



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2022
OF THE CONDITION AND AFFAIRS OF THE

Ohio Mutual Insurance Company

NAIC Group Code	0963 (Current)	0963 (Prior)	NAIC Company Code	10202	Employer's ID Number	34-4320350
Organized under the Laws of	OHIO		State of Domicile or Port of Entry	OH		
Country of Domicile	United States of America					
Incorporated/Organized	03/05/1901		Commenced Business	03/05/1901		
Statutory Home Office	1725 Hopley Avenue (Street and Number)		Bucyrus, OH, US 44820-0111 (City or Town, State, Country and Zip Code)			
Main Administrative Office	1725 Hopley Avenue (Street and Number)		Bucyrus, OH, US 44820-0111 (City or Town, State, Country and Zip Code) 419-562-3011 (Area Code) (Telephone Number)			
Mail Address	1725 Hopley Avenue (Street and Number or P.O. Box)		Bucyrus, OH, US 44820-0111 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	1725 Hopley Avenue (Street and Number)		Bucyrus, OH, US 44820-0111 (City or Town, State, Country and Zip Code) 419-562-3011 (Area Code) (Telephone Number)			
Internet Website Address	www.omiq.com					
Statutory Statement Contact	Andrew Wallen Mr. (Name)		419-563-0810 (Area Code) (Telephone Number)			
	awallen@omiq.com (E-mail Address)		877-753-0580 (FAX Number)			

OFFICERS

President Mark Clarence Russell, Mr. Secretary Thomas Eugene Woolley, Mr. #
Treasurer David Gary Hendrix, Mr.

OTHER

Todd Marshall Boyer, Mr., Vice President Corporate Communications	Chad Philip Combs, Mr., Vice President Personal Lines Underwriting	John Richard DeLucia, Mr., Vice President Claims
David Alan Grove, Mr., Vice President Product Management	Gary Thomas Johnson, Mr., Vice President Commercial Lines Underwriting	Susan Elizabeth Kent, Mrs., Vice President Business Analytics
James Brady McCormack, Mr., Vice President Information Systems	Mendi Harris Riddle, Mrs., Vice President Sales	Marcella Slone Smith, Mrs., Chief Administrative Officer

DIRECTORS OR TRUSTEES

Neeru Arora Ms. # Karen Riley Haefling, Ms. Albert Michael Heister, Mr.
Dawn Kink Ms. # Susan Porter, Ms. John Redon Purse, Mr.
Mark Clarence Russell, Mr. Charles Self Mr. Thomas Eugene Woolley, Mr.

State of Ohio SS
County of Crawford

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

Mark Clarence Russell
President and CEO

David Gary Hendrix
Treasurer and CFO

Marcella Sloane Smith
Assistant Secretary

Subscribed and sworn to before me this
____ day of _____

- a. Is this an original filing?
- b. If no,
 - 1. State the amendment number.....
 - 2. Date filed
 - 3. Name of firm or individual.....



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0963	BUSINESS IN THE STATE OF	Connecticut	DURING THE YEAR 2022								NAIC Company Code	10202
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													
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													
11.1 Medical Professional Liability - Occurrence													
11.2 Medical Professional Liability - Claims-Made													
12. Earthquake													
13.1 Comprehensive (hospital and medical) ind (b)													
13.2 Comprehensive (hospital and medical) group (b)													
14. Credit A&H (Group and Individual)													
15.1 Vision Only (b)													
15.2 Dental Only (b)													
15.3 Disability Income (b)													
15.4 Medicare Supplement (b)													
15.5 Medicaid Title XIX (b)													
15.6 Medicare Title XVIII (b)													
15.7 Long-Term Care (b)													
15.8 Federal Employees Health Benefits Plan (b)													
15.9 Other Health (b)													
16. Workers' Compensation													
17.1 Other Liability - Occurrence													
17.2 Other Liability - Claims-Made													
17.3 Excess Workers' Compensation													
18.1 Products Liability - Occurrence													
18.2 Products Liability - Claims-Made													
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)													
19.2 Other Private Passenger Auto Liability													
19.3 Commercial Auto No-Fault (Personal Injury Protection)													
19.4 Other Commercial Auto Liability													
21.1 Private Passenger Auto Physical Damage													
21.2 Commercial Auto Physical Damage													
22. Aircraft (all perils)													
23. Fidelity													
24. Surety													
26. Burglary and Theft													
27. Boiler and Machinery													
28. Credit													
29. International													
30. Warranty													
31. Reins nonproportional assumed property	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
32. Reins nonproportional assumed liability	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
33. Reins nonproportional assumed financial lines	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)													
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

(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



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0963	BUSINESS IN THE STATE OF Indiana		DURING THE YEAR 2022							NAIC Company Code	10202	
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	963,604	835,120			491,195	704,887	820,995	232,501	10,890	26,834	22,457	174,495	13,875
4. Homeowners Multiple Peril	2,162,802	1,436,570			1,256,659	893,259	1,181,937	364,431	42,085	61,262	26,560	430,210	31,143
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													
11.1 Medical Professional Liability - Occurrence													
11.2 Medical Professional Liability - Claims-Made													
12. Earthquake													
13.1 Comprehensive (hospital and medical) ind (b)													
13.2 Comprehensive (hospital and medical) group (b)													
14. Credit A&H (Group and Individual)													
15.1 Vision Only (b)													
15.2 Dental Only (b)													
15.3 Disability Income (b)													
15.4 Medicare Supplement (b)													
15.5 Medicaid Title XIX (b)													
15.6 Medicare Title XVIII (b)													
15.7 Long-Term Care (b)													
15.8 Federal Employees Health Benefits Plan (b)													
15.9 Other Health (b)													
16. Workers' Compensation													
17.1 Other Liability - Occurrence													
17.2 Other Liability - Claims-Made													
17.3 Excess Workers' Compensation													
18.1 Products Liability - Occurrence													
18.2 Products Liability - Claims-Made													
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)													
19.2 Other Private Passenger Auto Liability	1,530,536	1,060,076			855,809	569,787	1,281,295	985,924	7,873	54,554	65,691	224,662	22,038
19.3 Commercial Auto No-Fault (Personal Injury Protection)													
19.4 Other Commercial Auto Liability													
21.1 Private Passenger Auto Physical Damage	1,405,598	940,443			804,893	569,220	1,082,195	178,281	428	1,039	1,227	205,933	20,239
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													
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)	6,062,540	4,272,209			3,408,556	3,137,153	4,366,422	1,761,137	61,276	143,689	115,935	1,035,300	87,285
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

(a) Finance and service charges not included in Lines 1 to 35 \$ 12

(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 2022 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0963	BUSINESS IN THE STATE OF	Maine	DURING THE YEAR 2022								NAIC Company Code	10202
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 1 Direct Premiums Written	4 2 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Unearned Premium Reserves	6 Direct Losses Paid (deducting salvage)	7 Direct Losses Incurred	8 Direct Losses Unpaid	9 Direct Defense and Cost Containment Expense Paid	10 Direct Defense and Cost Containment Expense Incurred	11 Direct Defense and Cost Containment Expense Unpaid	12 Commissions and Brokerage Expenses
		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													
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													
11.1 Medical Professional Liability - Occurrence													
11.2 Medical Professional Liability - Claims-Made													
12. Earthquake													
13.1 Comprehensive (hospital and medical) ind (b)													
13.2 Comprehensive (hospital and medical) group (b)													
14. Credit A&H (Group and Individual)													
15.1 Vision Only (b)													
15.2 Dental Only (b)													
15.3 Disability Income (b)													
15.4 Medicare Supplement (b)													
15.5 Medicaid Title XIX (b)													
15.6 Medicare Title XVIII (b)													
15.7 Long-Term Care (b)													
15.8 Federal Employees Health Benefits Plan (b)													
15.9 Other Health (b)													
16. Workers' Compensation													
17.1 Other Liability - Occurrence													
17.2 Other Liability - Claims-Made													
17.3 Excess Workers' Compensation													
18.1 Products Liability - Occurrence													
18.2 Products Liability - Claims-Made													
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)													
19.2 Other Private Passenger Auto Liability													
19.3 Commercial Auto No-Fault (Personal Injury Protection)													
19.4 Other Commercial Auto Liability													
21.1 Private Passenger Auto Physical Damage													
21.2 Commercial Auto Physical Damage													
22. Aircraft (all perils)													
23. Fidelity													
24. Surety													
26. Burglary and Theft													
27. Boiler and Machinery													
28. Credit													
29. International													
30. Warranty													
31. Reins nonproportional assumed property	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
32. Reins nonproportional assumed liability	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
33. Reins nonproportional assumed financial lines	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)													
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

(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



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

19.NH

(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 2022 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0963	BUSINESS IN THE STATE OF Ohio		DURING THE YEAR 2022							NAIC Company Code	10202	
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	2,293,020		2,339,798		1,301,815	914,005	1,361,804	501,616	13,138	26,715	17,622	296,670	33,018
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	10,047,860		9,273,162		4,608,273	5,532,986	5,902,416	2,441,775	125,160	227,161	219,021	1,753,284	144,681
4. Homeowners Multiple Peril	35,493,373		32,364,366		18,680,153	33,065,524	38,829,811	9,224,083	646,989	948,798	661,543	5,602,112	511,074
5.1 Commercial Multiple Peril (Non-Liability Portion)													
5.2 Commercial Multiple Peril (Liability Portion)													
6. Mortgage Guaranty													
8. Ocean Marine													
9. Inland Marine	15,678		15,962		5,402								2,028
10. Financial Guaranty .....													.226
11.1 Medical Professional Liability - Occurrence													
11.2 Medical Professional Liability - Claims-Made													
12. Earthquake													
13.1 Comprehensive (hospital and medical) ind (b)													
13.2 Comprehensive (hospital and medical) group (b)													
14. Credit A&H (Group and Individual)													
15.1 Vision Only (b)													
15.2 Dental Only (b)													
15.3 Disability Income (b)													
15.4 Medicare Supplement (b)													
15.5 Medicaid Title XIX (b)													
15.6 Medicare Title XVIII (b)													
15.7 Long-Term Care (b)													
15.8 Federal Employees Health Benefits Plan (b)													
15.9 Other Health (b)													
16. Workers' Compensation													
17.1 Other Liability - Occurrence	198,555		204,110		96,291	3,564	(4,010)	.8,097	11,103	13,234	7,338	25,744	2,859
17.2 Other Liability - Claims-Made													
17.3 Excess Workers' Compensation													
18.1 Products Liability - Occurrence													
18.2 Products Liability - Claims-Made													
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)													
19.2 Other Private Passenger Auto Liability	31,830,103		30,882,816		14,046,688	19,891,809	24,816,511	24,035,106	786,001	1,054,611	1,607,724	4,242,142	458,327
19.3 Commercial Auto No-Fault (Personal Injury Protection)													
19.4 Other Commercial Auto Liability													
21.1 Private Passenger Auto Physical Damage	36,968,824		33,805,084		16,652,325	.27,831,441	.29,381,312	4,501,414	83,825	86,884	30,873	4,948,532	.532,320
21.2 Commercial Auto Physical Damage													
22. Aircraft (all perils)													
23. Fidelity													
24. Surety													
26. Burglary and Theft	58,130		60,970		28,834	5,233	3,896	1,663					7,529
27. Boiler and Machinery .....													.837
28. Credit													
29. International													
30. Warranty													
31. Reins nonproportional assumed property	XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)	116,905,543		108,946,268		55,419,781	87,244,562	100,291,740	40,713,754	1,666,216	2,357,403	2,544,121	16,878,041	1,683,342
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

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

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

and number of persons insured under indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0963	BUSINESS IN THE STATE OF Rhode Island		DURING THE YEAR 2022							NAIC Company Code	10202	
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													
5.1 Commercial Multiple Peril (Non-Liability Portion)													
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6. Mortgage Guaranty													
8. Ocean Marine													
9. Inland Marine													
10. Financial Guaranty													
11.1 Medical Professional Liability - Occurrence													
11.2 Medical Professional Liability - Claims-Made													
12. Earthquake													
13.1 Comprehensive (hospital and medical) ind (b)													
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15.5 Medicaid Title XIX (b)													
15.6 Medicare Title XVIII (b)													
15.7 Long-Term Care (b)													
15.8 Federal Employees Health Benefits Plan (b)													
15.9 Other Health (b)													
16. Workers' Compensation													
17.1 Other Liability - Occurrence													
17.2 Other Liability - Claims-Made													
17.3 Excess Workers' Compensation													
18.1 Products Liability - Occurrence													
18.2 Products Liability - Claims-Made													
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)													
19.2 Other Private Passenger Auto Liability													
19.3 Commercial Auto No-Fault (Personal Injury Protection)													
19.4 Other Commercial Auto Liability													
21.1 Private Passenger Auto Physical Damage													
21.2 Commercial Auto Physical Damage													
22. Aircraft (all perils)													
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24. Surety													
26. Burglary and Theft													
27. Boiler and Machinery													
28. Credit													
29. International													
30. Warranty													
31. Reins nonproportional assumed property	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
32. Reins nonproportional assumed liability	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
33. Reins nonproportional assumed financial lines	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)													
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

(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 2022 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0963	BUSINESS IN THE STATE OF Tennessee		DURING THE YEAR 2022							NAIC Company Code	10202	
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													
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													
11.1 Medical Professional Liability - Occurrence													
11.2 Medical Professional Liability - Claims-Made													
12. Earthquake													
13.1 Comprehensive (hospital and medical) ind (b)													
13.2 Comprehensive (hospital and medical) group (b)													
14. Credit A&H (Group and Individual)													
15.1 Vision Only (b)													
15.2 Dental Only (b)													
15.3 Disability Income (b)													
15.4 Medicare Supplement (b)													
15.5 Medicaid Title XIX (b)													
15.6 Medicare Title XVIII (b)													
15.7 Long-Term Care (b)													
15.8 Federal Employees Health Benefits Plan (b)													
15.9 Other Health (b)													
16. Workers' Compensation													
17.1 Other Liability - Occurrence													
17.2 Other Liability - Claims-Made													
17.3 Excess Workers' Compensation													
18.1 Products Liability - Occurrence													
18.2 Products Liability - Claims-Made													
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)													
19.2 Other Private Passenger Auto Liability													
19.3 Commercial Auto No-Fault (Personal Injury Protection)													
19.4 Other Commercial Auto Liability													
21.1 Private Passenger Auto Physical Damage													
21.2 Commercial Auto Physical Damage													
22. Aircraft (all perils)													
23. Fidelity													
24. Surety													
26. Burglary and Theft													
27. Boiler and Machinery													
28. Credit													
29. International													
30. Warranty													
31. Reins nonproportional assumed property	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
32. Reins nonproportional assumed liability	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
33. Reins nonproportional assumed financial lines	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)													
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

(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 2022 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0963	BUSINESS IN THE STATE OF	Vermont	DURING THE YEAR 2022								NAIC Company Code	10202
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													
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													
11.1 Medical Professional Liability - Occurrence													
11.2 Medical Professional Liability - Claims-Made													
12. Earthquake													
13.1 Comprehensive (hospital and medical) ind (b)													
13.2 Comprehensive (hospital and medical) group (b)													
14. Credit A&H (Group and Individual)													
15.1 Vision Only (b)													
15.2 Dental Only (b)													
15.3 Disability Income (b)													
15.4 Medicare Supplement (b)													
15.5 Medicaid Title XIX (b)													
15.6 Medicare Title XVIII (b)													
15.7 Long-Term Care (b)													
15.8 Federal Employees Health Benefits Plan (b)													
15.9 Other Health (b)													
16. Workers' Compensation													
17.1 Other Liability - Occurrence													
17.2 Other Liability - Claims-Made													
17.3 Excess Workers' Compensation													
18.1 Products Liability - Occurrence													
18.2 Products Liability - Claims-Made													
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)													
19.2 Other Private Passenger Auto Liability													
19.3 Commercial Auto No-Fault (Personal Injury Protection)													
19.4 Other Commercial Auto Liability													
21.1 Private Passenger Auto Physical Damage													
21.2 Commercial Auto Physical Damage													
22. Aircraft (all perils)													
23. Fidelity													
24. Surety													
26. Burglary and Theft													
27. Boiler and Machinery													
28. Credit													
29. International													
30. Warranty													
31. Reins nonproportional assumed property	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
32. Reins nonproportional assumed liability	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
33. Reins nonproportional assumed financial lines	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)													
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

(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 2022 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0963	BUSINESS IN THE STATE OF Virginia		DURING THE YEAR 2022							NAIC Company Code	10202	
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 1 Direct Premiums Written	4 2 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Unearned Premium Reserves	6 Direct Losses Paid (deducting salvage)	7 Direct Losses Incurred	8 Direct Losses Unpaid	9 Direct Defense and Cost Containment Expense Paid	10 Direct Defense and Cost Containment Expense Incurred	11 Direct Defense and Cost Containment Expense Unpaid	12 Commissions and Brokerage Expenses
		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													
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													
11.1 Medical Professional Liability - Occurrence													
11.2 Medical Professional Liability - Claims-Made													
12. Earthquake													
13.1 Comprehensive (hospital and medical) ind (b)													
13.2 Comprehensive (hospital and medical) group (b)													
14. Credit A&H (Group and Individual)													
15.1 Vision Only (b)													
15.2 Dental Only (b)													
15.3 Disability Income (b)													
15.4 Medicare Supplement (b)													
15.5 Medicaid Title XIX (b)													
15.6 Medicare Title XVIII (b)													
15.7 Long-Term Care (b)													
15.8 Federal Employees Health Benefits Plan (b)													
15.9 Other Health (b)													
16. Workers' Compensation													
17.1 Other Liability - Occurrence													
17.2 Other Liability - Claims-Made													
17.3 Excess Workers' Compensation													
18.1 Products Liability - Occurrence													
18.2 Products Liability - Claims-Made													
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)													
19.2 Other Private Passenger Auto Liability													
19.3 Commercial Auto No-Fault (Personal Injury Protection)													
19.4 Other Commercial Auto Liability													
21.1 Private Passenger Auto Physical Damage													
21.2 Commercial Auto Physical Damage													
22. Aircraft (all perils)													
23. Fidelity													
24. Surety													
26. Burglary and Theft													
27. Boiler and Machinery													
28. Credit													
29. International													
30. Warranty													
31. Reins nonproportional assumed property	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
32. Reins nonproportional assumed liability	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
33. Reins nonproportional assumed financial lines	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)													
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

(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



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0963	BUSINESS IN THE STATE OF	Wisconsin	DURING THE YEAR 2022								NAIC Company Code	10202
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 1 Direct Premiums Written	4 2 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Unearned Premium Reserves	6 Direct Losses Paid (deducting salvage)	7 Direct Losses Incurred	8 Direct Losses Unpaid	9 Direct Defense and Cost Containment Expense Paid	10 Direct Defense and Cost Containment Expense Incurred	11 Direct Defense and Cost Containment Expense Unpaid	12 Commissions and Brokerage Expenses
		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													
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													
11.1 Medical Professional Liability - Occurrence													
11.2 Medical Professional Liability - Claims-Made													
12. Earthquake													
13.1 Comprehensive (hospital and medical) ind (b)													
13.2 Comprehensive (hospital and medical) group (b)													
14. Credit A&H (Group and Individual)													
15.1 Vision Only (b)													
15.2 Dental Only (b)													
15.3 Disability Income (b)													
15.4 Medicare Supplement (b)													
15.5 Medicaid Title XIX (b)													
15.6 Medicare Title XVIII (b)													
15.7 Long-Term Care (b)													
15.8 Federal Employees Health Benefits Plan (b)													
15.9 Other Health (b)													
16. Workers' Compensation													
17.1 Other Liability - Occurrence													
17.2 Other Liability - Claims-Made													
17.3 Excess Workers' Compensation													
18.1 Products Liability - Occurrence													
18.2 Products Liability - Claims-Made													
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)													
19.2 Other Private Passenger Auto Liability													
19.3 Commercial Auto No-Fault (Personal Injury Protection)													
19.4 Other Commercial Auto Liability													
21.1 Private Passenger Auto Physical Damage													
21.2 Commercial Auto Physical Damage													
22. Aircraft (all perils)													
23. Fidelity													
24. Surety													
26. Burglary and Theft													
27. Boiler and Machinery													
28. Credit													
29. International													
30. Warranty													
31. Reins nonproportional assumed property	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
32. Reins nonproportional assumed liability	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
33. Reins nonproportional assumed financial lines	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)													
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

(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



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0963	BUSINESS IN THE STATE OF		Grand Total	DURING THE YEAR 2022							NAIC Company Code	10202
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	2,293,020		2,339,798		1,301,815	914,005	1,361,804	501,616	13,138	26,715	17,622	296,670	33,018
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	11,011,464		10,108,282		5,099,468	6,237,873	6,723,411	2,674,276	136,050	253,995	241,478	1,927,779	158,556
4. Homeowners Multiple Peril	37,656,175		33,800,936		19,936,812	33,958,783	40,011,748	9,588,514	689,074	1,010,060	688,103	6,032,322	542,217
5.1 Commercial Multiple Peril (Non-Liability Portion)													
5.2 Commercial Multiple Peril (Liability Portion)													
6. Mortgage Guaranty													
8. Ocean Marine													
9. Inland Marine		15,678	15,962		5,402								2,028
10. Financial Guaranty .....													.226
11.1 Medical Professional Liability - Occurrence													
11.2 Medical Professional Liability - Claims-Made													
12. Earthquake													
13.1 Comprehensive (hospital and medical) ind (b)													
13.2 Comprehensive (hospital and medical) group (b)													
14. Credit A&H (Group and Individual)													
15.1 Vision Only (b)													
15.2 Dental Only (b)													
15.3 Disability Income (b)													
15.4 Medicare Supplement (b)													
15.5 Medicaid Title XIX (b)													
15.6 Medicare Title XVIII (b)													
15.7 Long-Term Care (b)													
15.8 Federal Employees Health Benefits Plan (b)													
15.9 Other Health (b)													
16. Workers' Compensation													
17.1 Other Liability - Occurrence	198,555		204,110		96,291	3,564	(4,010)	.8,097	11,103	13,234	7,338	25,744	2,859
17.2 Other Liability - Claims-Made													
17.3 Excess Workers' Compensation													
18.1 Products Liability - Occurrence													
18.2 Products Liability - Claims-Made													
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)													
19.2 Other Private Passenger Auto Liability	33,360,639		31,942,892		14,902,497	20,461,596	26,097,806	25,021,030	793,874	1,109,165	1,673,415	4,466,804	480,365
19.3 Commercial Auto No-Fault (Personal Injury Protection)													
19.4 Other Commercial Auto Liability													
21.1 Private Passenger Auto Physical Damage	38,374,422		34,745,527		17,457,218	28,800,661	30,463,507	4,679,695	84,253	87,923	32,100	5,154,465	.552,559
21.2 Commercial Auto Physical Damage													
22. Aircraft (all perils)													
23. Fidelity													
24. Surety													
26. Burglary and Theft	58,130		60,970		28,834	5,233	3,896	1,663					7,529
27. Boiler and Machinery .....													.837
28. Credit													
29. International													
30. Warranty													
31. Reins nonproportional assumed property	XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)	122,968,083		113,218,477		58,828,337	90,381,715	104,658,162	42,474,891	1,727,492	2,501,092	2,660,056	17,913,341	1,770,637
DETAILS OF WRITE-INS													
3401.													
3402.													
3403.													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

(a) Finance and service charges not included in Lines 1 to 35 \$ 12

(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 2022 OF THE Ohio Mutual Insurance Company

SCHEDULE F - PART 1

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

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effectuated or (Cancelled) during Current Year

NONE

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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 Commiss- ions	15 Columns 7 through 14 Totals	17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers					
34-1008736 ..	13072 ..	UNITED OHIO INSURANCE COMPANY	OH.....		201,139	44,167		38,980		99,610		182,757							182,757		
01-0407315 ..	25950 ..	CASCO INDEMNITY COMPANY	ME.....		24,756	5,436		4,798		12,260		22,494							22,494		
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling					225,895		49,603		43,778		111,870		205,251							205,251	
0499999. Total Authorized - Affiliates - U.S. Non-Pool																					
0799999. Total Authorized - Affiliates - Other (Non-U.S.)																					
0899999. Total Authorized - Affiliates					225,895		49,603		43,778		111,870		205,251							205,251	
06-1182357 ..	22730 ..	ALLIED WORLD INSURANCE COMPANY	NH.....		372	25	1	13		31		70								.48	
36-2661954 ..	10103 ..	AMERICAN AGRICULTURAL INSURANCE COMPANY	IN.....		225	9		35		12		24								.67	
06-1430254 ..	10348 ..	ARCH REINSURANCE COMPANY	DE.....		191	21	1	7		16		1								.33	
42-0234980 ..	21415 ..	EMPLOYERS MUTUAL CASUALTY CO	IA.....		84			35				28								.58	
05-0316605 ..	21482 ..	FACTORY MUTUAL INSURANCE COMPANY	RI.....		781	48		54				393								.451	
42-0245840 ..	13897 ..	FARMERS MUTUAL HAIL INSURANCE COMPANY	IA.....		34			14				11								.23	
13-2673100 ..	22039 ..	GENERAL REINSURANCE CORPORATION	DE.....		817	402	5	62		675		333								1,413	294
06-0384680 ..	11452 ..	HARTFORD STEAM BOILER INSPECTION & INS	CT.....		2							1								1	
47-0698807 ..	23680 ..	ODYSSEY REINSURANCE COMPANY	CT.....		147	10		5				28								.19	
52-1952955 ..	10357 ..	RENAISSANCE REINSURANCE US INC	MD.....		88			37				29								.60	
13-1675535 ..	25364 ..	SWISS REINSURANCE AMERICA CORPORATION	NY.....		171	8		25				16								.49	
13-2918573 ..	42439 ..	THE TOA REINSURANCE COMPANY OF AMERICA	DE.....		8			3				3								6	
13-3031176 ..	38636 ..	PARTNER REINSURANCE COMPANY OF THE U.S.	NY.....		12			5				4								8	
23-2423138 ..	23850 ..	TOKIO MARINE SPECIALTY INS CO	DE.....		208							117								102	
95-3187355 ..	35300 ..	ALLIANZ GLOBAL RISKS US INSURANCE CO	IL.....		161	14	1	5		12										.22	
43-0613000 ..	23388 ..	SHELTER MUTUAL INSURANCE COMPANY	MO.....		110	21	1	4		10										.27	
0999999. Total Authorized - Other U.S. Unaffiliated Insurers					3,411	558	9	304		779		960		2,610		223				2,387	294
AA-999122 ..	32573 ..	OHIO FAIR PLAN UNDERWRITING ASSOCIATION	OH.....		11							6				6				4	
1099999. Total Authorized - Pools - Mandatory Pools												6				6				4	
AA-9995035 ..	00000 ..	MUTUAL REINSURANCE BUREAU	IL.....		307															(16)	
1199999. Total Authorized - Pools - Voluntary Pools					307															(16)	
AA-1120157 ..	00000 ..	LLOYD'S SYNDICATE #1729	GBR.....		65	8		3		7										.13	
AA-1128001 ..	00000 ..	LLOYD'S SYNDICATE #2001	GBR.....		77	10		3		8										.15	
AA-1120085 ..	00000 ..	LLOYD'S SYNDICATE # 1274	GBR.....		14															(1)	
AA-1126609 ..	00000 ..	LLOYD'S SYNDICATE #0609	GBR.....		33	4		1		3										6	
AA-1128121 ..	00000 ..	LLOYD'S SYNDICATE #2121	GBR.....		12															(1)	
AA-1128791 ..	00000 ..	LLOYD'S SYNDICATE #2791	GBR.....		152	11		3		8										.15	
AA-1120181 ..	00000 ..	LLOYD'S SYNDICATE #5886	GBR.....		94	10		3		8										.14	
AA-1120156 ..	00000 ..	LLOYD'S SYNDICATE #1686	GBR.....		74	8		3		7										.13	
AA-1120171 ..	00000 ..	LLOYD'S SYNDICATE #1856	GBR.....		91	16	1	5		12										.25	
1299999. Total Authorized - Other Non-U.S. Insurers					612	67	1	21		53										99	
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)					230,236	625	10	49,928		44,610		112,836		208,009		284				207,725	294
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool																					
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)																					
2299999. Total Unauthorized - Affiliates																					
AA-1120337 ..	00000 ..	ASPEN INSURANCE UK LIMITED	GBR.....		10			4				3								6	
AA-3191435 ..	00000 ..	CONDUIT REINS LTD	BMU.....		128	70	2	5		12										.71	
AA-3194122 ..	00000 ..	DAVINCI REINSURANCE LTD	BMU.....		176	13		6		16										.24	
AA-1340028 ..	00000 ..	DEVK RUCKVERSICHERUNGS UND BETEILIGUNGS AG	DEU.....		73	5		3		7										10	
AA-3191298 ..	00000 ..	ANTARES REINS CO LTD	BMU.....		102	8		4		10										.15	
AA-3190339 ..	00000 ..	RENAISSANCE REINSURANCE LTD	BMU.....		118	8		4		11										.16	

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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			
AA-1340004 ..	.00000	R&V VERSICHERUNG AG	DEU.....		626	82	3	26		66					177	49		128		
2699999. Total Unauthorized - Other Non-U.S. Insurers					1,233	186	5	52		122		3			368		98		270	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					1,233	186	5	52		122		3			368		98		270	
3299999. Total Certified - Affiliates - U.S. Non-Pool																				
3599999. Total Certified - Affiliates - Other (Non-U.S.)																				
3699999. Total Certified - Affiliates																				
CR-1340125 ..	.00000	HANNOVER RUCKVERSICHERUNGS AG	DEU.....		119	11	1	18		9		11			50	9		.41		
4099999. Total Certified - Other Non-U.S. Insurers					119	11	1	18		9		11			50	9		41		
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)					119	11	1	18		9		11			50	9		41		
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool																				
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)																				
5099999. Total Reciprocal Jurisdiction - Affiliates																				
RJ-1120191 ..	.00000	CONVEX INS UK LTD	GBR.....		382	41	2	13		33					89	27		.62		
RJ-3191400 ..	.00000	CONVEX RE LTD	BMU.....		141	8		4		10					22	8		.14		
5499999. Total Reciprocal Jurisdiction - Other Non-U.S. Insurers					523	49	2	17		43					111		35		76	
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)					523	49	2	17		43					111		35		76	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)					232,111	871	18	50,015		44,784		112,850			208,538		426		208,112	294
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																				
9999999 Totals					232,111	871	18	50,015		44,784		112,850			208,538		426		208,112	294

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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	26	27	Ceded Reinsurance Credit Risk												
		21	22	23	24				Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Recoverable (Col. 28 * 120%)	30	31	32	33	34	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
34-1008736 ..	UNITED OHIO INSURANCE COMPANY						182,757														
01-0407315 ..	CASCO INDEMNITY COMPANY						22,494														
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling				XXX				205,251													
0499999. Total Authorized - Affiliates - U.S. Non-Pool				XXX																	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)				XXX																	
0899999. Total Authorized - Affiliates				XXX				205,251													
06-1182357 ..	ALLIED WORLD INSURANCE COMPANY						22	48					70	84	22	62					2
36-2661954 ..	AMERICAN AGRICULTURAL INSURANCE COMPANY						13	67					80	96	13	83					2
06-1430254 ..	ARCH REINSURANCE COMPANY						13	33					46	55	13	42					1
42-0234980 ..	EMPLOYERS MUTUAL CASUALTY CO						5	58					63	76	5	71					2
05-0316605 ..	FACTORY MUTUAL INSURANCE COMPANY						44	451					495	594	44	550					12
42-0245840 ..	FARMERS MUTUAL HAIL INSURANCE COMPANY						2	23					25	30	2	28					1
13-2673100 ..	GENERAL REINSURANCE CORPORATION						358	1,119					1,477	1,772	358	1,414					23
06-0384680 ..	HARTFORD STEAM BOILER INSPECTION & INS							1					1	1							1
47-0698507 ..	ODYSSEY REINSURANCE COMPANY						9	19					28	34	9	25					1
52-1952955 ..	RENAISSANCE REINSURANCE US INC						6	60					66	79	6	73					2
13-1675535 ..	SWISS REINSURANCE AMERICA CORPORATION						10	49					59	71	10	61					1
13-2918573 ..	THE TOA REINSURANCE COMPANY OF AMERICA							6					6	7		7					
13-3031176 ..	PARTNER REINSURANCE COMPANY OF THE U.S.						1	8					9	11	1	10					
23-2423138 ..	TOKIO MARINE SPECIALTY INS CO						15	102					117	140	15	125					2
95-3187355 ..	ALLIANZ GLOBAL RISKS US INSURANCE CO.						10	22					32	38	10	28					1
43-0613000 ..	SHELTER MUTUAL INSURANCE COMPANY						9	27					36	43	9	34					1
0999999. Total Authorized - Other U.S. Unaffiliated Insurers				XXX			517	2,093					2,610	3,132	517	2,615					50
AA-999122 ..	OHIO FAIR PLAN UNDERWRITING ASSOCIATION							2	4				XXX	XXX	XXX	XXX					
1099999. Total Authorized - Pools - Mandatory Pools				XXX				2	4				XXX	XXX	XXX	XXX					
AA-9995035 ..	MUTUAL REINSURANCE BUREAU																			3	
1199999. Total Authorized - Pools - Voluntary Pools				XXX																	
AA-1120157 ..	LLOYD'S SYNDICATE #1729							5	13				18	22	5	17					3
AA-1128001 ..	LLOYD'S SYNDICATE #2001							6	15				21	25	6	19					1
AA-1120085 ..	LLOYD'S SYNDICATE # 1274							2	6				8	10	2	8					3
AA-1126609 ..	LLOYD'S SYNDICATE #0609																			3	
AA-1128121 ..	LLOYD'S SYNDICATE #2121							7	15				22	26	7	19					3
AA-1128791 ..	LLOYD'S SYNDICATE #2791							7	14				21	25	7	18					1
AA-1120181 ..	LLOYD'S SYNDICATE #5886							5	13				18	22	5	17					1
AA-1120156 ..	LLOYD'S SYNDICATE #1686							9	25				34	41	9	32					1
AA-1120171 ..	LLOYD'S SYNDICATE #1856																			3	
1299999. Total Authorized - Other Non-U.S. Insurers				XXX			41	101					142	170	41	129					4
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)				XXX			560	207,449					2,752	3,302	558	2,744					53
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool				XXX									XXX	XXX	XXX	XXX					
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX																	

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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	26	27	Ceded Reinsurance Credit Risk											
		21	22	23	24				Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Recoverable (Col. 28 * 120%)	30	31	32	33	34	35	36
Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number																Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	
2299999. Total Unauthorized - Affiliates			XXX															XXX		
AA-1120337 .. ASPEN INSURANCE UK LIMITED	6	.....	71	.....	0001	.....	89	.....	.....	.....	.....	7	8	1	7	6	1	3	.....	.....
AA-3191435 .. CONDUIT REINS LTD	24	.....	10	.....	0002	.....	35	.....	.....	.....	.....	35	42	11	31	21	18	4	.....	2
AA-3194122 .. DAVINCI REINSURANCE LTD	15	.....	15	.....	0003	.....	22	.....	.....	.....	.....	15	18	5	13	10	3	7	.....	1
AA-1340028 .. DEV RUCKVERSICHERUNGS UND Beteiligungs AG	16	.....	128	.....	0004	.....	177	.....	.....	.....	.....	177	212	49	21	16	5	2	4	.....
AA-3190339 .. RENAISSANCE REINSURANCE LTD	128	.....	128	.....	0004	.....	177	.....	.....	.....	.....	177	212	49	163	128	35	3	4	1
2699999. Total Unauthorized - Other Non-U.S. Insurers	46	224	XXX				368					368	442	98	344	270	74	XXX	8	2
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	46	224	XXX				368					368	442	98	344	270	74	XXX	8	2
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		
CR-1340125 .. HANNOVER RUCKVERSICHERUNGS AG .....	.....	.....	.....	.....	.....	9	41	.....	.....	.....	.....	50	60	9	51	.....	51	2	.....	1
4099999. Total Certified - Other Non-U.S. Insurers			XXX				9	41				50	60	9	51		51	XXX		1
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)			XXX				9	41				50	60	9	51		51	XXX		1
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		
RJ-1120191 .. CONVEX INS UK LTD .....	.....	.....	.....	.....	.....	27	62	.....	.....	.....	.....	89	107	27	80	.....	80	4	.....	3
RJ-3191400 .. CONVEX RE LTD .....	.....	.....	8	14	.....	.....	22	26	.....	.....	.....	22	26	8	18	.....	18	4	.....	1
5499999. Total Reciprocal Jurisdiction - Other Non-U.S. Insurers			XXX				35	76				111	133	35	98		98	XXX		3
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)			XXX				35	76				111	133	35	98		98	XXX		3
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	46	224	XXX				972	207,566				3,281	3,937	700	3,237	270	2,967	XXX	8	60
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)			XXX				972	207,566				3,281	3,937	700	3,237	270	2,967	XXX	XXX	XXX
9999999 Totals	46	224	XXX				972	207,566				3,281	3,937	700	3,237	270	2,967	XXX	8	60

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute	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/[Col. 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	Overdue																									
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38+39 +40+41																					
34-1008736 ..	UNITED OHIO INSURANCE COMPANY																	YES										
01-0407315 ..	CASCO INDEMNITY COMPANY																	YES										
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling																		XXX										
0499999. Total Authorized - Affiliates - U.S. Non-Pool																		XXX										
0799999. Total Authorized - Affiliates - Other (Non-U.S.)																		XXX										
0899999. Total Authorized - Affiliates																		XXX										
06-1182357 ..	ALLIED WORLD INSURANCE COMPANY	26							26									YES										
36-2661954 ..	AMERICAN AGRICULTURAL INSURANCE COMPANY	9							9									YES										
06-1430254 ..	ARCH REINSURANCE COMPANY	22							22									YES										
42-0234980 ..	EMPLOYERS MUTUAL CASUALTY CO																	YES										
05-0316605 ..	FACTORY MUTUAL INSURANCE COMPANY	48							48									YES										
42-0245840 ..	FARMERS MUTUAL HAIL INSURANCE COMPANY																	YES										
13-2673100 ..	GENERAL REINSURANCE CORPORATION	407							407									YES										
06-0384680 ..	HARTFORD STEAM BOILER INSPECTION & INS																	YES										
47-0698507 ..	ODYSSEY REINSURANCE COMPANY	10							10									YES										
52-1952955 ..	RENAISSANCE REINSURANCE US INC																	YES										
13-1675535 ..	SWISS REINSURANCE AMERICA CORPORATION	8							8									YES										
13-2918573 ..	THE TOA REINSURANCE COMPANY OF AMERICA																	YES										
13-3031176 ..	PARTNER REINSURANCE COMPANY OF THE U.S.																	YES										
23-2423138 ..	TOKIO MARINE SPECIALTY INS CO																	YES										
95-3187355 ..	ALLIANZ GLOBAL RISKS US INSURANCE CO	15							15									YES										
43-0613000 ..	SHELTER MUTUAL INSURANCE COMPANY	22							22									YES										
0999999. Total Authorized - Other U.S. Unaffiliated Insurers		567							567									XXX										
AA-9991222 ..	OHIO FAIR PLAN UNDERWRITING ASSOCIATION																	YES										
1099999. Total Authorized - Pools - Mandatory Pools																		XXX										
AA-9995035 ..	MUTUAL REINSURANCE BUREAU																	YES										
1199999. Total Authorized - Pools - Voluntary Pools																		XXX										
AA-1120157 ..	LLOYD'S SYNDICATE #1729	8							8									YES										
AA-1128001 ..	LLOYD'S SYNDICATE #2001	10							10									YES										
AA-1120085 ..	LLOYD'S SYNDICATE # 1274																	YES										
AA-1126609 ..	LLOYD'S SYNDICATE #0609	4							4									YES										
AA-1128121 ..	LLOYD'S SYNDICATE #2121																	YES										
AA-1128791 ..	LLOYD'S SYNDICATE #2791	11							11									YES										
AA-1120181 ..	LLOYD'S SYNDICATE #5886	10							10									YES										
AA-1120156 ..	LLOYD'S SYNDICATE #1686	8							8									YES										
AA-1120171 ..	LLOYD'S SYNDICATE #1856	17							17									YES										
1299999. Total Authorized - Other Non-U.S. Insurers		68							68									XXX										
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		635							635									XXX										
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool																		XXX										

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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	Current	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 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/[Col. 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	Overdue																								
				38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38+39 +40+41																				
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)																		XXX										
2299999. Total Unauthorized - Affiliates																		XXX										
AA-1120337 .. ASPEN INSURANCE UK LIMITED																		YES										
AA-3191435 .. CONDUIT REINS LTD		72							72									YES										
AA-3194122 .. DAVINCI REINSURANCE LTD		13							13									YES										
AA-1340028 .. DEV RUCKVERSICHERUNGS UND BETEILIGUNGS AG .....		.5							.5									YES								
AA-3191298 .. ANTARES REINS CO LTD		8							.8									YES										
AA-3190339 .. RENAISSANCE REINSURANCE LTD .....		.8							.8									YES								
AA-1340004 .. R&V VERSICHERUNG AG		85							85									YES										
2699999. Total Unauthorized - Other Non-U.S. Insurers		191							191									XXX										
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		191							191									XXX										
3299999. Total Certified - Affiliates - U.S. Non-Pool																		XXX										
3599999. Total Certified - Affiliates - Other (Non-U.S.)																		XXX										
3699999. Total Certified - Affiliates																		XXX										
CR-1340125 .. HANNOVER RUCKVERSICHERUNGS AG		12							12									YES										
4099999. Total Certified - Other Non-U.S. Insurers		12							12									XXX										
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		12							12									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										
RJ-1120191 .. CONVEX INS UK LTD		43							43									YES										
RJ-3191400 .. CONVEX RE LTD		8							.8									YES										
5499999. Total Reciprocal Jurisdiction - Other Non-U.S. Insurers		51							51									XXX										
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		51							51									XXX										
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		889							889									XXX										
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																		XXX										
9999999 Totals		889							889									XXX										

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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																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	Complete if Col. 52 = "No"; Otherwise Enter 0	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	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. 45 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67				
34-1008736 ..	UNITED OHIO INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
01-0407315 ..	CASCO INDEMNITY COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0499999. Total Authorized - Affiliates - U.S. Non-Pool		XXX	XXX	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	XXX	XXX			
0899999. Total Authorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
06-1182357 ..	ALLIED WORLD INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
36-2661954 ..	AMERICAN AGRICULTURAL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
06-1430254 ..	ARCH REINSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
42-0234980 ..	EMPLOYERS MUTUAL CASUALTY CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
05-0316605 ..	FACTORY MUTUAL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
42-0245840 ..	FARMERS MUTUAL HAIL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
13-2673100 ..	GENERAL REINSURANCE CORPORATION	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
06-0384680 ..	HARTFORD STEAM BOILER INSPECTION & INS	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
47-0698507 ..	ODYSSEY REINSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
52-1952955 ..	RENAISSANCE REINSURANCE US INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
13-1675535 ..	SWISS RE INSURANCE AMERICA CORPORATION	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
13-2918573 ..	THE TOA REINSURANCE COMPANY OF AMERICA	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
13-3031176 ..	PARTNER REINSURANCE COMPANY OF THE U.S.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
23-2423138 ..	TOKIO MARINE SPECIALTY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
95-3187355 ..	ALLIANZ GLOBAL RISKS US INSURANCE CO.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
43-0613000 ..	SHELTER MUTUAL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0999999. Total Authorized - Other U.S. Unaffiliated Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-999122 ..	OHIO FAIR PLAN UNDERWRITING ASSOCIATION	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
1099999. Total Authorized - Pools - Mandatory Pools		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-9995035 ..	MUTUAL REINSURANCE BUREAU	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
1199999. Total Authorized - Pools - Voluntary Pools		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1120157 ..	LLOYD'S SYNDICATE #1729	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1128001 ..	LLOYD'S SYNDICATE #2001	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1120085 ..	LLOYD'S SYNDICATE # 1274	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1126609 ..	LLOYD'S SYNDICATE #0609	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1128121 ..	LLOYD'S SYNDICATE #2121	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1128791 ..	LLOYD'S SYNDICATE #2791	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1120181 ..	LLOYD'S SYNDICATE #5886	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1120156 ..	LLOYD'S SYNDICATE #1686	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1120171 ..	LLOYD'S SYNDICATE #1856	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	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	XXX			
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		XXX	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	XXX			

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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															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	Complete if Col. 52 = "No"; Otherwise Enter 0	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	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67			
2299999. Total Unauthorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1120337 .. ASPEN INSURANCE UK LIMITED		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-3191435 .. CONDUIT REINS LTD		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-3194122 .. DAVINCI REINSURANCE LTD		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1340028 .. DEVK RUCKVERSICHERUNGS UND BETEILIGUNGS AG		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-3191298 .. ANTARES REINS CO LTD		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-3190339 .. RENAISSANCE RE INSURANCE LTD		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1340004 .. R&V VERSICHERUNG AG		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2699999. Total Unauthorized - Other Non-U.S. Insurers		XXX	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	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											
CR-1340125 .. HANNOVER RUCKVERSICHERUNGS AG	2 ..	07/01/2015 ..	10.0	41								41								
4099999. Total Certified - Other Non-U.S. Insurers		XXX		41				XXX	XXX			41								
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX		41				XXX	XXX			41								
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		XXX	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	XXX			
5099999. Total Reciprocal Jurisdiction - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
RJ-1120191 .. CONVEX INS UK LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
RJ-3191400 .. CONVEX RE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5499999. Total Reciprocal Jurisdiction - Other Non-U.S. Insurers		XXX	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	XXX			
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		XXX		41				XXX	XXX			41								
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		XXX						XXX	XXX											
9999999 Totals		XXX		41				XXX	XXX			41								

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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 Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
				72	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75	76	77	78	
34-1008736 ..	UNITED OHIO INSURANCE COMPANY	XXX.	XXX.					XXX.	XXX.		
01-0407315 ..	CASCO INDEMNITY COMPANY	XXX.	XXX.					XXX.	XXX.		
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling		XXX.	XXX.					XXX.	XXX.		
0499999. Total Authorized - Affiliates - U.S. Non-Pool		XXX.	XXX.					XXX.	XXX.		
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		XXX.	XXX.					XXX.	XXX.		
0899999. Total Authorized - Affiliates		XXX.	XXX.					XXX.	XXX.		
06-1182357 ..	ALLIED WORLD INSURANCE COMPANY	XXX.	XXX.					XXX.	XXX.		
36-2661954 ..	AMERICAN AGRICULTURAL INSURANCE COMPANY	XXX.	XXX.					XXX.	XXX.		
06-1430254 ..	ARCH REINSURANCE COMPANY	XXX.	XXX.					XXX.	XXX.		
42-0234980 ..	EMPLOYERS MUTUAL CASUALTY CO	XXX.	XXX.					XXX.	XXX.		
05-0316605 ..	FACTORY MUTUAL INSURANCE COMPANY	XXX.	XXX.					XXX.	XXX.		
42-0245840 ..	FARMERS MUTUAL HAIL INSURANCE COMPANY	XXX.	XXX.					XXX.	XXX.		
13-2673100 ..	GENERAL REINSURANCE CORPORATION	XXX.	XXX.					XXX.	XXX.		
06-0384680 ..	HARTFORD STEAM BOILER INSPECTION & INS.	XXX.	XXX.					XXX.	XXX.		
47-0698507 ..	ODYSSEY REINSURANCE COMPANY	XXX.	XXX.					XXX.	XXX.		
52-1952955 ..	RENAISSANCE REINSURANCE US INC	XXX.	XXX.					XXX.	XXX.		
13-1675535 ..	SWISS REINSURANCE AMERICA CORPORATION	XXX.	XXX.					XXX.	XXX.		
13-2918573 ..	THE TOA REINSURANCE COMPANY OF AMERICA	XXX.	XXX.					XXX.	XXX.		
13-3031176 ..	PARTNER REINSURANCE COMPANY OF THE U.S.	XXX.	XXX.					XXX.	XXX.		
23-2423138 ..	TOKIO MARINE SPECIALTY INS CO	XXX.	XXX.					XXX.	XXX.		
95-3187355 ..	ALLIANZ GLOBAL RISKS US INSURANCE CO.	XXX.	XXX.					XXX.	XXX.		
43-0613000 ..	SHELTER MUTUAL INSURANCE COMPANY	XXX.	XXX.					XXX.	XXX.		
0999999. Total Authorized - Other U.S. Unaffiliated Insurers		XXX.	XXX.					XXX.	XXX.		
AA-9991222 ..	OHIO FAIR PLAN UNDERWRITING ASSOCIATION	XXX.	XXX.					XXX.	XXX.		
1099999. Total Authorized - Pools - Mandatory Pools		XXX.	XXX.					XXX.	XXX.		
AA-9995035 ..	MUTUAL REINSURANCE BUREAU	XXX.	XXX.					XXX.	XXX.		
1199999. Total Authorized - Pools - Voluntary Pools		XXX.	XXX.					XXX.	XXX.		
AA-1120157 ..	LLOYD'S SYNDICATE #1729	XXX.	XXX.					XXX.	XXX.		
AA-1128001 ..	LLOYD'S SYNDICATE #2001	XXX.	XXX.					XXX.	XXX.		
AA-1120085 ..	LLOYD'S SYNDICATE # 1274	XXX.	XXX.					XXX.	XXX.		
AA-1126609 ..	LLOYD'S SYNDICATE #0609	XXX.	XXX.					XXX.	XXX.		
AA-1128121 ..	LLOYD'S SYNDICATE #2121	XXX.	XXX.					XXX.	XXX.		
AA-1128791 ..	LLOYD'S SYNDICATE #2791	XXX.	XXX.					XXX.	XXX.		
AA-1120181 ..	LLOYD'S SYNDICATE #5886	XXX.	XXX.					XXX.	XXX.		
AA-1120156 ..	LLOYD'S SYNDICATE #1686	XXX.	XXX.					XXX.	XXX.		
AA-1120171 ..	LLOYD'S SYNDICATE #1856	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.		

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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 Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
				72	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75	76	77	78	
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)					XXX	XXX	XXX		XXX		
2299999. Total Unauthorized - Affiliates					XXX	XXX	XXX		XXX		
AA-1120337 .. ASPEN INSURANCE UK LIMITED					XXX	XXX	XXX		XXX		
AA-3191435 .. CONDUIT REINS LTD					XXX	XXX	XXX		XXX		
AA-3194122 .. DAVINCI REINSURANCE LTD					XXX	XXX	XXX		XXX		
AA-1340028 .. DEVK RUCKVERSICHERUNGS UND BETEILIGUNGS AG					XXX	XXX	XXX		XXX		
AA-3191298 .. ANTARES REINS CO LTD					XXX	XXX	XXX		XXX		
AA-3190339 .. RENAISSANCE REINSURANCE LTD					XXX	XXX	XXX		XXX		
AA-1340004 .. R&V VERSICHERUNG AG					XXX	XXX	XXX		XXX		
2699999. Total Unauthorized - Other Non-U.S. Insurers					XXX	XXX	XXX		XXX		
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					XXX	XXX	XXX		XXX		
3299999. Total Certified - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX		XXX		
3599999. Total Certified - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX		XXX		
3699999. Total Certified - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX		XXX		
CR-1340125 .. HANNOVER RUCKVERSICHERUNGS AG		XXX	XXX	XXX	XXX	XXX	XXX		XXX		
4099999. Total Certified - Other Non-U.S. Insurers		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		
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	
RJ-1120191 .. CONVEX INS UK LTD			XXX	XXX					XXX	XXX	
RJ-3191400 .. CONVEX RE LTD			XXX	XXX					XXX	XXX	
5499999. Total Reciprocal Jurisdiction - Other Non-U.S. Insurers			XXX	XXX					XXX	XXX	
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)			XXX	XXX					XXX	XXX	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)											
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)											
9999999 Totals											

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company

SCHEDULE F - PART 4

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

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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:

	<u>1</u> Name of Reinsurer	<u>2</u> Commission Rate	<u>3</u> Ceded Premium
1.	FACTORY MUTUAL INSURANCE COMPANY	35.000	781,145
2.	TOKIO MARINE SPECIALTY INS CO	30.000	208,040
3.	RENAISSANCE REINSURANCE US INC	26.000	87,937
4.	EMPLOYERS MUTUAL CASUALTY CO	26.000	83,961
5.	AMERICAN AGRICULTURAL INSURANCE COMPANY	26.000	72,583

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.

	<u>1</u> Name of Reinsurer	<u>2</u> Total Recoverables	<u>3</u> Ceded Premiums	<u>4</u> Affiliated
6.	GENERAL REINSURANCE CORPORATION	1,477,401	817,180	Yes [] No [X]
7.	FACTORY MUTUAL INSURANCE COMPANY	494,765	781,145	Yes [] No [X]
8.	R&V VERSICHERUNG AG	177,689	625,965	Yes [] No [X]
9.	TOKIO MARINE SPECIALTY INS CO	117,063	208,040	Yes [] No [X]
10.	CONVEX INS UK LTD	88,843	382,315	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 2022 OF THE Ohio 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)	373,227,542		373,227,542
2. Premiums and considerations (Line 15)	21,899,010		21,899,010
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	889,563	(889,563)	
4. Funds held by or deposited with reinsured companies (Line 16.2)			
5. Other assets	2,402,935		2,402,935
6. Net amount recoverable from reinsurers		207,815,422	207,815,422
7. Protected cell assets (Line 27)			
8. Totals (Line 28)	398,419,050	206,925,859	605,344,909
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	42,054,980	94,798,728	136,853,708
10. Taxes, expenses, and other obligations (Lines 4 through 8)	2,095,598		2,095,598
11. Unearned premiums (Line 9)	41,376,299	112,844,196	154,220,495
12. Advance premiums (Line 10)	600,232		600,232
13. Dividends declared and unpaid (Line 11.1 and 11.2)			
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	425,576	(423,096)	2,480
15. Funds held by company under reinsurance treaties (Line 13)	293,969	(293,969)	
16. Amounts withheld or retained by company for account of others (Line 14)			
17. Provision for reinsurance (Line 16)			
18. Other liabilities	519,822		519,822
19. Total liabilities excluding protected cell business (Line 26)	87,366,476	206,925,859	294,292,335
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	311,052,574	XXX	311,052,574
22. Totals (Line 38)	398,419,050	206,925,859	605,344,909

NOTE: Is the restatement of this exhibit the result of grossing up balances ceded to affiliates under 100 percent reinsurance or pooling arrangements?

Yes [] No []

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

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS

	Total		Comprehensive (Hospital and Medical) Individual		Comprehensive (Hospital and Medical) Group		Medicare Supplement		Vision Only		Dental Only		Federal Employees Health Benefits Plan	
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %
1. Premiums written	125	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. Premiums earned	155	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3. Incurred claims														
4. Cost containment expenses														
5. Incurred claims and cost containment expenses (Lines 3 and 4)														
6. Increase in contract reserves														
7. Commissions (a) .....	.20	12.9												
8. Other general insurance expenses														
9. Taxes, licenses and fees														
10. Total other expenses incurred .....	.20	12.9												
11. Aggregate write-ins for deductions														
12. Gain from underwriting before dividends or refunds	135	87.1												
13. Dividends or refunds														
14. Gain from underwriting after dividends or refunds	135	87.1												
DETAILS OF WRITE-INS														
1101.														
1102.														
1103.														
1198. Summary of remaining write-ins for Line 11 from overflow page														
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)														

	Medicare Title XVIII		Medicaid Title XIX		Credit A&H		Disability Income		Long-Term Care		Other Health	
	15 Amount	16 %	17 Amount	18 %	19 Amount	20 %	21 Amount	22 %	23 Amount	24 %	25 Amount	26 %
1. Premiums written		XXX		XXX		XXX		XXX		XXX		XXX
2. Premiums earned		XXX		XXX		XXX		XXX		XXX		XXX
3. Incurred claims												
4. Cost containment expenses												
5. Incurred claims and cost containment expenses (Lines 3 and 4)												
6. Increase in contract reserves												
7. Commissions (a) .....											.20	12.9
8. Other general insurance expenses												
9. Taxes, licenses and fees												
10. Total other expenses incurred .....											.20	12.9
11. Aggregate write-ins for deductions												
12. Gain from underwriting before dividends or refunds											135	87.1
13. Dividends or refunds												
14. Gain from underwriting after dividends or refunds											135	87.1
DETAILS OF WRITE-INS												
1101.												
1102.												
1103.												
1198. Summary of remaining write-ins for Line 11 from overflow page												
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)												

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

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company
SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)
PART 2. - RESERVES AND LIABILITIES

	1 Total	2 Comprehensive (Hospital and Medical) Individual	3 Comprehensive (Hospital and Medical) Group	4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Medicare Title XVIII	9 Medicaid Title XIX	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
A. Premium Reserves:													
1. Unearned premiums	21												21
2. Advance premiums													
3. Reserve for rate credits													
4. Total premium reserves, current year	21												21
5. Total premium reserves, prior year	51												51
6. Increase in total premium reserves	(30)												(30)
B. Contract Reserves:													
1. Additional reserves (a)													
2. Reserve for future contingent benefits													
3. Total contract reserves, current year													
4. Total contract reserves, prior year													
5. Increase in contract reserves													
C. Claim Reserves and Liabilities:													
1. Total current year													
2. Total prior year													
3. Increase													

PART 3. - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES

	1 Total	2 Comprehensive (Hospital and Medical) Individual	3 Comprehensive (Hospital and Medical) Group	4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Medicare Title XVIII	9 Medicaid Title XIX	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
1. Claims paid during the year:													
1.1 On claims incurred prior to current year													
1.2 On claims incurred during current year													
2. Claim reserves and liabilities, December 31, current year:													
2.1 On claims incurred prior to current year													
2.2 On claims incurred during current year													
3. Test:													
3.1 Lines 1.1 and 2.1													
3.2 Claim reserves and liabilities, December 31, prior year													
3.3 Line 3.1 minus Line 3.2													

PART 4. - REINSURANCE

	1 Total	2 Comprehensive (Hospital and Medical) Individual	3 Comprehensive (Hospital and Medical) Group	4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Medicare Title XVIII	9 Medicaid Title XIX	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
A. Reinsurance Assumed:													
1. Premiums written	464												464
2. Premiums earned													
3. Incurred claims													
4. Commissions													
B. Reinsurance Ceded:													
1. Premiums written	339												339
2. Premiums earned													
3. Incurred claims													
4. Commissions													

(a) Includes \$ premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Comprehensive (Hospital and Medical) Individual	2 Comprehensive (Hospital and Medical) Group	3 Medicare Supplement	4 Vision Only	5 Dental Only	6 Federal Employees Health Benefits Plan	7 Medicare Title XVIII	8 Medicaid Title XIX	9 Credit A&H	10 Disability Income	11 Long-Term Care	12 Other Health	13 Total
A. Direct:													
1. Incurred claims
2. Beginning claim reserves and liabilities
3. Ending claim reserves and liabilities
4. Claims paid
B. Assumed Reinsurance:													
1. Incurred claims
2. Beginning claim reserves and liabilities
3. Ending claim reserves and liabilities
4. Claims paid
C. Ceded Reinsurance:													
1. Incurred claims
2. Beginning claim reserves and liabilities
3. Ending claim reserves and liabilities
4. Claims paid
D. Net:													
1. Incurred claims
2. Beginning claim reserves and liabilities
3. Ending claim reserves and liabilities
4. Claims paid
E. Net Incurred Claims and Cost Containment Expenses:													
1. Incurred claims and cost containment expenses
2. Beginning reserves and liabilities
3. Ending reserves and liabilities
4. Paid claims and cost containment expenses

None

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company
SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (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.....	20		1		1		1	22	XXX.....	
2. 2013.....	14,164	1,243	12,921	8,388	348	160	1	964		.124	9,163	1,099	
3. 2014.....	15,125	1,489	13,636	6,153	38	114		741		.186	6,970	787	
4. 2015.....	15,575	1,334	14,241	5,495	48	153		599		.112	6,199	726	
5. 2016.....	15,883	1,362	14,521	5,760	281	167	1	680		.127	6,325	686	
6. 2017.....	16,326	1,372	14,954	8,020	469	300	13	786		.170	8,624	865	
7. 2018.....	17,458	1,421	16,037	6,721	43	214		694		.120	7,586	769	
8. 2019.....	19,049	1,311	17,738	9,711	319	236	3	809		.145	10,434	1,001	
9. 2020.....	19,984	1,370	18,614	10,048	121	203		890		.60	11,020	1,037	
10. 2021.....	21,213	1,487	19,726	10,871	205	221	1	887		.104	11,773	735	
11. 2022	23,631	2,289	21,342	16,292	2,604	297	92	1,081		.60	14,974	134	
12. Totals	XXX	XXX	XXX	87,479	4,476	2,066	111	8,132		1,209	93,090	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	1											1	1
2. 2013.....													
3. 2014.....													
4. 2015.....													
5. 2016.....													
6. 2017.....	.76	34	39	.17			7				.71	2	
7. 2018.....	14		5			3					22	1	
8. 2019.....	.27		19	1		10		3			58	3	
9. 2020.....	19		97	5		27		4			142	1	
10. 2021.....	313	74	294	21		68		.34			.614	7	
11. 2022	2,906	118	1,954	241		316		293			5,110	134	
12. Totals	3,356	226	2,408	285		431		334			6,018	149	

	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
	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.....	1	
2. 2013.....	9,512	349	9,163	.67.2	28.1	70.9			.27.0		
3. 2014.....	7,008	38	6,970	.46.3	2.6	51.1			.27.0		
4. 2015.....	6,247	48	6,199	.40.1	3.6	43.5			.27.0		
5. 2016.....	6,607	282	6,325	.41.6	20.7	43.6			.27.0		
6. 2017.....	9,228	533	8,695	.56.5	38.8	58.1			.27.0	64	7
7. 2018.....	7,651	43	7,608	.43.8	3.0	47.4			.27.0	19	3
8. 2019.....	10,815	323	10,492	.56.8	24.6	59.1			.27.0	45	13
9. 2020.....	11,288	126	11,162	.56.5	9.2	60.0			.27.0	111	31
10. 2021.....	12,688	301	12,387	.59.8	20.2	62.8			.27.0	512	102
11. 2022	23,139	3,055	20,084	97.9	133.5	94.1			.27.0	4,501	609
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	5,253	765

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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								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.....	(4).....	.....	.....	.....	.....	.....	4	(4).....	XXX.....
2. 2013.....	10,707	76	10,631	6,435	18	264	.....	502	.....	.217	7,183	1,025
3. 2014.....	11,135	54	11,081	7,352	.....	312	.....	.610	.....	.248	8,274	995
4. 2015.....	11,569	64	11,505	7,542	39	291	.....	.852	.....	.333	8,646	973
5. 2016.....	12,347	65	12,282	8,138	6	272	.....	.889	.....	.252	9,293	974
6. 2017.....	13,670	86	13,584	8,414	15	268	.....	.886	.....	.314	9,553	1,018
7. 2018.....	15,657	74	15,583	9,619	.....	539	.....	.917	.....	.332	11,075	1,224
8. 2019.....	17,357	69	17,288	10,546	.....	538	.....	.877	.....	.263	11,961	1,271
9. 2020.....	16,294	32	16,262	7,245	81	193	1	.678	.....	.183	8,034	877
10. 2021.....	16,402	99	16,303	7,318	16	90	.....	.655	.....	.182	8,047	677
11. 2022	16,419	106	16,313	4,764	.....	19	.....	493	.....	74	5,276	348
12. Totals	XXX	XXX	XXX	77,369	175	2,786	1	7,359	.....	2,402	87,338	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2013.....	1	.....	1	.....	.....	.....	.....	.....	.....	.....	2	.....	1
3. 2014.....	18	.....	9	.....	.....	.....	2	.....	1	.....	.30	.....	2
4. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2016.....	.48	.....	.34	.....	.....	.....	.5	.....	.4	.....	.91	.....	1
6. 2017.....	114	.....	.36	.....	.....	12	.....	1	.....	.....	.163	.....	4
7. 2018.....	363	1	167	.....	.....	98	.....	11	.....	.....	.638	.....	10
8. 2019.....	950	.....	.407	1	.....	.174	.....	.48	.....	.....	1,578	.....	21
9. 2020.....	1,020	.....	.443	8	.....	.225	.....	.50	.....	.....	1,730	.....	.32
10. 2021.....	1,559	.....	1,186	58	.....	.327	.....	.173	.....	.....	3,187	.....	.74
11. 2022	3,749	.....	3,412	69	.....	335	.....	.569	.....	.....	7,996	.....	348
12. Totals	7,822	1	5,695	136	.....	1,178	.....	857	.....	.....	15,415	.....	493

	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
	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. 2013.....	7,203	18	7,185	67.3	23.7	67.6	.....	.....	.27.0	2	.....
3. 2014.....	8,304	.....	8,304	74.6	.....	74.9	.....	.....	.27.0	.27	3
4. 2015.....	8,685	39	8,646	75.1	60.9	75.1	.....	.....	.27.0	.....	.....
5. 2016.....	9,390	6	9,384	76.1	9.2	76.4	.....	.....	.27.0	.82	9
6. 2017.....	9,731	15	9,716	71.2	17.4	71.5	.....	.....	.27.0	.150	13
7. 2018.....	11,714	1	11,713	74.8	1.4	75.2	.....	.....	.27.0	.529	109
8. 2019.....	13,540	1	13,539	78.0	1.4	78.3	.....	.....	.27.0	1,356	222
9. 2020.....	9,854	90	9,764	60.5	281.3	60.0	.....	.....	.27.0	1,455	275
10. 2021.....	11,308	74	11,234	68.9	74.7	68.9	.....	.....	.27.0	2,687	500
11. 2022	13,341	69	13,272	81.3	65.1	81.4	.....	.....	.27.0	7,092	904
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	XXX	13,380	2,035

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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								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. 2013.....	3,781	206	3,575	2,275	149	329	7	244			26	2,692	
3. 2014.....	4,295	229	4,066	3,632	339	348	14	346			26	3,973	
4. 2015.....	4,420	256	4,164	2,972	422	195	7	261			44	2,999	
5. 2016.....	4,586	293	4,293	2,768	308	223	19	260			11	2,924	
6. 2017.....	4,779	352	4,427	2,262	4	213		278			54	2,749	
7. 2018.....	4,986	198	4,788	2,186	68	137	1	270			25	2,524	
8. 2019.....	5,177	112	5,065	3,070	97	168	1	242			40	3,382	
9. 2020.....	5,472	68	5,404	1,747		81		197			57	2,025	
10. 2021.....	5,878	35	5,843	1,507		31		169			26	1,707	
11. 2022	6,343	41	6,302	860		10		110			11	980	
12. Totals	XXX	XXX	XXX	23,279	1,387	1,735	49	2,377			320	25,955	
												XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2013.....													
3. 2014.....													
4. 2015.....									6				6
5. 2016.....	41		20				7					68	1
6. 2017.....	28		38	8			10		6			.74	1
7. 2018.....	22		214	29			24		2			.233	1
8. 2019.....	280		169	27			65		52			.539	4
9. 2020.....	534	150	376	36			144		24			.892	7
10. 2021.....	920	44	1,106	126			209		.70			2,135	12
11. 2022	812		1,557	97			220		237			2,729	49
12. Totals	2,637	194	3,480	323			679		397			6,676	75

	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
	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. 2013.....	2,848	156	2,692	75.3	75.7	75.3				27.0	
3. 2014.....	4,326	353	3,973	100.7	154.1	97.7				27.0	
4. 2015.....	3,434	429	3,005	77.7	167.6	72.2				27.0	
5. 2016.....	3,319	327	2,992	72.4	111.6	69.7				27.0	61
6. 2017.....	2,835	12	2,823	59.3	3.4	63.8				27.0	58
7. 2018.....	2,855	98	2,757	57.3	49.5	57.6				27.0	207
8. 2019.....	4,046	125	3,921	78.2	111.6	77.4				27.0	422
9. 2020.....	3,103	186	2,917	56.7	273.5	54.0				27.0	.724
10. 2021.....	4,012	170	3,842	68.3	485.7	65.8				27.0	1,856
11. 2022	3,806	97	3,709	60.0	236.6	58.9				27.0	2,272
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		1,076

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....	
2. 2013.....													
3. 2014.....													
4. 2015.....													
5. 2016.....													
6. 2017.....													
7. 2018.....													
8. 2019.....													
9. 2020.....													
10. 2021.....													
11. 2022.....													
12. Totals	XXX	XXX	XXX									XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing 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. 2013.....																
3. 2014.....																
4. 2015.....																
5. 2016.....																
6. 2017.....																
7. 2018.....																
8. 2019.....																
9. 2020.....																
10. 2021.....																
11. 2022.....																
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 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. 2013.....												
3. 2014.....												
4. 2015.....												
5. 2016.....												
6. 2017.....												
7. 2018.....												
8. 2019.....												
9. 2020.....												
10. 2021.....												
11. 2022.....												
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX			

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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								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.....			1						1.....	
2. 2013.....	5,720	713	5,007	3,853	662	620	31	421		33	4,201	297	
3. 2014.....	6,675	863	5,812	3,596	261	649	19	414		35	4,379	316	
4. 2015.....	6,939	863	6,076	2,723	186	734	17	286		49	3,540	304	
5. 2016.....	7,318	898	6,420	2,857	144	632		330		64	3,675	279	
6. 2017.....	7,563	915	6,648	2,818	183	471	1	297		69	3,402	266	
7. 2018.....	7,729	748	6,981	2,548	91	596	13	291		23	3,331	245	
8. 2019.....	8,180	706	7,474	3,344	58	594	1	279		109	4,158	259	
9. 2020.....	8,798	807	7,991	2,937	213	192	13	283		45	3,186	243	
10. 2021.....	9,582	787	8,795	2,321	76	127	3	225		48	2,594	163	
11. 2022	10,596	970	9,626	2,704	274	95	11	211		13	2,725	59	
12. Totals	XXX	XXX	XXX	29,701	2,148	4,711	109	3,037		488	35,192	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						
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded						
1. Prior.....	27												27.....			
2. 2013.....	12		6				7						25.....			
3. 2014.....	5		3				4						12.....			
4. 2015.....	61		31				61		1				154.....4			
5. 2016.....	78		53	2			98		3				230.....4			
6. 2017.....	136		65	5			100		6				302.....4			
7. 2018.....	475	68	258	32			587		11				1,231.....7			
8. 2019.....	316		224	7			469		29				1,031.....13			
9. 2020.....	112		566	31			237		30				.914.....5			
10. 2021.....	199		551	55			349		54				1,098.....14			
11. 2022	1,186	209	1,572	184			642		245				3,252.....59			
12. Totals	2,607	277	3,329	316			2,554		379				8,276.....110			

	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
	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.....	27.....	
2. 2013.....	4,919	693	4,226	86.0	97.2	84.4			27.0	18.....	7.....
3. 2014.....	4,671	280	4,391	70.0	32.4	75.6			27.0	8.....	4.....
4. 2015.....	3,897	203	3,694	56.2	23.5	60.8			27.0	92.....	62.....
5. 2016.....	4,051	146	3,905	55.4	16.3	60.8			27.0	129.....	101.....
6. 2017.....	3,893	189	3,704	51.5	20.7	55.7			27.0	196.....	106.....
7. 2018.....	4,766	204	4,562	61.7	27.3	65.3			27.0	.633.....	.598.....
8. 2019.....	5,255	66	5,189	64.2	9.3	69.4			27.0	.533.....	.498.....
9. 2020.....	4,357	257	4,100	49.5	31.8	51.3			27.0	.647.....	.267.....
10. 2021.....	3,826	134	3,692	39.9	17.0	42.0			27.0	.695.....	.403.....
11. 2022	6,655	678	5,977	62.8	69.9	62.1			27.0	2,365.....	887.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	5,343	2,933

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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								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. 2013.....	1,888	823	1,065	1,026	541	106		89		1	680	48	
3. 2014.....	1,952	893	1,059	880	622	84	8	114		1	448	45	
4. 2015.....	1,987	890	1,097	450	243	27		38		1	272	33	
5. 2016.....	1,849	901	948	534	243	42		39			372	33	
6. 2017.....	1,689	935	754	383	207	30		60			266	19	
7. 2018.....	1,753	1,002	751	552	402	75	4	50		1	271	17	
8. 2019.....	1,858	1,112	746	614	516	5	2	43			144	14	
9. 2020.....	1,986	720	1,266	1,363	660	14		56			773	15	
10. 2021.....	2,131	657	1,474	343	60	7		35			325	8	
11. 2022	2,337	831	1,506	33		2		66			101	4	
12. Totals	XXX	XXX	XXX	6,178	3,494	392	14	590		4	3,652	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2013.....													
3. 2014.....													
4. 2015.....													
5. 2016.....													
6. 2017.....	61		30				1				92	1	
7. 2018.....	28	24	20	15			17		2		28	1	
8. 2019.....	43	39	41	25			5		3		28	1	
9. 2020.....	328	149	501	455			15		33		273	2	
10. 2021.....	35	4	1,206	534			88		21		812	2	
11. 2022	331	135	810	511			181		58		734	4	
12. Totals	826	351	2,608	1,540			307		117		1,967	11	

	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
	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. 2013.....	1,221	541	680	64.7	65.7	63.8			27.0		
3. 2014.....	1,078	630	448	55.2	70.5	42.3			27.0		
4. 2015.....	515	243	272	25.9	27.3	24.8			27.0		
5. 2016.....	615	243	372	33.3	27.0	39.2			27.0		
6. 2017.....	565	207	358	33.5	22.1	47.5			27.0	91	1
7. 2018.....	744	445	299	42.4	44.4	39.8			27.0	9	19
8. 2019.....	754	582	172	40.6	52.3	23.1			27.0	20	8
9. 2020.....	2,310	1,264	1,046	116.3	175.6	82.6			27.0	225	48
10. 2021.....	1,735	598	1,137	81.4	91.0	77.1			27.0	703	109
11. 2022	1,481	646	835	63.4	77.7	55.4			27.0	495	239
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	1,543	424

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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								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. 2013.....													
3. 2014.....													
4. 2015.....													
5. 2016.....													
6. 2017.....													
7. 2018.....													
8. 2019.....													
9. 2020.....													
10. 2021.....													
11. 2022.....													
12. Totals	XXX	XXX	XXX									XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2013.....													
3. 2014.....													
4. 2015.....													
5. 2016.....													
6. 2017.....													
7. 2018.....													
8. 2019.....													
9. 2020.....													
10. 2021.....													
11. 2022.....													
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 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. 2013.....											
3. 2014.....											
4. 2015.....											
5. 2016.....											
6. 2017.....											
7. 2018.....											
8. 2019.....											
9. 2020.....											
10. 2021.....											
11. 2022.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (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	(22)		5		(1)		32	(18)	XXX	
2. 2021	5,655	285	5,370	2,512	37	62		207		59	2,744	XXX	
3. 2022	5,949	367	5,582	3,437	344	78	18	225		24	3,378	XXX	
4. Totals	XXX	XXX	XXX	5,927	381	145	18	431		115	6,104	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									
	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				1					2				
2. 2021	21		6				5		3			35	1			
3. 2022	526	6	134	17			33		33			703	28			
4. Totals	547	6	141	17			39		36			740	29			

	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	1	1
2. 2021	2,816	37	2,779	49.8	13.0	51.8			27.0	27	8
3. 2022	4,466	385	4,081	75.1	104.9	73.1			27.0	637	66
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	665	75

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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.....	6.....	1.....	12.....	.....	.....	.....	.....	100.....	17.....
2. 2021.....	17,376.....	287.....	17,089.....	11,495.....	1.....	67.....	.....	1,082.....	.....	.....	2,414.....	12,643.....
3. 2022	18,934	405	18,529	13,786	193	53	6	1,036	.....	1,499	14,676	319
4. Totals	XXX	XXX	XXX	25,287	195	132	6	2,118	.....	4,013	27,336	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing 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.....	10.....	7.....	21.....	2.....	.....	.....	4.....	.....	.....	.....	.....	26.....	3.....
2. 2021.....	10.....	2.....	27.....	1.....	.....	.....	5.....	.....	13.....	.....	.....	52.....	2.....
3. 2022	1,586	1	1,120	21	.....	.....	22	.....	163	.....	.....	2,869	319
4. Totals	1,606	10	1,168	24	.....	.....	31	.....	176	.....	.....	2,947	324

	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	
	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.....	22.....	4.....
2. 2021.....	12,699.....	4.....	12,695.....	73.1.....	1.4.....	74.3.....	.....	.....	.....	27.0.....	34.....	18.....
3. 2022	17,766	221	17,545	93.8	54.6	94.7	.....	.....	.....	27.0	2,684	185
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	XXX	2,740	207	

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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. 2021.....												XXX.....	
3. 2022												XXX	
4. Totals	XXX	XXX	XXX									XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing 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. 2021.....																
3. 2022																
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.....		XXX.....	XXX.....
2. 2021.....											
3. 2022											
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company
SCHEDULE P - PART 1L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 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. 2021.....												XXX.....	
3. 2022												XXX	
4. Totals	XXX	XXX	XXX									XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing 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. 2021.....																
3. 2022																
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.....		XXX.....	XXX.....
2. 2021.....										27.0	
3. 2022										27.0	
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

Schedule P - Part 1M - International

N O N E

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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								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. 2013.....	52		52	8		5		2				15.....2	
3. 2014.....	57		57	1		9						10.....3	
4. 2015.....	57		57			1						1.....1	
5. 2016.....	52		52	2								3.....1	
6. 2017.....	54		54	12		3		1				16.....1	
7. 2018.....	54		54	7		2						9.....2	
8. 2019.....	50		50	1		1						2.....2	
9. 2020.....	51		51					1				1.....1	
10. 2021.....	59		59	5		1						6.....1	
11. 2022	65		65										
12. Totals	XXX	XXX	XXX	36		22		4			62	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2013.....													
3. 2014.....	7											7.....1	
4. 2015.....													
5. 2016.....													
6. 2017.....													
7. 2018.....													
8. 2019.....													
9. 2020.....													
10. 2021.....			3				1					4.....	
11. 2022			4						1			5.....	
12. Totals	7		7				1			1		16.....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
	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. 2013.....	15		15	28.8		28.8			27.0.....		
3. 2014.....	17		17	29.8		29.8			27.0.....7		
4. 2015.....									27.0.....		
5. 2016.....	3		3	5.8		5.8			27.0.....		
6. 2017.....	16		16	29.6		29.6			27.0.....		
7. 2018.....	9		9	16.7		16.7			27.0.....		
8. 2019.....	2		2	4.0		4.0			27.0.....		
9. 2020.....	1		1	2.0		2.0			27.0.....		
10. 2021.....	10		10	16.9		16.9			27.0.....3.....1		
11. 2022	5		5	7.7		7.7			27.0.....4.....1		
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX.....14.....2		

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 2022 OF THE Ohio Mutual Insurance Company
SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	11 One Year	12 Two Year
1. Prior.....	.772	.522	.543	.524	.521	.494	.490	.482	.480	.470	(10)	(12)
2. 2013.....	8,793	8,316	8,198	8,193	8,195	8,197	8,203	8,207	8,207	8,199	(8)	(8)
3. 2014.....	XXX	7,037	6,461	6,303	6,247	6,230	6,235	6,230	6,229	6,229		(1)
4. 2015.....	XXX	XXX	6,028	5,704	5,600	5,674	5,661	5,608	5,600	5,600		(8)
5. 2016.....	XXX	XXX	XXX	6,458	5,861	5,830	5,662	5,663	5,647	5,645	(2)	(18)
6. 2017.....	XXX	XXX	XXX	XXX	8,308	7,922	7,865	7,846	7,854	7,909	55	63
7. 2018.....	XXX	XXX	XXX	XXX	XXX	7,251	6,976	6,929	6,892	6,914	22	(15)
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	9,765	9,568	9,477	9,680	203	112
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,655	10,482	10,268	(214)	(387)
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,662	11,466	(196)	XXX
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,710	XXX	XXX
											12. Totals	(150)
												(274)

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

1. Prior.....	5,777	4,782	4,451	4,165	4,035	4,016	3,976	3,991	3,979	3,975	(4)	(16)
2. 2013.....	7,358	7,417	7,220	6,842	6,861	6,739	6,703	6,691	6,685	6,683	(2)	(8)
3. 2014.....	XXX	8,102	8,017	7,992	7,765	7,710	7,738	7,717	7,700	7,693	(7)	(24)
4. 2015.....	XXX	XXX	9,156	8,867	8,016	7,854	7,872	7,817	7,787	7,794	7	(23)
5. 2016.....	XXX	XXX	XXX	9,503	8,922	8,560	8,534	8,526	8,547	8,491	(56)	(35)
6. 2017.....	XXX	XXX	XXX	XXX	9,818	9,251	9,171	8,753	8,808	8,829	21	76
7. 2018.....	XXX	XXX	XXX	XXX	XXX	11,533	10,516	10,163	10,731	10,785	54	622
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	11,641	11,576	12,376	12,614	238	1,038
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,164	8,584	9,036	452	(128)
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,873	10,406	533	XXX
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,210	XXX	XXX	XXX
											12. Totals	1,236
												1,502

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

1. Prior.....	1,702	1,503	1,318	1,446	1,225	1,178	1,176	1,178	1,178	1,178		
2. 2013.....	1,999	1,814	1,823	2,326	2,222	2,240	2,491	2,494	2,497	2,448	(49)	(46)
3. 2014.....	XXX	3,317	3,503	3,485	3,614	3,560	3,672	3,626	3,627	3,627	1	
4. 2015.....	XXX	XXX	2,813	2,849	2,716	2,606	2,823	2,713	2,733	2,738	5	25
5. 2016.....	XXX	XXX	XXX	2,448	2,592	2,876	2,903	2,823	2,731	2,732	1	(91)
6. 2017.....	XXX	XXX	XXX	XXX	2,793	2,729	2,584	2,836	2,603	2,539	(64)	(297)
7. 2018.....	XXX	XXX	XXX	XXX	XXX	2,721	2,444	2,793	2,759	2,485	(274)	(308)
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	3,598	3,940	3,653	3,627	(26)	(313)
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	2,469	3,150	2,696	(454)	227	
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,221	3,603	382	XXX
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,362	XXX	XXX	XXX
											12. Totals	(479)
												(802)

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

1. Prior.....												
2. 2013.....												
3. 2014.....												
4. 2015.....												
5. 2016.....												
6. 2017.....												
7. 2018.....												
8. 2019.....												
9. 2020.....												
10. 2021.....												
11. 2022												

NONE

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	1,195	1,079	1,191	1,374	1,264	1,179	1,130	1,142	1,155	1,124	(31)	(18)
2. 2013.....	3,773	3,942	3,959	3,620	3,609	3,811	3,774	3,839	3,793	3,805	12	(34)
3. 2014.....	XXX	3,240	3,261	3,697	3,623	3,945	3,969	4,035	3,978	3,977	(1)	(58)
4. 2015.....	XXX	XXX	2,986	3,021	3,315	3,622	3,432	3,348	3,308	3,407	99	59
5. 2016.....	XXX	XXX	XXX	3,322	3,370	3,325	3,516	3,633	3,565	3,572	7	(61)
6. 2017.....	XXX	XXX	XXX	XXX	3,617	3,273	3,497	3,346	3,457	3,401	(56)	55
7. 2018.....	XXX	XXX	XXX	XXX	XXX	3,254	3,387	3,705	4,189	4,260	71	555
8. 2019.....	XXX	XXX	XXX	XXX	XXX	4,238	4,961	4,692	4,881	4,881	189	(80)
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	4,071	3,798	3,787	(11)	(284)	
10. 2021.....	XXX	4,150	3,413	(737)	XXX	XXX						
11. 2022	XXX	5,521	XXX	XXX	XXX							
											12. Totals	(458)
												134

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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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	11 One Year	12 Two Year
1. Prior.....												
2. 2013.....												
3. 2014.....	XXX											
4. 2015.....	XXX	XXX										
5. 2016.....	XXX	XXX	XXX									
6. 2017.....	XXX	XXX	XXX	XX								
7. 2018.....	XXX	XXX	XXX	XX	XX							
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals	

NONE**SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**

1. Prior.....												
2. 2013.....												
3. 2014.....	XXX											
4. 2015.....	XXX	XXX										
5. 2016.....	XXX	XXX	XXX									
6. 2017.....	XXX	XXX	XXX	XXX								
7. 2018.....	XXX	XXX	XXX	XX	XX							
8. 2019.....	XXX	XXX	XXX	XX	XX	XX						
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XX					
10. 2021.....	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals	

NONE**SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),
BOILER AND MACHINERY)**

1. Prior.....												
2. 2013.....												
3. 2014.....	XXX											
4. 2015.....	XXX	XXX										
5. 2016.....	XXX	XXX	XXX									
6. 2017.....	XXX	XXX	XXX	XXX								
7. 2018.....	XXX	XXX	XXX	XX	XX							
8. 2019.....	XXX	XXX	XXX	XX	XX	XX						
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XX					
10. 2021.....	XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals	

NONE**SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**

1. Prior.....	.595	.447	.371	.374	.362	.356	.351	.349	.337	.337		(12)
2. 2013.....	.495	.510	.655	.703	.734	.610	.591	.591	.591	.591		
3. 2014.....	XXX	.504	.560	.392	.336	.317	.338	.341	.334	.334		
4. 2015.....	XXX	XXX	.417	.374	.256	.319	.239	.236	.234	.234		(2)
5. 2016.....	XXX	XXX	XXX	.576	.506	.463	.374	.331	.334	.333		2
6. 2017.....	XXX	XXX	XXX	XXX	.475	.351	.286	.312	.308	.298		(10)
7. 2018.....	XXX	XXX	XXX	XXX	XXX	.315	.326	.213	.213	.247		34
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	.221	.153	.186	.126		(27)
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,531	1,564	.957		(607)
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.519	1,081		562
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	711		XXX
											12. Totals	(82)
												(600)

NONE**SCHEDULE P - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE**

1. Prior.....												
2. 2013.....												
3. 2014.....	XXX											
4. 2015.....	XXX	XXX										
5. 2016.....	XXX	XXX	XXX									
6. 2017.....	XXX	XXX	XXX	XXX								
7. 2018.....	XXX	XXX	XXX	XX	XX							
8. 2019.....	XXX	XXX	XXX	XX	XX	XX						
9. 2020.....	XXX											
10. 2021.....	XXX				XXX							
11. 2022.....	XXX		XXX	XXX								
											12. Totals	

NONE

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	11 One Year	12 Two Year
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	472	359	305	(54)	(167)
2. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,625	2,569	(56)	XXX.....	XXX.....
3. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,823	XXX	XXX	XXX
										4. Totals	(110)	(167)

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX.....	1,358	499	426	(73)	(932)						
2. 2021.....	XXX.....	12,618	11,600	(1,018)	XXX.....	XXX.....						
3. 2022	XXX	XXX	16,346	XXX	XXX	XXX						
										4. Totals	(1,091)	(932)

SCHEDULE P - PART 2K - FIDELITY/SURETY

1. Prior.....	XXX.....	XXX.....	XXX.....									
2. 2021.....	XXX.....	XXX.....	XXX.....									
3. 2022	XXX	XXX	XXX									
										4. Totals		

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

1. Prior.....	XXX.....	XXX.....	XXX.....									
2. 2021.....	XXX.....	XXX.....	XXX.....									
3. 2022	XXX	XXX	XXX									
										4. Totals		

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior.....	XXX.....	XXX.....	XXX.....									
2. 2013.....	XXX.....	XXX.....	XXX.....									
3. 2014.....	XXX	XXX	XXX									
4. 2015.....	XXX	XXX	XXX									
5. 2016.....	XXX	XXX	XXX									
6. 2017.....	XXX	XXX	XXX									
7. 2018.....	XXX	XXX	XXX									
8. 2019.....	XXX	XXX	XXX									
9. 2020.....	XXX	XXX	XXX									
10. 2021.....	XXX	XXX	XXX									
11. 2022	XXX	XXX	XXX									
										12. Totals		

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	11 One Year	12 Two Year
1. Prior.....	13											
2. 2013.....	19	20	14	13	13	13	13	13	13	13		
3. 2014.....	XXX	16	29	4	4	4	4	4	4	17	13	13
4. 2015.....	XXX	XXX	1									
5. 2016.....	XXX	XXX	XXX	1	2	2	3	3	3	3		
6. 2017.....	XXX	XXX	XXX	XXX		1	34	15	15	15		
7. 2018.....	XXX	XXX	XXX	XXX	XXX	8	8	9	9	9		
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	1	4	4	2	(2)	(2)
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9	10	1	XXX
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	XXX	XXX
											12	11

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

1. Prior.....												
2. 2013.....												
3. 2014.....	XXX											
4. 2015.....	XXX	XXX										
5. 2016.....	XXX	XXX	XXX									
6. 2017.....	XXX	XXX	XXX	XXX								
7. 2018.....	XXX	XXX	XXX	XXX	XX							
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2020.....	XXX											
10. 2021.....	XXX				XXX							
11. 2022	XXX		XXX	XXX								
											12. Totals	

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	X	X				
2. 2021.....	XXX	XXX	XXX	XXX	XX	XX	X	X	XXX			XXX
3. 2022	XXX	XXX	XXX	XXX	XX	XX	XX	X	XXX	XXX	XXX	XXX
											4. Totals	

SCHEDULE P - PART 2T - WARRANTY

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	X	X				
2. 2021.....	XXX	XXX	XXX	XXX	XX	XX	X	X	XXX			XXX
3. 2022	XXX	XXX	XXX	XXX	XX	XX	XX	X	XXX	XXX	XXX	XXX
											4. Totals	

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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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior.....000.....	.....255.....	.....317.....	.....402.....	.....407.....	.....421.....	.....421.....	.....425.....	.....448.....	.....469.....	.....34.....	.....	.....
2. 2013.....6,427.....	.....8,001.....	.....8,079.....	.....8,174.....	.....8,181.....	.....8,183.....	.....8,191.....	.....8,195.....	.....8,199.....	.....8,199.....	.....925.....	.....174.....	.....
3. 2014.....XXX.....	.....5,413.....	.....6,196.....	.....6,217.....	.....6,229.....	.....6,227.....	.....6,228.....	.....6,227.....	.....6,229.....	.....6,229.....	.....644.....	.....143.....	.....
4. 2015.....XXX.....	.....XXX.....	.....4,257.....	.....5,315.....	.....5,445.....	.....5,508.....	.....5,513.....	.....5,585.....	.....5,600.....	.....5,600.....	.....586.....	.....140.....	.....
5. 2016.....XXX.....	.....XXX.....	.....XXX.....	.....4,807.....	.....5,476.....	.....5,542.....	.....5,627.....	.....5,638.....	.....5,645.....	.....5,645.....	.....561.....	.....125.....	.....
6. 2017.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....6,135.....	.....7,540.....	.....7,684.....	.....7,769.....	.....7,819.....	.....7,838.....	.....719.....	.....144.....	.....
7. 2018.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....5,242.....	.....6,502.....	.....6,787.....	.....6,858.....	.....6,892.....	.....635.....	.....133.....	.....
8. 2019.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....7,677.....	.....9,108.....	.....9,334.....	.....9,625.....	.....813.....	.....185.....	.....
9. 2020.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....8,404.....	.....9,799.....	.....10,130.....	.....874.....	.....162.....	.....
10. 2021.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....9,190.....	.....10,886.....	.....666.....	.....62.....	.....
11. 2022.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....13,893.....	.....	.....	.....

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

1. Prior.....000.....	.....2,331.....	.....3,441.....	.....3,764.....	.....3,915.....	.....3,955.....	.....3,950.....	.....3,983.....	.....3,979.....	.....3,975.....	.....195.....	.....	.....
2. 2013.....2,653.....	.....4,904.....	.....5,907.....	.....6,451.....	.....6,572.....	.....6,640.....	.....6,683.....	.....6,684.....	.....6,683.....	.....6,681.....	.....889.....	.....135.....	.....
3. 2014.....XXX.....	.....3,195.....	.....5,336.....	.....6,652.....	.....7,274.....	.....7,441.....	.....7,558.....	.....7,595.....	.....7,649.....	.....7,664.....	.....860.....	.....133.....	.....
4. 2015.....XXX.....	.....XXX.....	.....3,602.....	.....5,757.....	.....6,955.....	.....7,497.....	.....7,697.....	.....7,752.....	.....7,762.....	.....7,794.....	.....827.....	.....146.....	.....
5. 2016.....XXX.....	.....XXX.....	.....XXX.....	.....3,580.....	.....6,207.....	.....7,330.....	.....8,069.....	.....8,201.....	.....8,294.....	.....8,404.....	.....812.....	.....161.....	.....
6. 2017.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....3,926.....	.....6,415.....	.....7,874.....	.....8,402.....	.....8,638.....	.....8,667.....	.....848.....	.....166.....	.....
7. 2018.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....4,459.....	.....7,242.....	.....8,724.....	.....9,774.....	.....10,158.....	.....1,023.....	.....191.....	.....
8. 2019.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....4,728.....	.....7,965.....	.....9,684.....	.....11,084.....	.....1,059.....	.....191.....	.....
9. 2020.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....3,411.....	.....5,975.....	.....7,356.....	.....681.....	.....164.....	.....
10. 2021.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....3,987.....	.....7,392.....	.....510.....	.....93.....	.....	.....
11. 2022.....XXX.....	.....XXX.....4,783.....	.....	.....	.....	.....		

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

1. Prior.....000.....	.....640.....	.....803.....	.....1,024.....	.....1,147.....	.....1,176.....	.....1,176.....	.....1,178.....	.....1,178.....	.....1,178.....	.....34.....	.....	.....
2. 2013.....606.....	.....1,110.....	.....1,288.....	.....1,564.....	.....2,046.....	.....2,092.....	.....2,467.....	.....2,494.....	.....2,497.....	.....2,448.....	.....163.....	.....25.....	.....
3. 2014.....XXX.....	.....938.....	.....1,831.....	.....2,433.....	.....3,017.....	.....3,378.....	.....3,551.....	.....3,626.....	.....3,627.....	.....3,627.....	.....208.....	.....22.....	.....
4. 2015.....XXX.....	.....XXX.....	.....881.....	.....1,335.....	.....1,761.....	.....2,337.....	.....2,478.....	.....2,628.....	.....2,654.....	.....2,738.....	.....226.....	.....29.....	.....
5. 2016.....XXX.....	.....XXX.....	.....XXX.....	.....771.....	.....1,447.....	.....2,104.....	.....2,225.....	.....2,482.....	.....2,661.....	.....2,664.....	.....202.....	.....28.....	.....
6. 2017.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....832.....	.....1,489.....	.....1,896.....	.....2,300.....	.....2,381.....	.....2,471.....	.....210.....	.....32.....	.....
7. 2018.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....807.....	.....1,327.....	.....1,841.....	.....2,210.....	.....2,254.....	.....208.....	.....32.....	.....
8. 2019.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....995.....	.....1,775.....	.....2,377.....	.....3,140.....	.....208.....	.....28.....	.....
9. 2020.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....713.....	.....1,472.....	.....1,828.....	.....168.....	.....21.....	.....
10. 2021.....XXX.....	.....XXX.....841.....	.....1,538.....	.....124.....	.....13.....	.....					
11. 2022.....XXX.....	.....XXX.....870.....	.....	.....	.....	.....		

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

1. Prior.....000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2013.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2016.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2017.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2018.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8. 2019.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9. 2020.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10. 2021.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11. 2022.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....

NONE

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....000.....	.....361.....	.....750.....	.....967.....	.....1,119.....	.....1,090.....	.....1,095.....	.....1,095.....	.....1,096.....	.....1,097.....	.....53.....	.....	.....
2. 2013.....1,563.....	.....2,392.....	.....2,726.....	.....3,268.....	.....3,419.....	.....3,506.....	.....3,604.....	.....3,663.....	.....3,768.....	.....3,780.....	.....241.....	.....56.....	.....
3. 2014.....XXX.....	.....1,694.....	.....2,363.....	.....2,685.....	.....3,105.....	.....3,450.....	.....3,705.....	.....3,904.....	.....3,965.....	.....3,965.....	.....255.....	.....61.....	.....
4. 2015.....XXX.....	.....XXX.....	.....1,274.....	.....1,817.....	.....2,141.....	.....2,752.....	.....3,053.....	.....3,163.....	.....3,225.....	.....3,254.....	.....247.....	.....53.....	.....
5. 2016.....XXX.....	.....XXX.....	.....1,674.....	.....2,371.....	.....2,595.....	.....2,904.....	.....3,065.....	.....3,286.....	.....3,345.....	.....3,345.....	.....224.....	.....51.....	.....
6. 2017.....XXX.....	.....XXX.....	.....XXX.....	.....1,634.....	.....2,311.....	.....2,533.....	.....2,883.....	.....2,997.....	.....3,105.....	.....211.....	.....51.....	.....	.....
7. 2018.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....1,527.....	.....2,099.....	.....2,605.....	.....2,865.....	.....3,040.....	.....198.....	.....40.....	.....	.....
8. 2019.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....1,951.....	.....3,005.....	.....3,554.....	.....3,879.....	.....209.....	.....37.....	.....	.....
9. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....1,847.....2,585.....2,903.....202.....36.....
10. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....1,755.....2,369.....131.....18.....
11. 2022.....XXX.....XXX.....2,514.....						

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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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior.....	000.....											
2. 2013.....												
3. 2014.....	XXX.....											
4. 2015.....	XXX.....	XXX.....										
5. 2016.....	XXX.....	XXX.....	XXX.....									
6. 2017.....	XXX.....	XXX.....	XXX.....	X.....								
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				

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

1. Prior.....	000.....											
2. 2013.....												
3. 2014.....	XXX.....											
4. 2015.....	XXX.....	XXX.....										
5. 2016.....	XXX.....	XXX.....	XXX.....									
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....							
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....	XX.....						
9. 2020.....	XXX.....											
10. 2021.....	XXX.....											
11. 2022.....	XXX.....											

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

1. Prior.....	000.....											
2. 2013.....												
3. 2014.....	XXX.....											
4. 2015.....	XXX.....	XXX.....										
5. 2016.....	XXX.....	XXX.....	XXX.....									
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....	XX.....						
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....	XX.....	XX.....					
9. 2020.....	XXX.....	XX.....										
10. 2021.....	XXX.....											
11. 2022.....	XXX.....											

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

1. Prior.....	000.....	98.....	.224.....	.233.....	.258.....	.259.....	.259.....	.317.....	.337.....	.337.....	12.....	
2. 2013.....		68.....	176.....	.256.....	.320.....	.432.....	.591.....	.591.....	.591.....	.591.....	.591.....	35.....
3. 2014.....	XXX.....		88.....	.166.....	.212.....	.243.....	.303.....	.321.....	.334.....	.334.....	.334.....	33.....
4. 2015.....	XXX.....	XXX.....		.36.....	.109.....	.191.....	.230.....	.232.....	.234.....	.234.....	.234.....	10.....
5. 2016.....	XXX.....	XXX.....	XXX.....	.38.....	.104.....	.282.....	.315.....	.323.....	.333.....	.333.....	.333.....	6.....
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	.49.....	.148.....	.181.....	.197.....	.202.....	.206.....	.206.....	14.....
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.27.....	.86.....	.126.....	.167.....	.221.....	.221.....	4.....
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.19.....	.40.....	.53.....	.101.....	.101.....	3.....
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.36.....	.151.....	.717.....	.717.....	3.....
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.28.....	.290.....	.5.....	1.....
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.35.....		

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

1. Prior.....	000.....											
2. 2013.....												
3. 2014.....	XXX.....											
4. 2015.....	XXX.....	XXX.....										
5. 2016.....	XXX.....	XXX.....	XXX.....									
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....							
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....	XX.....						
9. 2020.....	XXX.....											
10. 2021.....	XXX.....											
11. 2022.....	XXX.....											

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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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	000.....	320.....	303.....	XXX.....	XXX.....
2. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,223.....	2,537.....	XXX.....	XXX.....
3. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3,153.....	XXX.....	XXX.....

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX.....	000.....	383.....	400.....						
2. 2021.....	XXX.....	10,894.....	11,561.....							
3. 2022.....	XXX.....	13,640.....								

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior.....	XXX.....	000.....	XXX.....	XXX.....						
2. 2021.....	XXX.....	XXX.....	XXX.....							
3. 2022.....	XXX.....											

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

1. Prior.....	XXX.....	000.....	XXX.....	XXX.....						
2. 2021.....	XXX.....	XXX.....	XXX.....							
3. 2022.....	XXX.....											

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior.....	000.....	XXX.....	XXX.....
2. 2013.....	XXX.....	XXX.....
3. 2014.....	XXX.....	XXX.....	XXX.....
4. 2015.....	XXX.....	XXX.....	XXX.....	XXX.....
5. 2016.....	XXX.....	XXX.....	XXX.....							
6. 2017.....	XXX.....	XXX.....	XXX.....							
7. 2018.....	XXX.....	XXX.....	XXX.....							
8. 2019.....	XXX.....	XXX.....	XXX.....							
9. 2020.....	XXX.....	XXX.....	XXX.....							
10. 2021.....	XXX.....	XXX.....	XXX.....							
11. 2022.....	XXX.....											

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022		
1. Prior.....	000.....										2.....	
2. 2013.....	7.....	7.....	13.....	13.....	13.....	13.....	13.....	13.....	13.....	13.....	2.....	
3. 2014.....	XXX.....	4.....	4.....	4.....	4.....	4.....	4.....	4.....	4.....	10.....	1.....	1.....
4. 2015.....	XXX.....	XXX.....										1.....
5. 2016.....	XXX.....	XXX.....	XXX.....		2.....	2.....	3.....	3.....	3.....	3.....	1.....	
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....		1.....	1.....	15.....	15.....	15.....	1.....	
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	5.....	5.....	9.....	9.....	9.....	2.....	
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			1.....	2.....		
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	4.....	6.....	1.....	
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

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

1. Prior.....	000.....											
2. 2013.....												
3. 2014.....	XXX.....											
4. 2015.....	XXX.....	XXX.....										
5. 2016.....	XXX.....	XXX.....	XXX.....									
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....							
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
9. 2020.....	XXX.....											
10. 2021.....	XXX.....											
11. 2022.....	XXX.....											

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

1. Prior.....	XXX.....											
2. 2021.....	XXX.....	XXX.....	XXX.....	XX.....	XX.....	XX.....	XX.....	XX.....	XX.....	XXX.....	XXX.....	XXX.....
3. 2022.....	XXX.....	XXX.....	XXX.....	XX.....	XX.....	XX.....	XX.....	XX.....	XX.....	XXX.....	XXX.....	XXX.....

SCHEDULE P - PART 3T - WARRANTY

1. Prior.....	XXX.....											
2. 2021.....	XXX.....	XXX.....	XXX.....	XX.....	XX.....	XX.....	XX.....	XX.....	XX.....	XXX.....	XXX.....	XXX.....
3. 2022.....	XXX.....	XXX.....	XXX.....	XX.....	XX.....	XX.....	XX.....	XX.....	XX.....	XXX.....	XXX.....	XXX.....

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company
SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	330	113	72	43	42	21	20	21	12	.....
2. 2013.....	873	228	42	8	5	5	4	4	3	.....
3. 2014.....	XXX.....	806	155	47	6	1	5	1	.....	.....
4. 2015.....	XXX.....	XXX.....	600	156	62	64	51	8	.....	.....
5. 2016.....	XXX.....	XXX.....	XXX.....	770	173	122	15	11	2	.....
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	757	166	98	40	17	29
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	775	179	75	19	8
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	842	175	69	28
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,070	327	119
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,190	341
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,029

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

1. Prior.....	2,105	921	449	214	45	31	10	1	.....	.....
2. 2013.....	1,776	1,086	547	119	111	40	12	2	1	1
3. 2014.....	XXX.....	1,796	826	496	161	93	70	46	19	11
4. 2015.....	XXX.....	XXX.....	2,034	1,066	278	97	74	40	8	.....
5. 2016.....	XXX.....	XXX.....	XXX.....	2,119	1,004	282	153	108	84	.39
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	2,606	1,060	684	105	50	.48
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3,632	1,589	336	.366	.265
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3,009	1,332	.861	.580
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,964	1,172	.660
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3,200	.1,455
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,678

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

1. Prior.....	916	.503	217	276	.37	1	.....	.....	.....	.....
2. 2013.....	867	402	189	318	.71	45	11	.....	.....	.....
3. 2014.....	XXX.....	1,213	753	401	252	59	.83	.....	.....	.....
4. 2015.....	XXX.....	XXX.....	1,011	.533	339	99	139	.25	.32	.....
5. 2016.....	XXX.....	XXX.....	XXX.....	.807	.597	.575	.292	131	.29	.27
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	1,118	643	.401	413	.118	.40
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	.XXX	1,341	.757	.761	.511	.209
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	.XXX	XXX.....	1,442	1,082	.592	.207
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,110	1,172	.484
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,365	.1,189
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,680

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

1. Prior.....
2. 2013.....
3. 2014.....	XXX.....
4. 2015.....	XXX.....	XXX.....
5. 2016.....	XXX.....	XXX.....	XXX.....
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
9. 2020.....	XXX.....						
10. 2021.....	XXX.....							
11. 2022	XXX	XXX							

NONE

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	713	.404	254	270	107	72	16	20	.32	.....
2. 2013.....	1,261	.884	653	206	98	132	.76	.82	.13	.13
3. 2014.....	XXX.....	.927	422	.421	198	256	115	.65	.7	.7
4. 2015.....	XXX.....	XXX.....	1,076	.656	481	448	.246	.80	.38	.92
5. 2016.....	XXX.....	XXX.....	XXX.....	1,013	.653	403	.320	.303	.144	.149
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	1,283	.659	.559	.256	.241	.160
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	.XXX	1,125	.882	.649	.876	.813
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	.XXX	XXX.....	1,472	1,423	.769	.686
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	.XXX	XXX.....	XXX.....	1,716	.929	.772
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	.XXX	XXX.....	XXX.....	XXX.....	1,880	.845
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,030

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company

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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....										
2. 2013.....										
3. 2014.....	XXX.....									
4. 2015.....	XXX.....	XXX.....								
5. 2016.....	XXX.....	XXX.....	XX.....							
6. 2017.....	XXX.....	XXX.....	XX.....	XX.....						
7. 2018.....	XXX.....	XXX.....	XX.....	XXX.....	XXX.....					
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

NONE**SCHEDULE P - PART 4F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**

1. Prior.....										
2. 2013.....										
3. 2014.....	XXX.....									
4. 2015.....	XXX.....	XXX.....								
5. 2016.....	XXX.....	XXX.....	XXX.....							
6. 2017.....	XXX.....	XXX.....	XX.....	XXX.....						
7. 2018.....	XXX.....	XXX.....	XX.....	XX.....						
8. 2019.....	XXX.....	XXX.....	XX.....	XX.....						
9. 2020.....	XXX.....	XXX.....	XX.....	XXX.....	XXX.....					
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2022.....	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. 2013.....										
3. 2014.....	XXX.....									
4. 2015.....	XXX.....	XXX.....								
5. 2016.....	XXX.....	XXX.....	XXX.....							
6. 2017.....	XXX.....	XXX.....	XX.....	XXX.....						
7. 2018.....	XXX.....	XXX.....	XX.....	XX.....						
8. 2019.....	XXX.....	XXX.....	XX.....	XX.....						
9. 2020.....	XXX.....	XXX.....	XX.....	XXX.....	XXX.....					
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE**SCHEDULE P - PART 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**

1. Prior.....	364	157	.57	53	48	42	41	.13		
2. 2013.....	330	129	174	144	154	16				
3. 2014.....	XXX.....	292	299	108	.34	.4	7	.3		
4. 2015.....	XXX.....	XXX.....	282	204	58	.86	4	.2		
5. 2016.....	XXX.....	XXX.....	XXX.....	411	240	141	55	.5	1	
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	292	157	.75	.74	45	.31
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	249	223	.52	.27	.22
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	185	.83	.87	.21
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,010	.869	.61
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.424	.760
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	480

NONE**SCHEDULE P - PART 4H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE**

1. Prior.....										
2. 2013.....										
3. 2014.....	XXX.....									
4. 2015.....	XXX.....	XXX.....								
5. 2016.....	XXX.....	XXX.....	XXX.....							
6. 2017.....	XXX.....	XXX.....	XX.....	XXX.....						
7. 2018.....	XXX.....	XXX.....	XX.....	XX.....						
8. 2019.....	XXX.....	XXX.....	XX.....	XX.....						
9. 2020.....	XXX.....	XXX.....	XX.....	XXX.....	XX.....					
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company

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
2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	111	16	2
2. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	125	11
3. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	150

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX.....	629	111	.23						
2. 2021.....	XXX.....	806	.31							
3. 2022.....	XXX	XXX	1,121							

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior.....	XXX.....									
2. 2021.....	XXX.....									
3. 2022.....	XXX	XXX								

NONE**SCHEDULE P - PART 4L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)**

1. Prior.....	XXX.....									
2. 2021.....	XXX.....									
3. 2022.....	XXX	XXX								

NONE**SCHEDULE P - PART 4M - INTERNATIONAL**

1. Prior.....										
2. 2013.....										
3. 2014.....	XXX.....									
4. 2015.....	XXX.....	XXX								
5. 2016.....	XXX.....	XXX	XXX							
6. 2017.....	XXX.....	XXX	XX	XX						
7. 2018.....	XXX.....	XXX	XX	XX	XX					
8. 2019.....	XXX.....	XXX	XX	XXX	XXX	XX				
9. 2020.....	XXX.....	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2021.....	XXX.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	9									
2. 2013.....	8	9	1							
3. 2014.....	XXX.....	7	24							
4. 2015.....	XXX.....	XXX.....	1							
5. 2016.....	XXX.....	XXX.....	XXX.....							
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....			12			
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3	3			
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1	3	2	
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	4	4
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4

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

1. Prior.....										
2. 2013.....										
3. 2014.....	XXX.....									
4. 2015.....	XXX.....	XXX.....								
5. 2016.....	XXX.....	XXX.....	XXX.....							
6. 2017.....	XXX.....	XXX.....	XX	XX						
7. 2018.....	XXX.....	XXX.....	XX	XX	XX					
8. 2019.....	XXX.....	XXX.....	XX	XXX.....	XXX.....	XX				
9. 2020.....	XXX.....									
10. 2021.....	XXX.....									
11. 2022	XXX	XXX								

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

1. Prior.....	XXX.....	XXX.....	XX	XXX.....	XXX.....	XX	XX			
2. 2021.....	XXX.....	XXX.....	XX	XXX.....	XX	XX	XXX.....	XXX.....		
3. 2022	XXX	XXX	XX	XX	XX	XX	XXX	XXX	XXX	

SCHEDULE P - PART 4T - WARRANTY

1. Prior.....	XXX.....	XXX.....	XX	XXX.....	XXX.....	XX	XX			
2. 2021.....	XXX.....	XXX.....	XX	XXX.....	XX	XX	XXX.....	XXX.....		
3. 2022	XXX	XXX	XX	XX	XX	XX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company
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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	150	21	5	5	1	1	1	1	1	.....
2. 2013.....	769	907	917	923	924	924	925	925	925	925
3. 2014.....	XXX.....	539	628	639	641	642	643	643	644	644
4. 2015.....	XXX.....	XXX.....	488	566	579	582	583	585	586	586
5. 2016.....	XXX.....	XXX.....	XXX.....	459	545	554	559	560	561	561
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	604	701	715	717	719	719
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	511	620	633	635	635
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	691	804	813	813
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	776	874	874
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	666	666
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	666

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	22	13	8	5	5	3	3	1	1	1
2. 2013.....	114	10	3	2	2	2	1	1	1	.....
3. 2014.....	XXX.....	73	8	3	2	1	1	1	1	.....
4. 2015.....	XXX.....	XXX.....	77	13	4	2	2	.....	.....	.....
5. 2016.....	XXX.....	XXX.....	XXX.....	80	11	6	1	1	1	.....
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	88	12	5	5	3	2
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	95	10	2	1	1
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	85	11	5	3
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	69	7	1
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	70	7
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	134

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	91	14	1	2	.....	(1)	1	.....	.....	.....
2. 2013.....	1,029	1,089	1,094	1,099	1,100	1,100	1,100	1,100	1,099	1,099
3. 2014.....	XXX.....	737	776	784	786	786	787	787	787	787
4. 2015.....	XXX.....	XXX.....	683	715	722	724	725	725	726	726
5. 2016.....	XXX.....	XXX.....	XXX.....	641	678	685	685	686	686	686
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	815	856	864	866	866	865
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	716	762	768	769	769
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	938	999	1,003	1,001
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	993	1,043	1,037
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	798	735
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	134

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company
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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior	414	111	47	21	9	5		1	1	
2. 2013	595	805	853	874	882	885	888	889	889	889
3. 2014	XXX	514	742	813	841	853	857	859	860	860
4. 2015	XXX	XXX	517	721	786	811	820	825	827	827
5. 2016	XXX	XXX	XXX	478	720	770	798	806	812	812
6. 2017	XXX	XXX	XXX	XXX	545	755	815	838	848	848
7. 2018	XXX	XXX	XXX	XXX	XXX	632	920	992	1,023	1,023
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX	691	993	1,059	1,059
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	502	681	681
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	510	510
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior	172	65	28	9	3	2				
2. 2013	343	79	27	8	5	2	1	1	1	1
3. 2014	XXX	388	112	33	13	6	3	2	2	2
4. 2015	XXX	XXX	398	117	32	11	5	2	1	
5. 2016	XXX	XXX	XXX	427	95	36	11	5	3	1
6. 2017	XXX	XXX	XXX	XXX	352	94	31	13	5	4
7. 2018	XXX	XXX	XXX	XXX	XXX	421	105	43	18	10
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX	412	96	44	21
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	278	68	32
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	324	74
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	348

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior	132	18	13	2	3	4	(2)	1	1	
2. 2013	1,011	1,007	1,013	1,017	1,022	1,022	1,024	1,025	1,025	1,025
3. 2014	XXX	970	974	975	986	992	993	994	995	995
4. 2015	XXX	XXX	991	968	960	966	970	973	974	973
5. 2016	XXX	XXX	XXX	995	964	966	970	972	976	974
6. 2017	XXX	XXX	XXX	XXX	990	1,001	1,010	1,017	1,019	1,018
7. 2018	XXX	XXX	XXX	XXX	XXX	1,159	1,203	1,224	1,232	1,224
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX	1,212	1,274	1,294	1,271
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	894	913	877
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	927	677
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	348

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	50	18	7	6	2	1				
2. 2013.....	103	144	151	156	161	162	163	163	163	163
3. 2014.....	XXX.....	125	178	191	200	205	207	208	208	208
4. 2015.....	XXX.....	XXX.....	143	193	211	219	224	225	226	226
5. 2016.....	XXX.....	XXX.....	XXX.....	127	178	195	199	201	202	202
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	130	187	202	208	210	210
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	129	190	202	208	208
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	145	195	208	208
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	117	168	168
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	124	124
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	25	11	5	1	1					
2. 2013.....	48	16	13	8	2	2				
3. 2014.....	XXX.....	65	25	14	7	3	1			
4. 2015.....	XXX.....	XXX.....	73	31	13	6	2	1		
5. 2016.....	XXX.....	XXX.....	XXX.....	64	20	6	4	2	1	1
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	.57	21	6	3	2	1
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	55	14	6	2	1
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	49	18	9	4
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	45	12	7
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	45	12
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	49

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	14	7	1	2	2					
2. 2013.....	165	183	188	189	188	189	188	188	188	188
3. 2014.....	XXX.....	203	222	226	229	230	230	230	230	230
4. 2015.....	XXX.....	XXX.....	228	249	252	254	255	255	255	255
5. 2016.....	XXX.....	XXX.....	XXX.....	207	225	229	231	231	231	231
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	206	238	240	243	244	243
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	202	234	240	242	241
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	211	240	245	240
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	177	201	196
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	182	149
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	49

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior	74	25	14	9	4	1				
2. 2013	153	202	215	228	234	237	239	240	241	241
3. 2014	XXX	154	212	228	241	248	251	254	255	255
4. 2015	XXX	XXX	143	202	221	232	241	245	247	247
5. 2016	XXX	XXX	XXX	137	190	204	215	221	224	224
6. 2017	XXX	XXX	XXX	XXX	142	182	196	206	211	211
7. 2018	XXX	XXX	XXX	XXX	XXX	128	177	192	198	198
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX	144	195	209	209
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	160	202	202
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	131	131
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior	36	22	11	8	2	1	1			
2. 2013	53	21	19	9	5	3	1	1		
3. 2014	XXX	65	31	24	14	7	4	1		
4. 2015	XXX	XXX	67	36	26	16	6	2	2	4
5. 2016	XXX	XXX	XXX	56	28	19	14	8	6	4
6. 2017	XXX	XXX	XXX	XXX	48	23	15	10	8	4
7. 2018	XXX	XXX	XXX	XXX	XXX	53	19	14	12	7
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX	41	23	19	13
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	34	10	5
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	38	14
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	59

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior	54	15	4	6	(2)			(1)		
2. 2013	239	272	288	292	295	296	296	297	297	297
3. 2014	XXX	258	297	310	315	316	316	316	316	316
4. 2015	XXX	XXX	239	282	296	300	300	300	302	304
5. 2016	XXX	XXX	XXX	225	264	273	280	280	281	279
6. 2017	XXX	XXX	XXX	XXX	217	250	260	267	270	266
7. 2018	XXX	XXX	XXX	XXX	XXX	204	233	245	250	245
8. 2019	XXX	XXX	XXX	XXX	XXX	XXX	209	252	265	259
9. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	222	248	243
10. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	187	163
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	59

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 2022 OF THE Ohio 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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	18	8	3	1						
2. 2013.....	18	25	30	32	33	35	35	35	35	35
3. 2014.....	XXX	15	23	28	29	30	31	32	33	33
4. 2015.....	XXX	XXX	11	17	21	22	22	22	23	23
5. 2016.....	XXX	XXX	XXX	12	18	24	25	26	27	27
6. 2017.....	XXX	XXX	XXX	XXX	9	11	13	14	14	14
7. 2018.....	XXX	XXX	XXX	XXX	XXX	7	10	11	12	12
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	5	10	10	10
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	10	10
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	5
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	13	4	2							
2. 2013.....	14	9	6		1	1				
3. 2014.....	XXX	17	9	1	3	2	1			
4. 2015.....	XXX	XXX	9		2	1	1			
5. 2016.....	XXX	XXX	XXX	3	9	3	1	1		
6. 2017.....	XXX	XXX	XXX	XXX	4	2	1	1	1	1
7. 2018.....	XXX	XXX	XXX	XXX	XXX	4	2	2	1	1
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	4	2	1	1
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	3	2
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	2
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4

SECTION 3A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	5	1	2	(1)						
2. 2013.....	39	45	48	45	47	49	48	48	48	48
3. 2014.....	XXX	37	41	39	43	43	44	44	45	45
4. 2015.....	XXX	XXX	25	25	32	33	33	32	33	33
5. 2016.....	XXX	XXX	XXX	19	33	33	32	33	33	33
6. 2017.....	XXX	XXX	XXX	XXX	15	17	18	19	19	19
7. 2018.....	XXX	XXX	XXX	XXX	XXX	12	15	17	17	17
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	10	14	14	14
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13	16	15
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11	8
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4

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 2022 OF THE Ohio Mutual Insurance Company
SCHEDULE P - PART 5R - PRODUCTS LIABILITY - OCCURRENCE
SECTION 1A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....		2								
2. 2013.....	1	2	2	2	2	2	2	2	2	2
3. 2014.....	XXX		1	1	1	1	1	1	1	1
4. 2015.....	XXX	XXX	1	1	1	1	1	1	1	1
5. 2016.....	XXX	XXX	XXX		1	1	1	1	1	1
6. 2017.....	XXX	XXX	XXX	XXX				1	1	1
7. 2018.....	XXX	XXX	XXX	XXX	XXX	2	2	2	2	2
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	1									
2. 2013.....	1									
3. 2014.....	XXX	1								1
4. 2015.....	XXX	XXX								
5. 2016.....	XXX	XXX	XXX	1						
6. 2017.....	XXX	XXX	XXX	XXX						
7. 2018.....	XXX	XXX	XXX	XXX	XXX					
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....	1	1								
2. 2013.....	2	2	2	2	2	2	2	2	2	2
3. 2014.....	XXX	1	1	2	2	2	2	2	2	3
4. 2015.....	XXX	XXX	1	1	1	1	1	1	1	1
5. 2016.....	XXX	XXX	XXX	1	1	1	1	1	1	1
6. 2017.....	XXX	XXX	XXX	XXX				1	1	1
7. 2018.....	XXX	XXX	XXX	XXX	XXX	2	2	2	2	2
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 5T - Warranty - Section 1

N O N E

Schedule P - Part 5T - Warranty - Section 2

N O N E

Schedule P - Part 5T - Warranty - Section 3

N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior.....											
2. 2013.....	3,781	3,781	3,781	3,781	3,781	3,781	3,781	3,781	3,781	3,781	
3. 2014.....	XXX	4,295	4,295	4,295	4,295	4,295	4,295	4,295	4,295	4,295	
4. 2015.....	XXX	XXX	4,420	4,420	4,420	4,420	4,420	4,420	4,420	4,420	
5. 2016.....	XXX	XXX	XXX	4,586	4,586	4,586	4,586	4,586	4,586	4,586	
6. 2017.....	XXX	XXX	XXX	XXX	4,779	4,779	4,779	4,779	4,779	4,779	
7. 2018.....	XXX	XXX	XXX	XXX	XXX	4,986	4,986	4,986	4,986	4,986	
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	5,177	5,177	5,177	5,177	
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,472	5,472	5,472	
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,878	5,878	
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,343	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,343
13. Earned Premiums (Sch P-Pt. 1)	3,781	4,295	4,420	4,586	4,779	4,986	5,177	5,472	5,878	6,343	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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior.....											
2. 2013.....	206	206	206	206	206	206	206	206	206	206	
3. 2014.....	XXX	229	229	229	229	229	229	229	229	229	
4. 2015.....	XXX	XXX	256	256	256	256	256	256	256	256	
5. 2016.....	XXX	XXX	XXX	293	293	293	293	293	293	293	
6. 2017.....	XXX	XXX	XXX	XXX	352	352	352	352	352	352	
7. 2018.....	XXX	XXX	XXX	XXX	XXX	198	198	198	198	198	
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	112	112	112	112	
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	68	68	68	68	
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35	35	35	
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	41	41	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	41
13. Earned Premiums (Sch P-Pt. 1)	206	229	256	293	352	198	112	68	35	41	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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior.....											
2. 2013.....											
3. 2014.....	XXX										
4. 2015.....	XXX	XXX									
5. 2016.....	XXX	XXX	X	X	X	X					
6. 2017.....	XXX	XXX	X	X	X	X					
7. 2018.....	XXX	XXX	X	X	X	X					
8. 2019.....	XXX	XXX	X	X	X	X					
9. 2020.....	XXX	XXX	X	X	X	X					
10. 2021.....	XXX	XXX	X	X	X	X					
11. 2022.....	XXX	XXX	X	X	X	X					
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior.....											
2. 2013.....											
3. 2014.....	XXX										
4. 2015.....	XXX	XXX									
5. 2016.....	XXX	XXX	X	X	X	X					
6. 2017.....	XXX	XXX	X	X	X	X					
7. 2018.....	XXX	XXX	X	X	X	X					
8. 2019.....	XXX	XXX	X	X	X	X					
9. 2020.....	XXX	XXX	X	X	X	X					
10. 2021.....	XXX	XXX	X	X	X	X					
11. 2022.....	XXX	XXX	X	X	X	X					
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Earned Premiums (Sch P-Pt. 1)											XXX

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior.....											
2. 2013.....	5,720	5,720	5,720	5,720	5,720	5,720	5,720	5,720	5,720	5,720	
3. 2014.....	XXX	6,675	6,675	6,675	6,675	6,675	6,675	6,675	6,675	6,675	
4. 2015.....	XXX	XXX	6,939	6,939	6,939	6,939	6,939	6,939	6,939	6,939	
5. 2016.....	XXX	XXX	XXX	7,318	7,318	7,318	7,318	7,318	7,318	7,318	
6. 2017.....	XXX	XXX	XXX	XXX	7,563	7,563	7,563	7,563	7,563	7,563	
7. 2018.....	XXX	XXX	XXX	XXX	XXX	7,729	7,729	7,729	7,729	7,729	
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	8,180	8,180	8,180	8,180	
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,798	8,798	8,798	
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,582	9,582	
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,596	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,596
13. Earned Premiums (Sch P-Pt. 1)	5,720	6,675	6,939	7,318	7,563	7,729	8,180	8,798	9,582	10,596	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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior.....											
2. 2013.....	713	713	713	713	713	713	713	713	713	713	
3. 2014.....	XXX	863	863	863	863	863	863	863	863	863	
4. 2015.....	XXX	XXX	863	863	863	863	863	863	863	863	
5. 2016.....	XXX	XXX	XXX	898	898	898	898	898	898	898	
6. 2017.....	XXX	XXX	XXX	XXX	915	915	915	915	915	915	
7. 2018.....	XXX	XXX	XXX	XXX	XXX	748	748	748	748	748	
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	706	706	706	706	
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	807	807	807	
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	787	787	787	
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	970	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	970
13. Earned Premiums (Sch P-Pt. 1)	713	863	863	898	915	748	706	807	787	970	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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior.....											
2. 2013.....	1,888	1,888	1,888	1,888	1,888	1,888	1,888	1,888	1,888	1,888	
3. 2014.....	XXX	1,952	1,952	1,952	1,952	1,952	1,952	1,952	1,952	1,952	
4. 2015.....	XXX	XXX	1,987	1,987	1,987	1,987	1,987	1,987	1,987	1,987	
5. 2016.....	XXX	XXX	XXX	1,849	1,849	1,849	1,849	1,849	1,849	1,849	
6. 2017.....	XXX	XXX	XXX	XXX	1,689	1,689	1,689	1,689	1,689	1,689	
7. 2018.....	XXX	XXX	XXX	XXX	XXX	1,753	1,753	1,753	1,753	1,753	
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	1,858	1,858	1,858	1,858	
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,986	1,986	1,986	
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,131	2,131	
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,337	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,337
13. Earned Premiums (Sch P-Pt. 1)	1,888	1,952	1,987	1,849	1,689	1,753	1,858	1,986	2,131	2,337	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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior.....											
2. 2013.....	823	823	823	823	823	823	823	823	823	823	
3. 2014.....	XXX	893	893	893	893	893	893	893	893	893	
4. 2015.....	XXX	XXX	890	890	890	890	890	890	890	890	
5. 2016.....	XXX	XXX	XXX	901	901	901	901	901	901	901	
6. 2017.....	XXX	XXX	XXX	XXX	935	935	935	935	935	935	
7. 2018.....	XXX	XXX	XXX	XXX	XXX	1,002	1,002	1,002	1,002	1,002	
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	1,112	1,112	1,112	1,112	
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	720	720	720	
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	657	657	
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	831	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	831
13. Earned Premiums (Sch P-Pt. 1)	823	893	890	901	935	1,002	1,112	720	657	831	XXX

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

N O N E

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

N O N E

Schedule P - Part 6M - International - Section 1

N O N E

Schedule P - Part 6M - International - Section 2

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior.....											
2. 2013.....	52	52	52	52	52	52	52	52	52	52	
3. 2014.....	XXX	57	57	57	57	57	57	57	57	57	
4. 2015.....	XXX	XXX	57	57	57	57	57	57	57	57	
5. 2016.....	XXX	XXX	XXX	52	52	52	52	52	52	52	
6. 2017.....	XXX	XXX	XXX	XXX	54	54	54	54	54	54	
7. 2018.....	XXX	XXX	XXX	XXX	XXX	54	54	54	54	54	
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	50	50	50	50	
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	51	51	51	
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	59	59	
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	65	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	65
13. Earned Premiums (Sch P-Pt. 1)		52	57	57	52	54	54	50	51	59	65
											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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior.....											
2. 2013.....											
3. 2014.....	XXX										
4. 2015.....	XXX	XXX									
5. 2016.....	XXX	XXX									
6. 2017.....	XXX	XXX									
7. 2018.....	XXX	XXX									
8. 2019.....	XXX	XXX									
9. 2020.....	XXX	XXX									
10. 2021.....	XXX	XXX									
11. 2022.....	XXX	XXX									
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

**SCHEDULE P - PART 6R - PRODUCTS LIABILITY - CLAIMS-MADE
SECTION 1B**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior.....											
2. 2013.....											
3. 2014.....	XXX										
4. 2015.....	XXX	XXX									
5. 2016.....	XXX	XXX									
6. 2017.....	XXX	XXX									
7. 2018.....	XXX	XXX									
8. 2019.....	XXX	XXX									
9. 2020.....	XXX	XXX									
10. 2021.....	XXX	XXX									
11. 2022.....	XXX	XXX									
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022	
1. Prior.....											
2. 2013.....											
3. 2014.....	XXX										
4. 2015.....	XXX	XXX									
5. 2016.....	XXX	XXX									
6. 2017.....	XXX	XXX									
7. 2018.....	XXX	XXX									
8. 2019.....	XXX	XXX									
9. 2020.....	XXX	XXX									
10. 2021.....	XXX	XXX									
11. 2022.....	XXX	XXX									
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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	6,018			22,876		
2. Private Passenger Auto Liability/Medical	15,415			16,670		
3. Commercial Auto/Truck Liability/Medical	6,676			6,599		
4. Workers' Compensation						
5. Commercial Multiple Peril	8,276			10,100		
6. Medical Professional Liability - Occurrence						
7. Medical Professional Liability - Claims - Made						
8. Special Liability						
9. Other Liability - Occurrence	1,967			1,537		
10. Other Liability - Claims-Made						
11. Special Property .....	.740			5,858		
12. Auto Physical Damage	2,947			19,839		
13. Fidelity/Surety						
14. Other						
15. International						
16. Reinsurance - Nonproportional Assumed Property						
17. Reinsurance - Nonproportional Assumed Liability						
18. Reinsurance - Nonproportional Assumed Financial Lines						
19. Products Liability - Occurrence	16			70		
20. Products Liability - Claims-Made						
21. Financial Guaranty/Mortgage Guaranty						
22. Warranty						
23. Totals	42,055			83,550		

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....										
2. 2013.....										
3. 2014.....	XXX.....									
4. 2015.....	XXX.....	XXX.....								
5. 2016.....	XXX.....	XXX.....	XX.....							
6. 2017.....	XXX.....	XXX.....	XX.....	XX.....						
7. 2018.....	XXX.....	XXX.....	XX.....	XXX.....	XXX.....					
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2022.....	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 2013	2 2014	3 2015	4 2016	5 2017	6 2018	7 2019	8 2020	9 2021	10 2022
1. Prior.....										
2. 2013.....										
3. 2014.....	XXX.....									
4. 2015.....	XXX.....	XXX.....								
5. 2016.....	XXX.....	XXX.....	XX.....							
6. 2017.....	XXX.....	XXX.....	XX.....	XX.....						
7. 2018.....	XXX.....	XXX.....	XX.....	XXX.....	XXX.....					
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2022.....	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 2022 OF THE Ohio 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 2013		
1.603 2014		
1.604 2015		
1.605 2016		
1.606 2017		
1.607 2018		
1.608 2019.....		
1.609 2020.....		
1.610 2021.....		
1.611 2022.....		
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 [] No [X]

3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Yes [X] No []

4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.

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

5. What were the net premiums in force at the end of the year for:

(in thousands of dollars)

5.1 Fidelity
5.2 Surety

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

7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [X] No []

7.2 (An extended statement may be attached.)

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

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

Allocated by States and Territories

States, Etc.	Direct Business Only					
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama	AL					
2. Alaska	AK					
3. Arizona	AZ					
4. Arkansas	AR					
5. California	CA					
6. Colorado	CO					
7. Connecticut	CT					
8. Delaware	DE					
9. District of Columbia	DC					
10. Florida	FL					
11. Georgia	GA					
12. Hawaii	HI					
13. Idaho	ID					
14. Illinois	IL					
15. Indiana	IN					
16. Iowa	IA					
17. Kansas	KS					
18. Kentucky	KY					
19. Louisiana	LA					
20. Maine	ME					
21. Maryland	MD					
22. Massachusetts	MA					
23. Michigan	MI					
24. Minnesota	MN					
25. Mississippi	MS					
26. Missouri	MO					
27. Montana	MT					
28. Nebraska	NE					
29. Nevada	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 2022 OF THE Ohio Mutual Insurance Company

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

NONExplan

NINE

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company

SCHEDULE Y

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

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company

SCHEDULE Y

PART 3 - ULTIMATE CONTROLLING PARTY AND LISTING OF OTHER U.S. INSURANCE GROUPS OR ENTITIES UNDER THAT ULTIMATE CONTROLLING PARTY'S CONTROL

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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

	Responses
	MARCH FILING
1. Will an actuarial opinion be filed by March 1?	YES
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?	YES
	APRIL FILING
5. Will the Insurance Expense Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
6. Will Management's Discussion and Analysis be filed by April 1?	YES
7. Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
	MAY FILING
8. Will this company be included in a combined annual statement which is filed with the NAIC by May 1?	YES
	JUNE FILING
9. Will an audited financial report be filed by June 1?	YES
10. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES

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.

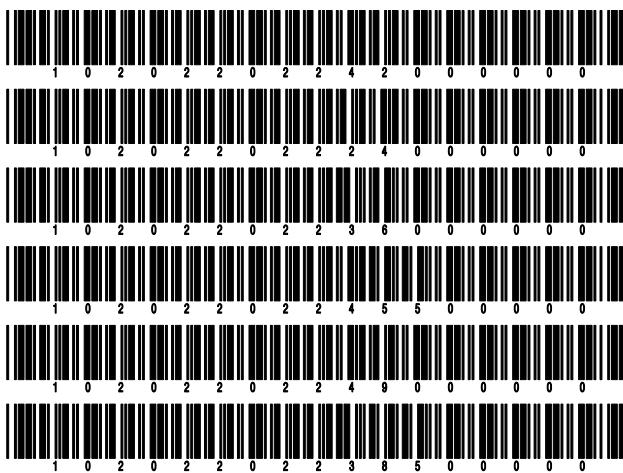
	MARCH FILING	
11. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO	
12. Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO	
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and 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?	YES	
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?	YES	
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?	NO	
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?	NO	

Explanations:

- 11.
- 12.
- 13.
- 14.
- 15.
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- 18.
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- 23.
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- 34.
- 35.
- 36.
- 37.

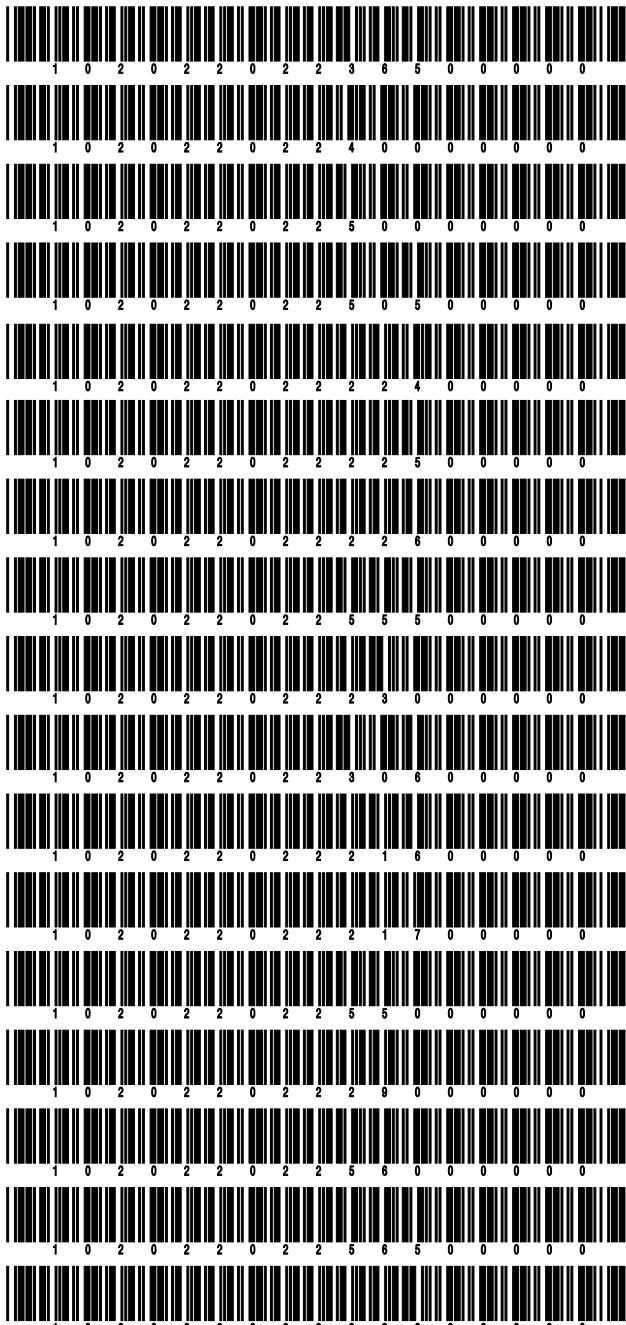
Bar Codes:

- 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]



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio 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]
- 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]
- 33. Cybersecurity and Identity Theft Insurance Coverage Supplement [Document Identifier 550]
- 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]
- 37. Management's Report of Internal Control Over Financial Reporting [Document Identifier 223]



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company
OVERFLOW PAGE FOR WRITE-INS

NONE



1 0 2 0 2 2 0 2 2 4 0 1 0 0 1

SUPPLEMENT FOR THE YEAR 2022 OF THE Ohio Mutual Insurance Company

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

For The Year Ended December 31, 2022

To Be Filed by March 1

TO BE Filed by March
(A) Financial Impact

(A) Financial Impact	1 As Reported	2 Interrogatory 9 Reinsurance Effect	3 Restated Without Interrogatory 9 Reinsurance
A01. Assets	398,419,050		398,419,050
A02. Liabilities	87,366,476		87,366,476
A03. Surplus as regards to policyholders	311,052,574		311,052,574
A04. Income before taxes	(5,647,183)		(5,647,183)

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

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