



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2021
OF THE CONDITION AND AFFAIRS OF THE

The National Mutual Insurance Company

NAIC Group Code 0035 (Current) 0035 (Prior) NAIC Company Code 20184 Employer's ID Number 34-4312510

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

Incorporated/Organized 09/14/1914 Commenced Business 01/07/1915

Statutory Home Office 1 Insurance Square, Celina, OH, US 45822-1690
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 1 Insurance Square, Celina, OH, US 45822-1690
(Street and Number) (City or Town, State, Country and Zip Code)
419-586-5181 (Area Code) (Telephone Number)

Mail Address 1 Insurance Square, Celina, OH, US 45822-1690
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 1 Insurance Square, Celina, OH, US 45822-1690
(Street and Number) (City or Town, State, Country and Zip Code)
419-586-5181-8238 (Area Code) (Telephone Number)

Internet Website Address www.celinainsurance.com

Statutory Statement Contact Michael Stanley Kleinhenz, 419-586-5181-8238
(Name) (Area Code) (Telephone Number)
mike.kleinhenz@celinainsurance.com, 419-586-6068
(E-mail Address) (FAX Number)

OFFICERS

President William West Montgomery Treasurer Michael Stanley Kleinhenz
Secretary Suzanne Lynn Wells

OTHER

Robert Mark Shoenfelt, Sr. VP - CIO Theodore Joseph Wissman #, Sr. VP - COO Scott William Montgomery #, Assistant Secretary

DIRECTORS OR TRUSTEES

William West Montgomery - Chairman Philip Marion Fullenkamp Nancy Montgomery Goldberg - Vice Chairman
David Thomas Mellin Wesley Moore Jetter John Michael Lazarich
Collin Jay Bryan John Richard Gregg

State of Ohio SS
County of Mercer

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.

William West Montgomery Suzanne Lynn Wells Michael Stanley Kleinhenz
Chairman, President, CEO and General Manager Secretary Sr. VP - CFO and Treasurer

Subscribed and sworn to before me this February 2022 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.....

Lori Homan
Accounting and Finance Manager
February 28, 2027



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0035

BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2021

NAIC Company Code 20184

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	594,267	600,388		303,316	151,602	121,520	55,395	1,635	106	430	97,395	8,258
2.1 Allied lines	238,911	239,800		121,601	196,524	164,072	4,155	3,697	3,513	17	39,155	3,320
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	7,607,485	7,900,543		3,938,301	5,203,458	5,578,663	2,328,193	33,634	(55,401)	298,607	1,553,044	105,715
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	195,969	207,606		99,349	31,748	25,346	13,198				40,930	2,723
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake	93,802	100,112		45,947							19,336	1,304
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	370,471	374,593		181,799	785,000	(335,150)	385,375	19,784	(171,791)	95,305	45,725	5,149
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	4,234,229	4,382,169		2,007,595	3,363,102	3,181,655	3,102,116	179,547	130,183	402,640	619,327	58,840
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	3,709,994	3,777,935		1,745,572	1,982,032	2,102,866	124,522	250	1,330	2,651	553,470	51,555
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)	17,045,128	17,583,146		8,443,480	11,713,465	10,838,972	6,012,953	238,547	(92,059)	799,650	2,968,382	236,863
<b>DETAILS OF WRITE-INS</b>												
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 \$ 125,300

(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 .....

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0035

BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2021

NAIC Company Code 20184

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	22,617	26,591		11,047	27,589	(3,461)	75		(77)	1	3,496	261
2.1 Allied lines	54,193	63,733		27,005	68,038	61,588	300		(39)	4	8,376	626
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	1,391,172	1,890,198		672,847	2,381,154	1,887,996	414,665	44,936	(46,705)	65,422	248,157	16,075
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	30,277	41,571		14,408	8,495	8,495	50				4,903	350
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake	3,220	4,182		1,518							582	37
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	97,975	112,680		46,906	1,067,620	1,067,620	1,077,445		191,949	194,750	10,443	1,132
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	1,765,145	1,945,615		836,354	1,065,265	1,342,063	1,788,521	55,104	59,754	213,704	256,538	20,396
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	2,395,215	2,575,293		1,137,360	1,463,368	1,402,175	47,234	838	239	1,352	357,022	27,677
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)	5,759,814	6,659,863		2,747,444	5,013,909	5,766,476	3,328,290	100,878	205,121	475,233	889,518	66,555
<b>DETAILS OF WRITE-INS</b>												
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 \$ 24,514

(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 .....

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)**

NAIC Group Code 0035

BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2021

NAIC Company Code 20184

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
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												152
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												152
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												152
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												152
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)												606
<b>DETAILS OF WRITE-INS</b>												
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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0035

BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2021

NAIC Company Code 20184

Table with 12 columns: Line of Business, Direct Premiums Written, 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. Rows include Fire, Multiple peril crop, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril, Mortgage guaranty, Ocean marine, Inland marine, Financial guaranty, Medical professional liability, Earthquake, Group accident and health, Credit accident and health, Medicare Title XVIII, Workers' compensation, Products liability, Private passenger auto, Commercial auto, Aircraft, Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, International, Warranty, and Aggregate write-ins for other lines of business.

(a) Finance and service charges not included in Lines 1 to 35 \$ 170,860

(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

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0035

BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2021

NAIC Company Code 20184

Table with 12 columns: Line of Business, Direct Premiums Written, 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. Rows include various insurance categories like Fire, Multiple peril crop, Commercial multiple peril, etc., ending with a TOTALS row.

19.PA

(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



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0035

BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2021

NAIC Company Code 20184

Table with 12 columns: Line of Business, Direct Premiums Written, 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. Rows include Fire, Multiple peril crop, Federal flood, Private crop, Private flood, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril (non-liability portion), Commercial multiple peril (liability portion), Mortgage guaranty, Ocean marine, Inland marine, Financial guaranty, Medical professional liability, Earthquake, Group accident and health (b), Credit accident and health (group and individual), Collectively renewable accident and health (b), Non-cancelable accident and health(b), Guaranteed renewable accident and health(b), Non-renewable for stated reasons only (b), Other accident only, Medicare Title XVIII exempt from state taxes or fees, All other accident and health (b), Federal employees health benefits plan premium (b), Workers' compensation, Other Liability - occurrence, Other Liability - claims made, Excess workers' compensation, Products liability, Private passenger auto no-fault (personal injury protection), Other private passenger auto liability, Other commercial auto liability, Private passenger auto physical damage, Commercial auto physical damage, Aircraft (all perils), Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, International, Warranty, Aggregate write-ins for other lines of business, TOTALS (a), and DETAILS OF WRITE-INS (3401-3403, 3498, 3499).

(a) Finance and service charges not included in Lines 1 to 35 \$ 34,465

(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

19.TN



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0035

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2021

NAIC Company Code 20184

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire	1,825,573	1,831,868		952,722	412,082	540,183	283,219	5,623	5,823	3,600	304,880	39,750
2.1 Allied lines	928,224	931,667		483,403	624,008	621,806	50,305	6,730	7,130	700	155,253	17,274
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	20,413,038	21,565,145		10,403,292	12,848,802	13,679,320	5,361,847	156,825	(17,975)	695,600	4,120,352	343,593
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9. Inland marine	518,200	554,728		251,826	114,999	108,522	13,448				104,426	7,741
10. Financial guaranty												
11. Medical professional liability												
12. Earthquake	242,758	253,820		119,167							49,306	3,722
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							10,266					152
17.1 Other Liability - occurrence	1,153,345	1,172,804		564,728	1,601,500	1,427,220	1,837,470	19,784	19,484	379,000	141,852	17,550
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	12,090,487	12,462,809		5,595,376	7,495,562	8,758,703	9,291,131	332,977	339,377	1,107,000	1,803,645	169,774
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	12,716,002	12,914,748		5,840,238	6,688,814	6,786,100	386,384	10,902	11,202	8,000	1,932,383	176,924
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)	49,887,627	51,687,589		24,210,753	29,785,768	31,921,856	17,234,070	532,841	365,041	2,193,900	8,612,098	776,480
<b>DETAILS OF WRITE-INS</b>												
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 \$ 355,139

(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 .....

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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE F - PART 1**

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On		8 Cols. 6 + 7	9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE								
34-4202015	20176	CELINA MUT INS CO	OH	99,333	4,560	15,094	19,654	1,600	6,849	47,220				
31-0617569	16764	MIAMI MUT INS CO	OH	5,246	285	922	1,207	70	457	2,099				
0199999. Affiliates - U.S. Intercompany Pooling				104,579	4,845	16,016	20,861	1,670	7,305	49,320				
0499999. Total - U.S. Non-Pool														
0799999. Total - Other (Non-U.S.)														
0899999. Total - Affiliates				104,579	4,845	16,016	20,861	1,670	7,305	49,320				
AA-9992114	00000	MICHIGAN WORKERS COMP INS PLACEMENT FACILITY	MI			16	16							
AA-9992118	00000	NATIONAL WORKERS COMP REINS POOL	NY			35	35							
1099999. Total Pools, Associations or Other Similar Facilities - Mandatory Pools						50	50							
1299999. Total - Pools and Associations						50	50							
9999999 Totals				104,579	4,845	16,066	20,911	1,670	7,305	49,320				

**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
<b>NONE</b>					

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE F - PART 3**

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals	17 Ceded Balances Payable		18 Other Amounts Due to Reinsurers			
34-4202015	20176	CELINA MUT INS CO	OH		51,373	2,466	102	8,653		5,130	2,483	26,462	874	46,170		3,441		42,729		
31-0617569	16764	MIAMI MUT INS CO	OH		42,811	2,055	85	7,211		4,275	2,069	22,051	729	38,475		2,867		35,607		
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling					94,184	4,521	187	15,864		9,404	4,552	48,513	1,603	84,645		6,308		78,336		
0499999. Total Authorized - Affiliates - U.S. Non-Pool																				
0799999. Total Authorized - Affiliates - Other (Non-U.S.)																				
0899999. Total Authorized - Affiliates					94,184	4,521	187	15,864		9,404	4,552	48,513	1,603	84,645		6,308		78,336		
95-3187355	35300	ALLIANZ GLOBAL RISKS US INS CO	IL		303	29		31		7				67		(6)		73		
06-1182357	22730	ALLIED WORLD INS CO	NH		195						1		(2)	(1)		2		(3)		
36-2661954	10103	AMERICAN AGRICULTURAL INS CO	IN		685	29		130		301	62		(3)	519		(29)		548		
13-5124990	19380	AMERICAN HOME ASSUR CO	NY		(1)															
39-6040366	19283	AMERICAN STANDARD INS CO OF WI	WI		151															
06-1430254	10348	ARCH REINS CO	DE		46											9		(9)		
51-0434766	20370	AXIS REINS CO	NY		299	55		78		22				155		(5)		160		
47-0574325	32603	BERKLEY INS CO	DE		634	10		11		38	20		(2)	77		(20)		98		
42-0234980	21415	EMPLOYERS MUT CAS CO	IA		1,373	21		244		450	106		(2)	819		(22)		842		
35-2293075	11551	ENDURANCE ASSUR CORP	DE		263	4		63		89	40		(1)	195		(16)		211		
05-0316605	21482	FACTORY MUT INS CO	RI		51	5						26		40		12		28		
42-0245840	13897	FARMERS MUT HAIL INS CO OF IA	IA		368	9		66		176	35		(1)	283		(15)		299		
13-2673100	22039	GENERAL REINS CORP	DE																	
95-2769232	27847	INSURANCE CO OF THE WEST	CA		382	11		25		6				42		(3)		45		
06-1481194	10829	MARKEL GLOBAL REINS CO	DE		139											38		(38)		
13-3031176	38636	PARTNER REINS CO OF THE US	NY		263	4		63		84	37			187		(16)		203		
52-1952955	10357	RENAISSANCE REINS US INC	MD		54	2		44		114	17			177		(2)		179		
43-0727872	15105	SAFETY NATL CAS CORP	MO													9		(9)		
75-1444207	30058	SCOR REINS CO	NY								1		(1)							
13-1675535	25364	SWISS REINS AMER CORP	NY		1,117	61		229		239	98		(4)	623		(23)		646		
13-2918573	42439	TOA RE INS CO OF AMER	DE			1		6		44	24		(3)	72		(16)		88		
13-5616275	19453	TRANSATLANTIC REINS CO	NY		1,041	5		113		101	40			260		(5)		264		
42-0644327	13021	UNITED FIRE & CAS CO	IA		46											9		(9)		
13-1290712	20583	XL REINS AMER INC	NY		46											13		(13)		
0999999. Total Authorized - Other U.S. Unaffiliated Insurers					7,459	246		1,103		1,672	481	26	(11)	3,517		(87)		3,604		
AA-9991501	00000	INDIANA MINE SUBSIDENCE FUND	IN		1															
AA-9991503	00000	OHIO MINE SUBSIDENCE FUND	OH		1															
1099999. Total Authorized - Pools - Mandatory Pools					3															
AA-3194130	00000	ENDURANCE SPECIALTY INS LTD	BMU																	
AA-1127414	00000	LLOYD'S SYNDICATE NUMBER 1414	GBR													(83)		83		
AA-1120156	00000	LLOYD'S SYNDICATE NUMBER 1686	GBR		252	17		24		7				48		(2)		50		
AA-1128001	00000	LLOYD'S SYNDICATE NUMBER 2001	GBR																	
AA-1128003	00000	LLOYD'S SYNDICATE NUMBER 2003	GBR																	
AA-1128791	00000	LLOYD'S SYNDICATE NUMBER 2791	GBR		132	7		4						11		(5)		15		
AA-1128987	00000	LLOYD'S SYNDICATE NUMBER 2987	GBR													6		(6)		
AA-1129000	00000	LLOYD'S SYNDICATE NUMBER 3000	GBR		46											9		(9)		
AA-1120184	00000	LLOYD'S SYNDICATE NUMBER 3268	GBR		78	11		15		4				30				30		
AA-1126004	00000	LLOYD'S SYNDICATE NUMBER 4444	GBR		111	(1)		4						3				1		
AA-1120181	00000	LLOYD'S SYNDICATE NUMBER 5886	GBR																	
AA-1126435	00000	LLOYD'S SYNDICATE NUMBER 435	GBR		116											30		(30)		
AA-1126609	00000	LLOYD'S SYNDICATE NUMBER 609	GBR		31	4		6		2				12				12		
1299999. Total Authorized - Other Non-U.S. Insurers					767	38		53		13				103		(45)		148		
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)					102,413	4,806	187	17,020		11,089	5,033	48,539	1,592	88,265		6,177		82,088		

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE F - PART 3**

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties	
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers			
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool																				
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)																				
2299999. Total Unauthorized - Affiliates																				
AA-3191400	00000	CONVEX RE LTD	BMU		264	15		14		3				31		(4)		35		
		DEVK RUCKVERSICHERUNGS UND BETEILIGUNGS AG																		
AA-1340028	00000		DEU		456	50		53		16				119		(3)		122		
AA-1560350	00000	FARM MUT REINS PLAN LTD	CAN		515	(116)		110		95	10			100		(6)		106		
AA-5340310	00000	GEN INS CORP OF INDIA	IND		1	49		45		9				102		(11)		113		
AA-1340125	00000	HANNOVER RUECK SE	DEU		2,190	61		373		715	186		(7)	1,329		(69)		1,397		
AA-5420050	00000	KOREAN REINS CO	PRK		57	63		66		24				154		3		150		
AA-3190829	00000	MARKEL BERMUDA LTD	BMU		(3)	8		55		9				72		(15)		87		
AA-5340660	00000	NEW INDIA ASSUR CO LTD	IND																	
AA-5320039	00000	PEAK REINS CO LTD	HKG																	
AA-5324100	00000	TAIPING REINS CO LTD	HKG		56	23		25		8				56		1		55		
2699999. Total Unauthorized - Other Non-U.S. Insurers						3,535	154		741		879	196	(7)	1,962		(104)		2,066		
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)						3,535	154		741		879	196	(7)	1,962		(104)		2,066		
3299999. Total Certified - Affiliates - U.S. Non-Pool																				
3599999. Total Certified - Affiliates - Other (Non-U.S.)																				
3699999. Total Certified - Affiliates																				
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																				
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool																				
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)																				
5099999. Total Reciprocal Jurisdiction - Affiliates																				
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)																				
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)						105,948	4,959	187	17,761		11,968	5,229	48,539	1,585	90,227		6,073		84,154	
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																				
9999999 Totals						105,948	4,959	187	17,761		11,968	5,229	48,539	1,585	90,227		6,073		84,154	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
34-4202015	CELINA MUT INS CO				3,441	42,729		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
31-0617569	MIAMI MUT INS CO				2,867	35,607		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling			XXX	6,308	78,336		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	6,308	78,336									XXX		
95-3187355	ALLIANZ GLOBAL RISKS US INS CO				(6)	73		67	80	(6)	87			87	2	4	
06-1182357	ALLIED WORLD INS CO				(1)										3		
36-2661954	AMERICAN AGRICULTURAL INS CO				(29)	548		519	623	(29)	652			652	3	31	
13-5124990	AMERICAN HOME ASSUR CO														3		
39-6040366	AMERICAN STANDARD INS CO OF WI														3		
06-1430254	ARCH REINS CO														2		
51-0434766	AXIS REINS CO				(5)	160		155	186	(5)	191			191	3	9	
47-0574325	BERKLEY INS CO				(20)	98		77	92	(20)	113			113	2	5	
42-0234980	EMPLOYERS MUT CAS CO				(22)	842		819	983	(22)	1,005			1,005	3	48	
35-2293075	ENDURANCE ASSUR CORP				(16)	211		195	234	(16)	250			250	2	10	
05-0316605	FACTORY MUT INS CO				12	28		40	48		36			36	2	1	
42-0245840	FARMERS MUT HAIL INS CO OF IA				(15)	299		283	340	(15)	355			355	4	19	
13-2673100	GENERAL REINS CORP														1		
95-2769232	INSURANCE CO OF THE WEST				(3)	45		42	51	(3)	54			54	3	3	
06-1481194	MARKEL GLOBAL REINS CO														3		
13-3031176	PARTNER REINS CO OF THE US				(16)	203		187	225	(16)	241			241	2	10	
52-1952955	RENAISSANCE REINS US INC				(2)	179		177	212	(2)	215			215	2	9	
43-0727872	SAFETY NATL CAS CORP														1		
75-1444207	SCOR REINS CO														2		
13-1675535	SWISS REINS AMER CORP				(23)	646		623	748	(23)	771			771	2	32	
13-2918573	TOA RE INS CO OF AMER				(16)	88		72	86	(16)	102			102	3	5	
13-5616275	TRANSATLANTIC REINS CO				(5)	264		260	311	(5)	316			316	2	13	
42-0644327	UNITED FIRE & CAS CO														3		
13-1290712	XL REINS AMER INC														2		
0999999	Total Authorized - Other U.S. Unaffiliated Insurers			XXX	(167)	3,684		3,517	4,221	(166)	4,387			4,387	XXX	198	
AA-9991501	INDIANA MINE SUBSIDENCE FUND							XXX	XXX	XXX	XXX			XXX	XXX	XXX	
AA-9991503	OHIO MINE SUBSIDENCE FUND							XXX	XXX	XXX	XXX			XXX	XXX	XXX	
1099999	Total Authorized - Pools - Mandatory Pools			XXX				XXX	XXX	XXX	XXX			XXX	XXX	XXX	
AA-3194130	ENDURANCE SPECIALTY INS LTD														2		
AA-1127414	LLOYD'S SYNDICATE NUMBER 1414				(83)	83				(83)	83			83	2	3	
AA-1120156	LLOYD'S SYNDICATE NUMBER 1686				(2)	50		48	58	(2)	60			60	2	2	
AA-1128001	LLOYD'S SYNDICATE NUMBER 2001														2		
AA-1128003	LLOYD'S SYNDICATE NUMBER 2003														2		
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791				(5)	15		11	13	(5)	17			17	2	1	
AA-1128987	LLOYD'S SYNDICATE NUMBER 2987														2		
AA-1129000	LLOYD'S SYNDICATE NUMBER 3000														2		

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
AA-1120184	LLOYD'S SYNDICATE NUMBER 3268					.30		.30	.36		.36		.36	2		1	
AA-1126004	LLOYD'S SYNDICATE NUMBER 4444				.1	.1		.3	.3	.1	.2		.2	2			
AA-1120181	LLOYD'S SYNDICATE NUMBER 5886													2			
AA-1126435	LLOYD'S SYNDICATE NUMBER 435													2			
AA-1126609	LLOYD'S SYNDICATE NUMBER 609					.12		.12	.14		.15		.15	2		1	
1299999	Total Authorized - Other Non-U.S. Insurers			XXX		(89)	192	104	124	(88)	213		213	XXX		9	
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			XXX		6,053	82,212	3,621	4,345	(254)	4,600		4,600	XXX		207	
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-3191400	CONVEX RE LTD		253	0006		31		31	37	(4)	41		41	4		2	
AA-1340028	DEVK RUCKVERSICHERUNGS UND BETEILIGUNGS AG		1,087	0005		119		118	141	(3)	145		145	3		7	
AA-1560350	FARM MUT REINS PLAN LTD		1,528	0001		100		100	120	(6)	126		126	4		6	
AA-5340310	GEN INS CORP OF INDIA		853	0007		102		102	123	(11)	134		134	5		7	
AA-1340125	HANNOVER RUECK SE	1,397				1,329		1,329	1,594	(69)	1,663		1,397	2		57	
AA-5420050	KOREAN REINS CO		1,464	0008		154		154	185	3	181		181	3		9	
AA-3190829	MARKEL BERMUDA LTD	87				72		72	87	(15)	102		87	3		4	
AA-5340660	NEW INDIA ASSUR CO LTD		220	0002										5		1	
AA-5320039	PEAK REINS CO LTD		220	0003										4			
AA-5324100	TAIPING REINS CO LTD		465	0004		56		56	67	1	66		66	3		3	
2699999	Total Unauthorized - Other Non-U.S. Insurers	1,485	6,090	XXX		1,962		1,961	2,353	(104)	2,457		2,177	280	XXX	95	12
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	1,485	6,090	XXX		1,962		1,961	2,353	(104)	2,457		2,177	280	XXX	95	12
3299999	Total Certified - Affiliates - U.S. Non-Pool			XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
3599999	Total Certified - Affiliates - Other (Non-U.S.)			XXX										XXX			
3699999	Total Certified - Affiliates			XXX										XXX			
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)			XXX										XXX			
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool			XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)			XXX										XXX			
5099999	Total Reciprocal Jurisdiction - Affiliates			XXX										XXX			
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)			XXX										XXX			
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	1,485	6,090	XXX		8,015	82,212	5,582	6,699	(358)	7,057		2,177	4,880	XXX	95	218
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)			XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
9999999	Totals	1,485	6,090	XXX		8,015	82,212	5,582	6,699	(358)	7,057		2,177	4,880	XXX	95	218

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46+48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37	Overdue				43										
		Current	38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38+39 +40+41										
34-4202015	CELINA MUT INS CO	2,568					2,568		2,568								YES
31-0617569	MIAMI MUT INS CO	2,140					2,140		2,140								YES
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling	4,708					4,708		4,708								XXX
0499999	Total Authorized - Affiliates - U.S. Non-Pool																XXX
0799999	Total Authorized - Affiliates - Other (Non-U.S.)																XXX
0899999	Total Authorized - Affiliates	4,708					4,708		4,708								XXX
95-3187355	ALLIANZ GLOBAL RISKS US INS CO	29					29		29								YES
06-1182357	ALLIED WORLD INS CO																YES
36-2661954	AMERICAN AGRICULTURAL INS CO	29					29		29								YES
13-5124990	AMERICAN HOME ASSUR CO											100.0					YES
39-6040366	AMERICAN STANDARD INS CO OF WI																YES
06-1430254	ARCH REINS CO																YES
51-0434766	AXIS REINS CO	55					55		55								YES
47-0574325	BERKLEY INS CO	10					10		10								YES
42-0234980	EMPLOYERS MUT CAS CO	21					21		21								YES
35-2293075	ENDURANCE ASSUR CORP	4					4		4								YES
05-0316605	FACTORY MUT INS CO	5					5		5								YES
42-0245840	FARMERS MUT HAIL INS CO OF IA	9					9		9								YES
13-2673100	GENERAL REINS CORP																YES
95-2769232	INSURANCE CO OF THE WEST	11					11		11								YES
06-1481194	MARKEL GLOBAL REINS CO																YES
13-3031176	PARTNER REINS CO OF THE US	4					4		4								YES
52-1952955	RENAISSANCE REINS US INC	2					2		2								YES
43-0727872	SAFETY NATL CAS CORP																YES
75-1444207	SCOR REINS CO																YES
13-1675535	SWISS REINS AMER CORP	61					61		61								YES
13-2918573	TOA RE INS CO OF AMER	1					1		1								YES
13-5616275	TRANSATLANTIC REINS CO	5					5		5								YES
42-0644327	UNITED FIRE & CAS CO																YES
13-1290712	XL REINS AMER INC																YES
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	246					247		247			0.1					XXX
AA-9991501	INDIANA MINE SUBSIDENCE FUND																YES
AA-9991503	OHIO MINE SUBSIDENCE FUND																YES
1099999	Total Authorized - Pools - Mandatory Pools																XXX
AA-3194130	ENDURANCE SPECIALTY INS LTD																YES
AA-1127414	LLOYD'S SYNDICATE NUMBER 1414																YES
AA-1120156	LLOYD'S SYNDICATE NUMBER 1686	17					17		17								YES
AA-1128001	LLOYD'S SYNDICATE NUMBER 2001																YES
AA-1128003	LLOYD'S SYNDICATE NUMBER 2003																YES
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791	7					7		7								YES
AA-1128987	LLOYD'S SYNDICATE NUMBER 2987																YES
AA-1129000	LLOYD'S SYNDICATE NUMBER 3000																YES

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37 Current	38 Overdue				43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)										
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days											
AA-1120184	LLOYD'S SYNDICATE NUMBER 3268	11					11		11			0.6				YES	
AA-1126004	LLOYD'S SYNDICATE NUMBER 4444	(1)					(1)		(1)							YES	
AA-1120181	LLOYD'S SYNDICATE NUMBER 5886											100.0				YES	
AA-1126435	LLOYD'S SYNDICATE NUMBER 435															YES	
AA-1126609	LLOYD'S SYNDICATE NUMBER 609	4					4		4			1.1				YES	
1299999	Total Authorized - Other Non-U.S. Insurers	37					38		38			0.5				XXX	
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	4,992					4,992		4,992			0.0				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-3191400	CONVEX RE LTD	13	2				15		15			11.3				YES	
AA-1340028	DEVK RUCKVERSICHERUNGS UND BETEILIGUNGS AG	45				5	50		50	5		9.5	9.5	9.5		YES	5
AA-1560350	FARM MUT REINS PLAN LTD	(116)					(116)		(116)							YES	
AA-5340310	GEN INS CORP OF INDIA	49					49		49							YES	
AA-1340125	HANNOVER RUECK SE	61					61		61			0.3				YES	
AA-5420050	KOREAN REINS CO	63					63		63							YES	
AA-3190829	MARKEL BERMUDA LTD	8					8		8							YES	
AA-5340660	NEW INDIA ASSUR CO LTD											100.0				YES	
AA-5320039	PEAK REINS CO LTD															YES	
AA-5324100	TAIPING REINS CO LTD	20	3				23		23			14.7				YES	
2699999	Total Unauthorized - Other Non-U.S. Insurers	144	5			5	154		154	5		6.6	3.1	3.1		XXX	5
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	144	5			5	154		154	5		6.6	3.1	3.1		XXX	5
3299999	Total Certified - Affiliates - U.S. Non-Pool															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	
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool															XXX	
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)															XXX	
5099999	Total Reciprocal Jurisdiction - Affiliates															XXX	
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)															XXX	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46+48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37	Overdue				43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)										
		Current	38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days											
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		5,135	6			5	11	5,146		5,146	5		0.2	0.1	0.1	XXX	5
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																XXX	
9999999 Totals		5,135	6			5	11	5,146		5,146	5		0.2	0.1	0.1	XXX	5

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**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													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (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. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67		
34-4202015	CELINA MUT INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
31-0617569	MIAMI MUT INS CO	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	
95-3187355	ALLIANZ GLOBAL RISKS US INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-1182357	ALLIED WORLD INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36-2661954	AMERICAN AGRICULTURAL INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-5124990	AMERICAN HOME ASSUR CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
39-6040366	AMERICAN STANDARD INS CO OF WI	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-1430254	ARCH REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
51-0434766	AXIS REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47-0574325	BERKLEY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0234980	EMPLOYERS MUT CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
35-2293075	ENDURANCE ASSUR CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
05-0316605	FACTORY MUT INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0245840	FARMERS MUT HAIL INS CO OF IA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-2673100	GENERAL REINS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
95-2769232	INSURANCE CO OF THE WEST	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-1481194	MARKEL GLOBAL REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-3031176	PARTNER REINS CO OF THE US	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
52-1952955	RENAISSANCE REINS US INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
43-0727872	SAFETY NATL CAS CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
75-1444207	SCOR REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1675535	SWISS REINS AMER CORP	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-2918573	TOA RE INS CO OF AMER	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-5616275	TRANSATLANTIC REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0644327	UNITED FIRE & CAS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1290712	XL REINS AMER INC	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-9991501	INDIANA MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991503	OHIO MINE SUBSIDENCE FUND	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-3194130	ENDURANCE SPECIALTY INS LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127414	LLOYD'S SYNDICATE NUMBER 1414	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120156	LLOYD'S SYNDICATE NUMBER 1686	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128001	LLOYD'S SYNDICATE NUMBER 2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128003	LLOYD'S SYNDICATE NUMBER 2003	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128987	LLOYD'S SYNDICATE NUMBER 2987	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**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														Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68			
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (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. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67			
AA-1129000	LLOYD'S SYNDICATE NUMBER 3000	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120184	LLOYD'S SYNDICATE NUMBER 3268	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126004	LLOYD'S SYNDICATE NUMBER 4444	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120181	LLOYD'S SYNDICATE NUMBER 5886	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126435	LLOYD'S SYNDICATE NUMBER 435	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126609	LLOYD'S SYNDICATE NUMBER 609	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1299999	Total Authorized - Other Non-U.S. Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	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	XXX	
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool			XXX	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	XXX	
2299999	Total Unauthorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3191400	CONVEX RE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340028	DEVK RUCKVERSICHERUNGS UND BETEILIGUNGS AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1560350	FARM MUT REINS PLAN LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5340310	GEN INS CORP OF INDIA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340125	HANNOVER RUECK SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5420050	KOREAN REINS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-3190829	MARKEL BERMUDA LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5340660	NEW INDIA ASSUR CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5320039	PEAK REINS CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5324100	TAIPIING REINS CO LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2699999	Total Unauthorized - Other Non-U.S. Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	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	XXX	
3299999	Total Certified - Affiliates - U.S. Non-Pool			XXX				XXX	XXX										
3599999	Total Certified - Affiliates - Other (Non-U.S.)			XXX				XXX	XXX										
3699999	Total Certified - Affiliates			XXX				XXX	XXX										
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)			XXX				XXX	XXX										
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5099999	Total Reciprocal Jurisdiction - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)			XXX				XXX	XXX										
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)			XXX				XXX	XXX										
9999999	Totals			XXX				XXX	XXX										

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71 Provision for Unauthorized Reinsurance		73 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		75 Total Provision for Reinsurance				
			71	72	73	74	75	76	77	78	
			Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	Complete if Col. 52 = "Yes"; Otherwise Enter 0	Complete if Col. 52 = "No"; Otherwise Enter 0	Provision for Amounts Ceded to Authorized and Reciprocal 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)	
34-4202015	CELINA MUT INS CO		XXX	XXX					XXX	XXX	
31-0617569	MIAMI MUT INS CO		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	
95-3187355	ALLIANZ GLOBAL RISKS US INS CO		XXX	XXX					XXX	XXX	
06-1182357	ALLIED WORLD INS CO		XXX	XXX					XXX	XXX	
36-2661954	AMERICAN AGRICULTURAL INS CO		XXX	XXX					XXX	XXX	
13-5124990	AMERICAN HOME ASSUR CO		XXX	XXX					XXX	XXX	
39-6040366	AMERICAN STANDARD INS CO OF WI		XXX	XXX					XXX	XXX	
06-1430254	ARCH REINS CO		XXX	XXX					XXX	XXX	
51-0434766	AXIS REINS CO		XXX	XXX					XXX	XXX	
47-0574325	BERKLEY INS CO		XXX	XXX					XXX	XXX	
42-0234980	EMPLOYERS MUT CAS CO		XXX	XXX					XXX	XXX	
35-2293075	ENDURANCE ASSUR CORP		XXX	XXX					XXX	XXX	
05-0316605	FACTORY MUT INS CO		XXX	XXX					XXX	XXX	
42-0245840	FARMERS MUT HAIL INS CO OF IA		XXX	XXX					XXX	XXX	
13-2673100	GENERAL REINS CORP		XXX	XXX					XXX	XXX	
95-2769232	INSURANCE CO OF THE WEST		XXX	XXX					XXX	XXX	
06-1481194	MARKEL GLOBAL REINS CO		XXX	XXX					XXX	XXX	
13-3031176	PARTNER REINS CO OF THE US		XXX	XXX					XXX	XXX	
52-1952955	RENAISSANCE REINS US INC		XXX	XXX					XXX	XXX	
43-0727872	SAFETY NATL CAS CORP		XXX	XXX					XXX	XXX	
75-1444207	SCOR REINS CO		XXX	XXX					XXX	XXX	
13-1675535	SWISS REINS AMER CORP		XXX	XXX					XXX	XXX	
13-2918573	TOA RE INS CO OF AMER		XXX	XXX					XXX	XXX	
13-5616275	TRANSATLANTIC REINS CO		XXX	XXX					XXX	XXX	
42-0644327	UNITED FIRE & CAS CO		XXX	XXX					XXX	XXX	
13-1290712	XL REINS AMER INC		XXX	XXX					XXX	XXX	
0999999	Total Authorized - Other U.S. Unaffiliated Insurers		XXX	XXX					XXX	XXX	
AA-9991501	INDIANA MINE SUBSIDENCE FUND		XXX	XXX					XXX	XXX	
AA-9991503	OHIO MINE SUBSIDENCE FUND		XXX	XXX					XXX	XXX	
1099999	Total Authorized - Pools - Mandatory Pools		XXX	XXX					XXX	XXX	
AA-3194130	ENDURANCE SPECIALTY INS LTD		XXX	XXX					XXX	XXX	
AA-1127414	LLOYD'S SYNDICATE NUMBER 1414		XXX	XXX					XXX	XXX	
AA-1120156	LLOYD'S SYNDICATE NUMBER 1686		XXX	XXX					XXX	XXX	
AA-1128001	LLOYD'S SYNDICATE NUMBER 2001		XXX	XXX					XXX	XXX	
AA-1128003	LLOYD'S SYNDICATE NUMBER 2003		XXX	XXX					XXX	XXX	
AA-1128791	LLOYD'S SYNDICATE NUMBER 2791		XXX	XXX					XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71 Provision for Unauthorized Reinsurance		73 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		75 Total Provision for Reinsurance				
			72 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	74 Complete if Col. 52 = "Yes"; Otherwise Enter 0	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75 Provision for Amounts Ceded to Authorized and Reciprocal Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)	
AA-1128987	LLOYD'S SYNDICATE NUMBER 2987		XXX	XXX					XXX	XXX	
AA-1129000	LLOYD'S SYNDICATE NUMBER 3000		XXX	XXX					XXX	XXX	
AA-1120184	LLOYD'S SYNDICATE NUMBER 3268		XXX	XXX					XXX	XXX	
AA-1126004	LLOYD'S SYNDICATE NUMBER 4444		XXX	XXX					XXX	XXX	
AA-1120181	LLOYD'S SYNDICATE NUMBER 5886		XXX	XXX					XXX	XXX	
AA-1126435	LLOYD'S SYNDICATE NUMBER 435		XXX	XXX					XXX	XXX	
AA-1126609	LLOYD'S SYNDICATE NUMBER 609		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		XXX	XXX
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX		XXX	XXX
2299999	Total Unauthorized - Affiliates				XXX	XXX	XXX	XXX		XXX	XXX
AA-3191400	CONVEX RE LTD				XXX	XXX	XXX	XXX		XXX	XXX
AA-1340028	DEVK RUCKVERSICHERUNGS UND BETEILIGUNGS AG				XXX	XXX	XXX	XXX		XXX	XXX
AA-1560350	FARM MUT REINS PLAN LTD				XXX	XXX	XXX	XXX		XXX	XXX
AA-5340310	GEN INS CORP OF INDIA				XXX	XXX	XXX	XXX		XXX	XXX
AA-1340125	HANNOVER RUECK SE				XXX	XXX	XXX	XXX		XXX	XXX
AA-5420050	KOREAN REINS CO				XXX	XXX	XXX	XXX		XXX	XXX
AA-3190829	MARKEL BERMUDA LTD				XXX	XXX	XXX	XXX		XXX	XXX
AA-5340660	NEW INDIA ASSUR CO LTD				XXX	XXX	XXX	XXX		XXX	XXX
AA-5320039	PEAK REINS CO LTD				XXX	XXX	XXX	XXX		XXX	XXX
AA-5324100	TAIPIING REINS CO LTD				XXX	XXX	XXX	XXX		XXX	XXX
2699999	Total Unauthorized - Other Non-U.S. Insurers	1		1	XXX	XXX	XXX	XXX	1	XXX	1
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	1		1	XXX	XXX	XXX	XXX	1	XXX	1
3299999	Total Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999	Total Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3699999	Total Certified - Affiliates	XXX	XXX	XXX	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	XXX	XXX	XXX
4699999	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		XXX	XXX					XXX	XXX	
4999999	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		XXX	XXX					XXX	XXX	
5099999	Total Reciprocal Jurisdiction - Affiliates		XXX	XXX					XXX	XXX	
5699999	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		XXX	XXX					XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE F - PART 3 (Continued)**

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70  20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71 Provision for Unauthorized Reinsurance		72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)		73 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		74 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		75 Total Provision for Reinsurance			
			71  Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72  Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73  Complete if Col. 52 = "Yes"; Otherwise Enter 0  20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74  Complete if Col. 52 = "No"; Otherwise Enter 0  Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75  Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	76  Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77  Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78  Total Provision for Reinsurance (Cols. 75 + 76 + 77)				
5799999	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	1			1								1	1
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)													
9999999	Totals	1			1								1	1

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**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
0001	1	026004093	Royal Bank of Canada	1,528
0002	1	026002574	Barclays Bank PLC	220
0003	1	026001591	Standard Chartered Bank	220
0004	1	021000089	Citibank NA	465
0005	1	026013453	Landesbank Baden-Württemberg	1,087
0006	1	021000089	Citibank NA	253
0007	1	026001591	Standard Chartered Bank	853
0008	1	026009917	Australia and New Zealand Banking Group Limited	1,464
Total				6,090

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE F - PART 5**

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

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

B. Report the five largest reinsurance recoverables reported in 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.	CELINA MUTUAL INSURANCE COMPANY .....	46,170	51,373	Yes [ X ] No [ ]
7.	MIAMI MUTUAL INSURANCE COMPANY .....	38,475	42,811	Yes [ X ] No [ ]
8.	HANNOVER RUECK SE .....	1,329	2,190	Yes [ ] No [ X ]
9.	EMPLOYERS MUT CAS CO .....	819	1,373	Yes [ ] No [ X ]
10.	SWISS REINS AMER CORP .....	623	1,117	Yes [ ] No [ X ]

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE F - PART 6**

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12) .....	85,326,616		85,326,616
2. Premiums and considerations (Line 15) .....	17,741,722	(77,553)	17,664,168
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1) .....	5,146,047	(5,146,047)	
4. Funds held by or deposited with reinsured companies (Line 16.2) .....			
5. Other assets .....	2,485,059	(19,753,984)	(17,268,925)
6. Net amount recoverable from reinsurers .....		103,674,218	103,674,218
7. Protected cell assets (Line 27) .....			
8. Totals (Line 28) .....	110,699,443	78,696,634	189,396,078
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3) .....	20,206,757	34,957,323	55,164,080
10. Taxes, expenses, and other obligations (Lines 4 through 8) .....	1,398,857	1,274,455	2,673,311
11. Unearned premiums (Line 9) .....	24,991,520	48,538,838	73,530,358
12. Advance premiums (Line 10) .....	549,941		549,941
13. Dividends declared and unpaid (Line 11.1 and 11.2) .....			
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12) .....	6,073,032	(6,073,032)	
15. Funds held by company under reinsurance treaties (Line 13) .....			
16. Amounts withheld or retained by company for account of others (Line 14) .....	7,267,448		7,267,448
17. Provision for reinsurance (Line 16) .....	950	(950)	
18. Other liabilities .....	107,267		107,267
19. Total liabilities excluding protected cell business (Line 26) .....	60,595,771	78,696,634	139,292,405
20. Protected cell liabilities (Line 27) .....			
21. Surplus as regards policyholders (Line 37) .....	50,103,673	XXX	50,103,673
22. Totals (Line 38) .....	110,699,443	78,696,634	189,396,078

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: In addition to cessions to unaffiliated companies, the restatement adjustments shown above include gross cessions under a pooling arrangement (among affiliated insurance companies) but do not include the corresponding amounts assumed under this contract. The assumed amounts under this contract offset \$99,591,585.10 of the net amount recoverable shown on line 6 above. ....

Schedule H - Part 1 - Analysis of Underwriting Operations

**N O N E**

Schedule H - Part 2 - Reserves and Liabilities

**N O N E**

Schedule H - Part 3 - Test of Prior Year's Claim Reserves and Liabilities

**N O N E**

Schedule H - Part 4 - Reinsurance

**N O N E**

Schedule H - Part 5 - Health Claims

**N O N E**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY**  
**SCHEDULE P - PART 1A - HOMEOWNERS/FAROWNERS**  
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX			3					3	XXX
2. 2012.....	12,738	1,555	11,184	11,851	3,985	113		1,269	256	63	8,992	2,626
3. 2013.....	13,880	2,236	11,644	8,438	928	89	25	1,010	37	17	8,547	1,683
4. 2014.....	14,402	1,621	12,780	8,968	704	104	15	1,030	26	62	9,357	1,611
5. 2015.....	14,338	1,567	12,770	7,379	661	62	14	873	15	31	7,623	1,209
6. 2016.....	14,503	1,628	12,875	6,927	439	149	12	952	14	165	7,563	1,247
7. 2017.....	15,086	1,665	13,420	12,616	2,267	106	21	1,366	77	79	11,724	1,910
8. 2018.....	15,991	1,697	14,294	8,729	635	95	17	1,107	16	57	9,264	1,318
9. 2019.....	16,795	2,362	14,433	12,490	4,489	77	20	1,504	179	148	9,382	1,904
10. 2020.....	17,006	1,721	15,285	14,089	5,581	67		1,575	261	59	9,889	2,243
11. 2021.....	17,212	1,436	15,776	7,409	242	27		883		51	8,077	1,129
12. Totals	XXX	XXX	XXX	98,895	19,930	893	124	11,568	881	733	90,420	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	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			
1. Prior.....													
2. 2012.....													
3. 2013.....													
4. 2014.....	9						2					10	
5. 2015.....							2					2	
6. 2016.....	2		(1)				7				1	8	1
7. 2017.....	51		5				10		3		1	70	
8. 2018.....	31		62	5			26	2	5		1	116	1
9. 2019.....	59	1	90	27			61	19	14		7	178	3
10. 2020.....	247	103	259	119			143	70	42		5	399	12
11. 2021.....	1,526	293	1,438	533			199	80	223		62	2,480	109
12. Totals	1,923	397	1,854	685			449	170	288		77	3,263	126

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2012.....	13,233	4,241	8,992	103.9	272.7	80.4			34.0		
3. 2013.....	9,537	990	8,547	68.7	44.3	73.4			34.0		
4. 2014.....	10,112	745	9,367	70.2	46.0	73.3			34.0	9	2
5. 2015.....	8,315	691	7,625	58.0	44.1	59.7			34.0		2
6. 2016.....	8,036	465	7,571	55.4	28.6	58.8			34.0	1	7
7. 2017.....	14,158	2,364	11,794	93.9	141.9	87.9			34.0	56	14
8. 2018.....	10,054	674	9,380	62.9	39.7	65.6			34.0	87	29
9. 2019.....	14,295	4,735	9,560	85.1	200.5	66.2			34.0	121	57
10. 2020.....	16,421	6,133	10,288	96.6	356.3	67.3			34.0	284	115
11. 2021.....	11,706	1,149	10,557	68.0	80.0	66.9			34.0	2,138	342
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	2,696	567

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY**  
**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						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	3		2				4	5	XXX
2. 2012.....	8,787	95	8,691	5,422	141	157	1	450		335	5,888	1,541
3. 2013.....	9,390	151	9,239	6,227	93	224	14	595		305	6,939	1,539
4. 2014.....	9,188	164	9,024	5,732	78	146	1	585		264	6,385	1,491
5. 2015.....	8,794	91	8,703	5,293	176	198	1	651		276	5,964	1,399
6. 2016.....	8,791	103	8,688	5,994	65	229		659		319	6,816	1,447
7. 2017.....	9,401	98	9,303	6,811	213	238	4	605		327	7,436	1,482
8. 2018.....	10,140	111	10,028	6,993	187	258	4	731		309	7,791	1,557
9. 2019.....	10,346	148	10,198	6,137		127		636		299	6,900	1,453
10. 2020.....	10,010	182	9,827	3,636		46		426		168	4,108	980
11. 2021.....	9,403	222	9,181	2,525		22		396		129	2,944	944
12. Totals	XXX	XXX	XXX	54,771	954	1,648	25	5,734	1	2,735	61,175	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	1											1	
2. 2012.....													
3. 2013.....			(2)								2	(2)	
4. 2014.....			(2)								2	(2)	
5. 2015.....			(5)				2				5	(3)	
6. 2016.....			2	2			10	2	2		6	11	
7. 2017.....	165		1	2			20	5	3		10	183	3
8. 2018.....	305		40	5			61	5	22		18	418	13
9. 2019.....	617		111	14			133	10	49		35	886	17
10. 2020.....	809	35	526	54			201	29	90		69	1,507	32
11. 2021.....	1,773	59	2,026	219			287	63	221		167	3,966	208
12. Totals	3,670	94	2,698	296			714	114	388		313	6,966	273

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
2. 2012.....	6,029	142	5,888	68.6	148.4	67.7			34.0		
3. 2013.....	7,044	107	6,937	75.0	70.9	75.1			34.0	(2)	
4. 2014.....	6,462	79	6,384	70.3	48.2	70.7			34.0	(2)	
5. 2015.....	6,138	177	5,961	69.8	195.6	68.5			34.0	(5)	
6. 2016.....	6,895	69	6,826	78.4	66.9	78.6			34.0	10	
7. 2017.....	7,843	224	7,619	83.4	228.7	81.9			34.0	164	
8. 2018.....	8,411	202	8,209	82.9	180.8	81.9			34.0	340	
9. 2019.....	7,810	24	7,786	75.5	16.1	76.3			34.0	714	
10. 2020.....	5,733	118	5,615	57.3	64.8	57.1			34.0	1,245	
11. 2021.....	7,251	341	6,910	77.1	153.3	75.3			34.0	3,521	
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	5,978	

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY**  
**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						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	(1)						1	(1)	XXX
2. 2012.....	807	77	729	661	160	29	6	46		9	570	56
3. 2013.....	875	60	815	370	91	40	12	37	1	24	342	58
4. 2014.....	923	36	887	375	66	24		35		3	369	54
5. 2015.....	911	35	876	212		20		47		3	279	51
6. 2016.....	962	36	926	436	22	14	1	58		9	485	64
7. 2017.....	1,076	53	1,022	336		7		40		14	383	68
8. 2018.....	1,278	62	1,216	353		11		52		22	416	92
9. 2019.....	1,625	80	1,546	643	56	11	1	58		24	655	107
10. 2020.....	2,049	110	1,939	353		19		39		17	411	92
11. 2021.....	2,531	136	2,395	444		9		60		20	513	141
12. Totals	XXX	XXX	XXX	4,183	394	185	21	471	1	147	4,423	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	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			
1. Prior.....	3											3	
2. 2012.....													
3. 2013.....													
4. 2014.....													
5. 2015.....													
6. 2016.....													
7. 2017.....			1				2				1	3	
8. 2018.....	135	11	6				9	2	3		1	140	1
9. 2019.....	36		22	3			20	2	7		2	80	2
10. 2020.....	482	145	117	15			39	5	19		4	491	7
11. 2021.....	283		578	77			75	17	56		9	898	36
12. Totals	939	156	723	95			145	26	85		17	1,615	46

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2012.....	736	166	570	91.3	214.2	78.2			34.0		
3. 2013.....	446	104	342	51.0	173.4	42.0			34.0		
4. 2014.....	435	66	369	47.1	183.0	41.6			34.0		
5. 2015.....	279		279	30.6		31.8			34.0		
6. 2016.....	508	23	485	52.8	63.8	52.4			34.0		
7. 2017.....	386		386	35.9		37.7			34.0	1	2
8. 2018.....	568	12	556	44.5	19.8	45.7			34.0	130	10
9. 2019.....	798	62	736	49.1	78.1	47.6			34.0	55	26
10. 2020.....	1,068	165	902	52.1	150.9	46.5			34.0	438	53
11. 2021.....	1,504	94	1,411	59.4	68.8	58.9			34.0	784	114
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	1,411	204

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior	XXX	XXX	XXX	24	10		1	1	1		14	XXX
2. 2012	425	70	354	244		24		16			284	26
3. 2013	497	70	426	206	7	15	1	17		4	232	26
4. 2014	509	67	442	108		7		13		1	129	14
5. 2015	510	56	454	159		32		15		17	206	18
6. 2016	548	70	478	223	51	40	8	19			224	28
7. 2017	609	73	536	208		29		20		1	257	23
8. 2018	688	182	506	149		25		23		11	197	34
9. 2019	786	175	611	178		47		16		6	241	40
10. 2020	914	189	725	214		35		15		1	264	39
11. 2021	1,117	234	883	179		26		19			224	45
12. Totals	XXX	XXX	XXX	1,892	68	280	9	176	1	40	2,270	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13	14	15	16	17	18	19	20					
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded					
1. Prior	188	31										157	3
2. 2012													
3. 2013													
4. 2014	1											1	
5. 2015	1		2									3	
6. 2016	1		3									4	
7. 2017	2		5				2					9	
8. 2018	7		7				3		1			18	
9. 2019	63		9				12		3			87	2
10. 2020	66		37				26		4			133	6
11. 2021	198	38	216	36			97	24	14			427	24
12. Totals	527	69	279	36			139	24	22			839	36

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense			
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX	157	
2. 2012	284		284	66.7		80.0			34.0		
3. 2013	239	7	232	48.1	10.6	54.3			34.0		
4. 2014	130		130	25.5		29.4			34.0	1	
5. 2015	209		209	40.9		46.0			34.0	3	
6. 2016	287	59	228	52.3	84.1	47.6			34.0	4	
7. 2017	266		266	43.7		49.6			34.0	7	2
8. 2018	215		215	31.2		42.4			34.0	13	4
9. 2019	328		328	41.7		53.6			34.0	71	15
10. 2020	397		397	43.4		54.7			34.0	103	30
11. 2021	748	97	651	67.0	41.6	73.7			34.0	341	87
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	701	138

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY**  
**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						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	38		1		2			41	XXX
2. 2012.....	2,062	463	1,599	1,418	516	87	21	134	9	58	1,093	180
3. 2013.....	2,361	675	1,686	839	92	41	2	107	3	12	890	168
4. 2014.....	2,571	559	2,012	1,016	112	73	4	142	2	13	1,113	162
5. 2015.....	2,750	679	2,072	581	76	73	20	94	8	62	644	151
6. 2016.....	3,138	674	2,463	1,399	190	80	2	178	2	90	1,463	157
7. 2017.....	3,597	801	2,796	2,115	338	55	6	254	10	102	2,070	235
8. 2018.....	4,174	890	3,284	1,582	419	40	5	239	7	12	1,430	213
9. 2019.....	4,943	1,101	3,842	3,003	1,158	96	8	365	22	193	2,275	280
10. 2020.....	5,748	1,487	4,261	10,612	7,763	75	7	947	173	177	3,690	564
11. 2021.....	6,379	1,225	5,154	2,403	702	33	6	341	3	2	2,066	253
12. Totals	XXX	XXX	XXX	25,004	11,367	654	81	2,804	239	721	16,775	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	164											164	3
2. 2012.....													
3. 2013.....	5											5	
4. 2014.....													
5. 2015.....													
6. 2016.....	16		(1)				2				1	17	1
7. 2017.....							3				2	3	
8. 2018.....	9		16	2			7	2	2		1	30	
9. 2019.....	60		14	7			17	5	5		13	84	5
10. 2020.....	925	725	88	51			39	19	14		9	271	51
11. 2021.....	747	301	365	136			65	26	77		112	790	46
12. Totals	1,926	1,026	481	196			133	51	97		138	1,364	106

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
2. 2012.....	1,639	546	1,093	79.5	117.8	68.4		34.0			
3. 2013.....	992	96	895	42.0	14.3	53.1		34.0	5		
4. 2014.....	1,231	118	1,113	47.9	21.1	55.3		34.0			
5. 2015.....	748	104	644	27.2	15.3	31.1		34.0			
6. 2016.....	1,674	194	1,480	53.3	28.8	60.1		34.0	15	2	
7. 2017.....	2,427	354	2,073	67.5	44.2	74.1		34.0		3	
8. 2018.....	1,894	435	1,459	45.4	48.9	44.4		34.0	23	7	
9. 2019.....	3,560	1,201	2,360	72.0	109.1	61.4		34.0	67	17	
10. 2020.....	12,699	8,738	3,961	220.9	587.8	92.9		34.0	237	34	
11. 2021.....	4,030	1,175	2,855	63.2	95.9	55.4		34.0	674	116	
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX		XXX	1,185	179	

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**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY**  
**SCHEDULE P - PART 1G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),**  
**BOILER AND MACHINERY)**  
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
	Direct and Assumed	Ceded	Net (1 - 2)	4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX									XXX
2. 2012												XXX
3. 2013												XXX
4. 2014												XXX
5. 2015												XXX
6. 2016												XXX
7. 2017												XXX
8. 2018												XXX
9. 2019												XXX
10. 2020												XXX
11. 2021												XXX
12. Totals	XXX	XXX	XXX									XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	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			
1. Prior													
2. 2012													
3. 2013													
4. 2014													
5. 2015													
6. 2016													
7. 2017													
8. 2018													
9. 2019													
10. 2020													
11. 2021													
12. Totals													

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		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		
2. 2012									34.0		
3. 2013									34.0		
4. 2014									34.0		
5. 2015									34.0		
6. 2016									34.0		
7. 2017									34.0		
8. 2018									34.0		
9. 2019									34.0		
10. 2020									34.0		
11. 2021									34.0		
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY**  
**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						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX	17		1		1			20	XXX
2. 2012.....	907	253	654	337	198	21		30			190	17
3. 2013.....	960	275	685	172	35	5		15			157	19
4. 2014.....	979	329	650	68		13		15			96	17
5. 2015.....	963	210	753	409	292	43		29			188	23
6. 2016.....	1,018	238	779	260	79	20	5	20			216	14
7. 2017.....	1,089	229	860	53		8		15			76	15
8. 2018.....	1,208	232	977	19		3		16			38	16
9. 2019.....	1,353	230	1,123	501	406	15	3	26			134	12
10. 2020.....	1,492	277	1,215	13		2		1			16	12
11. 2021.....	1,656	337	1,319	18				26			44	16
12. Totals	XXX	XXX	XXX	1,866	1,010	131	9	196			1,174	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	8											8	1
2. 2012.....													
3. 2013.....													
4. 2014.....													
5. 2015.....													
6. 2016.....													
7. 2017.....			14	5			3	2	2			12	
8. 2018.....			22	12			10	5	2			17	
9. 2019.....	34		75	44			27	17	10			85	2
10. 2020.....	61	22	129	46			48	17	22			175	2
11. 2021.....	313	200	177	92			88	48	20			259	5
12. Totals	415	222	417	199			177	88	56			555	10

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX	8	
2. 2012.....	388	198	190	42.8	78.3	29.0			34.0		
3. 2013.....	192	35	157	20.0	12.7	23.0			34.0		
4. 2014.....	96		96	9.8		14.8			34.0		
5. 2015.....	480	292	188	49.9	139.0	25.0			34.0		
6. 2016.....	300	85	216	29.5	35.4	27.7			34.0		
7. 2017.....	95	7	88	8.7	3.0	10.3			34.0	9	3
8. 2018.....	72	17	55	5.9	7.3	5.6			34.0	10	7
9. 2019.....	689	470	219	50.9	204.2	19.5			34.0	65	20
10. 2020.....	275	85	190	18.5	30.6	15.7			34.0	122	53
11. 2021.....	642	339	303	38.8	100.6	23.0			34.0	198	61
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	411	145

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY**  
**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						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX									XXX
2. 2012												
3. 2013												
4. 2014												
5. 2015												
6. 2016												
7. 2017												
8. 2018												
9. 2019												
10. 2020												
11. 2021												
12. Totals	XXX	XXX	XXX									XXX

**NONE**

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	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			
1. Prior													
2. 2012													
3. 2013													
4. 2014													
5. 2015													
6. 2016													
7. 2017													
8. 2018													
9. 2019													
10. 2020													
11. 2021													
12. Totals													

**NONE**

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2012											
3. 2013											
4. 2014											
5. 2015											
6. 2016											
7. 2017											
8. 2018											
9. 2019											
10. 2020											
11. 2021											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY**  
**SCHEDULE P - PART 11 - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,**  
**EARTHQUAKE, BURGLARY AND THEFT)**  
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX	17	18			1		1		XXX
2. 2020	4,179	752	3,426	2,960	1,448	13		305	57	8	1,775	XXX
3. 2021	4,352	746	3,606	925	26	9	1	119		69	1,025	XXX
4. Totals	XXX	XXX	XXX	3,902	1,492	23	1	426	57	78	2,800	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	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			
1. Prior													
2. 2020	32	24	5	5							2	8	2
3. 2021	227	3	38	17			3		7		5	254	10
4. Totals	259	27	42	22			3		7		7	262	12

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2020	3,316	1,533	1,783	79.3	203.8	52.0			34.0	8	
3. 2021	1,328	48	1,280	30.5	6.5	35.5			34.0	244	10
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	252	10

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY**  
**SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE**  
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported Direct and Assumed			
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	(42)	5				1		44	(46)	XXX
2. 2020	10,286	328	9,958	5,269	303	4			613	10	1,238	5,573	2,538
3. 2021	10,285	343	9,942	5,870	1	7			686		983	6,562	2,594
4. Totals	XXX	XXX	XXX	11,097	309	11			1,300	10	2,265	12,089	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	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			
1. Prior	1		(73)								73	(72)	
2. 2020	5		(36)	2					3		46	(29)	1
3. 2021	475		(23)	55			5		97		381	498	144
4. Totals	482		(132)	57			5		100		500	398	146

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2020	5,858	314	5,544	57.0	95.9	55.7			34.0	(32)	3
3. 2021	7,117	57	7,060	69.2	16.6	71.0			34.0	396	102
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	293	105

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY**  
**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 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2020.....												XXX
3. 2021.....												XXX
4. Totals	XXX	XXX	XXX									XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	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			
1. Prior.....													
2. 2020.....													
3. 2021.....													
4. Totals													

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2020.....									34.0		
3. 2021.....									34.0		
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

Schedule P - Part 1L - Other (Including Credit, Accident and Health)

**N O N E**

Schedule P - Part 1M - International

**N O N E**

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

**N O N E**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY**  
**SCHEDULE P - PART 10 - REINSURANCE - NONPROPORTIONAL ASSUMED LIABILITY**  
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2012.....												XXX
3. 2013.....												XXX
4. 2014.....												XXX
5. 2015.....												XXX
6. 2016.....												XXX
7. 2017.....												XXX
8. 2018.....												XXX
9. 2019.....												XXX
10. 2020.....												XXX
11. 2021.....												XXX
12. Totals	XXX	XXX	XXX									XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	10		53									62	XXX
2. 2012.....													XXX
3. 2013.....													XXX
4. 2014.....													XXX
5. 2015.....													XXX
6. 2016.....													XXX
7. 2017.....													XXX
8. 2018.....													XXX
9. 2019.....													XXX
10. 2020.....													XXX
11. 2021.....													XXX
12. Totals	10		53									62	XXX

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX	62	
2. 2012.....									34.0		
3. 2013.....									34.0		
4. 2014.....									34.0		
5. 2015.....									34.0		
6. 2016.....									34.0		
7. 2017.....									34.0		
8. 2018.....									34.0		
9. 2019.....									34.0		
10. 2020.....									34.0		
11. 2021.....									34.0		
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	62	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY  
**SCHEDULE P - PART 1P - REINSURANCE - NONPROPORTIONAL ASSUMED FINANCIAL LINES**  
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior	XXX	XXX	XXX									XXX
2. 2012												XXX
3. 2013												XXX
4. 2014												XXX
5. 2015												XXX
6. 2016												XXX
7. 2017												XXX
8. 2018												XXX
9. 2019												XXX
10. 2020												XXX
11. 2021												XXX
12. Totals	XXX	XXX	XXX									XXX

**NONE**

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	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			
1. Prior													XXX
2. 2012													XXX
3. 2013													XXX
4. 2014													XXX
5. 2015													XXX
6. 2016													XXX
7. 2017													XXX
8. 2018													XXX
9. 2019													XXX
10. 2020													XXX
11. 2021													XXX
12. Totals													XXX

**NONE**

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2012											
3. 2013											
4. 2014											
5. 2015											
6. 2016											
7. 2017											
8. 2018											
9. 2019											
10. 2020											
11. 2021											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY**  
**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						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments					
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX	XXX	XXX									XXX	
2. 2012.....	85	14	71	22		3			2			27	4
3. 2013.....	89	12	77	4		2						6	3
4. 2014.....	91	9	81	6					1			7	2
5. 2015.....	81	7	73	1					3			4	1
6. 2016.....	74	7	68	7		1			1			9	4
7. 2017.....	81	6	76	44		3			4			50	2
8. 2018.....	90	6	85										1
9. 2019.....	84	4	80										
10. 2020.....	87	4	83										
11. 2021.....	94	4	89	1								1	2
12. Totals	XXX	XXX	XXX	84		10			10			104	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	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			
1. Prior.....	3											3	
2. 2012.....													
3. 2013.....													
4. 2014.....													
5. 2015.....													
6. 2016.....													
7. 2017.....													
8. 2018.....			2									2	
9. 2019.....			5	3			2					3	
10. 2020.....	4		9	2			3	2	2			14	
11. 2021.....	5		10	5			7	3	2			15	1
12. Totals	12		26	10			12	5	3			38	1

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2012.....	27		27	31.3		37.3			34.0		
3. 2013.....	6		6	6.4		7.5			34.0		
4. 2014.....	7		7	7.3		8.1			34.0		
5. 2015.....	4		4	5.2		5.8			34.0		
6. 2016.....	9		9	12.1		13.3			34.0		
7. 2017.....	50		50	61.8		66.4			34.0		
8. 2018.....	2		2	1.9		2.0			34.0	2	
9. 2019.....	7	3	3	8.1	84.9	4.3			34.0	2	2
10. 2020.....	18	3	14	20.5	91.3	17.3			34.0	11	3
11. 2021.....	25	9	16	26.4	193.6	18.1			34.0	10	5
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	28	10

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**

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE P - PART 2A - HOMEOWNERS/FAROWNERS**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior.....	650	455	428	394	356	342	335	345	396	399	3	54
2. 2012.....	8,089	8,109	8,085	8,062	8,006	8,008	8,008	7,979	7,979	7,979		
3. 2013.....	XXX	7,724	7,801	7,677	7,641	7,593	7,576	7,575	7,575	7,574	(1)	
4. 2014.....	XXX	XXX	8,496	8,340	8,285	8,364	8,359	8,369	8,361	8,363	2	(6)
5. 2015.....	XXX	XXX	XXX	7,301	6,932	6,856	6,814	6,790	6,770	6,767	(3)	(23)
6. 2016.....	XXX	XXX	XXX	XXX	7,107	6,770	6,641	6,689	6,649	6,633	(15)	(56)
7. 2017.....	XXX	XXX	XXX	XXX	XXX	10,853	10,561	10,546	10,509	10,501	(8)	(45)
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	8,262	8,227	8,309	8,284	(26)	57
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,150	8,358	8,221	(137)	71
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,025	8,932	(93)	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,451	XXX	XXX
12. Totals											(278)	52

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

1. Prior.....	1,684	1,462	1,397	1,292	1,298	1,293	1,293	1,288	1,290	1,292	2	5
2. 2012.....	5,843	5,724	5,579	5,542	5,454	5,441	5,442	5,438	5,437	5,438		
3. 2013.....	XXX	6,473	6,215	6,202	6,301	6,325	6,325	6,349	6,345	6,342	(3)	(7)
4. 2014.....	XXX	XXX	6,322	6,111	5,789	5,698	5,779	5,808	5,801	5,798	(2)	(10)
5. 2015.....	XXX	XXX	XXX	6,039	5,588	5,328	5,356	5,330	5,325	5,311	(15)	(19)
6. 2016.....	XXX	XXX	XXX	XXX	6,139	6,056	6,419	6,291	6,206	6,166	(40)	(125)
7. 2017.....	XXX	XXX	XXX	XXX	XXX	6,857	6,968	7,123	7,064	7,011	(54)	(112)
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	7,121	7,390	7,536	7,456	(80)	66
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,030	7,006	7,101	95	71
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,979	5,099	120	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,293	XXX	XXX
12. Totals											23	(131)

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

1. Prior.....	88	64	50	44	43	46	50	50	48	47	(1)	(3)
2. 2012.....	457	436	476	529	525	524	525	525	525	525		
3. 2013.....	XXX	272	263	310	311	308	306	306	306	306		
4. 2014.....	XXX	XXX	328	340	315	322	339	334	334	334		
5. 2015.....	XXX	XXX	XXX	268	201	193	237	236	232	232		(4)
6. 2016.....	XXX	XXX	XXX	XXX	503	455	465	444	433	428	(6)	(16)
7. 2017.....	XXX	XXX	XXX	XXX	XXX	398	355	361	357	346	(11)	(15)
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	528	451	473	501	28	50
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	749	626	670	44	(79)
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	792	844	52	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,295	XXX	XXX
12. Totals											107	(67)

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

1. Prior.....	505	489	482	463	421	434	439	433	428	429	1	(4)
2. 2012.....	305	290	294	287	276	273	271	270	267	267		(3)
3. 2013.....	XXX	242	231	234	226	221	220	217	215	214		(3)
4. 2014.....	XXX	XXX	234	214	135	122	119	118	117	116		(2)
5. 2015.....	XXX	XXX	XXX	206	235	217	202	200	195	194	(1)	(6)
6. 2016.....	XXX	XXX	XXX	XXX	243	246	203	216	208	208		(8)
7. 2017.....	XXX	XXX	XXX	XXX	XXX	277	300	248	251	246	(5)	(2)
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	320	264	207	191	(16)	(73)
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	330	314	309	(6)	(22)
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	372	377	5	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	618	XXX	XXX
12. Totals											(22)	(122)

**SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL**

1. Prior.....	215	314	324	329	351	419	460	461	462	575	114	115
2. 2012.....	830	820	846	876	1,020	963	967	968	968	968		
3. 2013.....	XXX	839	835	818	797	790	787	786	786	791	5	5
4. 2014.....	XXX	XXX	944	898	921	920	924	963	973	973	1	10
5. 2015.....	XXX	XXX	XXX	690	566	572	564	562	559	559		(4)
6. 2016.....	XXX	XXX	XXX	XXX	1,257	1,118	1,188	1,224	1,291	1,303	12	79
7. 2017.....	XXX	XXX	XXX	XXX	XXX	1,950	1,797	1,836	1,837	1,829	(8)	(7)
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	1,200	1,218	1,245	1,226	(20)	7
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,009	1,964	2,011	48	2
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,045	3,173	129	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,441	XXX	XXX
12. Totals											279	207

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**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 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior												
2. 2012												
3. 2013	XXX											
4. 2014	XXX	XXX										
5. 2015	XXX	XXX	XXX									
6. 2016	XXX	XXX	XXX	XXX								
7. 2017	XXX	XXX	XXX	XXX	XXX							
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021	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**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior												
2. 2012												
3. 2013	XXX											
4. 2014	XXX	XXX										
5. 2015	XXX	XXX	XXX									
6. 2016	XXX	XXX	XXX	XXX								
7. 2017	XXX	XXX	XXX	XXX	XXX							
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021	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)**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior												
2. 2012												
3. 2013	XXX											
4. 2014	XXX	XXX										
5. 2015	XXX	XXX	XXX									
6. 2016	XXX	XXX	XXX	XXX								
7. 2017	XXX	XXX	XXX	XXX	XXX							
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

**SCHEDULE P - PART 2H - SECTION 1 - OTHER 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 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior	509	392	377	353	347	347	343	362	363	346	(17)	(16)
2. 2012	253	246	232	206	180	170	163	160	160	160		
3. 2013	XXX	242	152	150	78	112	153	145	142	142		(3)
4. 2014	XXX	XXX	195	178	158	103	81	78	77	81	4	3
5. 2015	XXX	XXX	XXX	233	245	243	212	176	162	159	(3)	(17)
6. 2016	XXX	XXX	XXX	XXX	251	199	216	196	180	196	16	(1)
7. 2017	XXX	XXX	XXX	XXX	XXX	250	175	129	86	71	(15)	(58)
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	227	154	120	37	(83)	(117)
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	258	209	182	(27)	(76)
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	218	167	(51)	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	256	XXX	XXX
12. Totals											(177)	(285)

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior												
2. 2012												
3. 2013	XXX											
4. 2014	XXX	XXX										
5. 2015	XXX	XXX	XXX									
6. 2016	XXX	XXX	XXX	XXX								
7. 2017	XXX	XXX	XXX	XXX	XXX							
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY  
**SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	136	160	150	(11)	14
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,535	1,534	(2)	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,154	XXX	XXX
4. Totals											(12)	14

**SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE**

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	294	(9)	(54)	(45)	(348)
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,119	4,938	(181)	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,277	XXX	XXX
4. Totals											(226)	(348)

**SCHEDULE P - PART 2K - FIDELITY/SURETY**

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2021.....	XXX	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	XXX	XXX	XXX	XXX	XXX
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Totals												

**NONE**

**SCHEDULE P - PART 2M - INTERNATIONAL**

1. Prior.....												
2. 2012.....												
3. 2013.....	XXX											
4. 2014.....	XXX	XXX										
5. 2015.....	XXX	XXX	XXX									
6. 2016.....	XXX	XXX	XXX	XXX								
7. 2017.....	XXX	XXX	XXX	XXX	XXX							
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

**NONE**

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE P - PART 2N - REINSURANCE  
NONPROPORTIONAL ASSUMED PROPERTY**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior												
2. 2012												
3. 2013	XXX											
4. 2014	XXX	XXX										
5. 2015	XXX	XXX	XXX									
6. 2016	XXX	XXX	XXX									
7. 2017	XXX	XXX	XXX	XXX								
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

**SCHEDULE P - PART 2O - REINSURANCE  
NONPROPORTIONAL ASSUMED LIABILITY**

1. Prior	433	440	440	440	406	406	406	406	406	105	(301)	(301)
2. 2012												
3. 2013	XXX											
4. 2014	XXX	XXX										
5. 2015	XXX	XXX	XXX									
6. 2016	XXX	XXX	XXX	XXX								
7. 2017	XXX	XXX	XXX	XXX	XXX							
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals											(301)	(301)

**SCHEDULE P - PART 2P - REINSURANCE  
NONPROPORTIONAL ASSUMED FINANCIAL LINES**

1. Prior												
2. 2012												
3. 2013	XXX											
4. 2014	XXX	XXX										
5. 2015	XXX	XXX	XXX									
6. 2016	XXX	XXX	XXX	XXX								
7. 2017	XXX	XXX	XXX	XXX	XXX							
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY**  
**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 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior	87	69	66	86	80	80	83	89	89	89		1
2. 2012	22	17	16	30	27	25	25	25	25	25		
3. 2013	XXX	37	17	17	7	5	5	5	5	5		
4. 2014	XXX	XXX	25	20	16	9	8	6	6	6		
5. 2015	XXX	XXX	XXX	16	16	9	6	4	1	1		(3)
6. 2016	XXX	XXX	XXX	XXX	24	22	15	12	10	8	(2)	(3)
7. 2017	XXX	XXX	XXX	XXX	XXX	28	19	25	48	47	(2)	21
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	17	12	7	2	(5)	(10)
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9	9	3	(5)	(5)
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16	13	(3)	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14	XXX	XXX
12. Totals											(17)	

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

1. Prior												
2. 2012												
3. 2013	XXX											
4. 2014	XXX	XXX										
5. 2015	XXX	XXX	XXX									
6. 2016	XXX	XXX	XXX	XXX								
7. 2017	XXX	XXX	XXX	XXX	XXX							
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Totals												

**SCHEDULE P - PART 2T - WARRANTY**

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4. Totals												

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 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		
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021		
1. Prior	.000	.162	.231	.276	.293	.299	.307	.301	.396	.399	.15	
2. 2012	6,600	7,707	7,862	7,990	7,991	7,994	7,994	7,979	7,979	7,979	2,097	529
3. 2013	XXX	6,215	7,342	7,546	7,553	7,560	7,571	7,571	7,573	7,574	1,285	398
4. 2014	XXX	XXX	7,051	8,035	8,093	8,303	8,323	8,356	8,351	8,353	1,228	383
5. 2015	XXX	XXX	XXX	5,640	6,576	6,746	6,765	6,768	6,767	6,765	895	315
6. 2016	XXX	XXX	XXX	XXX	5,455	6,435	6,549	6,630	6,626	6,625	888	358
7. 2017	XXX	XXX	XXX	XXX	XXX	8,686	10,260	10,378	10,401	10,435	1,443	468
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	6,254	7,855	8,084	8,173	943	374
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,831	8,068	8,057	1,423	478
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,580	8,575	1,645	586
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,194	725	296

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

1. Prior	.000	.585	1,084	1,240	1,264	1,294	1,291	1,285	1,287	1,291	.49	
2. 2012	2,618	4,292	4,951	5,276	5,441	5,442	5,443	5,441	5,439	5,438	1,187	354
3. 2013	XXX	3,017	4,681	5,831	6,119	6,233	6,292	6,349	6,347	6,344	1,193	345
4. 2014	XXX	XXX	3,040	4,912	5,329	5,482	5,667	5,767	5,802	5,800	1,182	309
5. 2015	XXX	XXX	XXX	3,030	4,227	4,850	5,184	5,295	5,295	5,314	1,087	312
6. 2016	XXX	XXX	XXX	XXX	3,096	4,429	5,578	5,956	6,136	6,157	1,101	346
7. 2017	XXX	XXX	XXX	XXX	XXX	3,231	4,997	6,203	6,698	6,831	1,115	364
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	3,130	5,230	6,388	7,060	1,155	389
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,196	5,064	6,264	1,065	371
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,137	3,682	696	252
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,547	571	165

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

1. Prior	.000	.34	.36	.38	.41	.44	.44	.44	.45	.44	.1	
2. 2012	106	224	261	371	525	525	525	525	525	525	43	13
3. 2013	XXX	89	180	292	306	306	306	306	306	306	42	16
4. 2014	XXX	XXX	107	255	259	281	325	327	334	334	39	15
5. 2015	XXX	XXX	XXX	94	109	150	229	233	232	232	38	13
6. 2016	XXX	XXX	XXX	XXX	169	372	393	428	428	428	51	13
7. 2017	XXX	XXX	XXX	XXX	XXX	173	232	296	343	343	54	14
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	231	302	357	364	69	22
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	327	434	597	80	25
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	197	372	61	24
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	453	83	22

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

1. Prior	.000	.64	100	126	157	198	221	241	258	272	.4	
2. 2012	153	221	244	262	266	267	267	267	267	267	21	4
3. 2013	XXX	56	177	204	212	214	214	214	214	214	21	5
4. 2014	XXX	XXX	73	104	111	113	114	115	115	115	12	2
5. 2015	XXX	XXX	XXX	49	131	182	187	190	191	191	14	4
6. 2016	XXX	XXX	XXX	XXX	40	134	174	195	204	204	19	8
7. 2017	XXX	XXX	XXX	XXX	XXX	70	196	213	235	237	19	3
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	123	160	171	174	25	9
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	97	190	225	32	6
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	103	248	24	9
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	204	17	4

**SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL**

1. Prior	.000	.145	.223	.265	.293	.310	.327	.341	.372	.411	.11	
2. 2012	518	661	787	799	917	963	967	968	968	968	125	55
3. 2013	XXX	542	753	775	787	786	787	786	786	786	119	49
4. 2014	XXX	XXX	736	840	882	896	915	963	973	973	112	51
5. 2015	XXX	XXX	XXX	439	522	542	553	558	559	559	88	63
6. 2016	XXX	XXX	XXX	XXX	717	1,039	1,104	1,175	1,270	1,286	100	56
7. 2017	XXX	XXX	XXX	XXX	XXX	1,502	1,632	1,801	1,816	1,826	162	73
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	831	1,078	1,176	1,198	124	88
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,454	1,756	1,932	167	108
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,506	2,916	330	184
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,728	126	81

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**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			
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021			
1. Prior	.000												
2. 2012													
3. 2013	XXX												
4. 2014	XXX	XXX											
5. 2015	XXX	XXX	XXX										
6. 2016	XXX	XXX	XXX	XXX									
7. 2017	XXX	XXX	XXX	XXX	XXX								
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2021	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. 2012													
3. 2013	XXX												
4. 2014	XXX	XXX											
5. 2015	XXX	XXX	XXX										
6. 2016	XXX	XXX	XXX	XXX									
7. 2017	XXX	XXX	XXX	XXX	XXX								
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2021	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. 2012												XXX	XXX
3. 2013	XXX											XXX	XXX
4. 2014	XXX	XXX										XXX	XXX
5. 2015	XXX	XXX	XXX									XXX	XXX
6. 2016	XXX	XXX	XXX	XXX								XXX	XXX
7. 2017	XXX	XXX	XXX	XXX	XXX							XXX	XXX
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX						XXX	XXX
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**NONE**

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

1. Prior	.000	108	250	264	307	315	321	334	319	338	4	
2. 2012	8	107	151	160	160	160	160	160	160	160	10	7
3. 2013	XXX	18	28	41	41	104	148	142	142	142	10	9
4. 2014	XXX	XXX	23	32	65	65	71	77	77	81	8	9
5. 2015	XXX	XXX	XXX	41	70	155	156	159	159	159	12	11
6. 2016	XXX	XXX	XXX	XXX	8	30	145	147	147	196	7	7
7. 2017	XXX	XXX	XXX	XXX	XXX	30	54	61	61	61	6	9
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	11	16	18	21	8	8
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10	12	107	4	5
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11	14	3	6
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18	5	6

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

1. Prior	.000												
2. 2012													
3. 2013	XXX												
4. 2014	XXX	XXX											
5. 2015	XXX	XXX	XXX										
6. 2016	XXX	XXX	XXX	XXX									
7. 2017	XXX	XXX	XXX	XXX	XXX								
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX							
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX						
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

**NONE**

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**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		
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021		
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	.150	.150	XXX	XXX
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,409	1,526	XXX	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	906	XXX	XXX

**SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE**

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000	.64	.18		
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,882	4,970	1,961	576
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,875	1,842	608

**SCHEDULE P - PART 3K - FIDELITY/SURETY**

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000			XXX	XXX
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**NONE**

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.000			XXX	XXX
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**NONE**

**SCHEDULE P - PART 3M - INTERNATIONAL**

1. Prior.....	.000										XXX	XXX
2. 2012.....											XXX	XXX
3. 2013.....	XXX										XXX	XXX
4. 2014.....	XXX	XXX									XXX	XXX
5. 2015.....	XXX	XXX	XXX								XXX	XXX
6. 2016.....	XXX	XXX	XXX	XXX							XXX	XXX
7. 2017.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**NONE**

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**SCHEDULE P - PART 3N - REINSURANCE  
NONPROPORTIONAL ASSUMED PROPERTY**

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			
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021			
1. Prior	.000											XXX	XXX
2. 2012												XXX	XXX
3. 2013	XXX											XXX	XXX
4. 2014	XXX	XXX										XXX	XXX
5. 2015	XXX	XXX	XXX									XXX	XXX
6. 2016	XXX	XXX	XXX	XXX								XXX	XXX
7. 2017	XXX	XXX	XXX	XXX	XXX							XXX	XXX
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX						XXX	XXX
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

**NONE**

**SCHEDULE P - PART 3O - REINSURANCE  
NONPROPORTIONAL ASSUMED LIABILITY**

1. Prior	.000	43	43	43	43	43	43	43	43	43	XXX	XXX
2. 2012											XXX	XXX
3. 2013	XXX										XXX	XXX
4. 2014	XXX	XXX									XXX	XXX
5. 2015	XXX	XXX	XXX								XXX	XXX
6. 2016	XXX	XXX	XXX	XXX							XXX	XXX
7. 2017	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**SCHEDULE P - PART 3P - REINSURANCE  
NONPROPORTIONAL ASSUMED FINANCIAL LINES**

1. Prior	.000										XXX	XXX
2. 2012											XXX	XXX
3. 2013	XXX										XXX	XXX
4. 2014	XXX	XXX									XXX	XXX
5. 2015	XXX	XXX	XXX								XXX	XXX
6. 2016	XXX	XXX	XXX	XXX							XXX	XXX
7. 2017	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**NONE**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY**  
**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		
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021		
1. Prior.....	.000	4	15	77	78	78	79	85	86	86	1	
2. 2012.....	3	4	5	25	25	25	25	25	25	25	2	2
3. 2013.....	XXX	3	5	5	5	5	5	5	5	5	2	1
4. 2014.....	XXX	XXX	6	6	6	6	6	6	6	6	1	1
5. 2015.....	XXX	XXX	XXX	1	1	1	1	1	1	1		
6. 2016.....	XXX	XXX	XXX	XXX	2	8	8	8	8	8	2	2
7. 2017.....	XXX	XXX	XXX	XXX	XXX		9	10	47	47	1	1
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX						1
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1

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

1. Prior.....	.000											
2. 2012.....												
3. 2013.....	XXX											
4. 2014.....	XXX	XXX										
5. 2015.....	XXX	XXX	XXX									
6. 2016.....	XXX	XXX	XXX	XXX								
7. 2017.....	XXX	XXX	XXX	XXX	XXX							
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
11. 2021.....	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	XXX	XXX	XXX	XXX	XXX
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2021.....	XXX	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	XXX	XXX	XXX	XXX	XXX
2. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**NONE**

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**SCHEDULE P - PART 4A - HOMEOWNERS/FAROWNERS**

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....	398	197	129	71	31	9	2			
2. 2012.....	828	228	121	60	(1)					
3. 2013.....	XXX	647	241	104	74	22	5	2		
4. 2014.....	XXX	XXX	811	158	74	48	14	5	2	2
5. 2015.....	XXX	XXX	XXX	943	174	85	45	22	3	2
6. 2016.....	XXX	XXX	XXX	XXX	1,001	178	83	57	21	6
7. 2017.....	XXX	XXX	XXX	XXX	XXX	1,408	216	95	49	16
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	952	181	128	80
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	758	221	105
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	888	213
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,024

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

1. Prior.....	556	159	62		(2)	(3)				
2. 2012.....	1,205	498	132	45	(3)	(1)	(2)	(3)	(2)	
3. 2013.....	XXX	1,395	440	106	31	(1)			(2)	(2)
4. 2014.....	XXX	XXX	1,273	590	194	24	2		(2)	(2)
5. 2015.....	XXX	XXX	XXX	1,336	548	200	50	19	11	(3)
6. 2016.....	XXX	XXX	XXX	XXX	1,239	402	259	109	41	9
7. 2017.....	XXX	XXX	XXX	XXX	XXX	1,189	538	226	108	14
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	1,458	694	316	91
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,846	744	220
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,513	643
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,032

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

1. Prior.....	75	25	12	2						
2. 2012.....	109	48	15	3						
3. 2013.....	XXX	135	43	11	5	1				
4. 2014.....	XXX	XXX	141	63	21	3				
5. 2015.....	XXX	XXX	XXX	149	61	23	8	3		
6. 2016.....	XXX	XXX	XXX	XXX	147	49	30	15	5	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	147	67	27	13	3
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	194	90	41	13
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	298	123	37
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	316	136
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	559

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

1. Prior.....	129	70	46	22	11	5	1			
2. 2012.....	116	41	24	17	9	5	3	3		
3. 2013.....	XXX	156	32	22	11	6	4	2		
4. 2014.....	XXX	XXX	145	95	18	6	3	2		
5. 2015.....	XXX	XXX	XXX	131	79	22	10	6	2	2
6. 2016.....	XXX	XXX	XXX	XXX	138	77	20	7	3	3
7. 2017.....	XXX	XXX	XXX	XXX	XXX	162	88	26	9	7
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	146	80	26	10
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	155	94	20
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	168	63
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	253

**SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL**

1. Prior.....	63	32	16	4						
2. 2012.....	115	28	17	9	(1)					
3. 2013.....	XXX	84	35	16	10	3				
4. 2014.....	XXX	XXX	124	18	11	7	2			
5. 2015.....	XXX	XXX	XXX	141	18	13	7	4		
6. 2016.....	XXX	XXX	XXX	XXX	190	27	15	10	5	1
7. 2017.....	XXX	XXX	XXX	XXX	XXX	262	35	17	9	3
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	214	40	30	19
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	186	44	19
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	230	57
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	268

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XXX	XXX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**NONE**

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

1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XXX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XX	XX					
8. 2018	XXX	XXX	XX	XX	XX	XX				
9. 2019	XXX	XXX	XX	XXX	XXX	XX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	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. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XXX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XX	XX					
8. 2018	XXX	XXX	XX	XX	XX	XX				
9. 2019	XXX	XXX	XX	XXX	XXX	XX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**NONE**

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

1. Prior	277	172	75	41	14	7				
2. 2012	146	122	73	46	20	10	3			
3. 2013	XXX	213	112	109	20	9	5	.3		
4. 2014	XXX	XXX	153	102	85	29	10	.2		
5. 2015	XXX	XXX	XXX	150	150	85	53	17	3	
6. 2016	XXX	XXX	XXX	XXX	202	143	68	31	14	
7. 2017	XXX	XXX	XXX	XXX	XXX	214	116	68	26	10
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	209	128	92	15
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	153	109	41
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	202	114
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	126

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

1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XXX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XX	XX					
8. 2018	XXX	XXX	XX	XX	XX	XX				
9. 2019	XXX	XXX	XX	XXX	XXX	XX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**NONE**

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**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24		
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24	
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24

**SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE**

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(19)	(80)	(73)
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(66)	(37)
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	(73)

**SCHEDULE P - PART 4K - FIDELITY/SURETY**

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2021	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. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**NONE**

**SCHEDULE P - PART 4M - INTERNATIONAL**

1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XXX							
6. 2016	XXX	XXX	XXX	XXX						
7. 2017	XXX	XXX	XXX	XXX	XXX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**NONE**

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**SCHEDULE P - PART 4N - REINSURANCE  
NONPROPORTIONAL ASSUMED PROPERTY**

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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XXX	XXX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**NONE**

**SCHEDULE P - PART 4O - REINSURANCE  
NONPROPORTIONAL ASSUMED LIABILITY**

1. Prior	423	388	388	388	354	354	354	354	354	53
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XXX							
6. 2016	XXX	XXX	XXX	XXX						
7. 2017	XXX	XXX	XXX	XXX	XXX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SCHEDULE P - PART 4P - REINSURANCE  
NONPROPORTIONAL ASSUMED FINANCIAL LINES**

1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XXX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XX	XX					
8. 2018	XXX	XXX	XX	XX	XX	XX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**NONE**

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY  
**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	46	24	14	5	2	2				
2. 2012	17	14	9	5	2					
3. 2013	XXX	24	12	12	2					
4. 2014	XXX	XXX	19	14	10	3	2			
5. 2015	XXX	XXX	XXX	15	15	9	5	3		
6. 2016	XXX	XXX	XXX	XXX	17	14	7	3	2	
7. 2017	XXX	XXX	XXX	XXX	XXX	19	10	7	2	
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	17	12	7	2
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9	9	3
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14	9
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9

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

1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XXX							
6. 2016	XXX	XXX	XXX	XXX						
7. 2017	XXX	XXX	XXX	XXX	XXX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	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	XXX	XXX	XXX
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**NONE**

**SCHEDULE P - PART 4T - WARRANTY**

1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

**NONE**

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**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	160	8	3	1		1	1		1	
2. 2012	1,937	2,085	2,093	2,096	2,096	2,097	2,097	2,097	2,097	2,097
3. 2013	XXX	1,127	1,278	1,283	1,283	1,284	1,285	1,285	1,285	1,285
4. 2014	XXX	XXX	1,133	1,217	1,217	1,226	1,227	1,228	1,228	1,228
5. 2015	XXX	XXX	XXX	783	783	893	895	895	895	895
6. 2016	XXX	XXX	XXX	XXX		882	887	888	888	888
7. 2017	XXX	XXX	XXX	XXX	XXX	1,316	1,433	1,441	1,442	1,443
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	838	932	940	943
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,290	1,417	1,423
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,513	1,645
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	725

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	12	5	2	2		1	1	1		
2. 2012	80	9	3	1		1	1			
3. 2013	XXX	103	7	2		1				
4. 2014	XXX	XXX	62	10		1	1			
5. 2015	XXX	XXX	XXX	79		2	1			
6. 2016	XXX	XXX	XXX	XXX		6	2	1	1	1
7. 2017	XXX	XXX	XXX	XXX	XXX	75	6	2	1	
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	72	10	3	1
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	77	7	3
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	95	12
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	109

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	138	7	1	1	(2)	1	1			
2. 2012	2,508	2,620	2,624	2,625	2,625	2,626	2,626	2,626	2,626	2,626
3. 2013	XXX	1,595	1,677	1,680	1,678	1,682	1,682	1,683	1,683	1,683
4. 2014	XXX	XXX	1,545	1,604	1,594	1,610	1,611	1,611	1,611	1,611
5. 2015	XXX	XXX	XXX	1,140	1,061	1,208	1,209	1,209	1,209	1,209
6. 2016	XXX	XXX	XXX	XXX		1,243	1,246	1,247	1,247	1,247
7. 2017	XXX	XXX	XXX	XXX	XXX	1,811	1,904	1,909	1,910	1,910
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	1,236	1,312	1,317	1,318
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,803	1,899	1,904
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,143	2,243
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,129

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**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	243	32	13	3		1				
2. 2012	874	1,143	1,174	1,183	1,183	1,187	1,187	1,187	1,187	1,187
3. 2013	XXX	873	1,139	1,181	1,181	1,192	1,193	1,193	1,193	1,193
4. 2014	XXX	XXX	918	1,137	1,137	1,176	1,180	1,182	1,182	1,182
5. 2015	XXX	XXX	XXX	838	838	1,071	1,083	1,086	1,086	1,087
6. 2016	XXX	XXX	XXX	XXX		1,039	1,088	1,095	1,099	1,101
7. 2017	XXX	XXX	XXX	XXX	XXX	785	1,056	1,098	1,108	1,115
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	831	1,089	1,144	1,155
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	803	1,024	1,065
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	541	696
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	571

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	60	26	9	2			1	1		
2. 2012	280	48	16	6						
3. 2013	XXX	306	58	16		1				
4. 2014	XXX	XXX	257	47		6	2	1		
5. 2015	XXX	XXX	XXX	232		15	4			
6. 2016	XXX	XXX	XXX	XXX		68	20	9	2	
7. 2017	XXX	XXX	XXX	XXX	XXX	323	67	26	10	3
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	329	81	29	13
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	260	60	17
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	179	32
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	208

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	88	9			(2)	2				
2. 2012	1,418	1,528	1,538	1,541	1,534	1,541	1,541	1,541	1,541	1,541
3. 2013	XXX	1,436	1,527	1,538	1,522	1,539	1,539	1,539	1,539	1,539
4. 2014	XXX	XXX	1,413	1,480	1,432	1,490	1,491	1,491	1,491	1,491
5. 2015	XXX	XXX	XXX	1,315	1,084	1,397	1,398	1,399	1,399	1,399
6. 2016	XXX	XXX	XXX	XXX		1,431	1,446	1,447	1,447	1,447
7. 2017	XXX	XXX	XXX	XXX	XXX	1,373	1,468	1,480	1,481	1,482
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	1,433	1,536	1,555	1,557
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,356	1,444	1,453
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	924	980
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	944

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY**  
**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	10	1								
2. 2012	32	39	41	42	42	43	43	43	43	43
3. 2013	XXX	30	40	41	41	42	42	42	42	42
4. 2014	XXX	XXX	30	38	38	38	39	39	39	39
5. 2015	XXX	XXX	XXX	30	30	37	38	38	38	38
6. 2016	XXX	XXX	XXX	XXX		49	50	51	51	51
7. 2017	XXX	XXX	XXX	XXX	XXX	39	50	52	54	54
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	55	68	69	69
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	64	79	80
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	49	61
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	83

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	2	2	1	1		1	1	1		
2. 2012	9	4	2	1						
3. 2013	XXX	11	2	1						
4. 2014	XXX	XXX	10	1		2	2	1		
5. 2015	XXX	XXX	XXX	8		1				
6. 2016	XXX	XXX	XXX	XXX		3	1			
7. 2017	XXX	XXX	XXX	XXX	XXX	11	3	1		
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	12	1	2	1
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	4	2
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15	7
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	4	1			(1)					
2. 2012	51	55	56	56	55	56	56	56	56	56
3. 2013	XXX	52	57	58	56	58	58	58	58	58
4. 2014	XXX	XXX	50	52	51	54	54	54	54	54
5. 2015	XXX	XXX	XXX	45	37	50	50	51	51	51
6. 2016	XXX	XXX	XXX	XXX		63	64	64	64	64
7. 2017	XXX	XXX	XXX	XXX	XXX	60	67	67	68	68
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	85	90	92	92
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	100	107	107
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	85	92
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	141

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

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

**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	11	1		1		2				
2. 2012	12	19	20	21	21	21	21	21	21	21
3. 2013	XXX	14	19	20	20	21	21	21	21	21
4. 2014	XXX	XXX	9	12	12	12	12	12	12	12
5. 2015	XXX	XXX	XXX	8	8	14	14	14	14	14
6. 2016	XXX	XXX	XXX	XXX		18	18	19	19	19
7. 2017	XXX	XXX	XXX	XXX	XXX	10	18	19	19	19
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	17	24	25	25
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13	30	32
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13	24
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	7	6	6	5		3	3	3	3	3
2. 2012	6	2	1	1						
3. 2013	XXX	5	2							
4. 2014	XXX	XXX	4							
5. 2015	XXX	XXX	XXX	4		1				
6. 2016	XXX	XXX	XXX	XXX		3	3	1		
7. 2017	XXX	XXX	XXX	XXX	XXX	8		1		
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	9	1		
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18	3	2
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	6
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	2				(5)					
2. 2012	22	24	25	25	24	26	26	26	26	26
3. 2013	XXX	23	26	26	26	26	26	26	26	26
4. 2014	XXX	XXX	14	14	14	14	14	14	14	14
5. 2015	XXX	XXX	XXX	16	11	18	18	18	18	18
6. 2016	XXX	XXX	XXX	XXX		26	27	27	28	28
7. 2017	XXX	XXX	XXX	XXX	XXX	20	22	22	23	23
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	33	34	34	34
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36	39	40
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36	39
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	45

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY**  
**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	38	5	3	1		1				
2. 2012	104	121	122	123	123	124	125	125	125	125
3. 2013	XXX	97	116	118	118	119	119	119	119	119
4. 2014	XXX	XXX	94	106	106	109	111	111	112	112
5. 2015	XXX	XXX	XXX	70	70	87	87	88	88	88
6. 2016	XXX	XXX	XXX	XXX		94	97	98	99	100
7. 2017	XXX	XXX	XXX	XXX	XXX	133	155	160	161	162
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	97	118	123	124
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	127	157	167
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	245	330
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	126

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	8	4	3	1		1	1	1	1	3
2. 2012	13	2	2	1						
3. 2013	XXX	19	4	1						
4. 2014	XXX	XXX	12	5		1	1			
5. 2015	XXX	XXX	XXX	16		2				
6. 2016	XXX	XXX	XXX	XXX		4	3	2	2	1
7. 2017	XXX	XXX	XXX	XXX	XXX	28	6	1	1	
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	24	6	2	
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33	12	5
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	115	51
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	46

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	25	4	3	1	(1)	2				2
2. 2012	164	177	179	180	178	180	180	180	180	180
3. 2013	XXX	152	166	167	166	168	168	168	168	168
4. 2014	XXX	XXX	150	160	155	161	162	162	162	162
5. 2015	XXX	XXX	XXX	131	116	150	150	150	151	151
6. 2016	XXX	XXX	XXX	XXX		151	155	156	157	157
7. 2017	XXX	XXX	XXX	XXX	XXX	216	231	234	235	235
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	184	206	213	213
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	249	275	280
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	519	564
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	253

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**

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY  
**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	6	2	1			1				
2. 2012	4	9	9	10	10	10	10	10	10	10
3. 2013	XXX	5	7	9	9	10	10	10	10	10
4. 2014	XXX	XXX	4	6	6	7	8	8	8	8
5. 2015	XXX	XXX	XXX	6	6	12	12	12	12	12
6. 2016	XXX	XXX	XXX	XXX		5	6	6	6	7
7. 2017	XXX	XXX	XXX	XXX	XXX	4	6	6	6	6
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	6	7	7	8
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	3	4
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	3
11. 2021	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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	7	4	3	3		2	1	2	2	1
2. 2012	5	1	1							
3. 2013	XXX	3	1							
4. 2014	XXX	XXX	3	2		1				
5. 2015	XXX	XXX	XXX	5						
6. 2016	XXX	XXX	XXX	XXX		1	1			
7. 2017	XXX	XXX	XXX	XXX	XXX	2	1			
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	2	2	1	
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	2
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5

**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
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	7	2	1	1	(3)	1			1	
2. 2012	13	16	17	17	17	17	17	17	17	17
3. 2013	XXX	13	18	18	18	19	19	19	19	19
4. 2014	XXX	XXX	14	16	14	17	17	17	17	17
5. 2015	XXX	XXX	XXX	19	14	22	22	23	23	23
6. 2016	XXX	XXX	XXX	XXX		13	15	14	14	14
7. 2017	XXX	XXX	XXX	XXX	XXX	11	15	15	15	15
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	13	16	16	16
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	9	12
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	12
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16

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**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY  
SCHEDULE P - PART 5R - PRODUCTS LIABILITY - OCCURRENCE**

**SECTION 1A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior										
2. 2012	2	2	2	2	2	2	2	2	2	2
3. 2013	XXX	1	2	2	2	2	2	2	2	2
4. 2014	XXX	XXX	1	1	1	1	1	1	1	1
5. 2015	XXX	XXX	XXX							
6. 2016	XXX	XXX	XXX	XXX		2	2	2	2	2
7. 2017	XXX	XXX	XXX	XXX	XXX		1	1	1	1
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

**SECTION 2A**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	1	1								
2. 2012										
3. 2013	XXX	1								
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XXX							
6. 2016	XXX	XXX	XXX	XXX						
7. 2017	XXX	XXX	XXX	XXX	XXX	1				
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

**SECTION 3A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior	1	1								
2. 2012	4	4	4	4	4	4	4	4	4	4
3. 2013	XXX	3	3	3	3	3	3	3	3	3
4. 2014	XXX	XXX	2	2	2	2	2	2	2	2
5. 2015	XXX	XXX	XXX	1	1	1	1	1	1	1
6. 2016	XXX	XXX	XXX	XXX		4	4	4	4	4
7. 2017	XXX	XXX	XXX	XXX	XXX	2	2	2	2	2
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	1
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2

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**

**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY**  
**SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**  
**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....											
2. 2012.....	807	807	807	807	807	807	807	807	807	807	
3. 2013.....	XXX	875	875	875	875	875	875	875	875	875	
4. 2014.....	XXX	XXX	923	923	923	923	923	923	923	923	
5. 2015.....	XXX	XXX	XXX	911	911	911	911	911	911	911	
6. 2016.....	XXX	XXX	XXX	XXX	962	962	962	962	962	962	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	1,076	1,076	1,076	1,076	1,076	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	1,278	1,278	1,278	1,278	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,625	1,625	1,625	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,049	2,049	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,531	2,531
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,531
13. Earned Premiums (Sch P-Pt. 1)	807	875	923	911	962	1,076	1,278	1,625	2,049	2,531	XXX

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....											
2. 2012.....	77	77	77	77	77	77	77	77	77	77	
3. 2013.....	XXX	60	60	60	60	60	60	60	60	60	
4. 2014.....	XXX	XXX	36	36	36	36	36	36	36	36	
5. 2015.....	XXX	XXX	XXX	35	35	35	35	35	35	35	
6. 2016.....	XXX	XXX	XXX	XXX	36	36	36	36	36	36	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	53	53	53	53	53	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	62	62	62	62	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	80	80	80	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	110	110	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	136	136
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	136
13. Earned Premiums (Sch P-Pt. 1)	77	60	36	35	36	53	62	80	110	136	XXX

**SCHEDULE P - PART 6D - WORKERS' COMPENSATION**  
**(EXCLUDING EXCESS WORKERS' COMPENSATION)**  
**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....											
2. 2012.....	425	425	425	425	425	425	425	425	425	425	
3. 2013.....	XXX	497	497	497	497	497	497	497	497	497	
4. 2014.....	XXX	XXX	509	509	509	509	509	509	509	509	
5. 2015.....	XXX	XXX	XXX	510	510	510	510	510	510	510	
6. 2016.....	XXX	XXX	XXX	XXX	548	548	548	548	548	548	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	609	609	609	609	609	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	688	688	688	688	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	786	786	786	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	914	914	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,117	1,117
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,117
13. Earned Premiums (Sch P-Pt. 1)	425	497	509	510	548	609	688	786	914	1,117	XXX

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....											
2. 2012.....	70	70	70	70	70	70	70	70	70	70	
3. 2013.....	XXX	70	70	70	70	70	70	70	70	70	
4. 2014.....	XXX	XXX	67	67	67	67	67	67	67	67	
5. 2015.....	XXX	XXX	XXX	56	56	56	56	56	56	56	
6. 2016.....	XXX	XXX	XXX	XXX	70	70	70	70	70	70	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	73	73	73	73	73	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	182	182	182	182	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	175	175	175	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	189	189	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	234	234
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	234
13. Earned Premiums (Sch P-Pt. 1)	70	70	67	56	70	73	182	175	189	234	XXX

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL**

**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....											
2. 2012.....	2,062	2,062	2,062	2,062	2,062	2,062	2,062	2,062	2,062	2,062	
3. 2013.....	XXX	2,361	2,361	2,361	2,361	2,361	2,361	2,361	2,361	2,361	
4. 2014.....	XXX	XXX	2,571	2,571	2,571	2,571	2,571	2,571	2,571	2,571	
5. 2015.....	XXX	XXX	XXX	2,750	2,750	2,750	2,750	2,750	2,750	2,750	
6. 2016.....	XXX	XXX	XXX	XXX	3,138	3,138	3,138	3,138	3,138	3,138	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	3,597	3,597	3,597	3,597	3,597	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	4,174	4,174	4,174	4,174	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,943	4,943	4,943	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,748	5,748	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,379	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,379
13. Earned Premiums (Sch P-Pt. 1)	2,062	2,361	2,571	2,750	3,138	3,597	4,174	4,943	5,748	6,379	XXX

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....											
2. 2012.....	463	463	463	463	463	463	463	463	463	463	
3. 2013.....	XXX	675	675	675	675	675	675	675	675	675	
4. 2014.....	XXX	XXX	559	559	559	559	559	559	559	559	
5. 2015.....	XXX	XXX	XXX	679	679	679	679	679	679	679	
6. 2016.....	XXX	XXX	XXX	XXX	674	674	674	674	674	674	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	801	801	801	801	801	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	890	890	890	890	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,101	1,101	1,101	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,487	1,487	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,225	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,225
13. Earned Premiums (Sch P-Pt. 1)	463	675	559	679	674	801	890	1,101	1,487	1,225	XXX

**SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE**

**SECTION 1A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....											
2. 2012.....	907	907	907	907	907	907	907	907	907	907	
3. 2013.....	XXX	960	960	960	960	960	960	960	960	960	
4. 2014.....	XXX	XXX	979	979	979	979	979	979	979	979	
5. 2015.....	XXX	XXX	XXX	963	963	963	963	963	963	963	
6. 2016.....	XXX	XXX	XXX	XXX	1,018	1,018	1,018	1,018	1,018	1,018	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	1,089	1,089	1,089	1,089	1,089	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	1,208	1,208	1,208	1,208	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,353	1,353	1,353	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,492	1,492	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,656	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,656
13. Earned Premiums (Sch P-Pt. 1)	907	960	979	963	1,018	1,089	1,208	1,353	1,492	1,656	XXX

**SECTION 2A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021	
1. Prior.....											
2. 2012.....	253	253	253	253	253	253	253	253	253	253	
3. 2013.....	XXX	275	275	275	275	275	275	275	275	275	
4. 2014.....	XXX	XXX	329	329	329	329	329	329	329	329	
5. 2015.....	XXX	XXX	XXX	210	210	210	210	210	210	210	
6. 2016.....	XXX	XXX	XXX	XXX	238	238	238	238	238	238	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	229	229	229	229	229	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	232	232	232	232	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	230	230	230	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	277	277	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	337	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	337
13. Earned Premiums (Sch P-Pt. 1)	253	275	329	210	238	229	232	230	277	337	XXX

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

**NONE**

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

**NONE**

Schedule P - Part 6M - International - Section 1

**NONE**

Schedule P - Part 6M - International - Section 2

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

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

**NONE**

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY  
**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 Current Year Premiums Earned	
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021		
1. Prior.....												
2. 2012.....	85	85	85	85	85	85	85	85	85	85	85	
3. 2013.....	XXX	89	89	89	89	89	89	89	89	89	89	
4. 2014.....	XXX	XXX	91	91	91	91	91	91	91	91	91	
5. 2015.....	XXX	XXX	XXX	81	81	81	81	81	81	81	81	
6. 2016.....	XXX	XXX	XXX	XXX	74	74	74	74	74	74	74	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	81	81	81	81	81	81	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	90	90	90	90	90	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	84	84	84	84	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	87	87	87	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	94	94	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)	85	89	91	81	74	81	90	84	87	94	XXX	

**SECTION 2A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned	
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021		
1. Prior.....												
2. 2012.....	14	14	14	14	14	14	14	14	14	14	14	
3. 2013.....	XXX	12	12	12	12	12	12	12	12	12	12	
4. 2014.....	XXX	XXX	9	9	9	9	9	9	9	9	9	
5. 2015.....	XXX	XXX	XXX	7	7	7	7	7	7	7	7	
6. 2016.....	XXX	XXX	XXX	XXX	7	7	7	7	7	7	7	
7. 2017.....	XXX	XXX	XXX	XXX	XXX	6	6	6	6	6	6	
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX	6	6	6	6	6	
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	4	4	4	
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	4	4	
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	4	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)	14	12	9	7	7	6	6	4	4	4	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 Current Year Premiums Earned	
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021		
1. Prior.....												
2. 2012.....												
3. 2013.....	XXX											
4. 2014.....	XXX	XXX										
5. 2015.....	XXX	XXX										
6. 2016.....	XXX	XXX										
7. 2017.....	XXX	XXX										
8. 2018.....	XXX	XXX										
9. 2019.....	XXX	XXX										
10. 2020.....	XXX	XXX										
11. 2021.....	XXX	XXX										
12. Totals.....	XXX	XXX										
13. Earned Premiums (Sch P-Pt. 1)												XXX

**SECTION 2B**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned	
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021		
1. Prior.....												
2. 2012.....												
3. 2013.....	XXX											
4. 2014.....	XXX	XXX										
5. 2015.....	XXX	XXX										
6. 2016.....	XXX	XXX										
7. 2017.....	XXX	XXX										
8. 2018.....	XXX	XXX										
9. 2019.....	XXX	XXX										
10. 2020.....	XXX	XXX										
11. 2021.....	XXX	XXX										
12. Totals.....	XXX	XXX										
13. Earned Premiums (Sch P-Pt. 1)												XXX

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY  
**SCHEDULE P - PART 7A - PRIMARY 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 .....	3,263					
2. Private Passenger Auto Liability/ Medical .....	6,966					
3. Commercial Auto/Truck Liability/ Medical .....	1,615					
4. Workers' Compensation .....	839					
5. Commercial Multiple Peril .....	1,364					
6. Medical Professional Liability - Occurrence .....						
7. Medical Professional Liability - Claims - Made .....						
8. Special Liability .....						
9. Other Liability - Occurrence .....	555					
10. Other Liability - Claims-Made .....						
11. Special Property .....	262					
12. Auto Physical Damage .....	398					
13. Fidelity/Surety .....						
14. Other .....						
15. International .....						
16. Reinsurance - Nonproportional Assumed Property .....	XXX	XXX	XXX	XXX	XXX	XXX
17. Reinsurance - Nonproportional Assumed Liability .....	XXX	XXX	XXX	XXX	XXX	XXX
18. Reinsurance - Nonproportional Assumed Financial Lines .....	XXX	XXX	XXX	XXX	XXX	XXX
19. Products Liability - Occurrence .....	38					
20. Products Liability - Claims-Made .....						
21. Financial Guaranty/Mortgage Guaranty .....						
22. Warranty .....						
23. Totals	15,300					

**SECTION 2**

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....										
2. 2012.....										
3. 2013.....	XXX									
4. 2014.....	XXX	XXX								
5. 2015.....	XXX	XXX	XX							
6. 2016.....	XXX	XXX	XX	XX						
7. 2017.....	XXX	XXX	XX	XXX	XX					
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3**

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2012	2013	2014	2015	2016	2017	2018	2019	2020	2021
1. Prior.....										
2. 2012.....										
3. 2013.....	XXX									
4. 2014.....	XXX	XXX								
5. 2015.....	XXX	XXX	XX							
6. 2016.....	XXX	XXX	XX	XX						
7. 2017.....	XXX	XXX	XX	XXX	XX					
8. 2018.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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**

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY  
**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	3,263					
2. Private Passenger Auto Liability/Medical	6,966					
3. Commercial Auto/Truck Liability/Medical	1,615					
4. Workers' Compensation	839					
5. Commercial Multiple Peril	1,364					
6. Medical Professional Liability - Occurrence						
7. Medical Professional Liability - Claims - Made						
8. Special Liability						
9. Other Liability - Occurrence	555					
10. Other Liability - Claims-Made						
11. Special Property	262					
12. Auto Physical Damage	398					
13. Fidelity/Surety						
14. Other						
15. International						
16. Reinsurance - Nonproportional Assumed Property						
17. Reinsurance - Nonproportional Assumed Liability	62					
18. Reinsurance - Nonproportional Assumed Financial Lines						
19. Products Liability - Occurrence	38					
20. Products Liability - Claims-Made						
21. Financial Guaranty/Mortgage Guaranty						
22. Warranty						
23. Totals	15,362					

**SECTION 2**

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021
1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XXX	XX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3**

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021
1. Prior										
2. 2012										
3. 2013	XXX									
4. 2014	XXX	XXX								
5. 2015	XXX	XXX	XX							
6. 2016	XXX	XXX	XX	XX						
7. 2017	XXX	XXX	XX	XXX	XX					
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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**

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE P INTERROGATORIES**

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not 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	2012 .....		
1.603	2013 .....		
1.604	2014 .....		
1.605	2015 .....		
1.606	2016 .....		
1.607	2017 .....		
1.608	2018 .....		
1.609	2019 .....		
1.610	2020 .....		
1.611	2021 .....		
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 claimant.....  
 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.)  
 Catastrophe weather activity in accident years 2021, 2020, 2019, 2012 and 2011 was significantly higher than prior years. This activity produced an abnormally high level of paid and incurred losses and adjusting and other expense payments for property lines on a direct, ceded and net basis. ....

**SCHEDULE T - PART 2**  
**INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN**

Allocated by States and Territories

States, Etc.	Direct Business Only					Totals
	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	
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	NV					
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**

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL 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	Domi-ciliary Loca-tion	Relation-ship 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 Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.0035	CELINA INSURANCE GROUP	.20176	34-4202015				THE CELINA MUTUAL INSURANCE COMPANY	.OH	.IA	THE NATIONAL MUTUAL INSURANCE COMPANY	Management		THE NATIONAL MUTUAL INSURANCE COMPANY	.NO.	
.0035	CELINA INSURANCE GROUP	.20184	34-4312510				THE NATIONAL MUTUAL INSURANCE COMPANY	.OH		THE NATIONAL MUTUAL INSURANCE COMPANY	Management		THE NATIONAL MUTUAL INSURANCE COMPANY	.NO.	
.0035	CELINA INSURANCE GROUP	.15431	55-0189700				WEST VIRGINIA FARMERS MUTUAL INSURANCE ASSOCIATION	.WV	.IA	THE NATIONAL MUTUAL INSURANCE COMPANY	Management		THE NATIONAL MUTUAL INSURANCE COMPANY	.NO.	
.0035	CELINA INSURANCE GROUP	.16764	31-0617569				MIAMI MUTUAL INSURANCE COMPANY	.OH	.IA	THE NATIONAL MUTUAL INSURANCE COMPANY	Management		THE NATIONAL MUTUAL INSURANCE COMPANY	.NO.	
		.00000	34-1120164				FIRST OHIO FINANCIAL CORPORATION	.OH	.NIA	THE NATIONAL MUTUAL INSURANCE COMPANY	Ownership	100.000	THE NATIONAL MUTUAL INSURANCE COMPANY	.NO.	

**NONE**

Asterisk	
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ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY

**SCHEDULE Y**

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
20176	34-4202015	THE CELINA MUTUAL INSURANCE COMPANY					(35,453,096)	751,951	*		(34,701,145)	(302,046)
16764	31-0617569	MIAMI MUTUAL INSURANCE COMPANY					(1,810,945)		*		(1,810,945)	
20184	34-4312510	THE NATIONAL MUTUAL INSURANCE COMPANY					38,566,045		*		38,566,045	
15431	55-0189700	WEST VIRGINIA FARMERS MUTUAL INSURANCE ASSOCIATION					(1,302,004)	(751,951)			(2,053,955)	302,046
00000	34-1120164	FIRST OHIO FINANCIAL CORPORATION										
9999999 Control Totals												
									XXX			

Pooling balances are excluded from the table above.

Pool Participation:

20176 The Celina Mutual Insurance Company 36%  
 20184 The National Mutual Insurance Company 34%  
 16764 Miami Mutual Insurance Company 30%



**ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY  
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

**MARCH FILING**

- |   | Responses |
|---|-----------|
| 1. Will an actuarial opinion be filed by March 1? .....   | YES       |
| 2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1? .....                   | YES       |
| 3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1? .....                           | YES       |
| 4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1? ..... | YES       |

**APRIL FILING**

- |  |     |
|--|-----|
| 5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1? ..... | YES |
| 6. Will 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 |

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**

- |  |     |
|--|-----|
| 11. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? .....   | NO  |
| 12. Will the Financial Guaranty Insurance Exhibit be filed by March 1? .....   | NO  |
| 13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? .....   | NO  |
| 14. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1? .....   | NO  |
| 15. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? .....   | NO  |
| 16. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1? .....   | NO  |
| 17. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1? .....  | NO  |
| 18. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1? .....  | NO  |
| 19. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)? .....   | YES |
| 20. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1? .....   | YES |
| 21. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1? .....  | NO  |
| 22. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1? .....   | NO  |
| 23. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1? .....   | NO  |
| 24. 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  |
| 25. 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  |
| 26. 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  |
| 27. 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**

- |  |     |
|--|-----|
| 28. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? .....  | NO  |
| 29. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? .....  | NO  |
| 30. Will the Accident and Health Policy Experience Exhibit be filed by April 1? .....  | NO  |
| 31. 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  |
| 32. 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  |
| 33. Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1? .....                           | YES |
| 34. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? .....   | NO  |
| 35. Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1? .....   | NO  |
| 36. Will the Mortgage Guaranty Insurance Exhibit 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? ..... | SEE EXPLANATION |
|--|-----------------|

**Explanations:**

11. Not Applicable
12. Not Applicable
13. Not Applicable
14. Not Applicable
15. Not Applicable
16. Not Applicable
17. Not Applicable
18. Not Applicable
21. Not Applicable
22. Not Applicable
23. Not Applicable
24. Not Applicable
25. Not Applicable
26. Not Applicable
27. Not Applicable
28. Not Applicable
29. Not Applicable
30. Not Applicable
31. Not Applicable
32. Not Applicable
34. Not Applicable
35. Not Applicable
36. Not Applicable
37. Not applicable as the company's direct and assumed written is less than \$500 million.

**Bar Codes:**

- |  |  |
|--|--|
| 11. SIS Stockholder Information Supplement [Document Identifier 420]           |  |
| 12. Financial Guaranty Insurance Exhibit [Document Identifier 240]             |  |
| 13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360] |  |
| 14. Supplement A to Schedule T [Document Identifier 455]                       |  |
| 15. Trusteed Surplus Statement [Document Identifier 490]                       |  |
| 16. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]   |  |
| 17. Reinsurance Summary Supplemental Filing [Document Identifier 401]          |  |

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE NATIONAL MUTUAL INSURANCE COMPANY  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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



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



22. Bail Bond Supplement [Document Identifier 500]



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



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



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



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



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



28. Credit Insurance Experience Exhibit [Document Identifier 230]



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



30. Accident and Health Policy Experience Exhibit [Document Identifier 210]



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



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



34. Life, Health & Annuity Guaranty Association Assessable Premium Exhibit -  
Parts 1 and 2 [Document Identifier 290]



35. Private Flood Insurance Supplement [Document Identifier 560]



36. Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]



**OVERFLOW PAGE FOR WRITE-INS**

**NONE**