



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

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

BUCKEYE STATE MUTUAL INSURANCE COMPANY

NAIC Group Code	0046 (Current)	0046 (Prior)	NAIC Company Code	16713	Employer's ID Number	31-6035649
Organized under the Laws of	Ohio			State of Domicile or Port of Entry		OH
Country of Domicile	United States of America					
Incorporated/Organized	01/28/1897			Commenced Business		04/30/1879
Statutory Home Office	One Heritage Place (Street and Number)			Piqua, OH, US 45356-4888 (City or Town, State, Country and Zip Code)		
Main Administrative Office	One Heritage Place (Street and Number)					
	Piqua, OH, US 45356 (City or Town, State, Country and Zip Code)			937-778-5000 (Area Code) (Telephone Number)		
Mail Address	One Heritage Place (Street and Number or P.O. Box)			Piqua, OH, US 45356 (City or Town, State, Country and Zip Code)		
Primary Location of Books and Records	One Heritage Place (Street and Number)					
	Piqua, OH, US 45356 (City or Town, State, Country and Zip Code)			937-778-5000 (Area Code) (Telephone Number)		
Internet Website Address	http://www.buckeye-ins.com					
Statutory Statement Contact	Craig A. Curcio (Name)			937-778-5000 (Area Code) (Telephone Number)		
	craig.curcio@buckeye-ins.com (E-mail Address)			937-778-5019 (FAX Number)		

OFFICERS

President	John Michael Brooks	Treasurer	Jerry Christopher Collins
Secretary	Lisa Lyn Wesner	Chief Underwriting Officer	Robert Edward Bornhorst

OTHER

Jon Allen DeHass, VP - Claims

DIRECTORS OR TRUSTEES

William L. Sweet Jr.	Zahid Afzal	Julie A. Covault
Tim Hein #	Jean M. Bratton	Oyauma M. Garrison
Joe W. Dickerson		

State of	Ohio	SS
County of	Miami	

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.

John Michael Brooks President & CEO	Lisa Lyn Wesner VP & Secretary	Jerry Christopher Collins CFO & Treasurer
Subscribed and sworn to before me this	a. Is this an original filing?	Yes [X] No []
day of	b. If no,	
	1. State the amendment number.....	
	2. Date filed	
	3. Number of pages attached.....	



ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046 BUSINESS IN THE STATE OF Arizona DURING THE YEAR 2022 NAIC Company Code 16713

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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
32. Reins nonproportional assumed liability	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
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	1,545
35. Total (a)	0	0	0	0	0	0	0	0	0	0	0	1,545
DETAILS OF WRITE-INS												
3401. State Fee												1,545
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	1,545

(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 BUCKEYE STATE MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046		BUSINESS IN THE STATE OF Colorado		DURING THE YEAR 2022								NAIC Company Code 16713	
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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	0		0	0	(2,385)	(2,385)	0	0	0	99	0	0
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
32.	Reins nonproportional assumed liability	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
34.	Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	1,395
35.	Total (a)	0	0	0	0	(2,385)	(2,385)	0	0	0	99	0	1,395
DETAILS OF WRITE-INS													
3401.	State Fee												1,395
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	1,395

(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 BUCKEYE STATE MUTUAL INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046		BUSINESS IN THE STATE OF Georgia				DURING THE YEAR 2022				NAIC Company Code 16713			
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											
Fire													
Allied Lines													
Multiple Peril Crop													
Federal Flood													
Private Crop													
Private Flood													
Farmowners Multiple Peril													
Homeowners Multiple Peril													
Commercial Multiple Peril (Non-Liability Portion)													
Commercial Multiple Peril (Liability Portion)													
Mortgage Guaranty													
Ocean Marine													
Inland Marine													
Financial Guaranty													
Medical Professional Liability - Occurrence													
Medical Professional Liability - Claims-Made													
Earthquake													
Comprehensive (hospital and medical) ind (b)													
Comprehensive (hospital and medical) group (b)													
Credit A&H (Group and Individual)													
Vision Only (b)													
Dental Only (b)													
Disability Income (b)													
Medicare Supplement (b)													
Medicaid Title XIX (b)													
Medicare Title XVIII (b)													
Long-Term Care (b)													
Federal Employees Health Benefits Plan (b)													
Other Health (b)													
Workers' Compensation													
Other Liability - Occurrence													
Other Liability - Claims-Made													
Excess Workers' Compensation													
Products Liability - Occurrence													
Products Liability - Claims-Made													
Private Passenger Auto No-Fault (Personal Injury Protection)													
Other Private Passenger Auto Liability					(360)	(360)	0	767	(3,045)				
Commercial Auto No-Fault (Personal Injury Protection)													
Other Commercial Auto Liability													
Private Passenger Auto Physical Damage													
Commercial Auto Physical Damage													
Aircraft (all perils)													
Fidelity													
Surety													
Burglary and Theft													
Boiler and Machinery													
Credit													
International													
Warranty													
Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	884	
Total (a)	0	0	0	0	(360)	(360)	0	767	(3,045)	0	0	884	
DETAILS OF WRITE-INS													
State Fee												884	
Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	
Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	884	

(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 BUCKEYE STATE MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046		BUSINESS IN THE STATE OF Illinois				DURING THE YEAR 2022				NAIC Company Code 16713			
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											
Fire													
Allied Lines													
Multiple Peril Crop													
Federal Flood													
Private Crop													
Private Flood													
Farmowners Multiple Peril													
Homeowners Multiple Peril													
Commercial Multiple Peril (Non-Liability Portion)													
Commercial Multiple Peril (Liability Portion)													
Mortgage Guaranty													
Ocean Marine													
Inland Marine													
Financial Guaranty													
Medical Professional Liability - Occurrence													
Medical Professional Liability - Claims-Made													
Earthquake													
Comprehensive (hospital and medical) ind (b)													
Comprehensive (hospital and medical) group (b)													
Credit A&H (Group and Individual)													
Vision Only (b)													
Dental Only (b)													
Disability Income (b)													
Medicare Supplement (b)													
Medicaid Title XIX (b)													
Medicare Title XVIII (b)													
Long-Term Care (b)													
Federal Employees Health Benefits Plan (b)													
Other Health (b)													
Workers' Compensation													
Other Liability - Occurrence													
Other Liability - Claims-Made													
Excess Workers' Compensation													
Products Liability - Occurrence													
Products Liability - Claims-Made													
Private Passenger Auto No-Fault (Personal Injury Protection)													
Other Private Passenger Auto Liability													
Commercial Auto No-Fault (Personal Injury Protection)													
Other Commercial Auto Liability													
Private Passenger Auto Physical Damage													
Commercial Auto Physical Damage													
Aircraft (all perils)													
Fidelity													
Surety													
Burglary and Theft													
Boiler and Machinery													
Credit													
International													
Warranty													
Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	1,458	
Total (a)	0	0	0	0	0	0	0	0	0	0	0	1,458	
DETAILS OF WRITE-INS													
State Fee												1,458	
Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	
Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	1,458	

(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 BUCKEYE STATE MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046 BUSINESS IN THE STATE OF Indiana DURING THE YEAR 2022 NAIC Company Code 16713

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	650,845	644,899	0	333,544	241,960	145,699	16,060	17,234	9,395	2,980	92,066	10,890
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	1,131	1,158	0	476	0	0	0	0	0	0	152	18
3.	Farmowners Multiple Peril	2,414,494	2,354,894	0	1,122,926	2,110,775	2,184,032	451,948	24,400	10,627	31,209	341,533	40,399
4.	Homeowners Multiple Peril	1,698,209	1,705,376	0	880,568	1,181,857	1,431,174	559,396	3,011	(3,379)	18,786	240,240	28,417
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.	Inland Marine	56,845	59,418	0	28,622	2,990	75	4,815	0	0	0	8,041	951
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	109,732	108,028	0	49,303	0	0	98,605	9,005	6,435	5,039	15,522	1,836
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	1,680,408	1,702,632	0	818,650	1,183,429	1,119,092	1,191,952	51,362	58,614	247,142	237,704	28,117
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	1,641,522	1,601,678	0	807,444	1,236,804	1,217,145	87,726	3,406	2,628	7,360	232,203	27,467
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
32.	Reins nonproportional assumed liability	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
34.	Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a)	8,253,186	8,178,083	0	4,041,533	5,957,815	6,097,217	2,410,502	108,418	84,320	312,516	1,167,461	138,095
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 48,967
(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 BUCKEYE STATE MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046 BUSINESS IN THE STATE OF Iowa DURING THE YEAR 2022 NAIC Company Code 16713

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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					(7,070)	(7,070)						
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
32. Reins nonproportional assumed liability	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
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	420
35. Total (a)	0	0	0	0	(7,070)	(7,070)	0	0	0	0	0	420
DETAILS OF WRITE-INS												
3401. State Fee												420
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	420

(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 BUCKEYE STATE MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046		BUSINESS IN THE STATE OF Kansas				DURING THE YEAR 2022				NAIC Company Code 16713			
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											
Fire													
Allied Lines													
Multiple Peril Crop													
Federal Flood													
Private Crop													
Private Flood	1,564	1,530	0	756	0	0	0	0	0	0	240	35	
Farmowners Multiple Peril	3,877,412	3,831,108	0	1,866,956	3,093,133	2,106,170	428,360	6,231	(78,353)	109,490	618,883	89,800	
Homeowners Multiple Peril	2,471,862	2,466,858	0	1,210,307	1,204,469	636,246	263,771	890	(48,375)	33,569	394,546	57,248	
Commercial Multiple Peril (Non-Liability Portion)													
Commercial Multiple Peril (Liability Portion)													
Mortgage Guaranty													
Ocean Marine													
Inland Marine	51,425	51,853	0	23,588	11,886	11,886	4,279	0	0	0	8,208	1,191	
Financial Guaranty													
Medical Professional Liability - Occurrence													
Medical Professional Liability - Claims-Made													
Earthquake													
Comprehensive (hospital and medical) ind (b)													
Comprehensive (hospital and medical) group (b)													
Credit A&H (Group and Individual)													
Vision Only (b)													
Dental Only (b)													
Disability Income (b)													
Medicare Supplement (b)													
Medicaid Title XIX (b)													
Medicare Title XVIII (b)													
Long-Term Care (b)													
Federal Employees Health Benefits Plan (b)													
Other Health (b)													
Workers' Compensation													
Other Liability - Occurrence	135,892	134,621	0	65,837	0	0	82,394	0	0	0	21,690	3,147	
Other Liability - Claims-Made													
Excess Workers' Compensation													
Products Liability - Occurrence													
Products Liability - Claims-Made													
Private Passenger Auto No-Fault (Personal Injury Protection)	230,737	231,777	0	109,133	158,135	74,573	83,334	0	16,540	33,981	36,828	5,344	
Other Private Passenger Auto Liability	1,288,638	1,292,417	0	600,777	366,901	508,609	599,744	606	(4,958)	4,803	205,682	29,844	
Commercial Auto No-Fault (Personal Injury Protection)													
Other Commercial Auto Liability													
Private Passenger Auto Physical Damage	1,808,109	1,801,077	0	846,848	1,083,764	1,032,514	118,216	790	38,541	58,146	288,595	41,875	
Commercial Auto Physical Damage													
Aircraft (all perils)													
Fidelity													
Surety													
Burglary and Theft													
Boiler and Machinery													
Credit													
International													
Warranty													
Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0	
Total (a)	9,865,639	9,811,241	0	4,724,202	5,918,288	4,369,998	1,580,098	8,517	(76,605)	239,989	1,574,672	228,484	
DETAILS OF WRITE-INS													
Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	
Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0	

(a) Finance and service charges not included in Lines 1 to 35 \$ 20,248
(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 BUCKEYE STATE MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046 BUSINESS IN THE STATE OF Michigan DURING THE YEAR 2022 NAIC Company Code 16713

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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
32. Reins nonproportional assumed liability	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
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	915
35. Total (a)	0	0	0	0	0	0	0	0	0	0	0	915
DETAILS OF WRITE-INS												
3401. State Fee												915
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	915

(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 BUCKEYE STATE MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046		BUSINESS IN THE STATE OF Minnesota				DURING THE YEAR 2022				NAIC Company Code 16713			
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											
Fire													
Marine													
Multiple Peril Crop													
Federal Flood													
Private Crop													
Private Flood													
Farmowners Multiple Peril													
Homeowners Multiple Peril													
Commercial Multiple Peril (Non-Liability Portion)													
Commercial Multiple Peril (Liability Portion)													
Mortgage Guaranty													
Ocean Marine													
Inland Marine													
Financial Guaranty													
Medical Professional Liability - Occurrence													
Medical Professional Liability - Claims-Made													
Earthquake													
Comprehensive (hospital and medical) ind (b)													
Comprehensive (hospital and medical) group (b)													
Credit A&H (Group and Individual)													
Vision Only (b)													
Dental Only (b)													
Disability Income (b)													
Medicare Supplement (b)													
Medicaid Title XIX (b)													
Medicare Title XVIII (b)													
Long-Term Care (b)													
Federal Employees Health Benefits Plan (b)													
Other Health (b)													
Workers' Compensation													
Other Liability - Occurrence													
Other Liability - Claims-Made													
Excess Workers' Compensation													
Products Liability - Occurrence													
Products Liability - Claims-Made													
Private Passenger Auto No-Fault (Personal Injury Protection)													
Other Private Passenger Auto Liability													
Commercial Auto No-Fault (Personal Injury Protection)													
Other Commercial Auto Liability													
Private Passenger Auto Physical Damage													
Commercial Auto Physical Damage													
Aircraft (all perils)													
Fidelity													
Surety													
Burglary and Theft													
Boiler and Machinery													
Credit													
International													
Warranty													
Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	1,176	
Total (a)	0	0	0	0	0	0	0	0	0	0	0	1,176	
DETAILS OF WRITE-INS													
State Fee												1,176	
Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	
Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	1,176	

(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 BUCKEYE STATE MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046 BUSINESS IN THE STATE OF Nebraska DURING THE YEAR 2022 NAIC Company Code 16713

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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
32. Reins nonproportional assumed liability	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
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	680
35. Total (a)	0	0	0	0	0	0	0	0	0	0	0	680
DETAILS OF WRITE-INS												
3401. State Fee												680
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	680

(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 BUCKEYE STATE MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046 BUSINESS IN THE STATE OF New Mexico DURING THE YEAR 2022 NAIC Company Code 16713

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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
32. Reins nonproportional assumed liability	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
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	1,500
35. Total (a)	0	0	0	0	0	0	0	0	0	0	0	1,500
DETAILS OF WRITE-INS												
3401. State Fee												1,500
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	1,500

(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 BUCKEYE STATE MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046 BUSINESS IN THE STATE OF North Dakota DURING THE YEAR 2022 NAIC Company Code 16713

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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
32. Reins nonproportional assumed liability	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
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	922
35. Total (a)	0	0	0	0	0	0	0	0	0	0	0	922
DETAILS OF WRITE-INS												
3401. State Fee												922
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	922

(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 BUCKEYE STATE MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046 BUSINESS IN THE STATE OF Ohio DURING THE YEAR 2022 NAIC Company Code 16713

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1.	Fire	1,566,980	1,555,801	0	784,116	1,274,114	1,486,281	316,040	3,995	(3,571)	7,149	254,210	24,300
2.1	Allied Lines												
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood		2,143	0	1,150	0	0	0	0	0	0	351	34
3.	Farmowners Multiple Peril	4,834,442	4,819,667	0	2,387,094	4,537,826	4,390,450	861,028	39,316	45,052	60,837	784,277	74,970
4.	Homeowners Multiple Peril	5,329,952	4,993,312	0	2,754,410	3,009,915	2,965,440	800,970	21,391	19,958	17,615	864,675	82,656
5.1	Commercial Multiple Peril (Non-Liability Portion)												
5.2	Commercial Multiple Peril (Liability Portion)												
6.	Mortgage Guaranty												
8.	Ocean Marine												
9.	Inland Marine	133,133	131,760	0	65,392	15,901	15,901	8,379	0	0	0	21,598	2,065
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	414,945	412,142	0	190,900	0	(150,000)	348,871	0	5,702	10,243	67,316	6,435
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	4,925,082	4,683,278	0	2,447,282	2,583,610	1,875,852	1,780,278	30,440	(23,705)	292,759	798,991	76,377
19.3	Commercial Auto No-Fault (Personal Injury Protection)												
19.4	Other Commercial Auto Liability												
21.1	Private Passenger Auto Physical Damage	4,626,952	4,190,516	0	2,303,552	3,466,639	3,553,000	40,561	12,757	13,760	13,311	750,626	71,753
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
32.	Reins nonproportional assumed liability	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
34.	Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a)	21,833,803	20,788,619	0	10,933,896	14,888,005	14,136,924	4,156,127	107,899	57,196	401,914	3,542,044	338,590
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 152,852
(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 BUCKEYE STATE MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046 BUSINESS IN THE STATE OF South Dakota DURING THE YEAR 2022 NAIC Company Code 16713

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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					(67)	(67)						
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
32. Reins nonproportional assumed liability	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
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	1,515
35. Total (a)	0	0	0	0	(67)	(67)	0	0	0	0	0	1,515
DETAILS OF WRITE-INS												
3401. State Fee												1,515
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	1,515

(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 BUCKEYE STATE MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046 BUSINESS IN THE STATE OF Wisconsin DURING THE YEAR 2022 NAIC Company Code 16713

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
	1	2										
	Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
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
32. Reins nonproportional assumed liability	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
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	600
35. Total (a)	0	0	0	0	0	0	0	0	0	0	0	600
DETAILS OF WRITE-INS												
3401. State Fee												600
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	600

(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 BUCKEYE STATE MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046		BUSINESS IN THE STATE OF		Grand Total		DURING THE YEAR 2022						NAIC Company Code 16713	
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	2,217,825	2,200,700	0	1,117,660	1,516,074	1,631,980	332,100	21,229	5,824	10,129	346,276	35,190
2.1	Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.3	Federal Flood	0	0	0	0	0	0	0	0	0	0	0	0
2.4	Private Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	4,812	4,831	0	2,382	0	0	0	0	0	0	743	87
4.	Homeowners Multiple Peril	11,126,348	11,005,669	0	5,376,976	9,741,734	8,680,652	1,741,336	69,947	(22,674)	201,536	1,744,693	205,169
5.1	Commercial Multiple Peril (Non-Liability Portion)	9,500,023	9,165,546	0	4,845,285	5,396,241	5,032,860	1,624,137	25,292	(31,796)	69,970	1,499,461	168,321
5.2	Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.	Inland Marine	241,403	243,031	0	117,602	30,777	27,862	17,473	0	0	0	37,847	4,207
10.	Financial Guaranty	0	0	0	0	0	0	0	0	0	0	0	0
11.1	Medical Professional Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
11.2	Medical Professional Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
12.	Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
13.1	Comprehensive (hospital and medical) ind (b)	0	0	0	0	0	0	0	0	0	0	0	0
13.2	Comprehensive (hospital and medical) group (b)	0	0	0	0	0	0	0	0	0	0	0	0
14.	Credit A&H (Group and Individual)	0	0	0	0	0	0	0	0	0	0	0	0
15.1	Vision Only (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.2	Dental Only (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.3	Disability Income (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.4	Medicare Supplement (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.5	Medicaid Title XIX (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.6	Medicare Title XVIII (b).....	0	0	0	0	0	0	0	0	0	0	0	0
15.7	Long-Term Care (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.8	Federal Employees Health Benefits Plan (b)	0	0	0	0	0	0	0	0	0	0	0	0
15.9	Other Health (b)	0	0	0	0	0	0	0	0	0	0	0	0
16.	Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence	660,569	654,791	0	306,040	0	(150,000)	529,870	9,005	12,137	15,282	104,528	11,418
17.2	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	230,737	231,777	0	109,133	158,135	74,573	83,334	0	16,540	33,981	36,828	5,344
19.2	Other Private Passenger Auto Liability	7,894,128	7,678,327	0	3,866,709	4,126,510	3,496,123	3,571,974	83,175	26,906	544,704	1,242,377	134,338
19.3	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
21.1	Private Passenger Auto Physical Damage	8,076,583	7,593,271	0	3,957,844	5,784,755	5,800,207	246,503	16,953	54,929	78,916	1,271,424	141,095
21.2	Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils)	0	0	0	0	0	0	0	0	0	0	0	0
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0
28.	Credit	0	0	0	0	0	0	0	0	0	0	0	0
29.	International	0	0	0	0	0	0	0	0	0	0	0	0
30.	Warranty	0	0	0	0	0	0	0	0	0	0	0	0
31.	Reins nonproportional assumed property	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
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	13,010
35.	Total (a)	39,952,428	38,777,943	0	19,699,631	26,754,226	24,594,257	8,146,727	225,601	61,866	954,518	6,284,177	718,179
DETAILS OF WRITE-INS													
3401.	State Fee	0	0	0	0	0	0	0	0	0	0	0	13,010
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	13,010

(a) Finance and service charges not included in Lines 1 to 35 \$ 222,067
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 1

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

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On										16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals	17 Ceded Balances Payable		18 Other Amounts Due to Reinsurers			
35-1630739	17639	Home and Farm Insurance Company	OH		1,752	105	8	94	4	125	50	917		1,303		127	16	1,160	2,000	
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling					1,752	105	8	94	4	125	50	917	0	1,303	0	127	16	1,160	2,000	
0499999. Total Authorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0899999. Total Authorized - Affiliates					1,752	105	8	94	4	125	50	917	0	1,303	0	127	16	1,160	2,000	
95-3187355	35300	Allianz Global Risks US Insurance Company	IL		89	1		2						3		(2)		5		
36-2661954	10103	American Agricultural Insurance Company	IN											0		(7)		7		
47-0574325	32603	Berkley Insurance Company	DE											0		(5)		5		
39-0712210	18767	Church Mutual Insurance Company	WI		74	4	0	17	0	25	6	37		89		28		61		
42-0234980	21415	Employers Mutual Casualty Company	IA			2	2	6	0	49	7			66		(5)		71		
22-2005057	26921	Everest Reinsurance Company	DE				0	4	1					5		(1)		6		
05-0316605	21482	Factory Mutual Insurance Company	RI		447							230		230		71		159		
38-1316179	21555	Farm Bureau Mutual Insurance Company of Michigan	MI		74	4	0	17	0	25	6	37		89		28		61		
42-0245840	13897	Farmers Mutual Hail Insurance Company Of Iowa	IA											0		(3)		3		
13-2673100	22039	General Reinsurance Corporation	DE				4			34	4			42				42		
42-0245990	14117	Grinnell Mutual Reinsurance Company	IA		1,023	8	0	1,519	0	279	42	275		2,123		191		1,932		
		Kentucky Farm Bureau Mutual Insurance Company																		
61-0392792	22993	Company	KY		74	4	0	17	0	25	6	37		89		28		61		
04-1543470	23043	Liberty Mutual Insurance Company	MA		874	39	3	150	1	235	50	311		789		228		561		
31-4259550	14621	Motorists Mutual Insurance Company	OH		74	4	0	17	0	25	6	37		89		28		61		
13-4924125	10227	Munich Reinsurance America, Inc.	DE		5	3	1	21	2			2		29		0		29		
23-2153760	39675	PMA Capital	PA											0		33		(33)		
52-1952955	10357	Renaissance Reinsurance U.S., Inc.	MD		74	4	0	17	0	25	6	37		89		28		61		
13-1675535	25364	Swiss Reinsurance America Corporation	NY		1,116	47	0	177	0	242	55	376		897		270		627		
13-2918573	42439	The Toa Reinsurance Company Of America	DE											0		28		(28)		
13-5616275	19453	Transatlantic Reinsurance Company	NY			3	4	1		34	4			46		(9)		55		
0999999. Total Authorized - Other U.S. Unaffiliated Insurers					3,924	123	14	1,965	4	998	192	1,379	0	4,675	0	929	0	3,746	0	
AA-1120337		Aspen Insurance UK Limited	GBR		549	22	0	83	0	126	28	183		442		132		310		
AA-1340125		Hannover Rück SE	DEU		1,372	55	4	212	1	330	72	458		1,132		330		802		
1299999. Total Authorized - Other Non-U.S. Insurers					1,921	77	4	295	1	456	100	641	0	1,574	0	462	0	1,112	0	
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)					7,597	305	26	2,354	9	1,579	342	2,937	0	7,552	0	1,518	16	6,018	2,000	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2299999. Total Unauthorized - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-5324100		Taiping Reinsurance Company Limited	HKG		74	0		78		5				83		(2)		85		
AA-1460080		HELVETIA SCHWEIZERISCHE VERSICHERUNGS Devk Rückversicherungs und Beteiligungs AG	CHE		190	6	1	23	0	47	9	46		132		32		100		
AA-1340028			DEU		102	0		79		5				84		(2)		86		
AA-1560350		Farm Mutual Reinsurance Plan Inc.	CAN											0				0	3	
AA-1440060		Länsförsäkringar Sak Försäkringsaktiebolag (publ)	SWE											0				0	50	
2699999. Total Unauthorized - Other Non-U.S. Insurers					366	6	1	180	0	57	9	46	0	299	0	28	0	271	53	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					366	6	1	180	0	57	9	46	0	299	0	28	0	271	53	
3299999. Total Certified - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3599999. Total Certified - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties	
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers			
3699999. Total Certified - Affiliates						0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)						0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool						0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)						0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5099999. Total Reciprocal Jurisdiction - Affiliates						0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)						0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)						7,963	311	27	2,534	9	1,636	351	2,983	0	7,851	0	1,546	16	6,289	2,053
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)						0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9999999 Totals						7,963	311	27	2,534	9	1,636	351	2,983	0	7,851	0	1,546	16	6,289	2,053

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE 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				28	29	30	31	32	33	34	35	36
		Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29-30)	Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un- collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
35-1630739 ..	Home and Farm Insurance Company .....	.....	.....	.....	.....	1,303	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling		0	0	XXX	0	1,303	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999. Total Authorized - Affiliates - U.S. Non-Pool		0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
0899999. Total Authorized - Affiliates		0	0	XXX	0	1,303	0	0	0	0	0	0	0	0	XXX	0	0
95-3187355 ..	Allianz Global Risks US Insurance Company .....	.....	.....	.....	.....	(2)	5	0	3	4	(2)	6	0	6	2	0	0
36-2661954 ..	American Agricultural Insurance Company .....	.....	.....	.....	.....	(7)	7	0	0	0	(7)	7	0	7	3	0	0
47-0574325 ..	Berkley Insurance Company .....	.....	.....	.....	.....	(5)	5	0	0	0	(5)	5	0	5	2	0	0
39-0712210 ..	Church Mutual Insurance Company .....	.....	.....	.....	.....	28	61	0	89	107	28	79	0	79	3	0	2
42-0234980 ..	Employers Mutual Casualty Company .....	.....	.....	.....	.....	(5)	71	0	66	79	(5)	84	0	84	3	0	2
22-2005057 ..	Everest Reinsurance Company .....	.....	.....	.....	.....	(1)	6	0	5	6	(1)	7	0	7	2	0	0
05-0316605 ..	Factory Mutual Insurance Company .....	.....	.....	.....	.....	71	159	0	230	276	71	205	0	205	2	0	4
38-1316179 ..	Farm Bureau Mutual Insurance Company of Michigan .....	.....	.....	.....	.....	28	61	0	89	107	28	79	0	79	4	0	3
42-0245840 ..	Farmers Mutual Hail Insurance Company Of Iowa .....	.....	.....	.....	.....	(3)	3	0	0	0	(3)	3	0	3	4	0	0
13-2673100 ..	General Reinsurance Corporation .....	.....	.....	.....	.....	0	42	0	42	50	0	50	0	50	1	0	1
42-0245990 ..	Grinnell Mutual Reinsurance Company .....	.....	.....	.....	.....	191	1,932	0	2,123	2,548	191	2,357	0	2,357	3	0	66
61-0392792 ..	Kentucky Farm Bureau Mutual Insurance Company .....	.....	.....	.....	.....	28	61	0	89	107	28	79	0	79	3	0	2
04-1543470 ..	Liberty Mutual Insurance Company .....	.....	.....	.....	.....	228	561	0	789	947	228	719	0	719	3	0	20
31-4259550 ..	Motorists Mutual Insurance Company .....	.....	.....	.....	.....	28	61	0	89	107	28	79	0	79	3	0	2
13-4924125 ..	Munich Reinsurance America, Inc. ....	.....	.....	.....	.....	0	29	0	29	35	0	35	0	35	2	0	1
23-2153760 ..	PMA Capital .....	.....	.....	.....	.....	0	0	0	0	0	0	0	0	0	3	0	0
52-1952955 ..	Renaissance Reinsurance U.S., Inc. ....	.....	.....	.....	.....	28	61	0	89	107	28	79	0	79	2	0	2
13-1675535 ..	Swiss Reinsurance America Corporation .....	.....	.....	.....	.....	270	627	0	897	1,076	270	806	0	806	2	0	17
13-2918573 ..	The Toa Reinsurance Company Of America .....	.....	.....	.....	.....	0	0	0	0	0	0	0	0	0	3	0	0
13-5616275 ..	Transatlantic Reinsurance Company .....	.....	.....	.....	.....	(9)	55	0	46	55	(9)	64	0	64	1	0	1
0999999. Total Authorized - Other U.S. Unaffiliated Insurers		0	0	XXX	0	868	3,807	0	4,675	5,610	868	4,742	0	4,742	XXX	0	124
AA-1120337 ..	Aspen Insurance UK Limited .....	.....	.....	.....	.....	132	310	0	442	530	132	398	0	398	3	0	11
AA-1340125 ..	Hannover Rück SE .....	.....	.....	.....	.....	330	802	0	1,132	1,358	330	1,028	0	1,028	2	0	22
1299999. Total Authorized - Other Non-U.S. Insurers		0	0	XXX	0	462	1,112	0	1,574	1,889	462	1,427	0	1,427	XXX	0	33
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		0	0	XXX	0	2,633	4,919	0	6,249	7,499	1,330	6,169	0	6,169	XXX	0	157
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
2299999. Total Unauthorized - Affiliates		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
AA-5324100 ..	Taiping Reinsurance Company Limited .....	.....	104	0001	.....	83	0	0	83	100	(2)	102	102	0	3	3	0
AA-1460080 ..	HELVETIA SCHWEIZERISCHE VERSICHERUNGS .....	.....	156	0002	.....	132	0	0	132	158	32	126	126	0	6	4	0
AA-1340028 ..	Devk Rückversicherungs und Beteiligungs AG .....	.....	106	0003	.....	84	0	0	84	101	(2)	103	103	0	6	3	0
AA-1560350 ..	Farm Mutual Reinsurance Plan Inc. ....	.....	.....	.....	.....	0	0	0	0	0	0	0	0	0	4	0	0
AA-1440060 ..	Länsförsäkringar Sak Försäkringsaktiebolag (publ) .....	.....	.....	.....	.....	0	0	0	0	0	0	0	0	0	6	0	0
2699999. Total Unauthorized - Other Non-U.S. Insurers		0	366	XXX	0	299	0	0	299	359	28	331	331	0	XXX	10	0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE 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				28	29	30	31	32	33	34	35	36
		Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29-30)	Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un- collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	366	XXX	0	299	0	0	299	359	28	331	331	0	XXX	10	0
3299999. Total Certified - Affiliates - U.S. Non-Pool		0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999. Total Certified - Affiliates - Other (Non-U.S.)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3699999. Total Certified - Affiliates		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5099999. Total Reciprocal Jurisdiction - Affiliates		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		0	366	XXX	0	2,932	4,919	0	6,548	7,858	1,358	6,500	331	6,169	XXX	10	157
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999 Totals		0	366	XXX	0	2,932	4,919	0	6,548	7,858	1,358	6,500	331	6,169	XXX	10	157

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37 Current	Overdue				43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)										
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days												42 Total Overdue Cols. 38+39 +40+41
35-1630739 ..	Home and Farm Insurance Company	113					0	113		113	0		0.0	0.0	0.0	YES	0
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling		113	0	0	0	0	0	113	0	113	0	0	0.0	0.0	0.0	XXX	0
0499999. Total Authorized - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
0899999. Total Authorized - Affiliates		113	0	0	0	0	0	113	0	113	0	0	0.0	0.0	0.0	XXX	0
95-3187355 ..	Allianz Global Risks US Insurance Company	1					0	1		1	0		0.0	0.0	0.0	YES	0
36-2661954 ..	American Agricultural Insurance Company						0	0		0	0		0.0	0.0	0.0	YES	0
47-0574325 ..	Berkley Insurance Company						0	0		0	0		0.0	0.0	0.0	YES	0
39-0712210 ..	Church Mutual Insurance Company	4					0	4		4	0		0.0	0.0	0.0	YES	0
42-0234980 ..	Employers Mutual Casualty Company	4					0	4		4	0		0.0	0.0	0.0	YES	0
22-2005057 ..	Everest Reinsurance Company	0					0	0		0	0		0.0	0.0	0.0	YES	0
05-0316605 ..	Factory Mutual Insurance Company						0	0		0	0		0.0	0.0	0.0	YES	0
38-1316179 ..	Farm Bureau Mutual Insurance Company of Michigan	4					0	4		4	0		0.0	0.0	0.0	YES	0
42-0245840 ..	Farmers Mutual Hail Insurance Company Of Iowa						0	0		0	0		0.0	0.0	0.0	YES	0
13-2673100 ..	General Reinsurance Corporation	4					0	4		4	0		0.0	0.0	0.0	YES	0
42-0245990 ..	Grinnell Mutual Reinsurance Company	9					0	9		9	0		0.0	0.0	0.0	YES	0
61-0392792 ..	Kentucky Farm Bureau Mutual Insurance Company	4					0	4		4	0		0.0	0.0	0.0	YES	0
04-1543470 ..	Liberty Mutual Insurance Company	42					0	42		42	0		0.0	0.0	0.0	YES	0
31-4259550 ..	Motorists Mutual Insurance Company	4					0	4		4	0		0.0	0.0	0.0	YES	0
13-4924125 ..	Munich Reinsurance America, Inc.	4					0	4		4	0		0.0	0.0	0.0	YES	0
23-2153760 ..	PMA Capital						0	0		0	0		0.0	0.0	0.0	YES	0
52-1952955 ..	Renaissance Reinsurance U.S., Inc.	4					0	4		4	0		0.0	0.0	0.0	YES	0
13-1675535 ..	Swiss Reinsurance America Corporation	47					0	47		47	0		0.0	0.0	0.0	YES	0
13-2918573 ..	The Toa Reinsurance Company Of America						0	0		0	0		0.0	0.0	0.0	YES	0
13-5616275 ..	Transatlantic Reinsurance Company	7					0	7		7	0		0.0	0.0	0.0	YES	0
0999999. Total Authorized - Other U.S. Unaffiliated Insurers		138	0	0	0	0	0	138	0	138	0	0	0.0	0.0	0.0	XXX	0
AA-1120337 ..	Aspen Insurance UK Limited	22					0	22		22	0		0.0	0.0	0.0	YES	0
AA-1340125 ..	Hannover Rück SE	59					0	59		59	0		0.0	0.0	0.0	YES	0
1299999. Total Authorized - Other Non-U.S. Insurers		81	0	0	0	0	0	81	0	81	0	0	0.0	0.0	0.0	XXX	0
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		332	0	0	0	0	0	332	0	332	0	0	0.0	0.0	0.0	XXX	0
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
2299999. Total Unauthorized - Affiliates		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
AA-5324100 ..	Taiping Reinsurance Company Limited	0					0	0		0	0		0.0	0.0	0.0	YES	0
AA-1460080 ..	HELVETIA SCHWEIZERISCHE VERSICHERUNGS	7					0	7		7	0		0.0	0.0	0.0	YES	0
AA-1340028 ..	Devk Rückversicherungs und Beteiligungs AG	0					0	0		0	0		0.0	0.0	0.0	YES	0
AA-1560350 ..	Farm Mutual Reinsurance Plan Inc.						0	0		0	0		0.0	0.0	0.0	YES	0
AA-1440060 ..	Länsförsäkringar Sak Försäkringsaktiebolag (publ)						0	0		0	0		0.0	0.0	0.0	YES	0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50	
		37	Overdue					43											
			38	39	40	41	42												
		Current	1 - 29 Days	30 - 90 Days	91 - 120 Days	Over 120 Days	Total Overdue Cols. 38+39 +40+41	Total Due Cols. 37+42 (In total should equal Cols. 7+8)											
2699999. Total Unauthorized - Other Non-U.S. Insurers		7	0	0	0	0	0	7	0	0	7	0	0	0.0	0.0	0.0	XXX	0	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		7	0	0	0	0	0	7	0	0	7	0	0	0.0	0.0	0.0	XXX	0	
3299999. Total Certified - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
3599999. Total Certified - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
3699999. Total Certified - Affiliates		0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
5099999. Total Reciprocal Jurisdiction - Affiliates		0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		339	0	0	0	0	0	339	0	0	339	0	0	0.0	0.0	0.0	XXX	0	
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
9999999 Totals		339	0	0	0	0	0	339	0	0	339	0	0	0.0	0.0	0.0	XXX		

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater or [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54 Certified Reinsurer Rating (1 through 6)	55 Effective Date of Certified Reinsurer Rating	56 Percent Collateral Required for Full Credit (0% through 100%)	57 Catastrophe Recoverables Qualifying for Collateral Deferral	58 Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	59 Dollar Amount of Collateral Required (Col. 56 * Col. 58)	60 Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	61 Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	62 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	63 Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	64 Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	65 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	66 Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	67 Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	68 20% of Amount in Col. 67		
35-1630739 ..	Home and Farm Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0499999. Total Authorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0899999. Total Authorized - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
95-3187355 ..	Allianz Global Risks US 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	
47-0574325 ..	Berkley Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
39-0712210 ..	Church Mutual Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0234980 ..	Employers Mutual Casualty Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
22-2005057 ..	Everest Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
05-0316605 ..	Factory Mutual Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
38-1316179 ..	Farm Bureau Mutual Insurance Company of Michigan	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0245840 ..	Farmers Mutual Hail Insurance Company Of Iowa	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-2673100 ..	General Reinsurance Corporation	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0245990 ..	Grinnell Mutual Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
61-0392792 ..	Kentucky Farm Bureau Mutual Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
04-1543470 ..	Liberty Mutual Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
31-4259550 ..	Motorists Mutual Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-4924125 ..	Munich Reinsurance America, Inc.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23-2153760 ..	PMA Capital	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
52-1952955 ..	Renaissance Reinsurance U.S., Inc.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1675535 ..	Swiss Reinsurance America Corporation	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-2918573 ..	The Toa Reinsurance Company Of America	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-5616275 ..	Transatlantic Reinsurance 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	
AA-1120337 ..	Aspen Insurance UK Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340125 ..	Hannover Rück SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1299999. Total Authorized - Other Non-U.S. Insurers				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2299999. Total Unauthorized - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5324100 ..	Taiping Reinsurance Company Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1460080 ..	HELVETIA SCHWEIZERISCHE VERSICHERUNGS	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340028 ..	Devk Rückversicherungs und Beteiligungs AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1560350 ..	Farm Mutual Reinsurance Plan Inc.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1440060 ..	Länsförsäkringar Sak Försäkringsaktiebolag (publ)	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	

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE 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															
		54 Certified Reinsurer Rating (1 through 6)	55 Effective Date of Certified Reinsurer Rating	56 Percent Collateral Required for Full Credit (0% through 100%)	57 Catastrophe Recoverables Qualifying for Collateral Deferral	58 Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	59 Dollar Amount of Collateral Required (Col. 56 * Col. 58)	60 Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	61 Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	62 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	63 Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	64 Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	65 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
														66 Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	67 Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	68 20% of Amount in Col. 67	
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	
3299999. Total Certified - Affiliates - U.S. Non-Pool				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	
3599999. Total Certified - Affiliates - Other (Non-U.S.)				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	
3699999. Total Certified - Affiliates				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool				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	
5099999. Total Reciprocal Jurisdiction - Affiliates				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	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	
9999999 Totals				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71	72	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75	76	77	78
			Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
35-1630739	Home and Farm Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling	0	XXX	XXX	0	0	0	XXX	XXX	0
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	XXX	XXX	0
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	XXX	XXX	0
0899999	Total Authorized - Affiliates	0	XXX	XXX	0	0	0	XXX	XXX	0
95-3187355	Allianz Global Risks US Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
36-2661954	American Agricultural Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
47-0574325	Berkley Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
39-0712210	Church Mutual Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
42-0234980	Employers Mutual Casualty Company	0	XXX	XXX	0	0	0	XXX	XXX	0
22-2005057	Everest Reinsurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
05-0316605	Factory Mutual Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
38-1316179	Farm Bureau Mutual Insurance Company of Michigan	0	XXX	XXX	0	0	0	XXX	XXX	0
42-0245840	Farmers Mutual Hail Insurance Company Of Iowa	0	XXX	XXX	0	0	0	XXX	XXX	0
13-2673100	General Reinsurance Corporation	0	XXX	XXX	0	0	0	XXX	XXX	0
42-0245990	Grinnell Mutual Reinsurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
61-0392792	Kentucky Farm Bureau Mutual Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
04-1543470	Liberty Mutual Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
31-4259550	Motorists Mutual Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
13-4924125	Munich Reinsurance America, Inc.	0	XXX	XXX	0	0	0	XXX	XXX	0
23-2153760	PMA Capital	0	XXX	XXX	0	0	0	XXX	XXX	0
52-1952955	Renaissance Reinsurance U.S., Inc.	0	XXX	XXX	0	0	0	XXX	XXX	0
13-1675535	Swiss Reinsurance America Corporation	0	XXX	XXX	0	0	0	XXX	XXX	0
13-2918573	The Toa Reinsurance Company Of America	0	XXX	XXX	0	0	0	XXX	XXX	0
13-5616275	Transatlantic Reinsurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120337	Aspen Insurance UK Limited	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1340125	Hannover Rück SE	0	XXX	XXX	0	0	0	XXX	XXX	0
1299999	Total Authorized - Other Non-U.S. Insurers	0	XXX	XXX	0	0	0	XXX	XXX	0
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	XXX	XXX	0	0	0	XXX	XXX	0
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	0	XXX	XXX	XXX	0	XXX	0
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	0	XXX	XXX	XXX	0	XXX	0
2299999	Total Unauthorized - Affiliates	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-5324100	Taiping Reinsurance Company Limited	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1460080	HELVETIA SCHWEIZERISCHE VERSICHERUNGS	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1340028	Devk Rückversicherungs und Beteiligungs AG	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1560350	Farm Mutual Reinsurance Plan Inc.	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1440060	Länsförsäkringar Sak Försäkringsaktiebolag (publ)	0	0	0	XXX	XXX	XXX	0	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71	72	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	74 Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75	76	77	78
			Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)			Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
2699999. Total Unauthorized - Other Non-U.S. Insurers		0	0	0	XXX	XXX	XXX	0	XXX	0
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	0	0	XXX	XXX	XXX	0	XXX	0
3299999. Total Certified - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3599999. Total Certified - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3699999. Total Certified - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		0	XXX	XXX	0	0	0	XXX	XXX	0
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		0	XXX	XXX	0	0	0	XXX	XXX	0
5099999. Total Reciprocal Jurisdiction - Affiliates		0	XXX	XXX	0	0	0	XXX	XXX	0
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		0	XXX	XXX	0	0	0	XXX	XXX	0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		0	0	0	0	0	0	0	0	0
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		0	0	0	0	0	0	0	0	0
9999999 Totals		0	0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 4

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

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

	1	2	3
	Name of Reinsurer	Commission Rate	Ceded Premium
1.	Factory Mutual Insurance Company	35.000	447
2.	Hannover Rück SE	25.000	1,372
3.	Swiss Reinsurance America Corporation	20.000	1,116
4.	Grinnel Mutual Reinsurance Corporation	25.000	1,023
5.	Liberty Mutual Insurance Company	25.000	874

B. Report the five largest reinsurance recoverables reported in Schedule F, Part 3, Column 15, due from any one reinsurer (based on the total recoverables, Schedule F, Part 3,Line 9999999, Column 15), the amount of ceded premium, and indicate whether the recoverables are due from an affiliated insurer.

	1	2	3	4
	Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated
6.	Grinnel Mutual Reinsurance Corporation	2,123	1,023	Yes [] No [X]
7.	Home and Farm Insurance Company	1,303	1,752	Yes [X] No []
8.	Hannover Rück SE	1,132	1,372	Yes [] No [X]
9.	Swiss Reinsurance America Corporation	897	1,116	Yes [] No [X]
10.	Liberty Mutual Insurance Company	789	874	Yes [] No [X]

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

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	43,231,172	(2,053,430)	41,177,742
2. Premiums and considerations (Line 15)	8,649,539		8,649,539
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	338,969	(338,969)	0
4. Funds held by or deposited with reinsured companies (Line 16.2)	300,000	(300,000)	0
5. Other assets	1,455,636	(164,679)	1,290,957
6. Net amount recoverable from reinsurers		6,895,002	6,895,002
7. Protected cell assets (Line 27)	0		0
8. Totals (Line 28)	53,975,316	4,037,924	58,013,240
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	5,281,039	4,528,880	9,809,919
10. Taxes, expenses, and other obligations (Lines 4 through 8)	2,583,637	154,482	2,738,119
11. Unearned premiums (Line 9)	17,416,277	2,980,763	20,397,040
12. Advance premiums (Line 10)	532,226		532,226
13. Dividends declared and unpaid (Line 11.1 and 11.2)	0		0
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	1,546,670	(1,546,670)	0
15. Funds held by company under reinsurance treaties (Line 13)	2,053,430	(2,053,430)	0
16. Amounts withheld or retained by company for account of others (Line 14)			0
17. Provision for reinsurance (Line 16)	0		0
18. Other liabilities	434,939	(26,101)	408,838
19. Total liabilities excluding protected cell business (Line 26)	29,848,218	4,037,924	33,886,142
20. Protected cell liabilities (Line 27)			0
21. Surplus as regards policyholders (Line 37)	24,127,098	XXX	24,127,098
22. Totals (Line 38)	53,975,316	4,037,924	58,013,240

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

If yes, give full explanation:

Schedule H - Part 1 - Analysis of Underwriting Operations

N O N E

Schedule H - Part 2 - Reserves and Liabilities

N O N E

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

N O N E

Schedule H - Part 4 - Reinsurance

N O N E

Schedule H - Part 5 - Health Claims

N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE 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
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	Number of Claims Reported Direct and Assumed
				4	5	6	7	8	9			
Direct and Assumed	Ceded	Net (1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
1. Prior.....	XXX.....	XXX.....	XXX.....	(2).....	46.....	0.....	0.....	2.....	0.....	2.....	(46).....	XXX.....
2. 2013.....	28,738.....	6,968.....	21,770.....	16,612.....	2,788.....	263.....	94.....	1,004.....	41.....	285.....	14,956.....	3,647.....
3. 2014.....	28,300.....	9,516.....	18,784.....	20,787.....	8,315.....	183.....	67.....	1,083.....	175.....	76.....	13,496.....	3,777.....
4. 2015.....	27,004.....	8,704.....	18,300.....	14,943.....	4,942.....	169.....	55.....	798.....	134.....	126.....	10,779.....	2,473.....
5. 2016.....	25,892.....	6,529.....	19,363.....	17,133.....	4,015.....	247.....	91.....	943.....	42.....	72.....	14,175.....	2,860.....
6. 2017.....	23,699.....	4,654.....	19,045.....	17,208.....	4,922.....	112.....	31.....	702.....	14.....	22.....	13,055.....	2,652.....
7. 2018.....	19,248.....	4,442.....	14,806.....	9,839.....	586.....	67.....	16.....	524.....	10.....	54.....	9,818.....	1,722.....
8. 2019.....	18,780.....	4,303.....	14,477.....	12,067.....	3,052.....	102.....	34.....	614.....	29.....	273.....	9,668.....	2,056.....
9. 2020.....	19,059.....	3,743.....	15,316.....	9,447.....	764.....	41.....	9.....	548.....	24.....	94.....	9,239.....	1,258.....
10. 2021.....	19,217.....	3,393.....	15,824.....	13,529.....	3,196.....	63.....	13.....	782.....	6.....	172.....	11,159.....	1,423.....
11. 2022.....	19,902.....	3,559.....	16,343.....	10,919.....	832.....	45.....	2.....	543.....	3.....	184.....	10,670.....	1,205.....
12. Totals.....	XXX.....	XXX.....	XXX.....	142,482.....	33,458.....	1,292.....	412.....	7,543.....	478.....	1,360.....	116,969.....	xxx.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	0	0	0	0	0	0	0	0	1	0	0	1	1
2. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2018.....	24	0	0	0	8	0	0	0	8	0	0	40	1
8. 2019.....	48	0	0	0	1	0	0	0	2	0	23	51	1
9. 2020.....	11	0	163	79	0	0	12	4	2	0	7	105	2
10. 2021.....	50	118	326	158	4	0	34	12	9	0	15	135	6
11. 2022	1,707	1,836	1,253	616	9	1	182	61	137	1	194	773	128
12. Totals	1,840	1,954	1,742	853	22	1	228	77	159	1	239	1,105	139

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	1.....
2. 2013.....	17,879.....	2,923.....	14,956.....	62.2.....	41.9.....	68.7.....	0.....	0.....	0.0.....	0.....	0.....
3. 2014.....	22,053.....	8,557.....	13,496.....	77.9.....	89.9.....	71.8.....	0.....	0.....	0.0.....	0.....	0.....
4. 2015.....	15,910.....	5,131.....	10,779.....	58.9.....	58.9.....	58.9.....	0.....	0.....	0.0.....	0.....	0.....
5. 2016.....	18,323.....	4,148.....	14,175.....	70.8.....	63.5.....	73.2.....	0.....	0.....	0.0.....	0.....	0.....
6. 2017.....	18,022.....	4,967.....	13,055.....	76.0.....	106.7.....	68.5.....	0.....	0.....	0.0.....	0.....	0.....
7. 2018.....	10,470.....	612.....	9,858.....	54.4.....	13.8.....	66.6.....	0.....	0.....	0.0.....	24.....	16.....
8. 2019.....	12,834.....	3,115.....	9,719.....	68.3.....	72.4.....	67.1.....	0.....	0.....	0.0.....	48.....	3.....
9. 2020.....	10,224.....	880.....	9,344.....	53.6.....	23.5.....	61.0.....	0.....	0.....	0.0.....	95.....	10.....
10. 2021.....	14,797.....	3,503.....	11,294.....	77.0.....	103.2.....	71.4.....	0.....	0.....	0.0.....	100.....	35.....
11. 2022.....	14,795.....	3,352.....	11,443.....	74.3.....	94.2.....	70.0.....	0.....	0.....	0.0.....	508.....	265.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	775.....	330.....

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	(2).....	0.....	0.....	0.....	0.....	0.....	2.....	(2).....	XXX.....
2. 2013.....	11,281.....	916.....	10,365.....	6,435.....	71.....	231.....	35.....	683.....	(19).....	310.....	7,262.....	2,959.....
3. 2014.....	12,113.....	3,735.....	8,378.....	7,681.....	2,061.....	228.....	41.....	680.....	33.....	291.....	6,454.....	2,853.....
4. 2015.....	11,833.....	3,364.....	8,469.....	8,722.....	2,459.....	354.....	67.....	719.....	53.....	309.....	7,216.....	2,550.....
5. 2016.....	11,541.....	2,436.....	9,105.....	7,641.....	1,455.....	280.....	60.....	681.....	(10).....	219.....	7,097.....	2,465.....
6. 2017.....	10,779.....	1,088.....	9,691.....	7,581.....	626.....	365.....	85.....	621.....	17.....	185.....	7,839.....	2,068.....
7. 2018.....	8,755.....	981.....	7,774.....	4,496.....	273.....	198.....	59.....	505.....	(59).....	236.....	4,926.....	1,533.....
8. 2019.....	8,439.....	979.....	7,460.....	5,454.....	1,005.....	108.....	36.....	494.....	(11).....	166.....	5,026.....	1,493.....
9. 2020.....	8,168.....	780.....	7,388.....	3,613.....	518.....	85.....	26.....	553.....	(20).....	88.....	3,727.....	1,086.....
10. 2021.....	7,774.....	772.....	7,002.....	3,374.....	316.....	24.....	8.....	475.....	3.....	62.....	3,546.....	1,129.....
11. 2022.....	7,701.....	747.....	6,954.....	2,142.....	0.....	7.....	0.....	490.....	0.....	48.....	2,639.....	1,093.....
12. Totals.....	XXX.....	XXX.....	XXX.....	57,137.....	8,784.....	1,880.....	417.....	5,901.....	(13).....	1,916.....	55,730.....	xxx.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2014.....	1	0	0	0	0	0	0	0	2	0	0	3	2
4. 2015.....	0	0	0	0	0	0	0	0	1	0	0	1	1
5. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2018.....	162	2	0	0	14	0	0	0	6	0	0	180	2
8. 2019.....	(3)	0	0	0	3	0	0	0	2	0	17	2	1
9. 2020.....	259	0	112	19	17	0	32	12	14	0	7	403	9
10. 2021.....	807	16	223	37	15	0	66	23	33	0	34	1,068	27
11. 2022.....	1,147	0	880	140	4	0	405	138	134	0	105	2,292	129
12. Totals.....	2,373	18	1,215	196	53	0	503	173	192	0	163	3,949	171

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	XXX.....	.....0	.....0
2. 2013.....	7,349.....	87.....	7,262.....	65.1.....	9.5.....	70.1.....	.....0	.....0	.....0.0	.....0	.....0
3. 2014.....	8,592.....	2,135.....	6,457.....	70.9.....	57.2.....	77.1.....	.....0	.....0	.....0.0	.....1	.....2
4. 2015.....	9,796.....	2,579.....	7,217.....	82.8.....	76.7.....	85.2.....	.....0	.....0	.....0.0	.....0	.....1
5. 2016.....	8,602.....	1,505.....	7,097.....	74.5.....	61.8.....	77.9.....	.....0	.....0	.....0.0	.....0	.....0
6. 2017.....	8,567.....	728.....	7,839.....	79.5.....	66.9.....	80.9.....	.....0	.....0	.....0.0	.....0	.....0
7. 2018.....	5,381.....	275.....	5,106.....	61.5.....	28.0.....	65.7.....	.....0	.....0	.....0.0	160.....	20.....
8. 2019.....	6,058.....	1,030.....	5,028.....	71.8.....	105.2.....	67.4.....	.....0	.....0	.....0.0	(3).....	5.....
9. 2020.....	4,685.....	555.....	4,130.....	57.4.....	71.2.....	55.9.....	.....0	.....0	.....0.0	352.....	51.....
10. 2021.....	5,017.....	403.....	4,614.....	64.5.....	52.2.....	65.9.....	.....0	.....0	.....0.0	977.....	91.....
11. 2022.....	5,209.....	278.....	4,931.....	67.6.....	37.2.....	70.9.....	0.....	0.....	0.0.....	1,887.....	405.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	3,374.....	575.....

Schedule P - Part 1C - Commercial Auto/Truck Liability/Medical

N O N E

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

N O N E

Schedule P - Part 1E - Commercial Multiple Peril

N O N E

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 BUCKEYE STATE 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....
2. 2013.....	1,057.....	679.....	378.....	24	0	1	0	11	0	0	36	18
3. 2014.....	1,128.....	743.....	385.....	802	640	0	0	15	0	0	177	21
4. 2015.....	1,149.....	732.....	417.....	125	41	16	13	19	0	0	106	17
5. 2016.....	1,162.....	703.....	459.....	59	0	16	0	21	0	0	96	13
6. 2017.....	1,062.....	666.....	396.....	942	857	0	0	15	0	0	100	17
7. 2018.....	795.....	555.....	240.....	295	147	6	2	10	0	0	162	8
8. 2019.....	536.....	506.....	30.....	1,385	1,338	0	0	6	0	0	53	1
9. 2020.....	563.....	540.....	23.....	0	0	16	15	4	0	0	5	1
10. 2021.....	609.....	585.....	24.....	1,900	1,853	0	0	0	0	0	47	1
11. 2022.....	622.....	597.....	25.....	0	0	0	0	0	0	0	0	0
12. Totals	XXX	XXX	XXX	5,532	4,876	55	30	101	0	0	782	xxx

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2013.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2014.....	0	0	0	0	0	0	0	0	0	0	0	0	0
4. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
5. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0
6. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0
8. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2020.....	24	23	48	45	5	5	1	0	1	0	0	6	1
10. 2021.....	0	0	96	90	0	0	1	0	0	0	0	7	0
11. 2022.....	0	0	336	315	0	0	8	3	0	0	0	26	0
12. Totals	24	23	480	450	5	5	10	3	1	0	0	39	1

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....0	.....0	XXX.....	.....0	.....0
2. 2013.....	.....36	.....0	.....36	.....3.4	.....0.0	.....9.5	.....0	.....0	.....0.0	.....0	.....0
3. 2014.....	.....817	.....640	.....177	.....72.4	.....86.1	.....46.0	.....0	.....0	.....0.0	.....0	.....0
4. 2015.....	.....160	.....54	.....106	.....13.9	.....7.4	.....25.4	.....0	.....0	.....0.0	.....0	.....0
5. 2016.....	.....96	.....0	.....96	.....8.3	.....0.0	.....20.9	.....0	.....0	.....0.0	.....0	.....0
6. 2017.....	.....957	.....857	.....100	.....90.1	.....128.7	.....25.3	.....0	.....0	.....0.0	.....0	.....0
7. 2018.....	.....311	.....149	.....162	.....39.1	.....26.8	.....67.5	.....0	.....0	.....0.0	.....0	.....0
8. 2019.....	.....1,391	.....1,338	.....53	.....259.5	.....264.4	.....176.7	.....0	.....0	.....0.0	.....0	.....0
9. 2020.....	.....99	.....88	.....11	.....17.6	.....16.3	.....47.8	.....0	.....0	.....0.0	.....4	.....2
10. 2021.....	.....1,997	.....1,943	.....54	.....327.9	.....332.1	.....225.0	.....0	.....0	.....0.0	.....6	.....1
11. 2022.....	.....344	.....318	.....26	.....55.3	.....53.3	.....104.0	.....0	.....0	.....0.0	.....21	.....5
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	31	8

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE 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
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	Number of Claims Reported Direct and Assumed
	Direct and Assumed	Ceded	Net (1 - 2)	4	5	6	7	8	9	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	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	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
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	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 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 BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 11 - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	29	9	15	0	0	0	0	35	XXX.....
2. 2021.....	2,346	437	1,909	1,232	90	6	0	49	0	3	1,197	XXX.....
3. 2022	2,331	451	1,880	1,276	118	5	0	55	0	0	1,218	XXX
4. Totals	XXX	XXX	XXX	2,537	217	26	0	104	0	3	2,450	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior	0	0	3	1	0	0	0	0	0	0	0	2	0
2. 2021	5	0	6	2	1	0	1	0	2	0	0	13	1
3. 2022	295	308	22	5	0	0	6	2	12	0	10	20	11
4. Totals	300	308	31	8	1	0	7	2	14	0	10	35	12

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	2	0
2. 2021.....	1,302	92	1,210	55.5	21.1	63.4	0	0	0.0	9	4
3. 2022	1,671	433	1,238	71.7	96.0	65.9	0	0	0.0	4	16
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	15	20

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE 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
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	(29).....	37.....	2.....	0.....	5.....	0.....	30.....	(59).....	XXX.....
2. 2021.....	6,999.....	628.....	6,371.....	4,707.....	73.....	11.....	0.....	346.....	0.....	769.....	4,991.....	1,493.....
3. 2022.....	7,384.....	659.....	6,725.....	5,421.....	0.....	13.....	0.....	361.....	0.....	330.....	5,795.....	1,548.....
4. Totals.....	XXX.....	XXX.....	XXX.....	10,099.....	110.....	26.....	0.....	712.....	0.....	1,129.....	10,727.....	xxx.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior	(42)	0	42	0	0	0	4	2	2	0	43	4	2
2. 2021	(35)	0	83	1	0	0	12	4	0	0	35	55	0
3. 2022	(104)	258	291	2	0	0	62	21	48	0	359	16	46
4. Totals	(181)	258	416	3	0	0	78	27	50	0	437	75	48

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	0.....	4.....
2. 2021.....	5,124.....	78.....	5,046.....	73.2.....	12.4.....	79.2.....	0.....	0.....	0.0.....	47.....	8.....
3. 2022.....	6,092.....	281.....	5,811.....	82.5.....	42.6.....	86.4.....	0.....	0.....	0.0.....	(73).....	89.....
4. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	(26).....	101.....

Schedule P - Part 1K - Fidelity/Surety
N O N E

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

Schedule P - Part 1M - International
N O N E

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

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

Schedule P - Part 1P - Reinsurance - Nonproportional Assumed Financial Lines
N O N E

Schedule P - Part 1R - Section 1 - Products Liability - Occurrence
N O N E

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 BUCKEYE STATE 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.....	869	559	727	723	923	903	899	680	629	581	(48)	(99)
2. 2013.....	14,392	14,114	14,156	14,047	14,094	14,020	14,010	13,993	13,993	13,993	0	0
3. 2014.....	XXX	12,864	12,464	12,507	12,550	12,589	12,589	12,588	12,588	12,588	0	0
4. 2015.....	XXX	XXX	10,399	9,961	10,160	10,112	10,113	10,112	10,116	10,115	(1)	3
5. 2016.....	XXX	XXX	XXX	13,169	13,173	13,496	13,251	13,186	13,274	13,274	0	88
6. 2017.....	XXX	XXX	XXX	XXX	12,598	12,528	12,638	12,377	12,361	12,367	6	(10)
7. 2018.....	XXX	XXX	XXX	XXX	XXX	9,456	9,349	9,408	9,300	9,336	36	(72)
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	9,357	9,413	9,203	9,132	(71)	(281)
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,279	8,880	8,818	(62)	(461)
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,061	10,509	(552)	XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,767	XXX	XXX
12. Totals											(692)	(832)

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

1. Prior.....	3,923	3,474	3,420	3,421	3,407	3,380	3,377	3,370	3,256	3,254	(2)	(116)
2. 2013.....	6,977	7,407	6,726	6,539	6,545	6,578	6,579	6,560	6,560	6,560	0	0
3. 2014.....	XXX	5,584	6,248	5,812	5,796	5,843	5,813	5,812	5,810	5,808	(2)	(4)
4. 2015.....	XXX	XXX	5,436	6,496	6,709	6,621	6,579	6,556	6,552	6,550	(2)	(6)
5. 2016.....	XXX	XXX	XXX	5,664	7,004	6,716	6,452	6,422	6,422	6,406	(16)	(16)
6. 2017.....	XXX	XXX	XXX	XXX	6,554	7,768	7,526	7,231	7,235	7,235	0	4
7. 2018.....	XXX	XXX	XXX	XXX	XXX	5,144	4,802	4,594	4,481	4,536	55	(58)
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	5,294	4,925	4,783	4,521	(262)	(404)
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,087	3,797	3,543	(254)	(544)
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,517	4,109	(408)	XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,307	XXX	XXX
12. Totals											(891)	(1,144)

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

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	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												

SCHEDULE P - PART 2D - 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	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												

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

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	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												

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 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	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				XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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	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				XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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	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				XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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

1. Prior.....	173	82	61	61	61	61	61	61	61	61	0	0
2. 2013.....	181	90	48	25	25	25	25	25	25	25	0	0
3. 2014.....	XXX	313	242	187	162	162	162	162	162	162	0	0
4. 2015.....	XXX	XXX	181	165	113	87	87	87	87	87	0	0
5. 2016.....	XXX	XXX	XXX	185	342	291	74	75	75	75	0	0
6. 2017.....	XXX	XXX	XXX	XXX	203	179	87	85	85	85	0	0
7. 2018.....	XXX	XXX	XXX	XXX	XXX	338	156	157	152	152	0	(5)
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	16	53	50	47	(3)	(6)
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24	8	6	(2)	(18)
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	70	54	(16)	XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26	XXX	XXX
12. Totals											(21)	(29)

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	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				XXX
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE 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.....	71.....	294.....	226.....	(68).....	155.....
2. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,157.....	1,159.....	2.....	XXX.....
3. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,171.....	XXX.....	XXX.....
4. Totals											(66).....	155.....

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	211.....	277.....	153.....	(124).....	(58).....
2. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	4,619.....	4,700.....	81.....	XXX.....
3. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	5,402.....	XXX.....	XXX.....
4. Totals											(43).....	(58).....

SCHEDULE P - PART 2K - FIDELITY/SURETY

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

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

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

SCHEDULE P - PART 2M - INTERNATIONAL

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.....	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											.....	.....

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 2R - Section 1 - Products Liability - Occurrence

N O N E

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

N O N E

Schedule P - Part 2S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 2T - Warranty

N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022		
1. Prior.....	000.....	356.....	650.....	644.....	897.....	903.....	899.....	680.....	629.....	581.....	180.....	.....
2. 2013.....	11,585.....	13,800.....	13,878.....	13,947.....	14,094.....	14,020.....	14,010.....	13,993.....	13,993.....	13,993.....	2,130.....	1,517.....
3. 2014.....	XXX.....	10,790.....	11,895.....	12,363.....	12,412.....	12,589.....	12,589.....	12,588.....	12,588.....	12,588.....	2,151.....	1,626.....
4. 2015.....	XXX.....	XXX.....	8,054.....	9,623.....	9,801.....	10,112.....	10,113.....	10,112.....	10,116.....	10,115.....	1,399.....	1,074.....
5. 2016.....	XXX.....	XXX.....	XXX.....	10,920.....	12,865.....	12,996.....	13,061.....	13,157.....	13,274.....	13,274.....	1,502.....	1,358.....
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	10,981.....	12,138.....	12,427.....	12,377.....	12,361.....	12,367.....	1,527.....	1,125.....
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	8,317.....	9,122.....	9,253.....	9,278.....	9,304.....	1,004.....	717.....
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	7,904.....	8,905.....	9,051.....	9,083.....	1,171.....	884.....
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	7,595.....	8,541.....	8,715.....	1,003.....	253.....
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	8,275.....	10,383.....	1,120.....	297.....
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	10,130.....	828.....	249.....

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

1. Prior.....	000.....	2,096.....	2,900.....	3,236.....	3,287.....	3,380.....	3,377.....	3,370.....	3,256.....	3,254.....	98.....	.....
2. 2013.....	3,409.....	5,469.....	6,158.....	6,448.....	6,545.....	6,544.....	6,547.....	6,560.....	6,560.....	6,560.....	1,694.....	1,265.....
3. 2014.....	XXX.....	2,918.....	4,627.....	5,281.....	5,662.....	5,780.....	5,812.....	5,811.....	5,807.....	5,807.....	1,498.....	1,353.....
4. 2015.....	XXX.....	XXX.....	2,672.....	4,539.....	6,126.....	6,468.....	6,537.....	6,552.....	6,551.....	6,550.....	1,260.....	1,289.....
5. 2016.....	XXX.....	XXX.....	XXX.....	3,074.....	5,190.....	5,965.....	6,337.....	6,385.....	6,386.....	6,406.....	1,148.....	1,317.....
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	3,402.....	5,781.....	6,941.....	7,175.....	7,235.....	7,235.....	1,010.....	1,058.....
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,589.....	3,979.....	4,210.....	4,266.....	4,362.....	781.....	750.....
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,387.....	3,900.....	4,506.....	4,521.....	811.....	681.....
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,583.....	2,698.....	3,154.....	884.....	193.....
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,882.....	3,074.....	929.....	173.....
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,149.....	800.....	164.....

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

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.....	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 3D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)

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.....	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 3E - COMMERCIAL MULTIPLE PERIL

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.....	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.....	.....	.....	.....

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022		
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.....	XXX.....	XXX.....						
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.....		

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.....	XXX.....	XXX.....						
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.....		

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

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.....								XXX.....	XXX.....
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	XXX.....
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

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

1. Prior.....	000.....	61.....	61.....	61.....	61.....	61.....	61.....	61.....	61.....	61.....	61.....	8.....	
2. 2013.....	25.....	25.....	25.....	25.....	25.....	25.....	25.....	25.....	25.....	25.....	25.....	8.....	10.....
3. 2014.....	XXX.....	137.....	137.....	162.....	162.....	162.....	162.....	162.....	162.....	162.....	162.....	16.....	5.....
4. 2015.....	XXX.....	XXX.....	32.....	85.....	85.....	87.....	87.....	87.....	87.....	87.....	87.....	14.....	3.....
5. 2016.....	XXX.....	XXX.....	XXX.....	21.....	21.....	24.....	74.....	75.....	75.....	75.....	75.....	11.....	2.....
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....	27.....	39.....	85.....	85.....	85.....	85.....	85.....	16.....	1.....
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3.....	10.....	152.....	152.....	152.....	152.....	4.....	4.....
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	47.....	47.....	47.....	47.....	1.....	0.....
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	47.....	47.....	47.....	1.....	0.....
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....		

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.....	XXX.....	XXX.....							
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.....			

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022		
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	000.....	189.....	224.....	XXX.....	XXX.....
2. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,048.....	1,148.....	XXX.....	XXX.....
3. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,163.....	XXX.....	XXX.....

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	000.....	215.....	151.....		
2. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	4,437.....	4,645.....	1,310.....	183.....
3. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	5,434.....	1,321.....	181.....

SCHEDULE P - PART 3K - FIDELITY/SURETY

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

NONE

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

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

NONE

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.....								XXX.....	XXX.....
6. 2017.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
7. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
8. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
9. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
10. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	XXX.....
11. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

NONE

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

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

Schedule P - Part 3P - Reinsurance - Nonproportional Assumed Financial Lines
N O N E

Schedule P - Part 3R - Section 1 - Product Liability - Occurrence
N O N E

Schedule P - Part 3R - Section 2 - Product Liability - Claims-Made
N O N E

Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty
N O N E

Schedule P - Part 3T - Warranty
N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE 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	2	3	4	5	6	7	8	9	10
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1. Prior.....	362	129	0	0	0	0	0	0	0	0
2. 2013.....	1,147	267	175	0	0	0	0	0	0	0
3. 2014.....	XXX	807	281	100	0	0	0	0	0	0
4. 2015.....	XXX	XXX	1,079	211	87	0	0	0	0	0
5. 2016.....	XXX	XXX	XXX	887	199	82	0	0	0	0
6. 2017.....	XXX	XXX	XXX	XXX	884	161	92	0	0	0
7. 2018.....	XXX	XXX	XXX	XXX	XXX	666	194	95	0	0
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	739	200	87	0
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	772	184	92
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	887	190
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	758

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

1. Prior.....	1,139	260	0	0	0	0	0	0	0	0
2. 2013.....	1,574	1,005	228	0	0	0	0	0	0	0
3. 2014.....	XXX	1,217	665	174	0	0	0	0	0	0
4. 2015.....	XXX	XXX	1,059	654	174	0	0	0	0	0
5. 2016.....	XXX	XXX	XXX	1,113	721	224	0	0	0	0
6. 2017.....	XXX	XXX	XXX	XXX	1,330	811	194	0	0	0
7. 2018.....	XXX	XXX	XXX	XXX	XXX	1,322	393	179	0	0
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	1,502	363	147	0
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,393	299	113
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,247	229
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,007

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

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	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 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	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 4E - COMMERCIAL MULTIPLE PERIL

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	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	

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE 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	2	3	4	5	6	7	8	9	10
	2013	2014	2015	2016	2017	2018	2019	2020	2021	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	XX					
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 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	XX						
7. 2018.....	XXX	XXX	XX	XX	XX					
8. 2019.....	XXX	XXX	XX	XX	XX	XX				
9. 2020.....	XXX	XXX	XX	XXX	XX	XX	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 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	XX						
7. 2018.....	XXX	XXX	XX	XX	XX					
8. 2019.....	XXX	XXX	XX	XX	XX	XX				
9. 2020.....	XXX	XXX	XX	XXX	XX	XX	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 4H - SECTION 1 - OTHER LIABILITY - OCCURRENCE

1. Prior.....	79	21	0	0	0	0	0	0	0	0
2. 2013.....	120	65	23	0	0	0	0	0	0	0
3. 2014.....	XXX	127	69	25	0	0	0	0	0	0
4. 2015.....	XXX	XXX	138	76	28	0	0	0	0	0
5. 2016.....	XXX	XXX	XXX	153	84	31	0	0	0	0
6. 2017.....	XXX	XXX	XXX	XXX	169	93	2	0	0	0
7. 2018.....	XXX	XXX	XXX	XXX	XXX	185	4	3	0	0
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	16	6	3	0
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24	7	4
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	23	7
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26

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	XX						
7. 2018.....	XXX	XXX	XX	XX	XX					
8. 2019.....	XXX	XXX	XX	XX	XX	XX				
9. 2020.....	XXX	XXX	XX	XXX	XX	XX	XXX			
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE 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	19	6	2
2. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	5
3. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	445	175	44
2. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	418	90
3. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	330

SCHEDULE P - PART 4K - FIDELITY/SURETY

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

NONE

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

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

NONE

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 4R - Section 1 - Products Liability - Occurrence

N O N E

Schedule P - Part 4R - Section 2 - Products Liability - Claims-Made

N O N E

Schedule P - Part 4S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 4T - Warranty

N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE 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	2	3	4	5	6	7	8	9	10
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1. Prior.....	495	63	80	19	16	1	0	1	0	0
2. 2013.....	1,724	2,097	2,113	2,114	2,123	2,125	2,130	2,130	2,130	2,130
3. 2014.....	XXX	1,729	2,108	2,126	2,139	2,144	2,144	2,151	2,151	2,151
4. 2015.....	XXX	XXX	1,070	1,369	1,386	1,393	1,396	1,398	1,399	1,399
5. 2016.....	XXX	XXX	XXX	1,171	1,475	1,486	1,493	1,501	1,502	1,502
6. 2017.....	XXX	XXX	XXX	XXX	1,261	1,501	1,514	1,520	1,526	1,527
7. 2018.....	XXX	XXX	XXX	XXX	XXX	871	987	998	1,003	1,004
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	930	1,151	1,168	1,171
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	850	989	1,003
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	717	1,120
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	828

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1. Prior.....	33	7	15	11	8	7	7	1	1	1
2. 2013.....	407	11	10	10	0	0	0	0	0	0
3. 2014.....	XXX	501	28	16	1	0	0	0	0	0
4. 2015.....	XXX	XXX	338	13	4	0	0	0	0	0
5. 2016.....	XXX	XXX	XXX	367	10	10	5	1	0	0
6. 2017.....	XXX	XXX	XXX	XXX	257	8	5	0	0	0
7. 2018.....	XXX	XXX	XXX	XXX	XXX	105	7	6	2	1
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	155	13	2	1
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	105	10	2
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	274	6
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	128

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1. Prior.....	375	59	105	23	17	1	0	(5)	0	0
2. 2013.....	3,352	3,606	3,630	3,632	3,638	3,642	3,647	3,647	3,647	3,647
3. 2014.....	XXX	3,565	3,742	3,755	3,761	3,770	3,770	3,777	3,777	3,777
4. 2015.....	XXX	XXX	2,264	2,446	2,460	2,467	2,470	2,472	2,473	2,473
5. 2016.....	XXX	XXX	XXX	2,650	2,830	2,849	2,852	2,860	2,860	2,860
6. 2017.....	XXX	XXX	XXX	XXX	2,476	2,623	2,639	2,642	2,651	2,652
7. 2018.....	XXX	XXX	XXX	XXX	XXX	1,614	1,707	1,719	1,721	1,722
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	1,938	2,043	2,055	2,056
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,193	1,250	1,258
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,221	1,423
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,205

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE 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	2	3	4	5	6	7	8	9	10
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1. Prior.....	325	73	10	8	5	2	0	0	0	0
2. 2013.....	1,344	1,653	1,678	1,686	1,691	1,691	1,692	1,694	1,694	1,694
3. 2014.....	XXX	1,238	1,462	1,480	1,491	1,495	1,497	1,498	1,498	1,498
4. 2015.....	XXX	XXX	949	1,200	1,242	1,257	1,259	1,260	1,260	1,260
5. 2016.....	XXX	XXX	XXX	843	1,088	1,130	1,142	1,146	1,146	1,148
6. 2017.....	XXX	XXX	XXX	XXX	775	970	999	1,005	1,010	1,010
7. 2018.....	XXX	XXX	XXX	XXX	XXX	618	753	775	778	781
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	609	788	809	811
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	702	864	884
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	752	929
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	800

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1. Prior.....	109	38	25	16	7	6	5	0	0	0
2. 2013.....	329	59	18	7	0	2	2	0		0
3. 2014.....	XXX	357	79	29	10	5	3	2	2	2
4. 2015.....	XXX	XXX	417	98	23	8	3	1	1	1
5. 2016.....	XXX	XXX	XXX	374	73	17	4	1	1	0
6. 2017.....	XXX	XXX	XXX	XXX	275	55	18	5	0	0
7. 2018.....	XXX	XXX	XXX	XXX	XXX	162	24	8	4	2
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	144	19	4	1
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	112	28	9
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	133	27
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	129

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1. Prior.....	299	44	9	12	4	3	0	(5)	0	0
2. 2013.....	2,620	2,929	2,944	2,949	2,955	2,958	2,959	2,959	2,959	2,959
3. 2014.....	XXX	2,650	2,831	2,846	2,851	2,853	2,853	2,853	2,853	2,853
4. 2015.....	XXX	XXX	2,344	2,514	2,540	2,548	2,550	2,550	2,550	2,550
5. 2016.....	XXX	XXX	XXX	2,220	2,435	2,454	2,463	2,465	2,465	2,465
6. 2017.....	XXX	XXX	XXX	XXX	1,889	2,044	2,067	2,068	2,068	2,068
7. 2018.....	XXX	XXX	XXX	XXX	XXX	1,404	1,519	1,532	1,532	1,533
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	1,390	1,487	1,493	1,493
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	969	1,082	1,086
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,034	1,129
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,093

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 1
N O N E

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 2
N O N E

Schedule P - Part 5C - Commercial Auto/Truck Liability/Medical - Section 3
N O N E

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

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

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

Schedule P - Part 5E - Commercial Multiple Peril - Section 1
N O N E

Schedule P - Part 5E - Commercial Multiple Peril - Section 2
N O N E

Schedule P - Part 5E - Commercial Multiple Peril - Section 3
N O N E

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 BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1. Prior.....	1	8	0	0	0	0	0	0	0	
2. 2013.....	5	8	8	8	8	8	8	8	8	8
3. 2014.....	XXX	15	15	16	16	16	16	16	16	16
4. 2015.....	XXX	XXX	11	13	13	14	14	14	14	14
5. 2016.....	XXX	XXX	XXX	8	8	9	10	11	11	11
6. 2017.....	XXX	XXX	XXX	XXX	12	15	16	16	16	16
7. 2018.....	XXX	XXX	XXX	XXX	XXX	2	3	4	4	4
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	0	1	1	1
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
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	2	3	4	5	6	7	8	9	10
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1. Prior.....	6	0	0	0	0	0	0	0	0	0
2. 2013.....	10	0	0	0	0	0	0	0		0
3. 2014.....	XXX	5	1	0	0	0	0	0		0
4. 2015.....	XXX	XXX	3	1	1	0	0	0		0
5. 2016.....	XXX	XXX	XXX	3	1	1	0	0		0
6. 2017.....	XXX	XXX	XXX	XXX	3	1	0	0		0
7. 2018.....	XXX	XXX	XXX	XXX	XXX	3	1	1		0
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	1	0		0
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	1	1
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3A

Years in Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022
1. Prior.....	(1)	3	0	0	0	0	0	0	0	0
2. 2013.....	16	18	18	18	18	18	18	18	18	18
3. 2014.....	XXX	21	21	21	21	21	21	21	21	21
4. 2015.....	XXX	XXX	16	16	17	17	17	17	17	17
5. 2016.....	XXX	XXX	XXX	11	11	12	12	13	13	13
6. 2017.....	XXX	XXX	XXX	XXX	16	17	17	17	17	17
7. 2018.....	XXX	XXX	XXX	XXX	XXX	6	7	8	8	8
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	1
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	1	1
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1
11. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 5R - Products Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 5R - Products Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 5R - Products Liability - Occurrence - Section 3A

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 5T - Warranty - Section 1

N O N E

Schedule P - Part 5T - Warranty - Section 2

N O N E

Schedule P - Part 5T - Warranty - Section 3

N O N E

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 1

N O N E

Schedule P - Part 6C - Commercial Auto/Truck Liability/Medical - Section 2

N O N E

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 1

N O N E

Schedule P-Part 6D-Workers' Compensation (Excluding Excess Workers' Compensation)-Section 2

N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL

SECTION 1

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

SECTION 2

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

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2013.....	1,057	1,057	1,057	1,057	1,057	1,057	1,057	1,057	1,057	1,057	
3. 2014.....	XXX	1,128	1,128	1,128	1,128	1,128	1,128	1,128	1,128	1,128	
4. 2015.....	XXX	XXX	1,149	1,149	1,149	1,149	1,149	1,149	1,149	1,149	
5. 2016.....	XXX	XXX	XXX	1,162	1,162	1,162	1,162	1,162	1,162	1,162	
6. 2017.....	XXX	XXX	XXX	XXX	1,062	1,062	1,062	1,062	1,062	1,062	
7. 2018.....	XXX	XXX	XXX	XXX	XXX	795	795	795	795	795	
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	536	536	536	536	
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	563	563	563	
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	609	609	
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	622	622
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	622
13. Earned Premiums (Sch P-Pt. 1)	1,057	1,128	1,149	1,162	1,062	795	536	563	609	622	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	
2. 2013.....	679	679	679	679	679	679	679	679	679	679	
3. 2014.....	XXX	743	743	743	743	743	743	743	743	743	
4. 2015.....	XXX	XXX	732	732	732	732	732	732	732	732	
5. 2016.....	XXX	XXX	XXX	703	703	703	703	703	703	703	
6. 2017.....	XXX	XXX	XXX	XXX	666	666	666	666	666	666	
7. 2018.....	XXX	XXX	XXX	XXX	XXX	555	555	555	555	555	
8. 2019.....	XXX	XXX	XXX	XXX	XXX	XXX	506	506	506	506	
9. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	540	540	540	
10. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	585	585	
11. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	597	597
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	597
13. Earned Premiums (Sch P-Pt. 1)	679	743	732	703	666	555	506	540	585	597	XXX

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

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

Schedule P - Part 6M - International - Section 1
N O N E

Schedule P - Part 6M - International - Section 2
N O N E

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

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

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

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

Schedule P - Part 6R - Products Liability - Occurrence - Section 1A
N O N E

Schedule P - Part 6R - Products Liability - Occurrence - Section 2A
N O N E

Schedule P - Part 6R - Products Liability - Claims-Made - Section 1B
N O N E

Schedule P - Part 6R - Products Liability - Claims-Made - Section 2B
N O N E

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (\$000 OMITTED)

SECTION 1

Schedule P - Part 1	1	2	3	4	5	6
	Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	1,105		0.0	16,954		0.0
2. Private Passenger Auto Liability/ Medical	3,949		0.0	7,193		0.0
3. Commercial Auto/Truck Liability/ Medical			0.0	0		0.0
4. Workers' Compensation			0.0	0		0.0
5. Commercial Multiple Peril			0.0	0		0.0
6. Medical Professional Liability - Occurrence			0.0	0		0.0
7. Medical Professional Liability - Claims - Made			0.0	0		0.0
8. Special Liability			0.0	0		0.0
9. Other Liability - Occurrence	39		0.0	25		0.0
10. Other Liability - Claims-Made			0.0	0		0.0
11. Special Property	35		0.0	1,891		0.0
12. Auto Physical Damage	75		0.0	7,221		0.0
13. Fidelity/Surety			0.0	0		0.0
14. Other			0.0	0		0.0
15. International			0.0	0		0.0
16. Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX	XXX	XXX
17. Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX	XXX	XXX
18. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX	XXX	XXX
19. Products Liability - Occurrence			0.0	0		0.0
20. Products Liability - Claims-Made			0.0	0		0.0
21. Financial Guaranty/Mortgage Guaranty			0.0	0		0.0
22. Warranty			0.0	0		0.0
23. Totals	5,203	0	0.0	33,285	0	0.0

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2013	2014	2015	2016	2017	2018	2019	2020	2021	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	XX					
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	2	3	4	5	6	7	8	9	10
	2013	2014	2015	2016	2017	2018	2019	2020	2021	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	XX					
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 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 BUCKEYE STATE 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	1,105		0.0	16,954		0.0
2.	Private Passenger Auto Liability/Medical	3,949		0.0	7,193		0.0
3.	Commercial Auto/Truck Liability/Medical			0.0	0		0.0
4.	Workers' Compensation			0.0	0		0.0
5.	Commercial Multiple Peril			0.0	0		0.0
6.	Medical Professional Liability - Occurrence			0.0	0		0.0
7.	Medical Professional Liability - Claims - Made			0.0	0		0.0
8.	Special Liability			0.0	0		0.0
9.	Other Liability - Occurrence	39		0.0	25		0.0
10.	Other Liability - Claims-Made			0.0	0		0.0
11.	Special Property	35		0.0	1,891		0.0
12.	Auto Physical Damage	75		0.0	7,221		0.0
13.	Fidelity/Surety			0.0	0		0.0
14.	Other			0.0	0		0.0
15.	International			0.0	0		0.0
16.	Reinsurance - Nonproportional Assumed Property			0.0	0		0.0
17.	Reinsurance - Nonproportional Assumed Liability			0.0	0		0.0
18.	Reinsurance - Nonproportional Assumed Financial Lines			0.0	0		0.0
19.	Products Liability - Occurrence			0.0	0		0.0
20.	Products Liability - Claims-Made			0.0	0		0.0
21.	Financial Guaranty/Mortgage Guaranty			0.0	0		0.0
22.	Warranty			0.0	0		0.0
23.	Totals	5,203	0	0.0	33,285	0	0.0

SECTION 2

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

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	0	0

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as “Defense and Cost Containment” and “Adjusting and Other”) reported in compliance with these definitions in this statement? Yes [X] No []
3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Yes [X] No []
4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]

If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.
Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.
5. What were the net premiums in force at the end of the year for:
(in thousands of dollars)

5.1 Fidelity
5.2 Surety
6. Claim count information is reported per claim or per claimant (Indicate which)per claimant.....
If not the same in all years, explain in Interrogatory 7.
- 7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [] No [X]
- 7.2 (An extended statement may be attached.)
.....

Schedule T - Part 2 - Interstate Compact

N O N E

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

Asterisk	Explanation

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE MUTUAL INSURANCE COMPANY

SCHEDULE Y

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

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE 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

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2022 OF THE BUCKEYE STATE 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

SUPPLEMENTAL FILINGS

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

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

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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 BUCKEYE STATE MUTUAL INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

17.	Reinsurance Summary Supplemental Filing [Document Identifier 401]	 1 6 7 1 3 2 0 2 2 4 0 1 0 0 0 0 0
18.	Medicare Part D Coverage Supplement [Document Identifier 365]	 1 6 7 1 3 2 0 2 2 3 6 5 0 0 0 0 0
21.	Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]	 1 6 7 1 3 2 0 2 2 4 0 0 0 0 0 0 0
22.	Bail Bond Supplement [Document Identifier 500]	 1 6 7 1 3 2 0 2 2 5 0 0 0 0 0 0 0
23.	Director and Officer Insurance Coverage Supplement [Document Identifier 505]	 1 6 7 1 3 2 0 2 2 5 0 5 0 0 0 0 0
24.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	 1 6 7 1 3 2 0 2 2 2 2 2 4 0 0 0 0
25.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	 1 6 7 1 3 2 0 2 2 2 2 2 5 0 0 0 0
26.	Relief from the Requirements for Audit Committees [Document Identifier 226]	 1 6 7 1 3 2 0 2 2 2 2 2 6 0 0 0 0
27.	Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts [Document Identifier 555]	 1 6 7 1 3 2 0 2 2 5 5 5 0 0 0 0 0
28.	Credit Insurance Experience Exhibit [Document Identifier 230]	 1 6 7 1 3 2 0 2 2 2 3 0 0 0 0 0 0
29.	Long-Term Care Experience Reporting Forms [Document Identifier 306]	 1 6 7 1 3 2 0 2 2 3 0 6 0 0 0 0 0
30.	Accident and Health Policy Experience Exhibit [Document Identifier 210]	 1 6 7 1 3 2 0 2 2 2 1 0 0 0 0 0 0
31.	Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]	 1 6 7 1 3 2 0 2 2 2 1 6 0 0 0 0 0
32.	Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]	 1 6 7 1 3 2 0 2 2 2 1 7 0 0 0 0 0
34.	Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 [Document Identifier 290]	 1 6 7 1 3 2 0 2 2 2 2 9 0 0 0 0 0
36.	Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]	 1 6 7 1 3 2 0 2 2 5 6 5 0 0 0 0 0
37.	Management's Report of Internal Control Over Financial Reporting [Document Identifier 223]	 1 6 7 1 3 2 0 2 2 2 2 2 3 0 0 0 0

NONE