



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

AS OF JUNE 30, 2020

OF THE CONDITION AND AFFAIRS OF THE

Ohio Mutual Insurance Company

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

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

Country of Domicile United States of America

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

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

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

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

Primary Location of Books and Records 1725 Hopley Avenue, Bucyrus, OH, US 44820-0111 (Street and Number) (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., ceasum@omig.com (Name) (E-mail Address) 419-563-0810 (Area Code) (Telephone Number) 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; David Alan Grove, Mr., Vice President Product Management; James Bradly McCormack, Mr., Vice President Information Systems; Chad Philip Combs, Mr., Vice President Personal Lines Underwriting; Gary Thomas Johnson, Mr., Vice President Commercial Lines Underwriting; Marcella Slone Smith, Mrs., Vice President Human Resources; John Richard DeLucia, Mr., Vice President Claims; Susan Elizabeth Kent, Mrs., Vice President Business Analytics

DIRECTORS OR TRUSTEES

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

State of Ohio County of Crawford SS:

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

Mark Clarence Russell President and CEO

David Gary Hendrix Treasurer and CFO

Marcella Slone Smith Assistant Secretary

Subscribed and sworn to before me this day of

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

STATEMENT AS OF JUNE 30, 2020 OF THE Ohio Mutual Insurance Company

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	70,548,944		70,548,944	71,786,179
2. Stocks:				
2.1 Preferred stocks				
2.2 Common stocks	253,983,700	26,064	253,957,636	245,258,347
3. Mortgage loans on real estate:				
3.1 First liens				
3.2 Other than first liens.....				
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)	7,606,158		7,606,158	7,670,910
4.2 Properties held for the production of income (less \$ encumbrances)				
4.3 Properties held for sale (less \$ encumbrances)				
5. Cash (\$2,106,797), cash equivalents (\$2,884,749) and short-term investments (\$)	4,991,546		4,991,546	6,381,090
6. Contract loans (including \$ premium notes)				
7. Derivatives				
8. Other invested assets				
9. Receivables for securities				
10. Securities lending reinvested collateral assets				
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Lines 1 to 11)	337,130,348	26,064	337,104,284	331,096,526
13. Title plants less \$ charged off (for Title insurers only)				
14. Investment income due and accrued	577,320		577,320	604,259
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	2,087,511		2,087,511	2,290,296
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	16,994,126		16,994,126	15,982,514
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	188,111		188,111	84,024
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts				
17. Amounts receivable relating to uninsured plans				
18.1 Current federal and foreign income tax recoverable and interest thereon				
18.2 Net deferred tax asset	1,757,704		1,757,704	1,049,292
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software	3,613,199	3,613,199		
21. Furniture and equipment, including health care delivery assets (\$)	632,588	632,588		
22. Net adjustment in assets and liabilities due to foreign exchange rates				
23. Receivables from parent, subsidiaries and affiliates	1,253,942		1,253,942	
24. Health care (\$) and other amounts receivable				
25. Aggregate write-ins for other than invested assets	630,282	630,282		
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	364,865,131	4,902,133	359,962,998	351,106,911
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Lines 26 and 27)	364,865,131	4,902,133	359,962,998	351,106,911
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)				
2501. Prepaid Expenses	630,282	630,282		
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	630,282	630,282		

STATEMENT AS OF JUNE 30, 2020 OF THE Ohio Mutual Insurance Company

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$10,303,976)	24,937,981	25,620,323
2. Reinsurance payable on paid losses and loss adjustment expenses		
3. Loss adjustment expenses	6,210,365	5,898,724
4. Commissions payable, contingent commissions and other similar charges	1,773,138	2,029,990
5. Other expenses (excluding taxes, licenses and fees)	184,003	60,291
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	57,929	62,978
7.1 Current federal and foreign income taxes (including \$4,692 on realized capital gains (losses))	1,487,092	918,961
7.2 Net deferred tax liability		
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$96,250,750 and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$ for medical loss ratio rebate per the Public Health Service Act)	35,409,117	33,581,406
10. Advance premium	689,044	528,375
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)		55,892
13. Funds held by company under reinsurance treaties	107,282	135,411
14. Amounts withheld or retained by company for account of others		
15. Remittances and items not allocated		
16. Provision for reinsurance (including \$ certified)		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates		1,786,276
20. Derivatives		
21. Payable for securities		
22. Payable for securities lending		
23. Liability for amounts held under uninsured plans		
24. Capital notes \$ and interest thereon \$		
25. Aggregate write-ins for liabilities		
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	70,855,951	70,678,627
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	70,855,951	70,678,627
29. Aggregate write-ins for special surplus funds		561,235
30. Common capital stock		
31. Preferred capital stock		
32. Aggregate write-ins for other than special surplus funds		
33. Surplus notes		
34. Gross paid in and contributed surplus		
35. Unassigned funds (surplus)	289,107,047	279,867,049
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)		
36.2 shares preferred (value included in Line 31 \$)		
37. Surplus as regards policyholders (Lines 29 to 35, less 36)	289,107,047	280,428,284
38. Totals (Page 2, Line 28, Col. 3)	359,962,998	351,106,911
DETAILS OF WRITE-INS		
2501.		
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)		
2901. Sale Leaseback of Saco Building		561,235
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)		561,235
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page		
3299. Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)		

STATEMENT AS OF JUNE 30, 2020 OF THE Ohio Mutual Insurance Company

STATEMENT OF INCOME

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct (written \$ 44,888,114)	42,503,280	42,031,689	86,614,838
1.2 Assumed (written \$ 90,213,450)	85,724,258	85,566,681	173,739,142
1.3 Ceded (written \$ 99,005,198)	93,958,884	93,464,128	190,733,527
1.4 Net (written \$ 36,096,366)	34,268,654	34,134,242	69,620,453
DEDUCTIONS:			
2. Losses incurred (current accident year \$ 20,444,324):			
2.1 Direct	24,262,518	24,878,221	47,915,226
2.2 Assumed	38,312,085	47,337,248	93,985,554
2.3 Ceded	45,751,846	52,792,670	103,331,491
2.4 Net	16,822,757	19,422,799	38,569,289
3. Loss adjustment expenses incurred	2,866,106	2,959,364	5,662,162
4. Other underwriting expenses incurred	11,705,905	10,807,048	22,131,036
5. Aggregate write-ins for underwriting deductions			
6. Total underwriting deductions (Lines 2 through 5)	31,394,768	33,189,211	66,362,487
7. Net income of protected cells			
8. Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)	2,873,886	945,031	3,257,966
INVESTMENT INCOME			
9. Net investment income earned	937,456	1,133,264	2,053,724
10. Net realized capital gains (losses) less capital gains tax of \$ 4,692	17,874	(68,151)	(151,240)
11. Net investment gain (loss) (Lines 9 + 10)	955,330	1,065,113	1,902,484
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ 35,955 amount charged off \$ 587,738)	(551,783)	(172,991)	(409,276)
13. Finance and service charges not included in premiums	12	(25)	(25)
14. Aggregate write-ins for miscellaneous income	122,076	124,159	276,972
15. Total other income (Lines 12 through 14)	(429,695)	(48,857)	(132,329)
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	3,399,521	1,961,287	5,028,121
17. Dividends to policyholders			
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	3,399,521	1,961,287	5,028,121
19. Federal and foreign income taxes incurred	564,286	263,869	864,180
20. Net income (Line 18 minus Line 19)(to Line 22)	2,835,235	1,697,418	4,163,941
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year	280,428,284	253,144,895	253,144,895
22. Net income (from Line 20)	2,835,235	1,697,418	4,163,941
23. Net transfers (to) from Protected Cell accounts			
24. Change in net unrealized capital gains (losses) less capital gains tax of \$ (500,953)	6,958,259	12,129,569	24,505,108
25. Change in net unrealized foreign exchange capital gain (loss)			
26. Change in net deferred income tax	207,459	299,055	370,965
27. Change in nonadmitted assets	(1,322,190)	(1,820,070)	(1,756,635)
28. Change in provision for reinsurance			
29. Change in surplus notes			
30. Surplus (contributed to) withdrawn from protected cells			
31. Cumulative effect of changes in accounting principles			
32. Capital changes:			
32.1 Paid in			
32.2 Transferred from surplus (Stock Dividend)			
32.3 Transferred to surplus			
33. Surplus adjustments:			
33.1 Paid in			
33.2 Transferred to capital (Stock Dividend)			
33.3 Transferred from capital			
34. Net remittances from or (to) Home Office			
35. Dividends to stockholders			
36. Change in treasury stock			
37. Aggregate write-ins for gains and losses in surplus			10
38. Change in surplus as regards policyholders (Lines 22 through 37)	8,678,763	12,305,972	27,283,389
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	289,107,047	265,450,867	280,428,284
DETAILS OF WRITE-INS			
0501.			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page			
0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)			
1401. Rental and Related Services	124,041	124,041	248,083
1402. Other (Expense) Income	(1,965)	118	243
1403. Gain on Disposal of Furniture & Equipment			28,646
1498. Summary of remaining write-ins for Line 14 from overflow page			
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	122,076	124,159	276,972
3701. Correction of prior period error			10
3702.			
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page			
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)			10

STATEMENT AS OF JUNE 30, 2020 OF THE Ohio Mutual Insurance Company

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	35,399,807	34,606,277	70,222,988
2. Net investment income	1,558,801	1,572,046	3,133,930
3. Miscellaneous income	(429,695)	(48,857)	(132,329)
4. Total (Lines 1 to 3)	36,528,913	36,129,466	73,224,589
5. Benefit and loss related payments	17,609,186	18,142,232	36,767,730
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	15,097,808	15,549,911	29,801,770
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$ 4,692 tax on capital gains (losses)	847	1,212	1,057,966
10. Total (Lines 5 through 9)	32,707,841	33,693,355	67,627,466
11. Net cash from operations (Line 4 minus Line 10)	3,821,072	2,436,111	5,597,123
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	4,490,095	11,978,076	16,320,040
12.2 Stocks		207,210	1,124,204
12.3 Mortgage loans			
12.4 Real estate			
12.5 Other invested assets			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		(1)	(2)
12.7 Miscellaneous proceeds			
12.8 Total investment proceeds (Lines 12.1 to 12.7)	4,490,095	12,185,285	17,444,242
13. Cost of investments acquired (long-term only):			
13.1 Bonds	3,471,552	8,900,045	13,993,125
13.2 Stocks	2,241,986	704,922	5,568,275
13.3 Mortgage loans			
13.4 Real estate	288,542	3,254,358	4,093,158
13.5 Other invested assets			
13.6 Miscellaneous applications			
13.7 Total investments acquired (Lines 13.1 to 13.6)	6,002,080	12,859,325	23,654,558
14. Net increase (or decrease) in contract loans and premium notes			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(1,511,985)	(674,040)	(6,210,316)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes			
16.2 Capital and paid in surplus, less treasury stock			
16.3 Borrowed funds			
16.4 Net deposits on deposit-type contracts and other insurance liabilities			
16.5 Dividends to stockholders			
16.6 Other cash provided (applied)	(3,698,631)	(1,419,974)	(217,590)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(3,698,631)	(1,419,974)	(217,590)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(1,389,544)	342,097	(830,783)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	6,381,090	7,211,873	7,211,873
19.2 End of period (Line 18 plus Line 19.1)	4,991,546	7,553,970	6,381,090

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

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NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

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

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

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

<u>NET INCOME</u>	<u>SSAP #</u>	<u>F/S Page</u>	<u>F/S Line #</u>	<u>06/30/2020</u>	<u>12/31/2019</u>
(1) Ohio Mutual Insurance Company state basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$ 2,835,235	\$ 4,163,941
(2) State Prescribed Practices that increase/(decrease) NAIC SAP:					
(3) State Permitted Practices that increase/(decrease) NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 2,835,235	\$ 4,163,941
<u>SURPLUS</u>					
(5) Ohio Mutual Insurance Company state basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 289,107,047	\$ 280,428,284
(6) State Prescribed Practices that increase/(decrease) NAIC SAP:					
(7) State Permitted Practices that increase/(decrease) NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 289,107,047	\$ 280,428,284

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

C. Accounting Policy – No Change

D. Going Concern

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

2. Accounting Changes and Corrections of Errors – No Change

3. Business Combinations and Goodwill – No Change

4. Discontinued Operations – No Change

5. Investments

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

- (1) Prepayment assumptions for Mortgage-backed securities, Collateralized Mortgage Obligations and Other Structured Securities were generated using a purchased prepayment model. The prepayment model uses a number of factors to estimate prepayment activity including the time of year (seasonality), current levels of interest rates (refinancing incentive), economic activity (including housing turnover) and term and age of the underlying collateral (burnout, seasoning). On an ongoing basis, we monitor the rate of prepayment and calibrate the model to reflect actual experience, market factors, and viewpoint.
- (2)
 - a. The Company had no securities it intended to sell for which it recognized other-than-temporary impairment losses.
 - b. The Company had no securities for which it lacked the ability or intent to retain an investment in for a period of time sufficient to recover the amortized cost basis.
- (3) The Company had no other-than-temporary impairments within the loan backed securities portfolio for the quarter ended June 30, 2020.

NOTES TO FINANCIAL STATEMENTS

(4) All temporarily impaired securities for which an other-than-temporary impairment has not been recognized in earnings as a realized loss in 2020 are as follows:

a. The aggregate amount of unrealized losses:		
	1. Less than 12 Months	<u>\$ (45,958)</u>
	2. 12 Months or Longer	<u>\$ (3,517)</u>
b. The aggregate related fair value of securities with unrealized losses:		
	1. Less than 12 Months	<u>\$ 2,546,434</u>
	2. 12 Months or Longer	<u>\$ 160,196</u>

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

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

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

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

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

7. Investment Income – No Change

8. Derivative Instruments – No Change

9. Income Taxes – No Change

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

- A. The Company is the parent company within the Ohio Mutual Insurance Group. The Company is the sole shareholder and owner of United Ohio Insurance Company (United Ohio), Casco Indemnity Company (Casco), United Premium Budget Service Inc., Centurion Financial Inc., and Ohio United Agency Inc.
- B. The Company, United Ohio, and Casco have entered into a reinsurance pooling agreement through which underwriting activities and operating expenses are proportionately allocated. See footnote #26 for additional information on the pooling agreement.
- C. In 2020 the Company reimbursed its subsidiary, United Ohio, \$8,538,510 and reimbursed its subsidiary, Casco, \$147,386 under the terms of the Reinsurance Pooling Agreement between the entities.
- D. As of June 30, 2020, United Ohio owes the Company \$317,790 and Casco owes the Company \$855,790 under the terms of the Reinsurance Pooling Agreement. As of June 30, 2020, United Ohio owes the Company \$80,361 under the terms of the Cost Sharing Agreement.
- E. The Company has no guarantees or undertakings at June 30, 2020.
- F. The Company and its subsidiaries, United Ohio and Casco, entered into a Cost Sharing Agreement effective January 1, 2011, through which certain common costs are shared proportionally between the entities.
- G. All outstanding shares of its subsidiaries, United Ohio, Casco, United Premium Budget Services Inc., Ohio United Agency Inc. and Centurion Financial Inc. are owned by the Parent Company, Ohio Mutual Insurance Company, an insurance company domiciled in the State of Ohio.
- H. None of the Company's capital stock is owned by downstream subsidiaries.
- I. The Company owns a 100% interest in United Ohio whose carrying value is equal to or exceeds 10% of the admitted assets of the Company. The Company carries United Ohio at its statutory statement value of \$213,753,956.

Based on the Company's ownership percentage of United Ohio, the statutory statement value of United Ohio assets and liabilities as of June 30, 2020 were \$397,512,521 and \$183,758,565, respectively.

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

NOTES TO FINANCIAL STATEMENTS

M. All SCA Investments

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

SCA Entity	Percentage of SCA Ownership	Gross Amount	Admitted Amount	Nonadmitted Amount
a. SSAP No. 97 8a Entities				
NONE	N/A	-	-	-
Total SSAP No. 97 8a Entities	XXX	-	-	-
b. SSAP No. 97 8b(ii) Entities				
Centurion Financial Inc.	100.0	-	-	-
Ohio United Agency Inc.	100.0	25,061	-	25,061
United Premium Budget Service Inc.	100.0	1,002	-	1,002
Total SSAP No. 97 8b(ii) Entities	XXX	26,063	-	26,063
c. SSAP No. 97 8b(iii) Entities				
NONE	N/A	-	-	-
Total SSAP No. 97 8b(iii) Entities	XXX	-	-	-
d. SSAP No. 97 8b(iv) Entities				
NONE	N/A	-	-	-
Total SSAP No. 97 8b(iv) Entities	XXX	-	-	-
e. Total SSAP No. 97 8b Entities (except 8bi entities) (b+c+d)	XXX	26,063	-	26,063
f. Aggregate Total (a+e)	XXX	26,063	-	26,063

(2) NAIC Filing Response Information

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

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

11. Debt – No Change

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

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

14. Liabilities, Contingencies and Assessments

D. The Company paid the following amounts in the reporting period to settle claims related extra contractual obligations or bad faith claims stemming from lawsuits.

Claims related ECO and bad faith losses paid during the reporting period	<u>Direct....</u> \$0
--	--------------------------

Number of claims where amounts were paid to settle claims related extra contractual obligations or bad faith claims resulting from lawsuits during the reporting period.

(a)	(b)	(c)	(d)	(e)
<u>0-25 Claims</u>	<u>26-50 Claims</u>	<u>51-100 Claims</u>	<u>101-500 Claims</u>	<u>More than 500 Claims</u>
X				

Indicate whether claim count information is disclosed per claim or per claimant.

(f) Per Claim []	(g) Per Claimant [X]
-------------------	------------------------

15. Leases – No Change

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

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

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

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

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

NOTES TO FINANCIAL STATEMENTS

20. Fair Value Measurements

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

(1) Fair Value Measurements at Reporting Date

Description	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Bonds					
Industrial & Misc	\$ -	\$ -	\$ -	\$ -	\$ -
Total Bonds	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>
Common Stock					
Industrial and Misc (Publically	13,930,441	-	-	-	13,930,441
Industrial and Misc (Other)	-	-	374,202	-	374,202
Mutual Funds	7,741,646	-	-	-	7,741,646
Total Common Stocks	<u>\$ 21,672,087</u>	<u>\$ -</u>	<u>\$ 374,202</u>	<u>\$ -</u>	<u>\$ 22,046,289</u>
Derivative assets	-	-	-	-	-
Total assets at fair value	<u>\$ 21,672,087</u>	<u>\$ -</u>	<u>\$ 374,202</u>	<u>\$ -</u>	<u>\$ 22,046,289</u>

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

Description	Ending Balance at 03/31/2020	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 06/30/2020
a. Assets:										
Common Stock - Industrial & Misc.	\$ 374,202				\$ -					\$ 374,202

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

(4) As of June 30, 2020, the reporting entity's investments in Level 3, NAIC rated A, represents one security that is not traded in a public market and was valued based on a valuation provided by the NAIC Securities Valuation Office.

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

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 74,733,783	\$ 70,548,944	\$ -	\$ 74,733,783	\$ -	\$ -	\$ -
Common Stocks	253,983,700	253,983,700	21,672,087	-	232,311,613	-	-
Total Financial Instruments	<u>\$ 328,717,483</u>	<u>\$ 324,532,644</u>	<u>\$ 21,672,087</u>	<u>\$ 74,733,783</u>	<u>\$ 232,311,613</u>	<u>\$ -</u>	<u>\$ -</u>

D. Not Practicable to Estimate Fair Value

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

E. The company has no investments measured using the NAV practical expedient pursuant to SSAP No. 100R – Fair Value.

21. Other Items

A. Unusual or Infrequent Items

Effective March 16, 2020, the Company initiated a self-imposed moratorium suspending all policy cancellations for non-payment due to the novel coronavirus pandemic. The moratorium will continue through July 26, 2020 with a phased return to normal operations beginning on Monday, July 27, 2020. The Company will continue to work with policyholders that may require additional payment assistance once the moratorium is lifted. In addition, the Company issued personal auto premium credits equal to 25% of earned premium for the period from March 16, 2020 through May 31, 2020. Credits and payments totaling \$6.1 million were applied to policyholder accounts, or mailed to policyholders, the first week of June, 2020. This action was in response to the abrupt reduction in driving and corresponding auto claims attributed to the coronavirus pandemic. The \$6.1 million credits and payments were taken as a direct reduction of written and earned premium in the current quarter.

22. Events Subsequent – None

23. Reinsurance – No Change

24. Retrospectively Rated Contracts and Contracts Subject to Redetermination – No Change

25. Change in Incurred Losses and Loss Adjustment Expenses

A. The Company's portion of pooled loss reserves as of December 31, 2019 was \$31.5 million. On a pooled basis as of June 30, 2020, \$8.9 million has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Pooled reserves remaining for prior years are now \$18.2 million. There has been a \$4.4 million favorable prior-year development, on a pooled basis, from December 31, 2019 to June 30, 2020 as a result of re-estimation of unpaid claims and claim adjustment expenses principally on homeowners, farmowners, and personal auto liability lines of insurance. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims. The Company does not have any retrospectively rated policies which would be included in the favorable development.

B. No Change

NOTES TO FINANCIAL STATEMENTS

26. Intercompany Pooling Arrangements

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

	06/30/2020	12/31/2019
Premium earned assumed by Ohio Mutual from United Ohio and Casco	\$ 85,693,870	\$ 173,693,255
Premium earned ceded back to United Ohio and Casco	(92,652,287)	(188,233,078)
Change in premium earned due to pooling	\$ (6,958,417)	\$ (14,539,823)
Losses incurred assumed by Ohio Mutual from United Ohio and Casco	\$ 38,312,085	\$ 93,973,492
Losses incurred ceded back to United Ohio and Casco	(45,483,752)	(104,279,929)
Change in losses incurred due to pooling	\$ (7,171,667)	\$ (10,306,437)
Net loss adjustment expenses assumed by Ohio Mutual	\$ 2,441,228	\$ 4,806,169
Net other underwriting expenses assumed by Ohio Mutual	3,138,214	6,100,031
Change in expenses incurred due to pooling	\$ 5,579,442	\$ 10,906,200
Change in income before taxes due to pooling	\$ (5,366,192)	\$ (15,139,586)

27. Structured Settlements – No Change

28. Health Care Receivables – No Change

29. Participating Policies – No Change

30. Premium Deficiency Reserves – No Change

31. High Deductibles – No Change

32. Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses – No Change

33. Asbestos/Environmental Reserves – No Change

34. Subscriber Savings Accounts – No Change

35. Multiple Peril Crop Insurance – No Change

36. Financial Guaranty Insurance – No Change

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [] No [X]
- 1.2 If yes, has the report been filed with the domiciliary state? Yes [] No []
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change:
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [] No [X]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.
- 3.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No [X]
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
If yes, complete and file the merger history data file with the NAIC.
- 4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [] No [X] N/A []
If yes, attach an explanation.
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2015
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2015
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 05/19/2017
- 6.4 By what department or departments?
Ohio Department of Insurance
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A [X]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [X] N/A []
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 7.2 If yes, give full information:
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

GENERAL INTERROGATORIES

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes No
 (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 (c) Compliance with applicable governmental laws, rules and regulations;
 (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 (e) Accountability for adherence to the code.
- 9.11 If the response to 9.1 is No, please explain:
- 9.2 Has the code of ethics for senior managers been amended? Yes No
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes No
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes No
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$

INVESTMENT

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes No
- 11.2 If yes, give full and complete information relating thereto:
12. Amount of real estate and mortgages held in other invested assets in Schedule BA: \$
13. Amount of real estate and mortgages held in short-term investments: \$
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes No
- 14.2 If yes, please complete the following:
- | | 1
Prior Year-End
Book/Adjusted
Carrying Value | 2
Current Quarter
Book/Adjusted
Carrying Value |
|---|--|---|
| 14.21 Bonds | \$ | \$ |
| 14.22 Preferred Stock | \$ | \$ |
| 14.23 Common Stock | \$ 223,094,616 | \$ 231,937,411 |
| 14.24 Short-Term Investments | \$ | \$ |
| 14.25 Mortgage Loans on Real Estate | \$ | \$ |
| 14.26 All Other | \$ | \$ |
| 14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) | \$ 223,094,616 | \$ 231,937,411 |
| 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above | \$ | \$ |
- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes No
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes No N/A
 If no, attach a description with this statement.
16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$
- 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$
- 16.3 Total payable for securities lending reported on the liability page. \$

GENERAL INTERROGATORIES

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

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

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

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

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [] No [X]
- 17.4 If yes, give full information relating thereto:

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

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

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

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

- 17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets? Yes [] No [X]

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

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

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []
- 18.2 If no, list exceptions:

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:
- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
 - b. Issuer or obligor is current on all contracted interest and principal payments.
 - c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
- Has the reporting entity self-designated 5GI securities? Yes [] No [X]

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
- a. The security was purchased prior to January 1, 2018.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 - d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.
- Has the reporting entity self-designated PLGI securities? Yes [] No [X]

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
- a. The shares were purchased prior to January 1, 2019.
 - b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 - c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
 - d. The fund only or predominantly holds bonds in its portfolio.
 - e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
 - f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.
- Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

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

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

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

3.2 If yes, give full and complete information thereto.

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

4.2 If yes, complete the following schedule:

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

5. Operating Percentages:

5.1 A&H loss percent %

5.2 A&H cost containment percent %

5.3 A&H expense percent excluding cost containment expenses 10.391 %

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

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

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

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

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

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

STATEMENT AS OF JUNE 30, 2020 OF THE Ohio Mutual Insurance Company
SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories

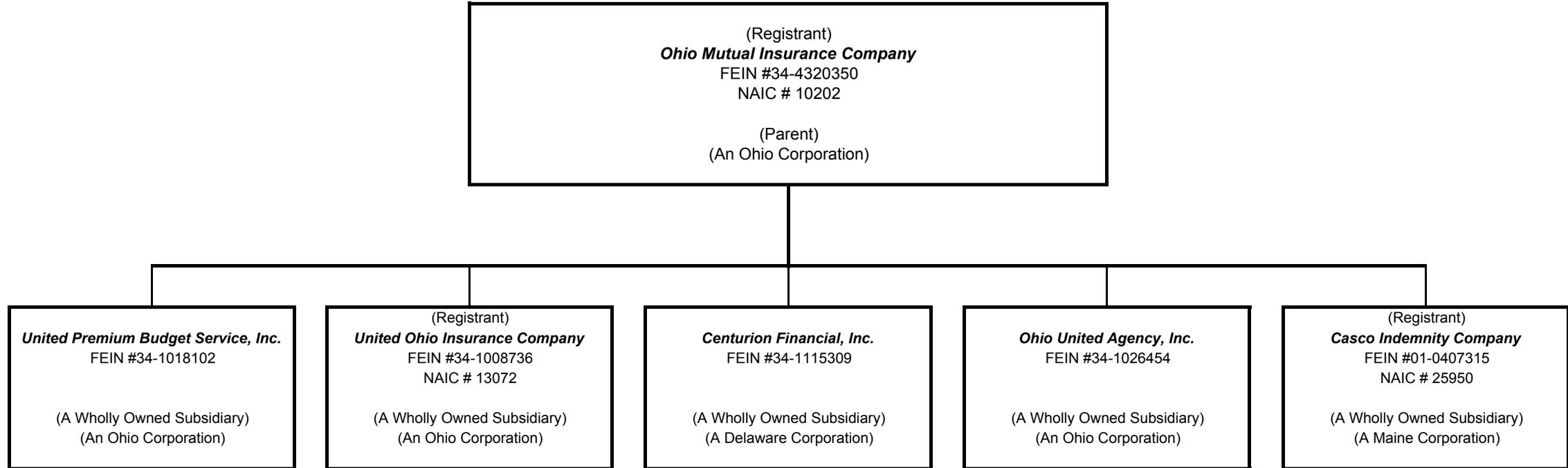
States, etc.	1 Active Status (a)	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date
1. AlabamaAL	N						
2. AlaskaAK	N						
3. ArizonaAZ	N						
4. ArkansasAR	N						
5. CaliforniaCA	N						
6. ColoradoCO	N						
7. ConnecticutCT	L						
8. DelawareDE	N						
9. District of ColumbiaDC	N						
10. FloridaFL	N						
11. GeorgiaGA	N						
12. HawaiiHI	N						
13. IdahoID	N						
14. IllinoisIL	N						
15. IndianaIN	L	167,254	45,416	21,092		33,974	
16. IowaIA	N						
17. KansasKS	N						
18. KentuckyKY	N						
19. LouisianaLA	N						
20. MaineME	L						
21. MarylandMD	N						
22. MassachusettsMA	N						
23. MichiganMI	N						
24. MinnesotaMN	N						
25. MississippiMS	N						
26. MissouriMO	N						
27. MontanaMT	N						
28. NebraskaNE	N						
29. NevadaNV	N						
30. New HampshireNH	L						
31. New JerseyNJ	N						
32. New MexicoNM	N						
33. New YorkNY	N						
34. North CarolinaNC	N						
35. North DakotaND	N						
36. OhioOH	L	44,720,860	44,263,754	25,234,548	22,660,530	23,292,061	26,416,993
37. OklahomaOK	N						
38. OregonOR	N						
39. PennsylvaniaPA	N						
40. Rhode IslandRI	L						
41. South CarolinaSC	N						
42. South DakotaSD	N						
43. TennesseeTN	L						
44. TexasTX	N						
45. UtahUT	N						
46. VermontVT	L						
47. VirginiaVA	L						
48. WashingtonWA	N						
49. West VirginiaWV	N						
50. WisconsinWI	L						
51. WyomingWY	N						
52. American SamoaAS	N						
53. GuamGU	N						
54. Puerto RicoPR	N						
55. U.S. Virgin IslandsVI	N						
56. Northern Mariana IslandsMP	N						
57. CanadaCAN	N						
58. Aggregate Other Alien OT	XXX						
59. Totals	XXX	44,888,114	44,309,170	25,255,640	22,660,530	23,326,035	26,416,993
DETAILS OF WRITE-INS							
58001.	XXX						
58002.	XXX						
58003.	XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX						
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX						

(a) Active Status Counts:

- | | |
|---|---|
| L - Licensed or Chartered - Licensed Insurance carrier or domiciled RRG.....10 | R - Registered - Non-domiciled RRGs..... |
| E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI)..... | Q - Qualified - Qualified or accredited reinsurer..... |
| D - Domestic Surplus Lines Insurer (DSLII) - Reporting entities authorized to write surplus lines in the state of domicile..... | N - None of the above - Not allowed to write business in the state.....47 |

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

Ohio Mutual Insurance Group



STATEMENT AS OF JUNE 30, 2020 OF THE Ohio Mutual Insurance Company

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

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

NONE

Asterisk	
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STATEMENT AS OF JUNE 30, 2020 OF THE Ohio Mutual Insurance Company

PART 1 - LOSS EXPERIENCE

Line of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire	1,261,820	1,067,290	84.6	45.8
2. Allied Lines				
3. Farmowners multiple peril	3,180,183	921,691	29.0	42.6
4. Homeowners multiple peril	11,789,896	9,086,790	77.1	74.2
5. Commercial multiple peril				
6. Mortgage guaranty				
8. Ocean marine				
9. Inland marine	7,246			(60.2)
10. Financial guaranty				
11.1 Medical professional liability - occurrence				
11.2 Medical professional liability - claims-made				
12. Earthquake				
13. Group accident and health				
14. Credit accident and health				
15. Other accident and health				
16. Workers' compensation				
17.1 Other liability - occurrence	113,499	23,470	20.7	9.8
17.2 Other liability - claims-made				
17.3 Excess workers' compensation				
18.1 Products liability - occurrence				
18.2 Products liability - claims-made				
19.1,19.2 Private passenger auto liability	13,619,448	6,395,659	47.0	54.2
19.3,19.4 Commercial auto liability				
21. Auto physical damage	12,494,744	6,761,522	54.1	57.8
22. Aircraft (all perils)				
23. Fidelity				
24. Surety				
26. Burglary and theft	36,444	6,096	16.7	(0.7)
27. Boiler and machinery				
28. Credit				
29. International				
30. Warranty				
31. Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX
32. Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX
33. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business				
35. Totals	42,503,280	24,262,518	57.1	59.2
DETAILS OF WRITE-INS				
3401.				
3402.				
3403.				
3498. Summary of remaining write-ins for Line 34 from overflow page				
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)				

PART 2 - DIRECT PREMIUMS WRITTEN

Line of Business	1	2	3
	Current Quarter	Current Year to Date	Prior Year Year to Date
1. Fire	517,068	1,019,078	1,085,987
2. Allied Lines			
3. Farmowners multiple peril	2,107,681	4,251,498	3,360,810
4. Homeowners multiple peril	6,890,844	12,357,074	11,223,845
5. Commercial multiple peril			
6. Mortgage guaranty			
8. Ocean marine			
9. Inland marine	2,993	9,462	8,849
10. Financial guaranty			
11.1 Medical professional liability - occurrence			
11.2 Medical professional liability - claims-made			
12. Earthquake			
13. Group accident and health			
14. Credit accident and health			
15. Other accident and health			
16. Workers' compensation			
17.1 Other liability - occurrence	57,431	113,056	116,837
17.2 Other liability - claims-made			
17.3 Excess workers' compensation			
18.1 Products liability - occurrence			
18.2 Products liability - claims-made			
19.1,19.2 Private passenger auto liability	6,451,094	14,067,007	14,877,603
19.3,19.4 Commercial auto liability			
21. Auto physical damage	6,053,070	13,034,989	13,596,684
22. Aircraft (all perils)			
23. Fidelity			
24. Surety			
26. Burglary and theft	20,005	35,950	38,555
27. Boiler and machinery			
28. Credit			
29. International			
30. Warranty			
31. Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX
32. Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX
33. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business			
35. Totals	22,100,186	44,888,114	44,309,170
DETAILS OF WRITE-INS			
3401.			
3402.			
3403.			
3498. Summary of remaining write-ins for Line 34 from overflow page			
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)			

STATEMENT AS OF JUNE 30, 2020 OF THE Ohio Mutual Insurance Company

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1+2)	2020 Loss and LAE Payments on Claims Reported as of Prior Year-End	2020 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2020 Loss and LAE Payments (Cols. 4+5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols.7+8+9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols.4+7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5+8+9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11+12)
1. 2017 + Prior	3,560	3,905	7,465	1,908	1	1,909	2,484	3	2,113	4,600	832	(1,788)	(956)
2. 2018	2,787	3,981	6,768	1,441	4	1,445	2,239	12	2,104	4,355	893	(1,861)	(968)
3. Subtotals 2018 + Prior	6,347	7,886	14,233	3,349	5	3,354	4,723	15	4,217	8,955	1,725	(3,649)	(1,924)
4. 2019	8,117	9,169	17,286	5,421	115	5,536	5,026	89	4,153	9,268	2,330	(4,812)	(2,482)
5. Subtotals 2019 + Prior	14,464	17,055	31,519	8,770	120	8,890	9,749	104	8,370	18,223	4,055	(8,461)	(4,406)
6. 2020	XXX	XXX	XXX	XXX	11,170	11,170	XXX	3,779	9,146	12,925	XXX	XXX	XXX
7. Totals	14,464	17,055	31,519	8,770	11,290	20,060	9,749	3,883	17,516	31,148	4,055	(8,461)	(4,406)
8. Prior Year-End Surplus As Regards Policyholders	280,428										Col. 11, Line 7 As % of Col. 1 Line 7	Col. 12, Line 7 As % of Col. 2 Line 7	Col. 13, Line 7 As % of Col. 3 Line 7
											1. 28.0	2. (49.6)	3. (14.0)
													Col. 13, Line 7 As a % of Col. 1 Line 8
													4. (1.6)

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

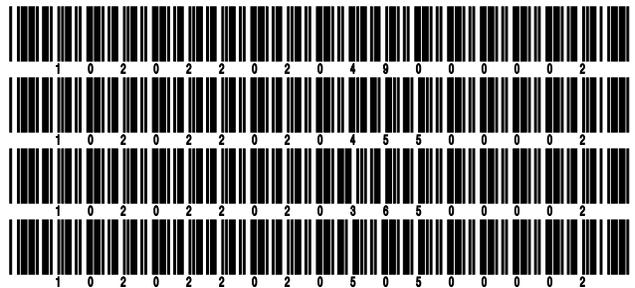
	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	NO
3. Will the Medicare Part D Coverage Supplement be filed with the state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

Explanations:

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

Bar Codes:

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



OVERFLOW PAGE FOR WRITE-INS

NONE

STATEMENT AS OF JUNE 30, 2020 OF THE Ohio Mutual Insurance Company

SCHEDULE A - VERIFICATION

Real Estate

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	7,670,910	4,450,309
2. Cost of acquired:		
2.1 Actual cost at time of acquisition	288,542	4,093,158
2.2 Additional investment made after acquisition		
3. Current year change in encumbrances		
4. Total gain (loss) on disposals		(353,154)
5. Deduct amounts received on disposals		
6. Total foreign exchange change in book/adjusted carrying value		
7. Deduct current year's other than temporary impairment recognized		
8. Deduct current year's depreciation	353,294	519,403
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)	7,606,158	7,670,910
10. Deduct total nonadmitted amounts		
11. Statement value at end of current period (Line 9 minus Line 10)	7,606,158	7,670,910

SCHEDULE B - VERIFICATION

Mortgage Loans

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

NONE

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

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

NONE

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	317,070,587	290,105,609
2. Cost of bonds and stocks acquired	5,713,538	19,561,400
3. Accrual of discount	19,929	38,655
4. Unrealized valuation increase (decrease)	6,457,307	25,143,344
5. Total gain (loss) on disposals	22,566	254,538
6. Deduct consideration for bonds and stocks disposed of	4,495,362	17,453,904
7. Deduct amortization of premium	261,190	588,715
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized		
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees	5,267	9,660
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	324,532,642	317,070,587
12. Deduct total nonadmitted amounts	26,064	26,061
13. Statement value at end of current period (Line 11 minus Line 12)	324,506,578	317,044,526

STATEMENT AS OF JUNE 30, 2020 OF THE Ohio Mutual Insurance Company

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	69,157,732	767,655	1,745,325	(1,666,018)	69,157,732	66,514,044		69,550,576
2. NAIC 2 (a)	2,239,372			1,545,600	2,239,372	3,784,972		2,235,605
3. NAIC 3 (a)	202,500			47,431	202,500	249,931		
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	71,599,604	767,655	1,745,325	(72,987)	71,599,604	70,548,947		71,786,181
PREFERRED STOCK								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds and Preferred Stock	71,599,604	767,655	1,745,325	(72,987)	71,599,604	70,548,947		71,786,181

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$; NAIC 2 \$; NAIC 3 \$ NAIC 4 \$; NAIC 5 \$; NAIC 6 \$

S102

Schedule DA - Part 1 - Short-Term Investments

N O N E

Schedule DA - Verification - Short-Term Investments

N O N E

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

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

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

N O N E

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

N O N E

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

N O N E

STATEMENT AS OF JUNE 30, 2020 OF THE Ohio Mutual Insurance Company

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	1,440,649	2,226,509
2. Cost of cash equivalents acquired	13,999,305	30,602,778
3. Accrual of discount		1,192
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals		(2)
6. Deduct consideration received on disposals	12,555,205	31,389,828
7. Deduct amortization of premium		
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	2,884,749	1,440,649
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	2,884,749	1,440,649

STATEMENT AS OF JUNE 30, 2020 OF THE Ohio Mutual Insurance Company

SCHEDULE A - PART 2

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

1 Description of Property	Location		4 Date Acquired	5 Name of Vendor	6 Actual Cost at Time of Acquisition	7 Amount of Encumbrances	8 Book/Adjusted Carrying Value Less Encumbrances	9 Additional Investment Made After Acquisition
	2 City	3 State						
Building	Bucyrus	OH	05/07/2020	Integrated Building Systems	4,505		4,467	
Building	Bucyrus	OH	05/07/2020	Integrated Building Systems	6,959		6,901	
Building	Bucyrus	OH	05/18/2020	Gilbane	182,423		175,205	
0199999. Acquired by Purchase					193,887		186,573	
0399999 - Totals					193,887		186,573	

SCHEDULE A - PART 3

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

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

E01

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

NONE

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

NONE

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

NONE

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

NONE

STATEMENT AS OF JUNE 30, 2020 OF THE Ohio Mutual Insurance Company

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation and Admini- strative Symbol
432272-FY-3	HILLSBOROUGH CA SCH DIST		.05/29/2020	RAYMOND JAMES		180,438	250,000		1FE
432272-FZ-0	HILLSBOROUGH CA SCH DIST		.05/29/2020	RAYMOND JAMES		173,408	250,000		1FE
432272-GA-4	HILLSBOROUGH CA SCH DIST		.05/29/2020	RAYMOND JAMES		166,323	250,000		1FE
2499999. Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions						520,169	750,000		XXX
731572-AB-9	RALPH LAUREN CORP		.06/01/2020	BANK OF AMERICA		247,488	250,000		1FE
3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						247,488	250,000		XXX
8399997. Total - Bonds - Part 3						767,657	1,000,000		XXX
8399998. Total - Bonds - Part 5						XXX	XXX	XXX	XXX
8399999. Total - Bonds						767,657	1,000,000		XXX
8999997. Total - Preferred Stocks - Part 3							XXX		XXX
8999998. Total - Preferred Stocks - Part 5						XXX	XXX	XXX	XXX
8999999. Total - Preferred Stocks							XXX		XXX
9799997. Total - Common Stocks - Part 3							XXX		XXX
9799998. Total - Common Stocks - Part 5						XXX	XXX	XXX	XXX
9799999. Total - Common Stocks							XXX		XXX
9899999. Total - Preferred and Common Stocks							XXX		XXX
9999999 - Totals						767,657	XXX		XXX

STATEMENT AS OF JUNE 30, 2020 OF THE Ohio Mutual Insurance Company

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	For- eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid- eration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization)/ Accretion	Current Year's Other Than Temporary Impairment Recogn- ized	Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Con- tractual Maturity Date	NAIC Desig- nation and Admini- strative Symbol
3620AU-TE-4	GOVERNMENT NATL MTG ASSOC #740449		06/01/2020	PAYDOWN		6,782	6,782	7,056	6,783		(1)		(1)		6,782				93	11/15/2040	IFE
3620AW-TA-8	GOVERNMENT NATL MTG ASSOC #742245		06/01/2020	PAYDOWN		917	917	918	917						917				15	01/15/2041	IFE
3620C6-YU-3	GOVERNMENT NATL MTG ASSOC #750523		06/01/2020	PAYDOWN		531	531	552	531						531				9	11/15/2040	IFE
38373Q-GX-3	GOVERNMENT NATIONAL MORTGAGE A 03 34 PM		06/01/2020	PAYDOWN		1,487	1,487	1,535	1,490		(3)		(3)		1,487				24	04/20/2033	IFE
38374T-LA-0	GOVERNMENT NATIONAL MORTGAGE A 09 15 NK		05/01/2020	PAYDOWN		228	228	234	228						228				4	12/20/2038	IFE
38376F-LH-3	GOVERNMENT NATIONAL MORTGAGE A 09 66 EJ		06/01/2020	PAYDOWN		812	812	847	815		(3)		(3)		812				13	07/16/2039	IFE
38376G-DN-7	GOVERNMENT NATIONAL MORTGAGE A 10 18 C		06/01/2020	PAYDOWN		41,297	41,297	43,336	41,683		(386)		(386)		41,297				825	03/16/2051	IFE
38376T-BF-8	GOVERNMENT NATIONAL MORTGAGE A 10 12 DA		06/01/2020	PAYDOWN		1,274	1,274	1,318	1,276		(2)		(2)		1,274				25	01/16/2040	IFE
38377V-ZM-7	GOVERNMENT NATIONAL MORTGAGE A 11 71 QE		06/01/2020	PAYDOWN		3,136	3,136	3,283	3,148		(12)		(12)		3,136				46	09/16/2040	IFE
0599999	Subtotal - Bonds - U.S. Governments					56,464	56,464	59,079	56,871		(407)		(407)		56,464				1,054	XXX	XXX
3128MM-LD-3	FEDERAL HOME LN MTG CORP #G18323		06/01/2020	PAYDOWN		1,359	1,359	1,399	1,363		(4)		(4)		1,359				25	09/01/2024	IFE
3131XJ-F9-8	UMBS - POOL ZL2892		06/01/2020	PAYDOWN		20,901	20,901	21,365	20,936		(35)		(35)		20,901				269	04/01/2042	IFE
3131XJ-G2-2	UMBS - POOL ZL2917		06/01/2020	PAYDOWN		12,677	12,677	12,958	12,703		(26)		(26)		12,677				217	04/01/2042	IFE
3131XQ-SZ-5	UMBS - POOL ZL8964		06/01/2020	PAYDOWN		13,594	13,594	14,280	13,615		(21)		(21)		13,594				221	01/01/2045	IFE
3131XQ-VR-4	UMBS - POOL ZL8724		06/01/2020	PAYDOWN		6,902	6,902	7,169	6,918		(16)		(16)		6,902				100	11/01/2044	IFE
31329K-X9-0	UMBS - POOL ZA2504		06/01/2020	PAYDOWN		38,314	38,314	37,494	38,254		61		61		38,314				456	04/01/2038	IFE
3132A1-AW-4	UMBS - POOL ZS0921		06/01/2020	PAYDOWN		1,439	1,439	1,507	1,444		(5)		(5)		1,439				27	10/01/2035	IFE
3132A4-6S-2	UMBS - POOL ZS4481		06/01/2020	PAYDOWN		15,612	15,612	15,958	15,636		(25)		(25)		15,612				236	04/01/2042	IFE
3136A7-GW-6	FANNIE MAE 12 67 KA		06/01/2020	PAYDOWN		8,668	8,668	9,129	8,710		(42)		(42)		8,668				121	05/25/2041	IFE
3136A7-QU-9	FANNIE MAE 12 86 CF		06/25/2020	PAYDOWN		9,551	9,551	9,563	9,561		(9)		(9)		9,551				68	04/25/2039	IFE
3136AD-EF-2	FANNIE MAE 13 36 AG		06/01/2020	PAYDOWN		5,220	5,220	5,327	5,229		(9)		(9)		5,220				65	12/25/2036	IFE
3136AJ-6B-7	FANNIE MAE 14 27 NV		06/01/2020	PAYDOWN		4,681	4,681	4,841	4,689		(8)		(8)		4,681				59	06/25/2027	IFE
3136AK-DG-5	FANNIE MAE 14 36 QB		06/01/2020	PAYDOWN		5,390	5,390	5,515	5,398		(8)		(8)		5,390				68	09/25/2033	IFE
3136AK-P4-9	FANNIE MAE 14 54 PN		06/01/2020	PAYDOWN		10,904	10,904	11,357	10,934		(30)		(30)		10,904				163	08/25/2043	IFE
3136AL-MX-6	FANNIE MAE 14 73 PJ		06/01/2020	PAYDOWN		6,363	6,363	6,573	6,379		(16)		(16)		6,363				83	12/25/2043	IFE
31376K-LZ-7	UMBS - POOL 357744		04/01/2020	PAYDOWN		10	10	10	10						10					04/02/2020	IFE
3137B9-BZ-7	FHLMC MULTIFAMILY STRUCTURED P KF03 A		04/25/2020	PAYDOWN		4,042	4,042	4,042	4,042						4,042				27	01/25/2021	IFE
3137BC-R6-7	FREDDIE MAC 4374 CE		06/01/2020	PAYDOWN		5,899	5,899	6,165	5,915		(16)		(16)		5,899				85	12/15/2043	IFE
3138EN-2N-8	UMBS - POOL AL6180		06/01/2020	PAYDOWN		35,322	35,322	37,915	35,547		(225)		(225)		35,322				611	01/01/2045	IFE
3138EP-WS-9	UMBS - POOL AL6956		06/01/2020	PAYDOWN		9,026	9,026	9,386	9,039		(13)		(13)		9,026				116	06/01/2045	IFE
3138M9-PE-5	UMBS - POOL AP5820		06/01/2020	PAYDOWN		1,470	1,470	1,473	1,473		(3)		(3)		1,470				18	11/01/2042	IFE
3138W1-GD-3	UMBS - POOL AR3795		06/01/2020	PAYDOWN		2,543	2,543	2,618	2,547		(4)		(4)		2,543				32	02/01/2043	IFE
3138W4-M2-4	UMBS - POOL AR6676		06/01/2020	PAYDOWN		21,513	21,513	22,307	21,546		(32)		(32)		21,513				256	02/01/2043	IFE
3138WE-KE-8	UMBS - POOL AS4792		06/01/2020	PAYDOWN		29,383	29,383	29,521	29,392		(9)		(9)		29,383				441	04/01/2045	IFE
3138X0-YU-6	UMBS - POOL AU1622		06/01/2020	PAYDOWN		39,597	39,597	39,263	39,580		16		16		39,597				599	07/01/2043	IFE
31393R-TE-0	FREDDIE MAC 2631 DA		06/01/2020	PAYDOWN		585	585	580	584		1		1		585				9	06/15/2033	IFE
31394K-L3-6	FREDDIE MAC 2682 TF		06/15/2020	PAYDOWN		3,216	3,216	3,241	3,219		(3)		(3)		3,216				23	10/15/2033	IFE
31394R-Y6-0	FREDDIE MAC 2761 QB		06/01/2020	PAYDOWN		723	723	740	725		(2)		(2)		723				13	12/15/2033	IFE
31396Y-SH-6	FANNIE MAE 08 17 DP		06/01/2020	PAYDOWN		964	964	1,007	968		(4)		(4)		964				19	02/25/2038	IFE
31397C-V5-5	FREDDIE MAC 3239 EF		06/15/2020	PAYDOWN		5,713	5,713	5,723	5,715		(2)		(2)		5,713				37	11/15/2036	IFE
31398C-D4-7	FREDDIE MAC 3527 DA		06/01/2020	PAYDOWN		872	872	904	876		(4)		(4)		872				14	04/15/2029	IFE
31398S-CH-4	FANNIE MAE 10 122 AC		06/01/2020	PAYDOWN		2,677	2,677	2,802	2,687		(10)		(10)		2,677				40	08/25/2022	IFE
31402C-V7-4	UMBS - POOL 725238		06/01/2020	PAYDOWN		735	735	688	732		2		2		735				15	03/01/2034	IFE
31406S-PD-8	UMBS - POOL BH4019		06/01/2020	PAYDOWN		131,360	131,360	137,928	131,837		(477)		(477)		131,360				2,215	09/01/2047	IFE
3140K3-J2-9	UMBS - POOL B07480		06/01/2020	PAYDOWN		45,791	45,791	47,208	45,791		(15)		(15)		45,791				374	12/01/2049	IFE
31417S-AP-5	UMBS - POOL AC5413		06/01/2020	PAYDOWN		2,820	2,820	2,919	2,832		(12)		(12)		2,820				53	10/01/2024	IFE
31418C-YN-8	UMBS - POOL MA3416		06/01/2020	PAYDOWN		51,006	51,006	53,029	51,311		(305)		(305)		51,006				969	07/01/2048	IFE
31418N-QV-5	UMBS - POOL AD1367		06/01/2020	PAYDOWN		1,358	1,358	1,416	1,361		(4)		(4)		1,358				25	03/01/2025	IFE
31418P-6M-2	UMBS - POOL AD2675		06/01/2020	PAYDOWN		2,103	2,103	2,194	2,107		(4)		(4)		2,103				39	03/01/2025	IFE
31418P-K7-9	UMBS - POOL AD2117		06/01/2020	PAYDOWN		2,389	2,389	2,493	2,398		(9)		(9)		2,389				46	03/01/2025	IFE
455114-HA-9	INDIANA ST UNIV		05/22/2020	MESTROW FINANCIAL INC. SECURITY CALLED BY		267,060	250,000	306,345	264,766		(2,606)		(2,606)		262,160		4,900	4,900	8,194	04/01/2023	IFE
54810C-6R-6	LOWER COLORADO RIVER TX AUTH R		05/15/2020	ISSUER at 100,000		250,000	250,000	284,573	251,565		(1,565)		(1,565)		250,000				6,250	05/15/2021	IFE
60416Q-GB-4	MINNESOTA ST HSG FIN AGY HOMEQ		06/01/2020	SINK FUND PAYMENT		5,716	5,716	5,716	5,716						5,716				71	11/01/2044	IFE
708796-3D-7	PENNSYLVANIA ST HSG FIN AGY SF		06/30/2020	SINK FUND PAYMENT		10,000	10,000	10,716	10,033		(33)		(33)		10,000				181	10/01/2046	IFE
3199999	Subtotal - Bonds - U.S. Special Revenues					1,095,468	1,078,408	1,187,432	1,050,292		(5,531)		(5,531)		1,090,568		4,900	4,900	22,951	XXX	XXX
02004V-AC-7	ALLY AUTO RECEIVABLES TRUST 18-2 A3		06/15/2020	PAYDOWN		166,448	166,448	166,417	166,310		138										

STATEMENT AS OF JUNE 30, 2020 OF THE Ohio Mutual Insurance Company

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22	
										11	12	13	14	15								
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/(Decrease)	Current Year's (Amortization)/Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in Book/Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation and Administrative Symbol	
36255J-AD-6	GM FINANCIAL SECURITIZED TERM 18-3 A3		06/16/2020	PAYDOWN		88,422	88,422	88,401	88,313		108		108		88,422				1,180	05/16/2023	1FE	
43800K-AB-3	HOMEWARD OPPORTUNITIES FUND 1 19-3 A2		06/01/2020	PAYDOWN		31,172	31,172	31,172	31,172						31,172				374	11/25/2059	1FE	
59166E-AB-1	METLIFE SECURITIZATION TRUST 19-1A A1A		06/01/2020	PAYDOWN		11,675	11,675	11,887	11,693		(17)		(17)		11,675				175	04/25/2058	1FM	
64830D-AB-9	NEW RESIDENTIAL MORTGAGE LOAN 19-2A A1		06/01/2020	PAYDOWN		30,946	30,946	31,705	31,007		(61)		(61)		30,946				547	12/25/2057	1FM	
79548K-UV-8	SALOMON BROTHERS MORTGAGE 97 HUD1 B3		06/01/2020	PAYDOWN		221	221												4	12/25/2030	1FM	
86212X-AB-6	STORE MASTER FUNDING LLC 19-1 A2		06/20/2020	PAYDOWN		1,286	1,286	1,286	1,284		2		2		1,286				20	11/20/2049	1FE	
89176U-AN-4	TOWD POINT MORTGAGE TRUST 20-2 A1A		06/01/2020	PAYDOWN		17,490	17,490	17,664			(1)		(1)		17,490				33	04/25/2060	1FE	
80685Q-AA-4	SCHLUMBERGER OILFIELD UK	D	06/29/2020	102,107 CALLED BY ISSUER at		255,267	250,000	257,053	252,282		(1,425)		(1,425)		250,857		(857)	(857)	15,300	01/15/2021	1FE	
3899999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					602,706	597,660	605,585	582,061		(1,256)		(1,256)		598,296		(857)	(857)	19,637		XXX	
8399997	Total - Bonds - Part 4					1,754,638	1,732,532	1,852,096	1,689,224		(7,194)		(7,194)		1,745,328		4,043	4,043	43,642		XXX	
8399998	Total - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX
8399999	Total - Bonds					1,754,638	1,732,532	1,852,096	1,689,224		(7,194)		(7,194)		1,745,328		4,043	4,043	43,642		XXX	
8999997	Total - Preferred Stocks - Part 4						XXX															XXX
8999998	Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX
8999999	Total - Preferred Stocks						XXX															XXX
9799997	Total - Common Stocks - Part 4						XXX															XXX
9799998	Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX
9799999	Total - Common Stocks						XXX															XXX
9899999	Total - Preferred and Common Stocks						XXX															XXX
9999999	Totals					1,754,638	XXX	1,852,096	1,689,224		(7,194)		(7,194)		1,745,328		4,043	4,043	43,642		XXX	

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees

N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

N O N E

