



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

AS OF JUNE 30, 2023

OF THE CONDITION AND AFFAIRS OF THE

Utica National Insurance Company of Ohio

NAIC Group Code 0201 (Current) 0201 (Prior) NAIC Company Code 13998 Employer's ID Number 27-2764004

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

Country of Domicile United States of America

Incorporated/Organized 04/06/2010 Commenced Business 12/22/2010

Statutory Home Office 2 Easton Oval, Suite 225 (Street and Number) Columbus, OH, US 43219 (City or Town, State, Country and Zip Code)

Main Administrative Office 180 Genesee Street (Street and Number) New Hartford, NY, US 13413 (City or Town, State, Country and Zip Code) 800-598-8422 (Area Code) (Telephone Number)

Mail Address Post Office Box 530 (Street and Number or P.O. Box) Utica, NY, US 135030530 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 180 Genesee Street (Street and Number) New Hartford, NY, US 13413 (City or Town, State, Country and Zip Code) 800-598-8422 (Area Code) (Telephone Number)

Internet Website Address www.uticanational.com

Statutory Statement Contact Sean Patrick Walsh (Name) 315-734-2745 (Area Code) (Telephone Number) sean.walsh@uticanational.com (E-mail Address) 315-235-4642 (FAX Number)

OFFICERS

Chairman & CEO Richard Patrick Creedon CFO & Treasurer Elizabeth Mary Miller

President & COO Kristen Holly Martin Secretary Louisa Suzanne Ruffine

OTHER

DIRECTORS OR TRUSTEES		
John Martin Anderson	Jolene Marie Casatelli	Paul Lewis Cohen
Richard Patrick Creedon	Kristen Holly Martin	Elizabeth Mary Miller
Louisa Suzanne Ruffine		

State of New York SS:

County of Oneida

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.

Kristen Holly Martin President & COO Elizabeth Mary Miller CFO & Treasurer Louisa Suzanne Ruffine Secretary

Subscribed and sworn to before me this day of

a. Is this an original filing? Yes [X] No []

b. If no, 1. State the amendment number..... 2. Date filed 3. Number of pages attached.....

STATEMENT AS OF JUNE 30, 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	27,393,221		27,393,221	26,081,034
2. Stocks:				
2.1 Preferred stocks				
2.2 Common stocks				
3. Mortgage loans on real estate:				
3.1 First liens				
3.2 Other than first liens.....				
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances)				
4.2 Properties held for the production of income (less \$ encumbrances)				
4.3 Properties held for sale (less \$ encumbrances)				
5. Cash (\$), cash equivalents (\$ 88,406) and short-term investments (\$)	88,406		88,406	611,666
6. Contract loans (including \$ premium notes)				
7. Derivatives				
8. Other invested assets				
9. Receivables for securities	4,303		4,303	0
10. Securities lending reinvested collateral assets				
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Lines 1 to 11)	27,485,930		27,485,930	26,692,700
13. Title plants less \$ charged off (for Title insurers only)				
14. Investment income due and accrued	133,706		133,706	130,814
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection				
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)				
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers				
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts				
17. Amounts receivable relating to uninsured plans				
18.1 Current federal and foreign income tax recoverable and interest thereon	4,302		4,302	
18.2 Net deferred tax asset				
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software				
21. Furniture and equipment, including health care delivery assets (\$)				
22. Net adjustment in assets and liabilities due to foreign exchange rates				
23. Receivables from parent, subsidiaries and affiliates	780,031		780,031	4,372,296
24. Health care (\$) and other amounts receivable				
25. Aggregate write-ins for other than invested assets	320,740		320,740	367,270
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	28,724,709		28,724,709	31,563,080
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Lines 26 and 27)	28,724,709		28,724,709	31,563,080
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)				
2501. Equities & Deposits in Pools & Associations	45,832		45,832	5,795
2502. Miscellaneous Accounts Recievable	274,908		274,908	361,475
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	320,740		320,740	367,270

STATEMENT AS OF JUNE 30, 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$)		
2. Reinsurance payable on paid losses and loss adjustment expenses		
3. Loss adjustment expenses		
4. Commissions payable, contingent commissions and other similar charges	667,918	4,847,001
5. Other expenses (excluding taxes, licenses and fees)	5,297	3,881
6. Taxes, licenses and fees (excluding federal and foreign income taxes)		
7.1 Current federal and foreign income taxes (including \$0 on realized capital gains (losses))	927,453	648,589
7.2 Net deferred tax liability	28,624	23,386
8. Borrowed money \$ and interest thereon \$		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ 44,265,327 and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$ for medical loss ratio rebate per the Public Health Service Act)		
10. Advance premium		
11. Dividends declared and unpaid:		
11.1 Stockholders		
11.2 Policyholders		
12. Ceded reinsurance premiums payable (net of ceding commissions)		
13. Funds held by company under reinsurance treaties		
14. Amounts withheld or retained by company for account of others	507,862	507,666
15. Remittances and items not allocated		
16. Provision for reinsurance (including \$ certified)		
17. Net adjustments in assets and liabilities due to foreign exchange rates		
18. Drafts outstanding		
19. Payable to parent, subsidiaries and affiliates		
20. Derivatives		
21. Payable for securities		
22. Payable for securities lending		
23. Liability for amounts held under uninsured plans		
24. Capital notes \$ and interest thereon \$		
25. Aggregate write-ins for liabilities		
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	2,137,154	6,030,523
27. Protected cell liabilities		
28. Total liabilities (Lines 26 and 27)	2,137,154	6,030,523
29. Aggregate write-ins for special surplus funds		
30. Common capital stock	4,000,000	4,000,000
31. Preferred capital stock		
32. Aggregate write-ins for other than special surplus funds		
33. Surplus notes		
34. Gross paid in and contributed surplus	6,229,204	6,229,204
35. Unassigned funds (surplus)	16,358,352	15,303,353
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)		
36.2 shares preferred (value included in Line 31 \$)		
37. Surplus as regards policyholders (Lines 29 to 35, less 36)	26,587,556	25,532,557
38. Totals (Page 2, Line 28, Col. 3)	28,724,709	31,563,080
DETAILS OF WRITE-INS		
2501.		
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page		
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)		
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page		
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)		
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page		
3299. Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)		

STATEMENT OF INCOME

	1	2	3
	Current Year to Date	Prior Year to Date	Prior Year Ended December 31
UNDERWRITING INCOME			
1. Premiums earned:			
1.1 Direct (written \$ 47,119,883)	61,597,966	55,918,126	116,538,123
1.2 Assumed (written \$ 124,998)	92,863	77,071	142,988
1.3 Ceded (written \$ 47,244,882)	61,690,830	55,995,198	116,681,111
1.4 Net (written \$)			
DEDUCTIONS:			
2. Losses incurred (current accident year \$)::			
2.1 Direct	31,838,881	20,071,777	46,150,047
2.2 Assumed	91,259	70,282	109,604
2.3 Ceded	31,930,140	20,142,058	46,259,652
2.4 Net			
3. Loss adjustment expenses incurred	5		8,765
4. Other underwriting expenses incurred	(954,855)	(838,739)	(2,447,921)
5. Aggregate write-ins for underwriting deductions			
6. Total underwriting deductions (Lines 2 through 5)	(954,850)	(838,739)	(2,439,156)
7. Net income of protected cells			
8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7)	954,850	838,739	2,439,156
INVESTMENT INCOME			
9. Net investment income earned	409,871	347,467	668,366
10. Net realized capital gains (losses) less capital gains tax of \$ (4,302)	(25,620)	2,291	724
11. Net investment gain (loss) (Lines 9 + 10)	384,251	349,758	669,090
OTHER INCOME			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ amount charged off \$)			
13. Finance and service charges not included in premiums			
14. Aggregate write-ins for miscellaneous income			
15. Total other income (Lines 12 through 14)			
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	1,339,101	1,188,496	3,108,246
17. Dividends to policyholders			
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	1,339,101	1,188,496	3,108,246
19. Federal and foreign income taxes incurred	278,864	246,313	647,808
20. Net income (Line 18 minus Line 19)(to Line 22)	1,060,237	942,183	2,460,438
CAPITAL AND SURPLUS ACCOUNT			
21. Surplus as regards policyholders, December 31 prior year	25,532,557	23,074,403	23,074,403
22. Net income (from Line 20)	1,060,237	942,183	2,460,438
23. Net transfers (to) from Protected Cell accounts			
24. Change in net unrealized capital gains (losses) less capital gains tax of \$			
25. Change in net unrealized foreign exchange capital gain (loss)			
26. Change in net deferred income tax	(5,238)	(1,197)	(2,284)
27. Change in nonadmitted assets			
28. Change in provision for reinsurance			
29. Change in surplus notes			
30. Surplus (contributed to) withdrawn from protected cells			
31. Cumulative effect of changes in accounting principles			
32. Capital changes:			
32.1 Paid in			
32.2 Transferred from surplus (Stock Dividend)			
32.3 Transferred to surplus			
33. Surplus adjustments:			
33.1 Paid in			
33.2 Transferred to capital (Stock Dividend)			
33.3 Transferred from capital			
34. Net remittances from or (to) Home Office			
35. Dividends to stockholders			
36. Change in treasury stock			
37. Aggregate write-ins for gains and losses in surplus			
38. Change in surplus as regards policyholders (Lines 22 through 37)	1,054,999	940,986	2,458,154
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	26,587,556	24,015,389	25,532,557
DETAILS OF WRITE-INS			
0501.			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page			
0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above)			
1401.			
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page			
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)			
3701.			
3702.			
3703.			
3798. Summary of remaining write-ins for Line 37 from overflow page			
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)			

STATEMENT AS OF JUNE 30, 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance			
2. Net investment income	404,880	345,894	661,970
3. Miscellaneous income			
4. Total (Lines 1 to 3)	404,880	345,894	661,970
5. Benefit and loss related payments			
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	3,164,759	3,432,575	(2,597,327)
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)			553,815
10. Total (Lines 5 through 9)	3,164,759	3,432,575	(2,043,512)
11. Net cash from operations (Line 4 minus Line 10)	(2,759,879)	(3,086,680)	2,705,482
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	5,372,061	5,169,869	6,272,740
12.2 Stocks			
12.3 Mortgage loans			
12.4 Real estate			
12.5 Other invested assets			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			
12.7 Miscellaneous proceeds			
12.8 Total investment proceeds (Lines 12.1 to 12.7)	5,372,061	5,169,869	6,272,740
13. Cost of investments acquired (long-term only):			
13.1 Bonds	6,714,958	4,742,790	7,169,460
13.2 Stocks			
13.3 Mortgage loans			
13.4 Real estate			
13.5 Other invested assets			
13.6 Miscellaneous applications			
13.7 Total investments acquired (Lines 13.1 to 13.6)	6,714,958	4,742,790	7,169,460
14. Net increase (or decrease) in contract loans and premium notes			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(1,342,897)	427,079	(896,719)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes			
16.2 Capital and paid in surplus, less treasury stock			
16.3 Borrowed funds			
16.4 Net deposits on deposit-type contracts and other insurance liabilities			
16.5 Dividends to stockholders			
16.6 Other cash provided (applied)	3,579,516	2,879,682	(1,369,971)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	3,579,516	2,879,682	(1,369,971)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .	(523,260)	220,081	438,792
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	611,666	172,873	172,873
19.2 End of period (Line 18 plus Line 19.1)	88,406	392,955	611,666

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

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NOTES TO FINANCIAL STATEMENTS

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of Utica National Insurance Company of Ohio are presented on the basis of accounting practices prescribed or permitted by the Ohio Insurance Department.

The Ohio Insurance Department recognizes only statutory accounting practices prescribed or permitted by the state of Ohio for determining and reporting the financial condition and results of operations of an insurance company and for determining its solvency under the Ohio Insurance Laws. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures manual (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of Ohio. The state of Ohio has adopted some practices that differ from NAIC SAP; however, none of those changes would impact the financial results of Utica National Insurance Company of Ohio.

A reconciliation of net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the state of Ohio is shown below.

	SSAP #	Page	Line #	2023		2022	
NET INCOME							
(1) State basis (Page 4, Line 20, Columns 1 & 3)	XXX	XXX	XXX	\$	1,060,237	\$	2,460,438
(2) State Prescribed Practices that are an increase/ (decrease) from NAIC SAP:							
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:							
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$	1,060,237	\$	2,460,438
SURPLUS							
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$	26,587,556	\$	25,532,557
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:							
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:							
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$	26,587,556	\$	25,532,557

B. Use of Estimates in the Preparation of the Financial Statements

No change

C. Accounting Policy

No change

D. Going Concern

Management's evaluation of the financial condition of the Company did not indicate any going concern issues.

NOTE 2 Accounting Changes and Corrections of Errors

(1) No change

(2) Bonds not backed by loans are carried at amortized cost using the scientific yield to worst method. Bonds that are defined by the NAIC as non-investment grade (rated 3 through 6) are carried at the lower of amortized cost or fair market value.

5) No change

(6) Loan-backed securities are stated at either amortized cost, or the lower of amortized cost or fair market value if defined by the NAIC as non-investment grade (rated 3 through 6). The prospective adjustment method is used to value all loan-backed securities.

(7-13) No change

NOTE 3 Business Combinations and Goodwill

No change

D. Subcomponents and Calculation of Adjusted Surplus and Total Admitted Goodwill - not applicable

NOTE 4 Discontinued Operations

No change

NOTE 5 Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans - not applicable

B. Debt Restructuring - not applicable

C. Reverse Mortgages - not applicable

D. Loan-Backed Securities

(1) Our asset manager uses a proprietary model for loss assumptions and widely accepted models for prepayment assumptions in valuing mortgage-backed and asset-backed securities with inputs from major third party data providers. The models combine the effects of interest rates, volatility, and pre-payment speeds based on various scenario (Monte Carlo) simulations with resulting effective analytics (spreads, duration, convexity) and cash flows on a monthly basis. Credit sensitive cash flows are calculated using a proprietary model which estimates future loan defaults in terms of timing and severity. Model assumptions are specific to asset class and collateral types and are regularly evaluated and adjusted where appropriate.

(2) OTTI Recognized - not applicable

(3) OTTI by CUSIP- not applicable

(4)

a) The aggregate amount of unrealized losses:

1. Less than 12 Months\$69,384

2. 12 Months or Longer\$1,221,920

b)The aggregate related fair value of securities with unrealized losses:

1. Less than 12 Months\$3,498,358

2. 12 Months or Longer\$7,249,373

NOTES TO FINANCIAL STATEMENTS

(5) There are a number of factors considered in determining if an other-than-temporary impairment does not exist for an investment, including but not limited to, debt burden, credit rating, sector, liquidity, financial flexibility, company management, expected earnings and cash flow stream, and economic prospects associated with the investment.

- E. Dollar Repurchase Agreements and/or Securities Lending Transactions - not applicable
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing - not applicable
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing - not applicable
- H. Repurchase Agreements Transactions Accounted for as a Sale - not applicable
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale - not applicable
- J. Real Estate - not applicable
- K. Low Income Housing tax Credits (LIHTC) - not applicable
- L. Restricted Assets - no change
- M. Working Capital Finance Investments - not applicable
- N. Offsetting and Netting of Assets and Liabilities - not applicable
- O. 5GI Securities - not applicable
- P. Short Sales - not applicable
- Q. Prepayment Penalty and Acceleration Fees - not applicable
- R. Reporting Entity's Share of Cash Pool by Asset Type - not applicable

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies
No change

NOTE 7 Investment Income
No change

- NOTE 8 Derivative Instruments**
- A. Derivatives under SSAP No. 86—Derivatives - not applicable
 - B. Derivatives under SSAP No. 108—Derivative Hedging Variable Annuity Guarantees - not applicable

NOTE 9 Income Taxes
No change

NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties
No change

- NOTE 11 Debt**
- A. No change
 - B. FHLB (Federal Home Loan Bank) Agreements - not applicable

NOTE 12 Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

No change

(4) Not applicable

NOTE 13 Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations
No change

NOTE 14 Liabilities, Contingencies and Assessments
No change

NOTE 15 Leases
No change

NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk
No change

- NOTE 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities**
- A. No change
 - B. No change
 - C. Wash Sales - not applicable

NOTE 18 Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans
No change

NOTE 19 Direct Premium Written/Produced by Managing General Agents/Third Party Administrators
No change

NOTES TO FINANCIAL STATEMENTS

NOTE 20 Fair Value Measurements

- A.
- (1) Fair Value Measurements at Reporting Date - not applicable
- (2) Fair Value Measurements in (Level 3) of the Fair Value hierarchy - not applicable
- (3) Not applicable
- (4) The following are the levels of the hierarchy and a brief description of the type of valuation inputs that are used to establish each level:
- Pricing Level 1 – Valuations based on unadjusted quoted prices in active markets for identical assets that our pricing sources have the ability to access. Since the valuations are based on quoted prices that are readily and regularly available in an active market, valuation of these securities does not entail a significant amount or degree of judgment.
- Pricing Level 2 – Valuations based upon quoted prices for similar assets in active markets, quoted prices for identical or similar assets in inactive markets; or valuations based on models where significant inputs are observable (e.g. interest rates, yield curves, prepayment speeds, default rates, loss severities) or can be corroborated by observable market data.
- Pricing Level 3 – Valuations that are derived from techniques in which one or more of the significant inputs are unobservable, including broker quotes which are non-binding.
- (5) Not applicable
- B. Not applicable

C. Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 24,792,113	\$ 27,393,221	\$ -	\$ 24,792,113	\$ -	\$ -	\$ -

- D. Not Practicable to Estimate Fair Value - not applicable
- E. Not applicable

NOTE 21 Other Items

No change

NOTE 22 Events Subsequent

No change

NOTE 23 Reinsurance

No change

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

No change

F. Risk Sharing Provisions of the Affordable Care Act

(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions (YES/NO)?

Yes [] No [X]

NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses

The Company does not have any loss or loss adjustment expense.

NOTE 26 Intercompany Pooling Arrangements

No change

NOTE 27 Structured Settlements

No change

NOTE 28 Health Care Receivables

No change

NOTE 29 Participating Policies

No change

NOTE 30 Premium Deficiency Reserves

No change

NOTE 31 High Deductibles

No change

NOTE 32 Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

No change

NOTE 33 Asbestos/Environmental Reserves

No change

NOTE 34 Subscriber Savings Accounts

No change

NOTE 35 Multiple Peril Crop Insurance

No change

NOTE 36 Financial Guaranty Insurance

No change

- B. Schedule of insured financial obligations at the end of the period - not applicable

STATEMENT AS OF JUNE 30, 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes [] No [X]

1.2

If yes, has the report been filed with the domiciliary state?

Yes [] No []

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes [] No [X]

2.2

If yes, date of change:

3.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?
If yes, complete Schedule Y, Parts 1 and 1A.

Yes [X] No []

3.2

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes [] No [X]

3.3

If the response to 3.2 is yes, provide a brief description of those changes.

3.4

Is the reporting entity publicly traded or a member of a publicly traded group?

Yes [] No [X]

3.5

If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes [] No [X]

4.2

If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?
If yes, attach an explanation.

Yes [] No [] N/A [X]

6.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2019

6.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2019

6.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

06/30/2021

6.4

By what department or departments?
Ohio Department of Insurance

6.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes [] No [] N/A [X]

6.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes [] No [] N/A [X]

7.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes [] No [X]

7.2

If yes, give full information:

8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes [] No [X]

8.2

If response to 8.1 is yes, please identify the name of the bank holding company.

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [] No [X]

8.4

If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

STATEMENT AS OF JUNE 30, 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

GENERAL INTERROGATORIES

- 9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
(c) Compliance with applicable governmental laws, rules and regulations;
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
(e) Accountability for adherence to the code.

Yes [X] No []
- 9.11

If the response to 9.1 is No, please explain:
.....
- 9.2

Has the code of ethics for senior managers been amended?

Yes [X] No []
- 9.21

If the response to 9.2 is Yes, provide information related to amendment(s).
The Code of Conduct was changed to prohibit the use of company IT resources for personal use.
- 9.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes [] No [X]
- 9.31

If the response to 9.3 is Yes, provide the nature of any waiver(s).
.....

FINANCIAL

- 10.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes [X] No []
- 10.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:\$.....

780,031

INVESTMENT

- 11.1

Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)

Yes [] No [X]
- 11.2

If yes, give full and complete information relating thereto:
.....
12.

Amount of real estate and mortgages held in other invested assets in Schedule BA:

\$.....
13.

Amount of real estate and mortgages held in short-term investments:

\$.....
- 14.1

Does the reporting entity have any investments in parent, subsidiaries and affiliates?

Yes [] No [X]
- 14.2

If yes, please complete the following:

	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$	\$.....
14.22 Preferred Stock	\$	\$.....
14.23 Common Stock	\$	\$.....
14.24 Short-Term Investments	\$	\$.....
14.25 Mortgage Loans on Real Estate	\$	\$.....
14.26 All Other	\$	\$.....
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$	\$.....
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	\$	\$.....

15.1

Has the reporting entity entered into any hedging transactions reported on Schedule DB?

Yes [] No [X]

15.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A []
If no, attach a description with this statement.
.....

16.

For the reporting entity's security lending program, state the amount of the following as of the current statement date:

16.1

Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.

\$

16.2

Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

\$

16.3

Total payable for securities lending reported on the liability page.

\$
- 7.1

STATEMENT AS OF JUNE 30, 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

GENERAL INTERROGATORIES

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

1 Name of Custodian(s)	2 Custodian Address
Bank of New York Mellon	One Wall Street, New York, NY

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

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

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

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

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

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

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

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

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

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
107423	Conning, Inc.	549300Z0G14KK37BDV40	SEC	DS.....

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

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:

a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
b. Issuer or obligor is current on all contracted interest and principal payments.
c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? Yes [] No [X]

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

a. The security was purchased prior to January 1, 2018.
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities? Yes [] No [X]

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

a. The shares were purchased prior to January 1, 2019.
b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
d. The fund only or predominantly holds bonds in its portfolio.
e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

STATEMENT AS OF JUNE 30, 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.

If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change?
If yes, attach an explanation.
.....

Yes [] No [] N/A [X]
2.

Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured?
If yes, attach an explanation.
.....

Yes [] No [X]
- 3.1

Have any of the reporting entity's primary reinsurance contracts been canceled?

Yes [] No [X]
- 3.2

If yes, give full and complete information thereto.
.....
- 4.1

Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of " tabular reserves") discounted at a rate of interest greater than zero?

Yes [] No [X]

4.2 If yes, complete the following schedule:

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

5.

Operating Percentages:

5.1 A&H loss percent0.000 %

5.2 A&H cost containment percent0.000 %

5.3 A&H expense percent excluding cost containment expenses0.000 %
- 6.1

Do you act as a custodian for health savings accounts?

Yes [] No [X]
- 6.2

If yes, please provide the amount of custodial funds held as of the reporting date\$.....
- 6.3

Do you act as an administrator for health savings accounts?

Yes [] No [X]
- 6.4

If yes, please provide the balance of the funds administered as of the reporting date\$.....
7.

Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?

Yes [X] No []
- 7.1

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

Yes [] No []

STATEMENT AS OF JUNE 30, 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

SCHEDULE F - CEDED REINSURANCE

Showing All New Reinsurers - Current Year to Date

[illegible]

STATEMENT AS OF JUNE 30, 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Current Year to Date - Allocated by States and Territories							
States, etc.	1 Active Status (a)	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date
1. Alabama	AL	N					
2. Alaska	AK	N					
3. Arizona	AZ	N					
4. Arkansas	AR	N					
5. California	CA	N					
6. Colorado	CO	N					
7. Connecticut	CT	L	126,374	71,797	64,822	4,864	139,209
8. Delaware	DE	L					47,135
9. District of Columbia	DC	N					
10. Florida	FL	N					
11. Georgia	GA	L	5,556,232	5,408,844	6,113,739	3,134,030	11,611,140
12. Hawaii	HI	N					8,271,777
13. Idaho	ID	N					
14. Illinois	IL	N					
15. Indiana	IN	N					
16. Iowa	IA	N					
17. Kansas	KS	N					
18. Kentucky	KY	N					
19. Louisiana	LA	N					
20. Maine	ME	N					
21. Maryland	MD	L					
22. Massachusetts	MA	L	760,744	14,018	112,553	8,022	288,531
23. Michigan	MI	N					46,676
24. Minnesota	MN	N					
25. Mississippi	MS	N					
26. Missouri	MO	N					
27. Montana	MT	N					
28. Nebraska	NE	N					
29. Nevada	NV	N					
30. New Hampshire	NH	L	238,087	147,612	13,137	48,033	78,008
31. New Jersey	NJ	L	8,832				33
32. New Mexico	NM	N					
33. New York	NY	L	35,745,131	32,271,204	15,657,693	12,087,961	91,916,092
34. North Carolina	NC	L					81,664,205
35. North Dakota	ND	N					
36. Ohio	OH	L	203,452	181,991	98,933	3,626	74,613
37. Oklahoma	OK	N					25,360
38. Oregon	OR	N					
39. Pennsylvania	PA	L	4,099,204	3,117,672	1,181,527	2,008,671	6,035,645
40. Rhode Island	RI	N					4,383,400
41. South Carolina	SC	L					
42. South Dakota	SD	N					
43. Tennessee	TN	L	381,828	236,954	165,748	334,432	387,587
44. Texas	TX	L					540,449
45. Utah	UT	N					
46. Vermont	VT	N					
47. Virginia	VA	N					
48. Washington	WA	N					
49. West Virginia	WV	N					
50. Wisconsin	WI	N					
51. Wyoming	WY	N					
52. American Samoa	AS	N					
53. Guam	GU	N					
54. Puerto Rico	PR	N					
55. U.S. Virgin Islands	VI	N					
56. Northern Mariana Islands	MP	N					
57. Canada	CAN	N					
58. Aggregate Other Alien OT	XXX						
59. Totals	XXX	47,119,883	41,450,093	23,408,151	17,629,638	110,530,857	95,045,548
DETAILS OF WRITE-INS							
58001.	XXX						
58002.	XXX						
58003.	XXX						
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX						
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX						

- (a) Active State Counts:
1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....

2. R - Registered - Non-domiciled RRGs.....

3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI).....

4. Q - Qualified - Qualified or accredited reinsurer.....

5. D - Domestic Surplus Lines Insurer (DSLII) - Reporting entities authorized to write surplus lines in the state of domicile.....

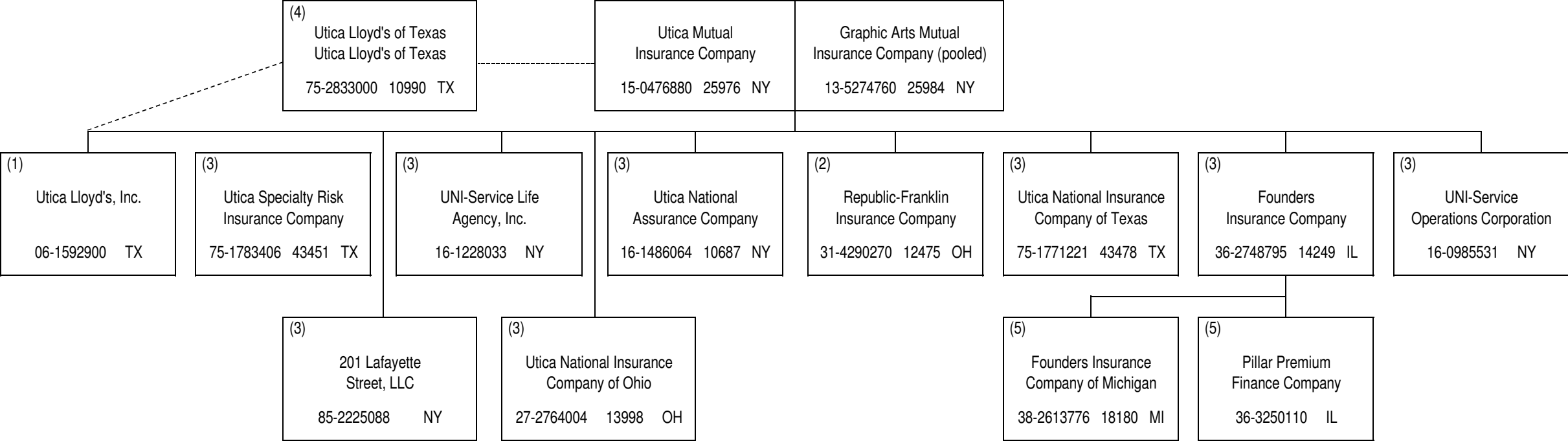
6. N - None of the above - Not allowed to write business in the state.....
- 14
- 43

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 - ORGANIZATIONAL CHART

UTICA NATIONAL INSURANCE GROUP ORGANIZATION STRUCTURE JUNE 30, 2023

11



1. Owned 100% by Utica Mutual Insurance Company; operates as attorney-in-fact for Utica Lloyd's of Texas.
2. Owned 94% by Utica Mutual Insurance Company and 6% by Graphic Arts Mutual Insurance Company.
3. Owned 100% by Utica Mutual Insurance Company.
4. A Texas Lloyd's association of twelve underwriters under sponsorship of the Utica Mutual Insurance Company.
5. Owned 100% by Founders Insurance Company.
6. Shares common management with the group.

(6)
Utica National
Group Foundation, Inc.
16-1313450 NY

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

Asterisk	Explanation
1	Owned 6% by Graphic Arts Mutual Insurance Company.
2	A Texas Lloyd's association of twelve underwriters under the sponsorship of the Utica Mutual Insurance Company.
3	Shares common management with the group.

PART 1 - LOSS EXPERIENCE

Line of Business		Current Year to Date			4 Prior Year to Date Direct Loss Percentage
		1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1.	Fire	4,801	923	19.2	0.3
2.1	Allied Lines	936			
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)	15,209,359	12,185,201	80.1	33.0
5.2	Commercial multiple peril (liability portion)	17,002,220	7,318,367	43.0	31.2
6.	Mortgage guaranty				
8.	Ocean marine				
9.	Inland marine	722	359	49.7	0.9
10.	Financial guaranty				
11.1	Medical professional liability - occurrence				
11.2	Medical professional liability - claims-made				
12.	Earthquake				
13.1	Comprehensive (hospital and medical) individual				
13.2	Comprehensive (hospital and medical) group				
14.	Credit accident and health				
15.1	Vision only				
15.2	Dental only				
15.3	Disability income				
15.4	Medicare supplement				
15.5	Medicaid Title XIX				
15.6	Medicare Title XVIII				
15.7	Long-term care				
15.8	Federal employees health benefits plan				
15.9	Other health				
16.	Workers' compensation	10,470,227	6,023,545	57.5	24.6
17.1	Other liability - occurrence	6,187,991	(2,255,406)	(36.4)	46.4
17.2	Other liability - claims-made	284,311	(59,181)	(20.8)	42.4
17.3	Excess workers' compensation				
18.1	Products liability - occurrence		(83)		
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)	424,842	147,735	34.8	31.3
19.4	Other commercial auto liability	9,375,871	6,366,294	67.9	47.8
21.1	Private passenger auto physical damage				
21.2	Commercial auto physical damage	2,636,687	2,111,120	80.1	58.2
22.	Aircraft (all perils)				
23.	Fidelity				
24.	Surety				
26.	Burglary and theft		8		
27.	Boiler and machinery				
28.	Credit				
29.	International				
30.	Warranty				
31.	Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business				
35.	Totals	61,597,966	31,838,881	51.7	35.9
DETAILS OF WRITE-INS					
3401.	.....				
3402.	.....				
3403.	.....				
3498.	Summary of remaining write-ins for Line 34 from overflow page				
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)				

PART 2 - DIRECT PREMIUMS WRITTEN

Line of Business		1 Current Quarter	2 Current Year to Date	3 Prior Year Year to Date
1.	Fire		622	890
2.1	Allied Lines		1,179	1,734
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)	4,553,188	8,438,170	6,784,612
5.2	Commercial multiple peril (liability portion)	6,914,956	12,719,159	9,080,690
6.	Mortgage guaranty			
8.	Ocean marine			
9.	Inland marine			8,504
10.	Financial guaranty			
11.1	Medical professional liability - occurrence			
11.2	Medical professional liability - claims-made			
12.	Earthquake			
13.1	Comprehensive (hospital and medical) individual			
13.2	Comprehensive (hospital and medical) group			
14.	Credit accident and health			
15.1	Vision only			
15.2	Dental only			
15.3	Disability income			
15.4	Medicare supplement			
15.5	Medicaid Title XIX			
15.6	Medicare Title XVIII			
15.7	Long-term care			
15.8	Federal employees health benefits plan			
15.9	Other health			
16.	Workers' compensation	5,522,328	11,112,933	12,388,337
17.1	Other liability - occurrence	2,694,248	5,008,263	4,524,971
17.2	Other liability - claims-made	153,905	208,810	208,649
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)	166,538	326,790	265,787
19.4	Other commercial auto liability	4,064,883	7,423,864	6,509,784
21.1	Private passenger auto physical damage			
21.2	Commercial auto physical damage	1,091,026	1,880,094	1,676,134
22.	Aircraft (all perils)			
23.	Fidelity			
24.	Surety			
26.	Burglary and theft			
27.	Boiler and machinery			
28.	Credit			
29.	International			
30.	Warranty			
31.	Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX
32.	Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX
33.	Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX
34.	Aggregate write-ins for other lines of business			
35.	Totals	25,161,070	47,119,883	41,450,093
DETAILS OF WRITE-INS				
3401.	.....			
3402.	.....			
3403.	.....			
3498.	Summary of remaining write-ins for Line 34 from overflow page			
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)			

STATEMENT AS OF JUNE 30, 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

PART 3 (000 omitted)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13									
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1+2)	2023 Loss and LAE Payments on Claims Reported as of Prior Year-End	2023 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2023 Loss and LAE Payments (Cols. 4+5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols.7+8+9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols.4+7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5+8+9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11+12)									
1. 2020 + Prior .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....									
2. 2021 .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....									
3. Subtotals 2021 + Prior .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....									
4. 2022 .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....									
5. Subtotals 2022 + Prior .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....									
6. 2023	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	.....XXX.....	.....	.....	.....	.....XXX.....	XXX.....	XXX.....									
7. Totals .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....									
8. Prior Year-End Surplus As Regards Policyholders	25,533										Col. 11, Line 7 As % of Col. 1 Line 7	Col. 12, Line 7 As % of Col. 2 Line 7	Col. 13, Line 7 As % of Col. 3 Line 7									
											1.	2.	3.									
											Col. 13, Line 7 As a % of Col. 1 Line 8											
											4.											

STATEMENT AS OF JUNE 30, 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

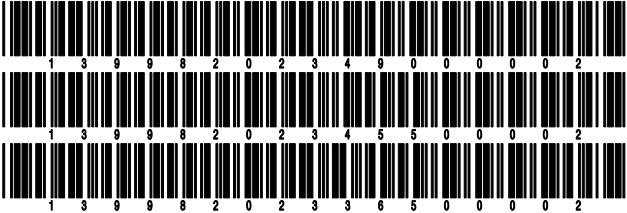
	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement?	NO
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement?	NO
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO
4. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	YES
AUGUST FILING	
5. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter.	YES

Explanations:

1.
2.
3.

Bar Codes:

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



NONE

SCHEDULE A - VERIFICATION

Real Estate

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

SCHEDULE B - VERIFICATION

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

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

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	26,081,036	21,213,321
2. Cost of bonds and stocks acquired	6,710,655	7,169,460
3. Accrual of discount	39,062	58,259
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals	(29,922)	1,505
6. Deduct consideration for bonds and stocks disposed of	5,372,061	2,289,635
7. Deduct amortization of premium	35,548	71,874
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized		
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	27,393,222	26,081,036
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)	27,393,222	26,081,036

STATEMENT AS OF JUNE 30, 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

SCHEDULE D - PART 1B

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. NAIC 1 (a)	27,831,374	1,445,967	4,884,466	873	27,831,374	24,393,748		23,062,215
2. NAIC 2 (a)	3,197,710		199,963	1,727	3,197,710	2,999,474		3,018,820
3. NAIC 3 (a)								
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	31,029,083	1,445,967	5,084,429	2,600	31,029,083	27,393,221		26,081,034
PREFERRED STOCK								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds and Preferred Stock	31,029,083	1,445,967	5,084,429	2,600	31,029,083	27,393,221		26,081,034

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

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

Schedule DA - Part 1 - Short-Term Investments

N O N E

Schedule DA - Verification - Short-Term Investments

N O N E

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

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

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

N O N E

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

N O N E

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

N O N E

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	
2. Cost of cash equivalents acquired	8,638,810	1,350
3. Accrual of discount		
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals		
6. Deduct consideration received on disposals	8,550,404	1,350
7. Deduct amortization of premium		
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	88,406	0
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	88,406	0

Schedule A - Part 2 - Real Estate Acquired and Additions Made

N O N E

Schedule A - Part 3 - Real Estate Disposed

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

STATEMENT AS OF JUNE 30, 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

SCHEDULE D - PART 3

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

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation, NAIC Designation Modifier and SVO Admini- strative Symbol
537428-20-6	LITTLE ROCK SCHOOL DISTRICT		06/22/2023	STIFEL NICHOLAUS & C		27,119	35,000	423	1.C FE
0709999999.	Subtotal - Bonds - U.S. Political Subdivisions of States, Territories and Possessions					27,119	35,000	423	XXX
3132DN-H4-8	FREDDIE MAC POOL		06/16/2023	JPM SECURITIES-FIXED		570,840	668,382	928	1.A
3132DP-3N-6	FREDDIE MAC POOL		06/16/2023	PIERPONT SECURITIES		196,387	196,081	599	1.A
3132DW-FT-5	FREDDIE MAC POOL		03/02/2023	BARCLAYS CAPITAL FIX		(4,155)		(3)	1.A
3140GS-A4-3	FANNIE MAE POOL		06/29/2023	TORONTO DOMINION SEC		194,933	195,759	867	1.A
64990F-YT-5	NEW YORK STATE DORMITORY AUTHORITY		06/26/2023	WELLS FARGO SECS LLC		54,874	70,000	601	1.B FE
64990G-JZ-6	NEW YORK STATE DORMITORY AUTHORITY		06/01/2023	JEFFERIES & COMPANY,		77,421	90,000	1,545	1.D FE
65000B-YE-2	NEW YORK STATE DORMITORY AUTHORITY		06/22/2023	JEFFERIES & COMPANY,		19,247	25,000	365	1.E FE
0909999999.	Subtotal - Bonds - U.S. Special Revenues					1,109,547	1,245,221	4,902	XXX
02079K-AF-4	ALPHABET INC		06/16/2023	PERSHING & COMPANY		123,988	200,000	1,435	1.C FE
20030N-CE-9	COMCAST CORP		06/20/2023	PERSHING & COMPANY		83,228	100,000	567	1.G FE
745332-CL-8	PUGET SOUND ENERGY INC		06/20/2023	BAIRD ROBERT W & CO		102,085	100,000	515	1.F FE
1109999999.	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					309,301	400,000	2,517	XXX
2509999997.	Total - Bonds - Part 3					1,445,967	1,680,221	7,842	XXX
2509999998.	Total - Bonds - Part 5					XXX	XXX	XXX	XXX
2509999999.	Total - Bonds					1,445,967	1,680,221	7,842	XXX
4509999997.	Total - Preferred Stocks - Part 3						XXX		XXX
4509999998.	Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
4509999999.	Total - Preferred Stocks						XXX		XXX
5989999997.	Total - Common Stocks - Part 3						XXX		XXX
5989999998.	Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX
5989999999.	Total - Common Stocks						XXX		XXX
5999999999.	Total - Preferred and Common Stocks						XXX		XXX
6009999999.	Totals					1,445,967	XXX	7,842	XXX

STATEMENT AS OF JUNE 30, 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	For- eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid- eration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization)/ Accretion	Current Year's Other Than Temporary Impairment Recogn- ized	Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Con- tractual Maturity Date	NAIC Desig- nation, NAIC Desig- nation Modifier and SVO Admini- strative Symbol
..36202F-M7-8	GINNIE MAE II POOL .....	.....	06/01/2023	PAYDOWN .....	.....	609	609	623	625	.....	(17)	.....	(17)	.....	609	.....	.....	.....	10	12/01/2040	1.A
..36202F-PF-7	GINNIE MAE II POOL .....	.....	06/01/2023	PAYDOWN .....	.....	585	585	600	602	.....	(17)	.....	(17)	.....	585	.....	.....	.....	10	01/01/2041	1.A
..36202F-TL-0	GINNIE MAE II POOL .....	.....	06/01/2023	PAYDOWN .....	.....	714	714	757	765	.....	(51)	.....	(51)	.....	714	.....	.....	.....	14	05/01/2041	1.A
..36202F-UE-4	GINNIE MAE II POOL .....	.....	06/01/2023	PAYDOWN .....	.....	351	351	361	363	.....	(12)	.....	(12)	.....	351	.....	.....	.....	6	06/01/2041	1.A
..36202F-UF-1	GINNIE MAE II POOL .....	.....	06/01/2023	PAYDOWN .....	.....	425	425	449	453	.....	(29)	.....	(29)	.....	425	.....	.....	.....	8	06/01/2041	1.A
..36202F-V5-9	GINNIE MAE II POOL .....	.....	06/01/2023	PAYDOWN .....	.....	2,234	2,234	2,314	2,324	.....	(89)	.....	(89)	.....	2,234	.....	.....	.....	33	11/01/2041	1.A
..36241L-S3-1	GINNIE MAE I POOL .....	.....	06/01/2023	PAYDOWN .....	.....	367	367	379	382	.....	(14)	.....	(14)	.....	367	.....	.....	.....	6	01/01/2041	1.A
..912828-U5-7	UNITED STATES TREASURY NOTE/BOND .....	.....	05/01/2023	CITIGROUP GLOBAL MKT ...	.....	132,843	135,000	133,903	134,822	.....	64	.....	64	.....	134,887	.....	(2,043)	(2,043)	1,206	11/30/2023	1.A
..912828-VS-6	UNITED STATES TREASURY NOTE/BOND .....	.....	05/01/2023	NOMURA SECURITIES/FI ...	.....	124,043	125,000	125,913	125,092	.....	(50)	.....	(50)	.....	125,041	.....	(998)	(998)	2,219	08/15/2023	1.A
..91282C-DA-6	UNITED STATES TREASURY NOTE/BOND .....	.....	05/01/2023	JPM SECURITIES-FIXED ...	.....	686,766	700,000	697,102	698,820	.....	528	.....	528	.....	699,348	.....	(12,582)	(12,582)	1,028	09/30/2023	1.A
..91282C-FN-6	UNITED STATES TREASURY NOTE/BOND .....	.....	05/01/2023	NOMURA SECURITIES/FI ...	.....	1,245,654	1,250,000	1,238,267	1,239,192	.....	2,020	.....	2,020	.....	1,241,212	.....	4,442	4,442	31,207	09/30/2024	1.A FE
0109999999 Subtotal - Bonds - U.S. Governments						2,194,591	2,215,285	2,200,668	2,203,440	.....	2,333	.....	2,333	.....	2,205,773	.....	(11,181)	(11,181)	35,747	XXX	XXX
..3128M9-2M-3	FREDDIE MAC GOLD POOL .....	.....	06/01/2023	PAYDOWN .....	.....	223	223	235	238	.....	(15)	.....	(15)	.....	223	.....	.....	.....	4	04/01/2044	1.A
..3128MJ-V2-3	FREDDIE MAC GOLD POOL .....	.....	06/01/2023	PAYDOWN .....	.....	223	223	232	239	.....	(16)	.....	(16)	.....	223	.....	.....	.....	3	03/01/2045	1.A
..3128MJ-XX-3	FREDDIE MAC GOLD POOL .....	.....	06/01/2023	PAYDOWN .....	.....	462	462	476	487	.....	(25)	.....	(25)	.....	462	.....	.....	.....	7	03/01/2046	1.A
..3128MJ-Z9-4	FREDDIE MAC GOLD POOL .....	.....	06/01/2023	PAYDOWN .....	.....	294	294	311	326	.....	(32)	.....	(32)	.....	294	.....	.....	.....	5	06/01/2047	1.A
..3128MJ-ZF-0	FREDDIE MAC GOLD POOL .....	.....	06/01/2023	PAYDOWN .....	.....	553	553	544	541	.....	12	.....	12	.....	553	.....	.....	.....	7	01/01/2047	1.A
..3128MJ-ZH-6	FREDDIE MAC GOLD POOL .....	.....	06/01/2023	PAYDOWN .....	.....	542	542	570	586	.....	(45)	.....	(45)	.....	542	.....	.....	.....	9	01/01/2047	1.A
..3128MJ-ZP-8	FREDDIE MAC GOLD POOL .....	.....	06/01/2023	PAYDOWN .....	.....	413	413	433	450	.....	(37)	.....	(37)	.....	413	.....	.....	.....	7	02/01/2047	1.A
..3128MI-WS-8	FREDDIE MAC GOLD POOL .....	.....	06/01/2023	PAYDOWN .....	.....	954	954	977	976	.....	(22)	.....	(22)	.....	954	.....	.....	.....	13	08/01/2032	1.A
..31307N-E3-4	FREDDIE MAC GOLD POOL .....	.....	06/01/2023	PAYDOWN .....	.....	737	737	773	762	.....	(25)	.....	(25)	.....	737	.....	.....	.....	11	12/01/2028	1.A
..3132AD-PF-9	FREDDIE MAC POOL .....	.....	06/01/2023	PAYDOWN .....	.....	2,473	2,473	2,648	2,940	.....	(467)	.....	(467)	.....	2,473	.....	.....	.....	59	11/01/2048	1.A
..3132CW-VZ-4	FREDDIE MAC POOL .....	.....	05/02/2023	VARIOUS .....	.....	2,115,960	2,280,400	2,121,485	.....	7,863	.....	7,863	.....	.....	2,129,348	.....	(13,388)	(13,388)	14,683	03/01/2037	1.A
..3132DV-4H-5	FREDDIE MAC POOL .....	.....	06/01/2023	PAYDOWN .....	.....	1,261	1,261	1,282	1,312	.....	(51)	.....	(51)	.....	1,261	.....	.....	.....	16	11/01/2049	1.A
..3132DV-4P-7	FREDDIE MAC POOL .....	.....	06/01/2023	PAYDOWN .....	.....	2,903	2,903	2,944	3,001	.....	(98)	.....	(98)	.....	2,903	.....	.....	.....	36	12/01/2049	1.A
..3132DW-BH-5	FREDDIE MAC POOL .....	.....	06/01/2023	PAYDOWN .....	.....	4,541	4,541	4,539	4,539	.....	2	.....	2	.....	4,541	.....	.....	.....	38	04/01/2051	1.A
..3132DW-CP-6	FREDDIE MAC POOL .....	.....	06/01/2023	PAYDOWN .....	.....	5,717	5,717	5,212	5,216	.....	501	.....	501	.....	5,717	.....	.....	.....	60	11/01/2051	1.A
..3132DW-CT-8	FREDDIE MAC POOL .....	.....	06/01/2023	PAYDOWN .....	.....	32,192	32,192	32,297	32,290	.....	(98)	.....	(98)	.....	32,192	.....	.....	.....	270	11/01/2051	1.A
..3132DW-08-3	FREDDIE MAC POOL .....	.....	06/01/2023	PAYDOWN .....	.....	6,717	6,717	6,697	6,697	.....	20	.....	20	.....	6,717	.....	.....	.....	114	07/01/2052	1.A
..3132DW-FT-5	FREDDIE MAC POOL .....	.....	06/01/2023	PAYDOWN .....	.....	12,445	12,445	12,552	.....	(107)	.....	.....	(107)	.....	12,445	.....	.....	.....	120	12/01/2052	1.A
..3132GD-RW-4	FREDDIE MAC GOLD POOL .....	.....	06/01/2023	PAYDOWN .....	.....	83	83	86	86	.....	(4)	.....	(4)	.....	83	.....	.....	.....	2	05/01/2041	1.A
..3132GK-5A-0	FREDDIE MAC GOLD POOL .....	.....	06/01/2023	PAYDOWN .....	.....	323	323	345	351	.....	(28)	.....	(28)	.....	323	.....	.....	.....	5	11/01/2041	1.A
..3132M9-2R-4	FREDDIE MAC GOLD POOL .....	.....	06/01/2023	PAYDOWN .....	.....	517	517	552	573	.....	(56)	.....	(56)	.....	517	.....	.....	.....	9	10/01/2044	1.A
..3132XU-SK-2	FREDDIE MAC GOLD POOL .....	.....	06/01/2023	PAYDOWN .....	.....	275	275	289	298	.....	(23)	.....	(23)	.....	275	.....	.....	.....	5	11/01/2047	1.A
..31335A-S7-4	FREDDIE MAC GOLD POOL .....	.....	06/01/2023	PAYDOWN .....	.....	349	349	374	388	.....	(38)	.....	(38)	.....	349	.....	.....	.....	6	09/01/2045	1.A
..31339S-BB-0	FREDDIE MAC POOL .....	.....	06/01/2023	PAYDOWN .....	.....	1,485	1,485	1,502	1,532	.....	(47)	.....	(47)	.....	1,485	.....	.....	.....	20	09/01/2049	1.A
..3133AY-LH-1	FREDDIE MAC POOL .....	.....	06/01/2023	PAYDOWN .....	.....	32,353	32,353	28,122	.....	4,231	.....	4,231	.....	.....	32,353	.....	.....	.....	241	11/01/2051	1.A
..3133B9-MK-7	FREDDIE MAC POOL .....	.....	06/01/2023	PAYDOWN .....	.....	33,934	33,934	33,743	33,747	.....	187	.....	187	.....	33,934	.....	.....	.....	437	04/01/2052	1.A
..3133KK-7C-7	FREDDIE MAC POOL .....	.....	06/01/2023	PAYDOWN .....	.....	7,149	7,149	7,203	7,200	.....	(51)	.....	(51)	.....	7,149	.....	.....	.....	40	02/01/2051	1.A
..3137FE-UA-6	FREDDIE MAC MULTIFAMILY STRUCTURED PASS .....	.....	06/01/2023	PAYDOWN .....	.....	498	498	512	498	.....	(3)	.....	(3)	.....	498	.....	.....	.....	7	01/01/2025	1.A
..3137FJ-JV-2	FREDDIE MAC MULTIFAMILY STRUCTURED PASS .....	.....	06/01/2023	PAYDOWN .....	.....	1,019	1,019	1,039	1,027	.....	(8)	.....	(8)	.....	1,019	.....	.....	.....	17	07/01/2028	1.A
..3138E7-TV-6	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	1,446	1,446	1,492	1,469	.....	(22)	.....	(22)	.....	1,446	.....	.....	.....	18	02/01/2027	1.A
..3138EJ-3Y-2	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	222	222	233	237	.....	(15)	.....	(15)	.....	222	.....	.....	.....	3	11/01/2042	1.A
..3138EQ-7L-0	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	381	381	409	421	.....	(40)	.....	(40)	.....	381	.....	.....	.....	7	06/01/2043	1.A
..3138MO-AK-6	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	163	163	169	171	.....	(9)	.....	(9)	.....	163	.....	.....	.....	2	08/01/2042	1.A
..3138M5-EA-3	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	124	124	132	134	.....	(10)	.....	(10)	.....	124	.....	.....	.....	2	08/01/2042	1.A

STATEMENT AS OF JUNE 30, 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Ident-ification	Description	For- eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid- eration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization)/ Accretion	Current Year's Other Than Temporary Impairment Recogn- ized	Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Con- tractual Maturity Date	NAIC Desig- nation, NAIC Desig- nation Modifier and SVO Admini- strative Symbol
..3138M5-LP-2	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	471	471	489	493	.....	(21)	.....	(21)	.....	471	.....	.....	.....	7	08/01/2042	1.A
..3138MB-XL-5	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	894	894	919	921	.....	(27)	.....	(27)	.....	894	.....	.....	.....	12	10/01/2042	1.A
..3138W6-SU-1	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	321	321	327	328	.....	(8)	.....	(8)	.....	321	.....	.....	.....	4	04/01/2043	1.A
..3138W9-BF-6	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	719	719	755	772	.....	(53)	.....	(53)	.....	719	.....	.....	.....	11	07/01/2043	1.A
..3138WB-AR-6	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	729	729	759	765	.....	(36)	.....	(36)	.....	729	.....	.....	.....	13	02/01/2044	1.A
..3138WB-UK-9	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	83	83	88	90	.....	(7)	.....	(7)	.....	83	.....	.....	.....	1	05/01/2044	1.A
..3138WD-ME-8	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	168	168	180	190	.....	(23)	.....	(23)	.....	168	.....	.....	.....	3	12/01/2044	1.A
..3138WE-6G-9	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	75	75	79	81	.....	(5)	.....	(5)	.....	75	.....	.....	.....	1	07/01/2045	1.A
..3138WE-KB-4	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	219	219	228	233	.....	(13)	.....	(13)	.....	219	.....	.....	.....	3	04/01/2045	1.A
..3138WE-KG-3	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	247	247	258	261	.....	(14)	.....	(14)	.....	247	.....	.....	.....	4	04/01/2045	1.A
..3138WF-NN-2	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	779	779	813	806	.....	(27)	.....	(27)	.....	779	.....	.....	.....	9	09/01/2030	1.A
..3138WG-BA-1	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	628	628	661	683	.....	(55)	.....	(55)	.....	628	.....	.....	.....	10	12/01/2045	1.A
..3138WG-BW-3	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	428	428	448	461	.....	(33)	.....	(33)	.....	428	.....	.....	.....	8	12/01/2045	1.A
..3138WG-DN-1	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	328	328	344	354	.....	(25)	.....	(25)	.....	328	.....	.....	.....	5	01/01/2046	1.A
..3138WJ-H3-5	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	1,209	1,209	1,243	1,239	.....	(29)	.....	(29)	.....	1,209	.....	.....	.....	15	11/01/2036	1.A
..3138WJ-K5-6	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	796	796	793	792	.....	5	.....	5	.....	796	.....	.....	.....	10	11/01/2046	1.A
..3138WK-4X-0	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	1,266	1,266	1,264	1,264	.....	2	.....	2	.....	1,266	.....	.....	.....	16	06/01/2032	1.A
..3138WL-C2-7	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	589	589	618	651	.....	(61)	.....	(61)	.....	589	.....	.....	.....	13	07/01/2047	1.A
..3138WV-X5-5	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	671	671	704	713	.....	(42)	.....	(42)	.....	671	.....	.....	.....	10	07/01/2043	1.A
..3138X4-V9-8	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	302	302	315	322	.....	(19)	.....	(19)	.....	302	.....	.....	.....	5	08/01/2043	1.A
..3138Y6-3S-1	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	587	587	616	629	.....	(42)	.....	(42)	.....	587	.....	.....	.....	10	01/01/2042	1.A
..3140EV-T7-2	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	2,773	2,773	2,770	2,769	.....	4	.....	4	.....	2,773	.....	.....	.....	30	07/01/2031	1.A
..3140FM-DF-0	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	853	853	853	854	.....	(1)	.....	(1)	.....	853	.....	.....	.....	11	12/01/2046	1.A
..3140J5-LM-9	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	1,216	1,216	1,261	1,250	.....	(33)	.....	(33)	.....	1,216	.....	.....	.....	18	11/01/2031	1.A
..3140J8-HC-0	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	89	89	91	95	.....	(6)	.....	(6)	.....	89	.....	.....	.....	2	04/01/2048	1.A
..3140Q7-LE-5	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	441	441	462	484	.....	(43)	.....	(43)	.....	441	.....	.....	.....	9	09/01/2047	1.A
..3140Q8-M9-3	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	1,014	1,014	1,032	1,029	.....	(16)	.....	(16)	.....	1,014	.....	.....	.....	15	02/01/2033	1.A
..3140QR-J8-7	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	19,894	19,894	19,708	187	.....	187	.....	187	.....	19,894	.....	.....	.....	212	02/01/2053	1.A
..3140X6-UB-5	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	3,360	3,360	3,549	3,803	.....	(443)	.....	(443)	.....	3,360	.....	.....	.....	49	05/01/2048	1.A
..3140X8-KF-3	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	5,313	5,313	5,491	5,509	.....	(196)	.....	(196)	.....	5,313	.....	.....	.....	45	11/01/2050	1.A
..3140XF-AR-2	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	22,437	22,437	25,056	25,371	.....	(2,934)	.....	(2,934)	.....	22,437	.....	.....	.....	401	01/01/2050	1.A
..31417B-7A-9	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	49	49	52	55	.....	(6)	.....	(6)	.....	49	.....	.....	.....	1	06/01/2042	1.A
..31417C-S3-0	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	418	418	440	443	.....	(25)	.....	(25)	.....	418	.....	.....	.....	6	08/01/2042	1.A
..31417D-TR-4	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	271	271	282	286	.....	(14)	.....	(14)	.....	271	.....	.....	.....	4	11/01/2042	1.A
..31417G-5A-0	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	455	455	477	486	.....	(31)	.....	(31)	.....	455	.....	.....	.....	7	07/01/2043	1.A
..31418C-E6-7	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	374	374	398	400	.....	(26)	.....	(26)	.....	374	.....	.....	.....	6	12/01/2036	1.A
..31418C-FG-4	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	761	761	766	766	.....	(6)	.....	(6)	.....	761	.....	.....	.....	9	01/01/2037	1.A
..31418C-ND-2	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	372	372	381	390	.....	(18)	.....	(18)	.....	372	.....	.....	.....	5	08/01/2047	1.A
..31418C-OB-3	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	451	451	469	485	.....	(33)	.....	(33)	.....	451	.....	.....	.....	7	10/01/2047	1.A
..31418D-BF-8	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	504	504	518	555	.....	(51)	.....	(51)	.....	504	.....	.....	.....	7	04/01/2049	1.A
..31418D-KJ-0	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	2,037	2,037	2,059	2,071	.....	(35)	.....	(35)	.....	2,037	.....	.....	.....	21	01/01/2035	1.A
..31418E-AP-5	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	26,611	26,611	27,238	27,230	.....	(619)	.....	(619)	.....	26,611	.....	.....	.....	318	01/01/2052	1.A
..31418E-LY-4	FANNIE MAE POOL .....	.....	06/01/2023	PAYDOWN .....	.....	5,171	5,171	5,201	.....	.....	(29)	.....	(29)	.....	5,171	.....	.....	.....	97	12/01/2052	1.A
0909999999. Subtotal - Bonds - U.S. Special Revenues						2,375,304	2,539,744	2,380,864	195,115	.....	6,517	.....	6,517	.....	2,388,692	(13,388)	(13,388)	17,733	XXX	XXX	
..10112R-AZ-7	BOSTON PROPERTIES LP .....	.....	06/12/2023	NATL FINANCIAL SERVI ...	.....	94,612	100,000	99,845	99,954	.....	9	.....	9	.....	99,963	(5,351)	(5,351)	2,924	01/15/2025	2.A FE	
..29364D-AR-1	ENTERGY ARKANSAS LLC .....	.....	06/01/2023	MATURITY .....	.....	100,000	100,000	99,917	99,996	.....	4	.....	4	.....	100,000	.....	.....	1,525	06/01/2023	1.F FE	

STATEMENT AS OF JUNE 30, 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Ident- ification	Description	For- eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid- eration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization)/ Accretion	Current Year's Other Than Temporary Impairment Recog- nized	Total Change in Book/ Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/ Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Stated Con- tractual Maturity Date	NAIC Desig- nation, NAIC Desig- nation Modifier and SVO Admini- strative Symbol
..69371R-08-2	PACCAR FINANCIAL CORP .....	.....	06/08/2023	MATURITY .....	.....	190,000	190,000	189,736	189,961	.....	39	.....	39	.....	190,000	.....	.....	.....	760	06/08/2023	1.E FE
..78355H-KH-1	RYDER SYSTEM INC .....	.....	06/09/2023	MATURITY .....	.....	100,000	100,000	99,836	99,984	.....	16	.....	16	.....	100,000	.....	.....	.....	1,875	06/09/2023	2.A FE
1109999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						484,612	490,000	489,334	489,895		68		68		489,963		(5,351)	(5,351)	7,084	XXX	XXX
2509999997. Total - Bonds - Part 4						5,054,507	5,245,029	5,070,866	2,888,450		8,918		8,918		5,084,428		(29,920)	(29,920)	60,564	XXX	XXX
2509999998. Total - Bonds - Part 5						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2509999999. Total - Bonds						5,054,507	5,245,029	5,070,866	2,888,450		8,918		8,918		5,084,428		(29,920)	(29,920)	60,564	XXX	XXX
4509999997. Total - Preferred Stocks - Part 4							XXX													XXX	XXX
4509999998. Total - Preferred Stocks - Part 5						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4509999999. Total - Preferred Stocks							XXX													XXX	XXX
5989999997. Total - Common Stocks - Part 4							XXX													XXX	XXX
5989999998. Total - Common Stocks - Part 5						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5989999999. Total - Common Stocks							XXX													XXX	XXX
5999999999. Total - Preferred and Common Stocks							XXX													XXX	XXX
6009999999 - Totals						5,054,507	XXX	5,070,866	2,888,450		8,918		8,918		5,084,428		(29,920)	(29,920)	60,564	XXX	XXX

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

Schedule DB - Part B - Section 1 - Futures Contracts Open
N O N E

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

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

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

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

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees
N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned
N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned
N O N E

Schedule E - Part 1 - Month End Depository Balances
N O N E

SCHEDULE E - PART 2 - CASH EQUIVALENTS

[illegible]



SUPPLEMENT FOR THE QUARTER ENDING JUNE 30, 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

Year To Date For The Period Ended JUNE 30, 2023

NAIC Group Code 0201 NAIC Company Code 13998

Company Name UTICA NATIONAL INSURANCE COMPANY OF OHIO

If the reporting entity writes any director and officer (D&O) business, please provide the following:

1. Monoline Policies

1 Direct Written Premium	2 Direct Earned Premium	3 Direct Losses Incurred
\$	\$	\$

2. Commercial Multiple Peril (CMP) Packaged Policies

- 2.1 Does the reporting entity provide D&O liability coverage as part of a CMP packaged policy?

Yes [X] No []
- 2.2 Can the direct premium earned for D&O liability coverage provided as part of a CMP packaged policy be quantified or estimated?

Yes [X] No []
- 2.3 If the answer to question 2.2 is yes, provide the quantified or estimated direct premium earned amount for D&O liability coverage in CMP packaged policies

2.31 Amount quantified:

\$ 80,637

2.32 Amount estimated using reasonable assumptions:

\$
- 2.4 If the answer to question 2.1 is yes, provide direct losses incurred (losses paid plus change in case reserves) for the D&O liability coverage provided in CMP packaged policies.

\$