XXX	XXX	39	45	48	45	47	49	48
6. 2014	XXX	XXX	XXX	XXX	37	41	39	43	43	44
7. 2015	XXX	XXX	XXX	XXX	XXX	25	25	32	33	33
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	19	33	33	32
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15	17	18
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12	15
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10

Schedule P - Part 5H - Other Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5H - Other Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5H - Other Liability - Claims-Made - Section 3B

N O N E

SCHEDULE P - PART 5R - PRODUCTS LIABILITY - OCCURRENCE

SECTION 1A

Years in 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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	10		1							
2. 2010	22	22	22	22	22	22	22	22	22	22
3. 2011	XXX	1	2	2	3	3	3	3	3	3
4. 2012	XXX	XXX			1	1	1	1	1	1
5. 2013	XXX	XXX	XXX	1	2	2	2	2	2	2
6. 2014	XXX	XXX	XXX	XXX		1	1	1	1	1
7. 2015	XXX	XXX	XXX	XXX	XXX	1	1	1	1	1
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX		1	1	1
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2A

Years in 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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	1	1								
2. 2010										
3. 2011	XXX			1						
4. 2012	XXX	XXX								
5. 2013	XXX	XXX	XXX	1						
6. 2014	XXX	XXX	XXX	XXX	1					
7. 2015	XXX	XXX	XXX	XXX	XXX					
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	1			
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3A

Years in 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
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019
1. Prior	20	(1)								
2. 2010	48	48	48	48	48	48	48	48	48	48
3. 2011	XXX	1	2	3	3	3	3	3	3	3
4. 2012	XXX	XXX			1	1	1	1	1	1
5. 2013	XXX	XXX	XXX	2	2	2	2	2	2	2
6. 2014	XXX	XXX	XXX	XXX	1	1	2	2	2	2
7. 2015	XXX	XXX	XXX	XXX	XXX	1	1	1	1	1
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	1
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

Schedule P - Part 5R - Products Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5R - Products Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5R - Products Liability - Claims-Made - Section 3B

N O N E

Schedule P - Part 5T - Warranty - Section 1

N O N E

Schedule P - Part 5T - Warranty - Section 2

N O N E

Schedule P - Part 5T - Warranty - Section 3

N O N E

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
	1	2	3	4	5	6	7	8	9	10	Current Year Premiums Earned
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior											
2. 2010	2,655	2,655	2,655	2,655	2,655	2,655	2,655	2,655	2,655	2,655	
3. 2011	XXX	2,919	2,919	2,919	2,919	2,919	2,919	2,919	2,919	2,919	
4. 2012	XXX	XXX	3,310	3,310	3,310	3,310	3,310	3,310	3,310	3,310	
5. 2013	XXX	XXX	XXX	3,781	3,781	3,781	3,781	3,781	3,781	3,781	
6. 2014	XXX	XXX	XXX	XXX	4,295	4,295	4,295	4,295	4,295	4,295	
7. 2015	XXX	XXX	XXX	XXX	XXX	4,420	4,420	4,420	4,420	4,420	
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	4,586	4,586	4,586	4,586	
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,779	4,779	4,779	
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,986	4,986	
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,177	5,177
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,177
13. Earned Premiums (Sch P-Pt. 1)	2,655	2,919	3,310	3,781	4,295	4,420	4,586	4,779	4,986	5,177	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END ($000 OMITTED)										11
	1	2	3	4	5	6	7	8	9	10	Current Year Premiums Earned
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior											
2. 2010	216	216	216	216	216	216	216	216	216	216	
3. 2011	XXX	184	184	184	184	184	184	184	184	184	
4. 2012	XXX	XXX	196	196	196	196	196	196	196	196	
5. 2013	XXX	XXX	XXX	206	206	206	206	206	206	206	
6. 2014	XXX	XXX	XXX	XXX	229	229	229	229	229	229	
7. 2015	XXX	XXX	XXX	XXX	XXX	256	256	256	256	256	
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	293	293	293	293	
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	352	352	352	
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	198	198	
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	112	112
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	112
13. Earned Premiums (Sch P-Pt. 1)	216	184	196	206	229	256	293	352	198	112	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
	1	2	3	4	5	6	7	8	9	10	Current Year Premiums Earned
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior											
2. 2010											
3. 2011	XXX										
4. 2012	XXX	XXX									
5. 2013	XXX	XXX	XXX								
6. 2014	XXX	XXX	XXX	XXX							
7. 2015	XXX	XXX	XXX	XXX	XXX						
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

NONE

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END ($000 OMITTED)										11
	1	2	3	4	5	6	7	8	9	10	Current Year Premiums Earned
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior											
2. 2010											
3. 2011	XXX										
4. 2012	XXX	XXX									
5. 2013	XXX	XXX	XXX								
6. 2014	XXX	XXX	XXX	XXX							
7. 2015	XXX	XXX	XXX	XXX	XXX						
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

NONE

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
	1	2	3	4	5	6	7	8	9	10	Current Year Premiums Earned
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior											
2. 2010	3,962	3,962	3,962	3,962	3,962	3,962	3,962	3,962	3,962	3,962	
3. 2011	XXX	4,298	4,298	4,298	4,298	4,298	4,298	4,298	4,298	4,298	
4. 2012	XXX	XXX	4,812	4,812	4,812	4,812	4,812	4,812	4,812	4,812	
5. 2013	XXX	XXX	XXX	5,720	5,720	5,720	5,720	5,720	5,720	5,720	
6. 2014	XXX	XXX	XXX	XXX	6,675	6,675	6,675	6,675	6,675	6,675	
7. 2015	XXX	XXX	XXX	XXX	XXX	6,939	6,939	6,939	6,939	6,939	
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	7,318	7,318	7,318	7,318	
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,563	7,563	7,563	
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,729	7,729	
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,180	8,180
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,180
13. Earned Premiums (Sch P-Pt. 1)	3,962	4,298	4,812	5,720	6,675	6,939	7,318	7,563	7,729	8,180	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END ($000 OMITTED)										11
	1	2	3	4	5	6	7	8	9	10	Current Year Premiums Earned
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior											
2. 2010	514	514	514	514	514	514	514	514	514	514	
3. 2011	XXX	553	553	553	553	553	553	553	553	553	
4. 2012	XXX	XXX	637	637	637	637	637	637	637	637	
5. 2013	XXX	XXX	XXX	713	713	713	713	713	713	713	
6. 2014	XXX	XXX	XXX	XXX	863	863	863	863	863	863	
7. 2015	XXX	XXX	XXX	XXX	XXX	863	863	863	863	863	
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	898	898	898	898	
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	915	915	915	
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	748	748	
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	706	706
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	706
13. Earned Premiums (Sch P-Pt. 1)	514	553	637	713	863	863	898	915	748	706	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
	1	2	3	4	5	6	7	8	9	10	Current Year Premiums Earned
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior											
2. 2010	1,528	1,528	1,528	1,528	1,528	1,528	1,528	1,528	1,528	1,528	
3. 2011	XXX	1,626	1,626	1,626	1,626	1,626	1,626	1,626	1,626	1,626	
4. 2012	XXX	XXX	1,765	1,765	1,765	1,765	1,765	1,765	1,765	1,765	
5. 2013	XXX	XXX	XXX	1,888	1,888	1,888	1,888	1,888	1,888	1,888	
6. 2014	XXX	XXX	XXX	XXX	1,952	1,952	1,952	1,952	1,952	1,952	
7. 2015	XXX	XXX	XXX	XXX	XXX	1,987	1,987	1,987	1,987	1,987	
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	1,849	1,849	1,849	1,849	
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,689	1,689	1,689	
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,753	1,753	
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,858	1,858
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,858
13. Earned Premiums (Sch P-Pt. 1)	1,528	1,626	1,765	1,888	1,952	1,987	1,849	1,689	1,753	1,858	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END ($000 OMITTED)										11
	1	2	3	4	5	6	7	8	9	10	Current Year Premiums Earned
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior											
2. 2010	594	594	594	594	594	594	594	594	594	594	
3. 2011	XXX	660	660	660	660	660	660	660	660	660	
4. 2012	XXX	XXX	761	761	761	761	761	761	761	761	
5. 2013	XXX	XXX	XXX	823	823	823	823	823	823	823	
6. 2014	XXX	XXX	XXX	XXX	893	893	893	893	893	893	
7. 2015	XXX	XXX	XXX	XXX	XXX	890	890	890	890	890	
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	901	901	901	901	
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	935	935	935	
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,002	1,002	
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,112	1,112
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,112
13. Earned Premiums (Sch P-Pt. 1)	594	660	761	823	893	890	901	935	1,002	1,112	XXX

Schedule P - Part 6H - Other Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 6H - Other Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 6M - International - Section 1

N O N E

Schedule P - Part 6M - International - Section 2

N O N E

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 1

N O N E

Schedule P - Part 6N- Reinsurance A - Nonproportional Assumed Property - Section 2

N O N E

Schedule P - Part 6O - Reinsurance B - Nonproportional Liability - Section 1

N O N E

Schedule P - Part 6O - Reinsurance B - Nonproportional Assumed Liability - Section 2

N O N E

SCHEDULE P - PART 6R - PRODUCTS 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
	1	2	3	4	5	6	7	8	9	10	Current Year Premiums Earned
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior											
2. 2010	60	60	60	60	60	60	60	60	60	60	
3. 2011	XXX	51	51	51	51	51	51	51	51	51	
4. 2012	XXX	XXX	49	49	49	49	49	49	49	49	
5. 2013	XXX	XXX	XXX	52	52	52	52	52	52	52	
6. 2014	XXX	XXX	XXX	XXX	57	57	57	57	57	57	
7. 2015	XXX	XXX	XXX	XXX	XXX	57	57	57	57	57	
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX	52	52	52	52	
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX	54	54	54	
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	54	54	
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50	50
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50
13. Earned Premiums (Sch P-Pt. 1)	60	51	49	52	57	57	52	54	54	50	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END ($000 OMITTED)										11
	1	2	3	4	5	6	7	8	9	10	Current Year Premiums Earned
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior											
2. 2010	1	1	1	1	1	1	1	1	1	1	
3. 2011	XXX										
4. 2012	XXX	XXX									
5. 2013	XXX	XXX	XXX								
6. 2014	XXX	XXX	XXX	XXX							
7. 2015	XXX	XXX	XXX	XXX	XXX						
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)	1										XXX

SCHEDULE P - PART 6R - PRODUCTS LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END ($000 OMITTED)										11
	1	2	3	4	5	6	7	8	9	10	Current Year Premiums Earned
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior											
2. 2010											
3. 2011	XXX										
4. 2012	XXX	XXX									
5. 2013	XXX	XXX	XXX								
6. 2014	XXX	XXX	XXX	XXX							
7. 2015	XXX	XXX	XXX	XXX	XXX						
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

NONE

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END ($000 OMITTED)										11
	1	2	3	4	5	6	7	8	9	10	Current Year Premiums Earned
	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	
1. Prior											
2. 2010											
3. 2011	XXX										
4. 2012	XXX	XXX									
5. 2013	XXX	XXX	XXX								
6. 2014	XXX	XXX	XXX	XXX							
7. 2015	XXX	XXX	XXX	XXX	XXX						
8. 2016	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

NONE

Schedule P - Part 7A - Section 1 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 2 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 3 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 4 - Primary Loss Sensitive Contracts

N O N E

Schedule P - Part 7A - Section 5 - Primary Loss Sensitive Contracts

N O N E

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS ($000 OMITTED)

SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	3,225			18,238		
2. Private Passenger Auto Liability/Medical	13,244			17,458		
3. Commercial Auto/Truck Liability/Medical	5,984			5,258		
4. Workers' Compensation						
5. Commercial Multiple Peril	6,318			7,730		
6. Medical Professional Liability - Occurrence						
7. Medical Professional Liability - Claims - Made						
8. Special Liability						
9. Other Liability - Occurrence	776			747		
10. Other Liability - Claims-Made						
11. Special Property	466			5,205		
12. Auto Physical Damage	1,465			16,559		
13. Fidelity/Surety						
14. Other				1		
15. International						
16. Reinsurance - Nonproportional Assumed Property						
17. Reinsurance - Nonproportional Assumed Liability						
18. Reinsurance - Nonproportional Assumed Financial Lines						
19. Products Liability - Occurrence	40			49		
20. Products Liability - Claims-Made						
21. Financial Guaranty/Mortgage Guaranty						
22. Warranty						
23. Totals	31,518			71,245		

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END ($000 OMITTED)									
	1 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019
1. Prior										
2. 2010										
3. 2011	XXX									
4. 2012	XXX	XXX								
5. 2013	XXX	XXX	XX							
6. 2014	XXX	XXX	XX	XX						
7. 2015	XXX	XXX	XX	XX	X					
8. 2016	XXX	XXX	XX	XXX	XXX	X				
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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 2010	2 2011	3 2012	4 2013	5 2014	6 2015	7 2016	8 2017	9 2018	10 2019
1. Prior										
2. 2010										
3. 2011	XXX									
4. 2012	XXX	XXX								
5. 2013	XXX	XXX	XX							
6. 2014	XXX	XXX	XX	XX						
7. 2015	XXX	XXX	XX	XX	X					
8. 2016	XXX	XXX	XX	XXX	XXX	X				
9. 2017	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2018	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

Schedule P - Part 7B - Section 4 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 5 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 6 - Reinsurance Loss Sensitive Contracts

N O N E

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts

N O N E

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 to 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? ..... Yes [ ] No [X]

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:

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 [X]

1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? ..... Yes [ ] No [X]

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 Section 1: Occurrence	2 Section 2: Claims-Made
1.601 Prior		
1.602 2010		
1.603 2011		
1.604 2012		
1.605 2013		
1.606 2014		
1.607 2015		
1.608 2016		
1.609 2017		
1.610 2018		
1.611 2019		
1.612 Totals		

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). ..... per claim .....

If not the same in all years, explain in Interrogatory 7.

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 [X] No [ ]

7.2 (An extended statement may be attached.)

Effective January 1, 2006, Ohio Mutual Insurance Company and its wholly-owned subsidiary, United Ohio Insurance Company entered into a pooling agreement whereby all underwriting results are pooled together and then split out proportionally with 25% going to Ohio Mutual and 75% going to United Ohio. As the pooling agreement was effective for all losses, the loss and LAE reserves, paid losses and paid LAE for the prior years were reallocated on Schedule P to resemble this pooling agreement. Effective January 1, 2011, Ohio Mutual purchased 100% of the shares of Casco Indemnity Company. At that time, Casco was added to the pool with Ohio Mutual and United Ohio. Casco was provided 8% of the pool with United Ohio holding 65% and Ohio Mutual retaining 27% of the pool. For 2011, the history presented on the Schedule P was reallocated once again to resemble this revised pooling agreement. .....

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

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

NONE

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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

NONE

Asterisk	Explanation

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
10202	34-4320350	Ohio Mutual Insurance Company					(153,046)				(153,046)	(7,766,000)
13072	34-1008736	United Ohio Insurance Company					132,977				132,977	2,349,000
25950	01-0407315	Casco Indemnity Company					20,069				20,069	5,417,000
9999999 Control Totals									XXX			

Effective 1/1/2011, Ohio Mutual Insurance Company and its wholly owned subsidiaries, United Ohio Insurance Company and Casco Indemnity Company entered into a pooling agreement whereby all underwriting results are pooled together and then split out proportionally with 27% going to Ohio Mutual, 65% going to United Ohio, and 8% going to Casco Indemnity.

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.

		Responses
	MARCH FILING	
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 Management's Discussion and Analysis be filed by April 1?	YES
7.	Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
	MAY FILING	
8.	Will this company be included in a combined annual statement which is filed with the NAIC by May 1?	YES
	JUNE FILING	
9.	Will an audited financial report be filed by June 1?	YES
10.	Will Accountant's 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?	YES

The following supplemental reports are required to be filed as part of your annual 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?	YES
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?	NO
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 the 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?	YES
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 the 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

Explanations:

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Bar Codes:

12. SIS Stockholder Information Supplement [Document Identifier 420]

13. Financial Guaranty Insurance Exhibit [Document Identifier 240]

14. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]

15. Supplement A to Schedule T [Document Identifier 455]

16. Trusteed Surplus Statement [Document Identifier 490]

17. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]

19. Medicare Part D Coverage Supplement [Document Identifier 365]

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

22. Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]

23. Bail Bond Supplement [Document Identifier 500]

24. Director and Officer Insurance Coverage Supplement [Document Identifier 505]

25. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]

26. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]

27. Relief from the Requirements for Audit Committees [Document Identifier 226]

28. Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts [Document Identifier 555]

29. Credit Insurance Experience Exhibit [Document Identifier 230]

30. Long-Term Care Experience Reporting Forms [Document Identifier 306]

32. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]

33. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]

34. Cybersecurity and Identity Theft Insurance Coverage Supplement [Document Identifier 550]

35 Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit [Document Identifier 290]

36 Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit [Document Identifier 300]

37 Management's Report of Internal Control Over Financial Reporting [Document Identifier 223]

OVERFLOW PAGE FOR WRITE-INS

NONE

SUPPLEMENT FOR THE YEAR 2019 OF THE Ohio Mutual Insurance Company

REINSURANCE SUMMARY SUPPLEMENTAL FILING FOR GENERAL INTERROGATORY 9 (PART 2)

For The Year Ended December 31, 2019
To Be Filed by March 1
(A) Financial Impact

		1 As Reported	2 Interrogatory 9 Reinsurance Effect	3 Restated Without Interrogatory 9 Reinsurance
A01.	Assets	351,106,911		351,106,911
A02.	Liabilities	70,678,627		70,678,627
A03.	Surplus as regards to policyholders	280,428,284		280,428,284
A04.	Income before taxes	5,028,121		5,028,121

(B) Summary of Reinsurance Contract Terms	(C) Management's Objectives

D. If the response to General Interrogatory 9.4 (Part 2 Property & Casualty Interrogatories) is yes, explain below why the contracts are treated differently for GAAP and SAP.

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK

ANNUAL STATEMENT BLANK (Continued)

ANNUAL STATEMENT BLANK (Continued)