



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

## ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2023  
OF THE CONDITION AND AFFAIRS OF THE

# Utica National Insurance Company of Ohio

NAIC Group Code 2021 2021 NAIC Company Code 13998 Employer's ID Number 27-2764004  
(Current) (Prior)

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, Columbus, OH, US 43219  
(Street and Number) (City or Town, State, Country and Zip Code)

Mail Address Post Office Box 530, Utica, NY, US 135030530  
(Street and Number or P.O. Box) (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 \_\_\_\_\_, \_\_\_\_\_ 800-598-8422  
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address [www.uticanational.com](http://www.uticanational.com)

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

## OFFICERS

**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 County of Oneida SS

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

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

NAIC Group Code	0201	BUSINESS IN THE STATE OF	Connecticut	DURING THE YEAR 2023								NAIC Company Code	13998
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 .....													0
2.1 Allied Lines .....													
2.2 Multiple Peril Crop .....													
2.3 Federal Flood .....													
2.4 Private Crop .....													
2.5 Private Flood .....													
3. Farmersowners Multiple Peril .....													
4. Homeowners Multiple Peril .....													.228
5.1 Commercial Multiple Peril (Non-Liability Portion) .....													.248
5.2 Commercial Multiple Peril (Liability Portion) .....													
6. Mortgage Guaranty .....													
8. Ocean Marine .....													
9. Inland Marine .....													0
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 .....	236,041	219,413		104,038	79,298	46,704	90,578	23,890	30,344	20,257	32,488	(2,646)	
17.1 Other Liability - Occurrence .....						0	0						.93
17.2 Other Liability - Claims-Made .....													4
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 .....													6
19.3 Commercial Auto No-Fault (Personal Injury Protection) .....													139
19.4 Other Commercial Auto Liability .....													
21.1 Private Passenger Auto Physical Damage .....													38
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 .....				104,038	79,298	46,704	90,578	23,890	30,344	20,257	32,488	(1,889)	
<b>DETAILS OF WRITE-INS</b>													
3401. ....													
3402. ....													
3403. ....													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

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

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

and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

NAIC Group Code	0201	BUSINESS IN THE STATE OF Georgia		DURING THE YEAR 2023							NAIC Company Code	13998	
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 Direct Premiums Written	2 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 .....													.663
2.1 Allied Lines .....													3
2.2 Multiple Peril Crop .....													
2.3 Federal Flood .....													
2.4 Private Crop .....													
2.5 Private Flood .....													
3. Farmersowners Multiple Peril .....													
4. Homeowners Multiple Peril .....													
5.1 Commercial Multiple Peril (Non-Liability Portion) .....	4,549,603	4,383,464		.2,009,670	..7,059,815	..10,203,952	..3,729,051	..45,862	..117,762	..83,281	..736,713	..392,501	
5.2 Commercial Multiple Peril (Liability Portion) .....	2,006,225	2,066,462		756,219	..1,250,069	..1,558,653	..3,469,585	..199,293	..330,887	..1,051,190	..317,210	..199,789	
6. Mortgage Guaranty .....								(90)					
8. Ocean Marine .....													
9. Inland Marine .....													32
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 .....	1,148,498	1,199,634		.458,699	..639,895	..180,325	..1,216,296	..91,071	..8,187	..197,174	..136,268	..116,313	
17.1 Other Liability - Occurrence .....													29,169
17.2 Other Liability - Claims-Made .....	168,222	182,175		96,635	(2,500)	(55,061)	100,356	4,766	(63,246)	39,354	20,112	6,804	
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 .....													(37)
19.3 Commercial Auto No-Fault (Personal Injury Protection) .....													2,063
19.4 Other Commercial Auto Liability .....	1,873,352	2,343,415		.836,066	..1,479,032	..1,443,397	..2,666,989	..104,521	..84,173	..386,154	..304,449	..148,214	
21.1 Private Passenger Auto Physical Damage .....													
21.2 Commercial Auto Physical Damage .....	408,318	509,896		178,731	..381,234	..417,183	..59,858	15,872	..16,606	..5,801	..65,603	..36,284	
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 .....													
35. Total (a) .....	10,154,218	10,685,046		4,336,020	10,807,545	13,748,359	11,242,135	461,385	494,341	1,762,953	1,580,318	931,834	
<b>DETAILS OF WRITE-INS</b>													
3401. ....													
3402. ....													
3403. ....													
3498. Summary of remaining write-ins for Line 34 from overflow page .....													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) .....													

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

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

and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

NAIC Group Code	0201	BUSINESS IN THE STATE OF	Maryland	DURING THE YEAR 2023								NAIC Company Code	13998
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire .....													
2.1 Allied Lines .....													
2.2 Multiple Peril Crop .....													
2.3 Federal Flood .....													
2.4 Private Crop .....													
2.5 Private Flood .....													
3. Farmersowners 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 .....													
35. Total (a) .....													
<b>DETAILS OF WRITE-INS</b>													
3401. ....													
3402. ....													
3403. ....													
3498. Summary of remaining write-ins for Line 34 from overflow page .....													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) .....													

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

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

and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

NAIC Group Code	0201	BUSINESS IN THE STATE OF	Massachusetts	DURING THE YEAR 2023								NAIC Company Code	13998
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire .....													
2.1 Allied Lines .....													0
2.2 Multiple Peril Crop .....													
2.3 Federal Flood .....													
2.4 Private Crop .....													
2.5 Private Flood .....													
3. Farmersowners Multiple Peril .....													
4. Homeowners Multiple Peril .....													
5.1 Commercial Multiple Peril (Non-Liability Portion) .....													(1,997)
5.2 Commercial Multiple Peril (Liability Portion) .....													(2,167)
6. Mortgage Guaranty .....													
8. Ocean Marine .....													
9. Inland Marine .....													0
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 .....		1,211,761	1,201,674		421,654	161,183	469,943	383,269	11,740	54,294	49,522	154,755	144,133
17.1 Other Liability - Occurrence .....													(809)
17.2 Other Liability - Claims-Made .....													(33)
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) .....													(56)
19.4 Other Commercial Auto Liability .....													(1,216)
21.1 Private Passenger Auto Physical Damage .....													
21.2 Commercial Auto Physical Damage .....													(336)
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 .....													
35. Total (a) .....		1,211,761	1,201,674		421,654	161,183	469,943	383,269	11,740	54,294	49,522	154,755	137,518
<b>DETAILS OF WRITE-INS</b>													
3401. ....													
3402. ....													
3403. ....													
3498. Summary of remaining write-ins for Line 34 from overflow page .....													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) .....													

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

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

and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

NAIC Group Code	0201	BUSINESS IN THE STATE OF New Hampshire		DURING THE YEAR 2023							NAIC Company Code	13998	
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 Direct Premiums Written	2 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 .....													0
2.1 Allied Lines .....													
2.2 Multiple Peril Crop .....													
2.3 Federal Flood .....													
2.4 Private Crop .....													
2.5 Private Flood .....													
3. Farmersowners Multiple Peril .....													
4. Homeowners Multiple Peril .....													.106
5.1 Commercial Multiple Peril (Non-Liability Portion) .....													.117
5.2 Commercial Multiple Peril (Liability Portion) .....													
6. Mortgage Guaranty .....													
8. Ocean Marine .....													
9. Inland Marine .....													0
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 .....		334,243	321,581		102,523	40,726	188,798	189,040	3,238	12,036	15,884	45,579	5,480
17.1 Other Liability - Occurrence .....													.44
17.2 Other Liability - Claims-Made .....													1
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) .....													3
19.4 Other Commercial Auto Liability .....													.66
21.1 Private Passenger Auto Physical Damage .....													
21.2 Commercial Auto Physical Damage .....													18
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 .....		334,243	321,581		102,523	40,726	188,798	189,040	3,238	12,036	15,884	45,579	5,837
<b>DETAILS OF WRITE-INS</b>													
3401. ....													
3402. ....													
3403. ....													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

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

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

NAIC Group Code	0201	BUSINESS IN THE STATE OF New Jersey		DURING THE YEAR 2023							NAIC Company Code	13998	
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 .....													0
2.1 Allied Lines .....													0
2.2 Multiple Peril Crop .....													
2.3 Federal Flood .....													
2.4 Private Crop .....													
2.5 Private Flood .....													
3. Farmersowners Multiple Peril .....													
4. Homeowners Multiple Peril .....													.746
5.1 Commercial Multiple Peril (Non-Liability Portion) .....													.814
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 .....		124,195	35,368		88,827		1,161		1,161		27	27	17,699
17.1 Other Liability - Occurrence .....													.438
17.2 Other Liability - Claims-Made .....													.305
17.3 Excess Workers' Compensation .....													12
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 .....													22
19.3 Commercial Auto No-Fault (Personal Injury Protection) .....													.708
19.4 Other Commercial Auto Liability .....													
21.1 Private Passenger Auto Physical Damage .....													.125
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 .....													
35. Total (a) .....		124,195	35,368		88,827		1,161		1,161		27	27	17,699
<b>DETAILS OF WRITE-INS</b>													
3401. ....													
3402. ....													
3403. ....													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

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

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

and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

NAIC Group Code	0201	BUSINESS IN THE STATE OF New York		DURING THE YEAR 2023							NAIC Company Code	13998	
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 Direct Premiums Written	2 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 .....	10,210	9,984		4,808			.943	1,280		6	17	1,990	3,468
2.1 Allied Lines .....	1,629	1,834		.302								.267	.81
2.2 Multiple Peril Crop .....													
2.3 Federal Flood .....													
2.4 Private Crop .....													
2.5 Private Flood .....													
3. Farmersowners Multiple Peril .....													
4. Homeowners Multiple Peril .....													
5.1 Commercial Multiple Peril (Non-Liability Portion) .....	27,714,971	26,365,587	.264,832	14,027,598	9,719,061	10,988,928	6,690,295	247,483	245,221	173,331	5,005,742	558,599	
5.2 Commercial Multiple Peril (Liability Portion) .....	33,178,580	31,982,848	219,131	16,012,848	5,715,492	7,620,031	35,301,537	2,158,170	3,563,757	13,160,088	5,859,756	731,406	
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 .....	12,998,301	14,108,006	.574,741	5,034,151	6,101,867	7,407,978	25,929,296	558,917	842,872	3,027,616	1,599,766	358,589	
17.1 Other Liability - Occurrence .....	12,837,177	12,021,357		6,563,266		1,648,672	12,034,463	8,632	38,237	145,993	1,608,355	272,792	
17.2 Other Liability - Claims-Made .....	(15)	427										(2)	
17.3 Excess Workers' Compensation .....													
18.1 Products Liability - Occurrence .....							(107)	77		0	0		
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) .....	.915,895	.863,078	.544	.456,831	.223,005	.348,852	.327,051	18,241	26,192	55,783	159,073	27,115	
19.4 Other Commercial Auto Liability .....	17,172,610	15,891,070	14,950	8,845,880	4,650,727	11,619,559	20,141,006	575,473	1,704,069	2,889,534	2,980,219	486,488	
21.1 Private Passenger Auto Physical Damage .....													
21.2 Commercial Auto Physical Damage .....	4,554,541	4,316,497	3,020	2,316,051	2,894,931	3,164,136	.744,644	115,233	135,887	58,858	795,662	90,278	
22. Aircraft (all perils) .....													
23. Fidelity .....													
24. Surety .....													
26. Burglary and Theft .....								8	14		2		
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 .....													
35. Total (a) .....	109,383,899	105,561,410	1,077,218	53,263,735	29,305,082	42,799,459	101,170,248	3,682,150	6,556,266	19,511,276	18,010,046	2,528,835	
<b>DETAILS OF WRITE-INS</b>													
3401. ....													
3402. ....													
3403. ....													
3498. Summary of remaining write-ins for Line 34 from overflow page .....													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) .....													

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

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

and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

NAIC Group Code	0201	BUSINESS IN THE STATE OF North Carolina		DURING THE YEAR 2023							NAIC Company Code	13998	
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
		1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire .....													
2.1 Allied Lines .....													
2.2 Multiple Peril Crop .....													
2.3 Federal Flood .....													
2.4. Private Crop .....													
2.5 Private Flood .....													
3. Farmersowners Multiple Peril .....													
4. Homeowners Multiple Peril .....													
5.1 Commercial Multiple Peril (Non-Liability Portion) .....													1,250
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 .....													93
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) .....													1,500
19.4 Other Commercial Auto Liability .....													
21.1 Private Passenger Auto Physical Damage .....													
21.2 Commercial Auto Physical Damage .....													
22. Aircraft (all perils) .....													
23. Fidelity .....													
24. Surety .....													
26. Burglary and Theft .....													
27. Boiler and Machinery .....													
28. Credit .....													
29. International .....													
30. Warranty .....													
31. Reins nonproportional assumed property .....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
32. Reins nonproportional assumed liability .....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
33. Reins nonproportional assumed financial lines .....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
34. Aggregate Write-Ins for Other Lines of Business .....													
35. Total (a) .....													2,843
<b>DETAILS OF WRITE-INS</b>													
3401. ....													
3402. ....													
3403. ....													
3498. Summary of remaining write-ins for Line 34 from overflow page													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)													

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

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

NAIC Group Code	0201	BUSINESS IN THE STATE OF Ohio		DURING THE YEAR 2023							NAIC Company Code	13998		
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 Direct Premiums Written	2 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 .....													0	
2.1 Allied Lines .....													0	
2.2 Multiple Peril Crop .....														
2.3 Federal Flood .....														
2.4 Private Crop .....														
2.5 Private Flood .....														
3. Farmersowners Multiple Peril .....														
4. Homeowners Multiple Peril .....														
5.1 Commercial Multiple Peril (Non-Liability Portion) .....	67,196	60,041			32,965	118,417	40,775	.577	1,458	1,309	.666	10,521	.9,196	
5.2 Commercial Multiple Peril (Liability Portion) .....	37,408	34,255			17,964		(3,096)	10,374			(979)	2,656	5,826	5,646
6. Mortgage Guaranty .....														
8. Ocean Marine .....														
9. Inland Marine .....														0
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 .....	362	499			231		(5)	64			(2)	5	48	(98)
17.1 Other Liability - Occurrence .....														67
17.2 Other Liability - Claims-Made .....	351,394	356,465			193,789	6,649	45,468	63,600	14,002	78,392	67,374	55,869	35,132	
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
19.3 Commercial Auto No-Fault (Personal Injury Protection) .....														99
19.4 Other Commercial Auto Liability .....														19
21.1 Private Passenger Auto Physical Damage .....														
21.2 Commercial Auto Physical Damage .....														
22. Aircraft (all perils) .....														
23. Fidelity .....														
24. Surety .....														
26. Burglary and Theft .....														
27. Boiler and Machinery .....														
28. Credit .....														
29. International .....														
30. Warranty .....														
31. Reins nonproportional assumed property .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business .....														
35. Total (a) .....	456,360	451,260			244,949	125,065	83,143	74,615	15,460	78,721	70,702	72,263	50,066	
<b>DETAILS OF WRITE-INS</b>														
3401. ....														
3402. ....														
3403. ....														
3498. Summary of remaining write-ins for Line 34 from overflow page														
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)														

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

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

and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

NAIC Group Code	0201	BUSINESS IN THE STATE OF Pennsylvania		DURING THE YEAR 2023							NAIC Company Code	13998	
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 Direct Premiums Written	2 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 .....													.576
2.1 Allied Lines .....													0
2.2 Multiple Peril Crop .....													
2.3 Federal Flood .....													
2.4 Private Crop .....													
2.5 Private Flood .....													
3. Farmersowners Multiple Peril .....													
4. Homeowners Multiple Peril .....													
5.1 Commercial Multiple Peril (Non-Liability Portion) .....	695,055	680,898	27,142	320,426	265,020	266,323	19,194	5,965	6,189	.901	117,000	14,275	
5.2 Commercial Multiple Peril (Liability Portion) .....	978,866	944,207	14,739	392,405	103,748	637,463	1,061,399	103,083	255,628	388,649	164,061	22,645	
6. Mortgage Guaranty .....													
8. Ocean Marine .....													
9. Inland Marine .....													.66
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 .....	3,321,871	3,287,178		1,319,916	1,084,569	1,425,625	2,392,837	75,912	136,095	.340,000	405,019	57,325	
17.1 Other Liability - Occurrence .....	759,708	780,554		381,224		(43,558)	.544,151			1,560	7,270	114,259	
17.2 Other Liability - Claims-Made .....													.622
17.3 Excess Workers' Compensation .....													(21)
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) .....	44,589	43,998	21	20,367	.987	(2,400)	1,098	142	(749)	.352	7,517	1,689	
19.4 Other Commercial Auto Liability .....	1,327,873	1,277,356	3,182	630,710	.354,851	1,124,892	1,941,985	14,399	154,588	277,868	228,620	43,429	
21.1 Private Passenger Auto Physical Damage .....													
21.2 Commercial Auto Physical Damage .....	601,536	586,099	.575	273,813	.896,074	(4,912)	37,467	21,585	29,207	24,276	102,482	23,348	
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 .....													
35. Total (a) .....	7,729,498	7,600,290	45,660	3,338,861	2,705,250	3,403,432	5,998,131	221,086	582,518	1,039,316	1,138,839	163,953	
<b>DETAILS OF WRITE-INS</b>													
3401. ....													
3402. ....													
3403. ....													
3498. Summary of remaining write-ins for Line 34 from overflow page .....													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) .....													

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

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

and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

NAIC Group Code	0201	BUSINESS IN THE STATE OF Tennessee		DURING THE YEAR 2023							NAIC Company Code	13998	
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 Direct Premiums Written	2 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 .....													.287
2.1 Allied Lines .....													0
2.2 Multiple Peril Crop .....													
2.3 Federal Flood .....													
2.4 Private Crop .....													
2.5 Private Flood .....													
3. Farmersowners Multiple Peril .....													
4. Homeowners Multiple Peril .....													
5.1 Commercial Multiple Peril (Non-Liability Portion) .....	245,423	313,806			96,694	204,280	57,416	25,869	105	(2,018)	.745	39,649	.9,190
5.2 Commercial Multiple Peril (Liability Portion) .....	106,414	111,841			47,195	1,950	53,585	71,910	3,582	25,008	30,908	16,282	1,152
6. Mortgage Guaranty .....													
8. Ocean Marine .....													
9. Inland Marine .....													(1)
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 .....	170,945	191,058			76,378	36,619	(108,007)	128,136	5,367	(4,458)	26,763	21,236	5,054
17.1 Other Liability - Occurrence .....													(1,172)
17.2 Other Liability - Claims-Made .....													(57)
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) .....													(83)
19.4 Other Commercial Auto Liability .....	37,245	25,198			14,399	8,863	10,290	3,352	70	130	265	5,912	(213)
21.1 Private Passenger Auto Physical Damage .....													
21.2 Commercial Auto Physical Damage .....	17,855	13,501			6,394		(66)	41	13	46	41	2,699	163
22. Aircraft (all perils) .....													
23. Fidelity .....													
24. Surety .....													
26. Burglary and Theft .....													
27. Boiler and Machinery .....													
28. Credit .....													
29. International .....													
30. Warranty .....													
31. Reins nonproportional assumed property .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business .....													
35. Total (a) .....	577,882	655,404			241,060	251,712	13,219	229,307	9,137	18,709	58,722	85,777	14,320
<b>DETAILS OF WRITE-INS</b>													
3401. ....													
3402. ....													
3403. ....													
3498. Summary of remaining write-ins for Line 34 from overflow page .....													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) .....													

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

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

and number of persons insured under indemnity only products .....



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

NAIC Group Code	0201	BUSINESS IN THE STATE OF	Virginia	DURING THE YEAR 2023								NAIC Company Code	13998
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 .....													0
2.1 Allied Lines .....													0
2.2 Multiple Peril Crop .....													
2.3 Federal Flood .....													
2.4 Private Crop .....													
2.5 Private Flood .....													
3. Farmersowners Multiple Peril .....													
4. Homeowners Multiple Peril .....													
5.1 Commercial Multiple Peril (Non-Liability Portion) .....													(1,437)
5.2 Commercial Multiple Peril (Liability Portion) .....													1,244
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 .....													2,393
17.1 Other Liability - Occurrence .....													(587)
17.2 Other Liability - Claims-Made .....													(22)
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) .....													(41)
19.4 Other Commercial Auto Liability .....													(882)
21.1 Private Passenger Auto Physical Damage .....													
21.2 Commercial Auto Physical Damage .....													(241)
22. Aircraft (all perils) .....													
23. Fidelity .....													
24. Surety .....													
26. Burglary and Theft .....													
27. Boiler and Machinery .....													
28. Credit .....													
29. International .....													
30. Warranty .....													
31. Reins nonproportional assumed property .....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
32. Reins nonproportional assumed liability .....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
33. Reins nonproportional assumed financial lines .....	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.
34. Aggregate Write-Ins for Other Lines of Business .....													
35. Total (a) .....													425
<b>DETAILS OF WRITE-INS</b>													
3401. ....													
3402. ....													
3403. ....													
3498. Summary of remaining write-ins for Line 34 from overflow page .....													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) .....													

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

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

NAIC Group Code	0201	BUSINESS IN THE STATE OF	Grand Total	DURING THE YEAR 2023								NAIC Company Code	13998
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 .....	10,210	9,984		4,808		.943	1,280		6		17	1,990	4,993
2.1 Allied Lines .....	1,629	1,834		.302								.267	.84
2.2 Multiple Peril Crop .....													
2.3 Federal Flood .....													
2.4. Private Crop .....													
2.5 Private Flood .....													
3. Farmersowners Multiple Peril .....													
4. Homeowners Multiple Peril .....													
5.1 Commercial Multiple Peril (Non-Liability Portion) .....	33,272,248	31,803,796	.291,974	.16,487,353	.17,366,592	.21,557,395	.10,464,985	.300,872	.368,462	.258,924	.5,909,624	982,657	
5.2 Commercial Multiple Peril (Liability Portion) .....	36,307,493	35,139,613	233,870	17,226,631	7,071,259	9,866,636	39,914,805	2,464,128	4,174,302	14,633,492	6,363,134	960,894	
6. Mortgage Guaranty .....													
8. Ocean Marine .....													
9. Inland Marine .....			.722				.369	.586			55	(91)	.734
10. Financial Guaranty .....									(2)				
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 .....	19,546,216	20,564,410	.574,741	.7,606,417	.8,144,157	.9,612,522	.30,330,676	.770,136	.1,079,396	.3,677,247	.2,412,858	690,790	
17.1 Other Liability - Occurrence .....	13,596,885	12,801,911		6,944,490		1,605,114	12,578,614	.8,632	.39,797	.153,263	.1,722,614	.300,523	
17.2 Other Liability - Claims-Made .....	519,601	539,067		.290,424	.4,149	(9,593)	163,956	18,769	15,146	106,729	75,979	41,198	
17.3 Excess Workers' Compensation .....								(107)	.77				
18.1 Products Liability - Occurrence .....										0	0		
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) .....	.960,484	.907,076	.565	.479,198	.223,992	.346,452	.328,150	.18,384	.25,443	.56,135	.166,590	30,724	
19.4 Other Commercial Auto Liability .....	20,411,079	19,537,038	18,133	10,327,055	6,493,473	14,198,138	24,753,332	.694,463	1,942,960	3,553,820	3,519,200	678,332	
21.1 Private Passenger Auto Physical Damage .....													
21.2 Commercial Auto Physical Damage .....	5,582,249	5,425,992	3,595	2,774,989	4,172,240	3,576,340	.842,010	152,703	181,747	.88,976	.966,446	149,696	
22. Aircraft (all perils) .....													
23. Fidelity .....													
24. Surety .....													
26. Burglary and Theft .....								8	14		2		
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 .....													
35. Total (a) .....	130,208,095	126,731,444	1,122,877	62,141,667	43,475,861	60,754,218	119,378,484	4,428,086	7,827,256	22,528,659	21,137,764	3,840,624	
<b>DETAILS OF WRITE-INS</b>													
3401. ....													
3402. ....													
3403. ....													
3498. Summary of remaining write-ins for Line 34 from overflow page .....													
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) .....													

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

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

and number of persons insured under indemnity only products .....

## ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**SCHEDULE F - PART 1**

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On		8	9	10	11	12	13	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE								
0499999. Total - U.S. Non-Pool														
0799999. Total - Other (Non-U.S.)														
0899999. Total - Affiliates														
AA-9992118 . 00000 . National Workers Comp Reinsurance Pool .....	NY			191			114	114					60	
1099999. Total Pools, Associations or Other Similar Facilities - Mandatory Pools				191			114	114					60	
1299999. Total - Pools and Associations				191			114	114					60	
.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
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99999999 Totals				191			114	114					60	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

## **SCHEDULE F - PART 2**

Premium Portfolio Reinsurance Effectuated or (Cancelled) during Current Year

## ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**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			
15-0476880 ..	25976 ..	Utica Mutual Insurance Company .....	NY .....		130,399 ..			88,864 ..	6,643 ..	30,722 ..	16,044 ..	62,201 ..		204,475 ..			204,475 ..		
0199999 ..	Total Authorized - Affiliates - U.S. Intercompany Pooling				130,399 ..			88,864 ..	6,643 ..	30,722 ..	16,044 ..	62,201 ..		204,475 ..			204,475 ..		
0499999 ..	Total Authorized - Affiliates - U.S. Non-Pool																		
0799999 ..	Total Authorized - Affiliates - Other (Non-U.S.)																		
0899999 ..	Total Authorized - Affiliates				130,399 ..			88,864 ..	6,643 ..	30,722 ..	16,044 ..	62,201 ..		204,475 ..			204,475 ..		
1499999 ..	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)				130,399 ..			88,864 ..	6,643 ..	30,722 ..	16,044 ..	62,201 ..		204,475 ..			204,475 ..		
1899999 ..	Total Unauthorized - Affiliates - U.S. Non-Pool																		
2199999 ..	Total Unauthorized - Affiliates - Other (Non-U.S.)																		
2299999 ..	Total Unauthorized - Affiliates																		
2899999 ..	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)																		
3299999 ..	Total Certified - Affiliates - U.S. Non-Pool																		
3599999 ..	Total Certified - Affiliates - Other (Non-U.S.)																		
3699999 ..	Total Certified - Affiliates																		
4299999 ..	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																		
4699999 ..	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool																		
4999999 ..	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)																		
5099999 ..	Total Reciprocal Jurisdiction - Affiliates																		
5699999 ..	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)																		
5799999 ..	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)				130,399 ..			88,864 ..	6,643 ..	30,722 ..	16,044 ..	62,201 ..		204,475 ..			204,475 ..		
5899999 ..	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)							88,864 ..	6,643 ..	30,722 ..	16,044 ..	62,201 ..		204,475 ..			204,475 ..		
9999999 Totals					130,399 ..			88,864 ..	6,643 ..	30,722 ..	16,044 ..	62,201 ..		204,475 ..			204,475 ..		

## ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**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										36 Credit Risk on Un- collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer)	
		21	22	23	24				Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Recoverable (Col. 28 * 120%)	30	31	32	33	34
15-0476880 ..	Utica Mutual Insurance Company .....	.....	.....	.....	.....	.....	204,475	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling				XXX			204,475			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
0799999. Total Authorized - Affiliates - Other (Non-U.S.)				XXX													XXX			
0899999. Total Authorized - Affiliates				XXX			204,475											XXX		
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)				XXX			204,475												XXX	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool				XXX						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX														XXX		
2299999. Total Unauthorized - Affiliates				XXX															XXX	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)				XXX															XXX	
3299999. Total Certified - Affiliates - U.S. Non-Pool				XXX						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999. Total Certified - Affiliates - Other (Non-U.S.)				XXX														XXX		
3699999. Total Certified - Affiliates				XXX															XXX	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)				XXX															XXX	
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool				XXX						XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)					XXX														XXX	
5099999. Total Reciprocal Jurisdiction - Affiliates				XXX															XXX	
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)					XXX														XXX	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)					XXX					204,475									XXX	
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)				XXX							XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999 Totals				XXX			204,475												XXX	

## ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Col. 46+48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50											
		37 Current	Overdue																									
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38+39 +40+41																					
15-0476880 ..	Utica Mutual Insurance Company .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....										
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling																		XXX										
0499999. Total Authorized - Affiliates - U.S. Non-Pool																		XXX										
0799999. Total Authorized - Affiliates - Other (Non-U.S.)																		XXX										
0899999. Total Authorized - Affiliates																		XXX										
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)																		XXX										
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool																		XXX										
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)																		XXX										
2299999. Total Unauthorized - Affiliates																		XXX										
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)																		XXX										
3299999. Total Certified - Affiliates - U.S. Non-Pool																		XXX										
3599999. Total Certified - Affiliates - Other (Non-U.S.)																		XXX										
3699999. Total Certified - Affiliates																		XXX										
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																		XXX										
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool																		XXX										
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)																		XXX										
5099999. Total Reciprocal Jurisdiction - Affiliates																		XXX										
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)																		XXX										
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)																		XXX										
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																		XXX										
9999999 Totals																		XXX										

## ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

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

(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)			
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0	66	67	68			
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67				
15-0476880 ..	Utica Mutual 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	XXX	XXX			
0499999. Total Authorized - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0899999. Total Authorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2299999. Total Unauthorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
3299999. Total Certified - Affiliates - U.S. Non-Pool		XXX						XXX	XXX											
3599999. Total Certified - Affiliates - Other (Non-U.S.)		XXX						XXX	XXX											
3699999. Total Certified - Affiliates		XXX						XXX	XXX											
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX						XXX	XXX											
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5099999. Total Reciprocal Jurisdiction - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		XXX	XXX	XXX	XXX	XXX	XXX													
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		XXX						XXX	XXX											
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		XXX						XXX	XXX											
9999999 Totals		XXX						XXX	XXX											

## ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

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

(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70  20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71  Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
				72  Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73  Complete if Col. 52 = "Yes"; Otherwise Enter 0  20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([(Col. 47 * 20%) + [Col. 45 * 20%])	74  Complete if Col. 52 = "No"; Otherwise Enter 0  Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	75  Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	76  Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77  Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78  Total Provision for Reinsurance (Cols. 75 + 76 + 77)	
15-0476880 ..	Utica Mutual Insurance Company .....	XXX .....	XXX .....	XXX .....	XXX .....	XXX .....	XXX .....	XXX .....	XXX .....	XXX .....	
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling			XXX	XXX					XXX	XXX	
0499999. Total Authorized - Affiliates - U.S. Non-Pool			XXX	XXX					XXX	XXX	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)			XXX	XXX					XXX	XXX	
0899999. Total Authorized - Affiliates			XXX	XXX					XXX	XXX	
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			XXX	XXX					XXX	XXX	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool					XXX	XXX	XXX			XXX	
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)					XXX	XXX	XXX			XXX	
2299999. Total Unauthorized - Affiliates					XXX	XXX	XXX			XXX	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					XXX	XXX	XXX			XXX	
3299999. Total Certified - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX			XXX	
3599999. Total Certified - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX			XXX	
3699999. Total Certified - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX			XXX	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX	XXX	XXX	XXX	XXX	XXX			XXX	
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool			XXX	XXX					XXX	XXX	
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)			XXX	XXX					XXX	XXX	
5099999. Total Reciprocal Jurisdiction - Affiliates			XXX	XXX					XXX	XXX	
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)			XXX	XXX					XXX	XXX	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)											
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)											
9999999 Totals											

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

## **SCHEDULE F - PART 4**

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

## ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**SCHEDULE F - PART 5**

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

	<u>1</u> <u>Name of Reinsurer</u>	<u>2</u> <u>Commission Rate</u>	<u>3</u> <u>Ceded Premium</u>
1.	.....	.....	.....
2.	.....	.....	.....
3.	.....	.....	.....
4.	.....	.....	.....
5.	.....	.....	.....

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

	<u>1</u> <u>Name of Reinsurer</u>	<u>2</u> <u>Total Recoverables</u>	<u>3</u> <u>Ceded Premiums</u>	<u>4</u> <u>Affiliated</u>
6.	Utica Mutual Insurance Company .....	204,475	130,399	Yes [ <input checked="" type="checkbox"/> ] No [ <input type="checkbox"/> ]
7.	.....	.....	.....	Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]
8.	.....	.....	.....	Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]
9.	.....	.....	.....	Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]
10.	.....	.....	.....	Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]

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

## ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**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)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	29,349,546		29,349,546
2. Premiums and considerations (Line 15) .....			
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1) .....			
4. Funds held by or deposited with reinsured companies (Line 16.2) .....			
5. Other assets .....	4,988,316		4,988,316
6. Net amount recoverable from reinsurers .....		204,474,836	204,474,836
7. Protected cell assets (Line 27) .....			
8. <b>Totals (Line 28)</b> .....	<b>34,337,862</b>	<b>204,474,836</b>	<b>238,812,698</b>
<b>LIABILITIES (Page 3)</b>			
9. Losses and loss adjustment expenses (Lines 1 through 3) .....		142,273,618	142,273,618
10. Taxes, expenses, and other obligations (Lines 4 through 8) .....	5,678,118		5,678,118
11. Unearned premiums (Line 9) .....		62,201,218	62,201,218
12. Advance premiums (Line 10) .....			
13. Dividends declared and unpaid (Line 11.1 and 11.2) .....			
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12) .....			
15. Funds held by company under reinsurance treaties (Line 13) .....			
16. Amounts withheld or retained by company for account of others (Line 14) .....	437,917		437,917
17. Provision for reinsurance (Line 16) .....			
18. Other liabilities .....			
19. Total liabilities excluding protected cell business (Line 26) .....	6,116,035	204,474,836	210,590,871
20. Protected cell liabilities (Line 27) .....			
21. Surplus as regards policyholders (Line 37)	28,221,827	XXX	28,221,827
<b>22. Totals (Line 38)</b>	<b>34,337,862</b>	<b>204,474,836</b>	<b>238,812,698</b>

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

Yes [  ] No [  ]

If yes, give full explanation: Utica National Insurance Company of Ohio (NAIC 13998) has a reinsurance agreement with its parent company, Utica Mutual Insurance Company (NAIC 25976). Under this agreement, Utica National Insurance Company of Ohio cedes 100% of all insurance business to Utica Mutual Insurance Company. ....

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**

Schedule P - Part 1A - Homeowners/Farmowners

**N O N E**

Schedule P - Part 1B - Private Passenger Auto Liability/Medical

**N O N E**

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO**  
**SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**  
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....	
2. 2014.....	5,697	5,697		991	991	.60	.60				4	455	
3. 2015.....	8,958	8,958		3,182	3,182	205	205	6	6	12		719	
4. 2016.....	8,528	8,528		5,868	5,868	476	476	5	5	9		749	
5. 2017.....	8,715	8,715		2,860	2,860	227	227	8	8	16		712	
6. 2018.....	9,828	9,828		2,643	2,643	391	391	0	0	3		682	
7. 2019.....	12,376	12,376		3,757	3,757	295	295	3	3	21		879	
8. 2020.....	15,392	15,392		3,524	3,524	426	426	27	27	18		747	
9. 2021.....	18,358	18,358		6,079	6,079	359	359	18	18	43		1,029	
10. 2022.....	19,653	19,653		3,646	3,646	164	164	3	3	59		1,089	
11. 2023	20,444	20,444		1,887	1,887	42	42	1	1	7		953	
12. Totals	XXX	XXX	XXX	34,438	34,438	2,646	2,646	71	71	192		XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2014.....													
3. 2015.....													
4. 2016.....	50	50	47	47	24	24	9	9	4	4			1
5. 2017.....	8	8	8	8			2	2	1	1			1
6. 2018.....	571	571	538	538	47	47	106	106	.43	.43			7
7. 2019.....	546	546	514	514	74	74	102	102	.43	.43			13
8. 2020.....	2,128	2,128	2,004	2,004	162	162	396	396	162	162			21
9. 2021.....	3,285	3,285	3,094	3,094	370	370	.612	.612	.250	.250			46
10. 2022.....	3,620	3,620	3,409	3,409	285	285	.675	.675	.276	.276			.75
11. 2023	2,710	2,710	2,552	2,552	241	241	505	505	206	206			231
12. Totals	12,918	12,918	12,164	12,164	1,203	1,203	2,407	2,407	985	985			395

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2014.....	1,051	1,051		18.4	18.4						
3. 2015.....	3,393	3,393		37.9	37.9						
4. 2016.....	6,484	6,484		76.0	76.0						
5. 2017.....	3,113	3,113		35.7	35.7						
6. 2018.....	4,340	4,340		44.2	44.2						
7. 2019.....	5,333	5,333		43.1	43.1						
8. 2020.....	8,830	8,830		57.4	57.4						
9. 2021.....	14,067	14,067		76.6	76.6						
10. 2022.....	12,076	12,076		61.4	61.4						
11. 2023	8,144	8,144		39.8	39.8						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....	29.....	29.....	6.....	6.....					XXX.....	
2. 2014.....	6,931.....	6,931.....		2,718.....	2,718.....	197.....	197.....			166.....		216.....	
3. 2015.....	13,645.....	13,645.....		4,396.....	4,396.....	399.....	399.....	2.....	2.....	141.....		444.....	
4. 2016.....	18,398.....	18,398.....		7,458.....	7,458.....	648.....	648.....	1.....	1.....	488.....		555.....	
5. 2017.....	23,522.....	23,522.....		5,891.....	5,891.....	561.....	561.....	25.....	25.....	148.....	0.....	703.....	
6. 2018.....	25,218.....	25,218.....		7,696.....	7,696.....	780.....	780.....	2.....	2.....	343.....		830.....	
7. 2019.....	24,062.....	24,062.....		6,099.....	6,099.....	512.....	512.....	0.....	0.....	131.....	(1).....	827.....	
8. 2020.....	22,535.....	22,535.....		7,457.....	7,457.....	874.....	874.....	7.....	7.....	108.....	0.....	810.....	
9. 2021.....	20,343.....	20,343.....		5,449.....	5,449.....	528.....	528.....	12.....	7.....	116.....	.5.....	783.....	
10. 2022.....	21,697.....	21,697.....		5,098.....	5,098.....	460.....	460.....	12.....	8.....	1.....	.4.....	723.....	
11. 2023	20,742	20,742		2,087	2,087	118	118	7	7			650	
12. Totals	XXX	XXX	XXX	54,377	54,377	5,083	5,083	68	60	1,641	8	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded						
1. Prior.....	165.....	165.....	148.....	148.....	14.....	14.....	26.....	26.....	14.....	14.....			3.....			
2. 2014.....	59.....	59.....	53.....	53.....	3.....	3.....	9.....	9.....	5.....	5.....			3.....			
3. 2015.....	334.....	334.....	300.....	300.....	16.....	16.....	53.....	53.....	28.....	28.....			8.....			
4. 2016.....	1,112.....	1,112.....	.996.....	.996.....	44.....	44.....	176.....	176.....	94.....	94.....			8.....			
5. 2017.....	727.....	727.....	.651.....	.651.....	.53.....	.53.....	115.....	115.....	62.....	62.....			11.....			
6. 2018.....	965.....	965.....	.863.....	.863.....	100.....	100.....	153.....	153.....	82.....	82.....			20.....			
7. 2019.....	633.....	633.....	.563.....	.563.....	.34.....	.34.....	100.....	100.....	.53.....	.53.....			15.....			
8. 2020.....	1,448.....	1,448.....	1,293.....	1,293.....	.85.....	.85.....	228.....	228.....	122.....	122.....			28.....			
9. 2021.....	1,866.....	1,866.....	1,664.....	1,664.....	125.....	125.....	293.....	293.....	157.....	157.....			.39.....			
10. 2022.....	4,454.....	4,454.....	3,981.....	3,981.....	315.....	315.....	.699.....	.699.....	374.....	374.....			91.....			
11. 2023	4,351	4,351	3,912	3,912	351	351	684	684	367	367			266			
12. Totals	16,114	16,114	14,424	14,424	1,140	1,140	2,537	2,537	1,359	1,359			492			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)				Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	35 Losses Unpaid		36 Loss Expenses Unpaid	
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid		Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....			
2. 2014.....	3,044.....	3,044.....		.43.9.....	.43.9.....							
3. 2015.....	5,529.....	5,529.....		.40.5.....	.40.5.....							
4. 2016.....	10,529.....	10,529.....		.57.2.....	.57.2.....							
5. 2017.....	8,085.....	8,085.....	.0.....	.34.4.....	.34.4.....							
6. 2018.....	10,640.....	10,640.....		.42.2.....	.42.2.....							
7. 2019.....	7,993.....	7,994.....	(1).....	.33.2.....	.33.2.....							
8. 2020.....	11,514.....	11,515.....	.0.....	.51.1.....	.51.1.....							
9. 2021.....	10,093.....	10,088.....	.5.....	.49.6.....	.49.6.....							
10. 2022.....	15,394.....	15,390.....	.4.....	.70.9.....	.70.9.....							
11. 2023	11,878	11,878		57.3	57.3							
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX			

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO**  
**SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL**  
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....	
2. 2014.....	20,137	20,137		5,493	5,493	1,183	1,183	29	29	.377		724	
3. 2015.....	36,275	36,275		11,194	11,194	3,815	3,815	90	90	.706		1,276	
4. 2016.....	36,066	36,066		9,962	9,962	2,237	2,237	48	48	.438		1,039	
5. 2017.....	36,821	36,821		12,807	12,807	1,974	1,974	83	83	.172		1,113	
6. 2018.....	37,680	37,680		9,162	9,162	2,389	2,389	71	71	.358		1,003	
7. 2019.....	38,957	38,957		12,015	12,015	2,029	2,029	242	242	.321		1,033	
8. 2020.....	41,711	41,711		10,459	10,459	2,343	2,343	419	419	.527		1,024	
9. 2021.....	46,383	46,383		12,137	12,137	1,430	1,430	243	243	.791		1,018	
10. 2022.....	58,063	58,063		18,275	18,275	1,263	1,263	420	420	.190		1,306	
11. 2023	66,943	66,943		5,240	5,240	310	310	157	157	43		1,025	
12. Totals	XXX	XXX	XXX	106,744	106,744	18,974	18,974	1,803	1,803	3,925		XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed	
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21		22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded				
1. Prior.....														
2. 2014.....														
3. 2015.....	598	598	529	529	128	128	242	242	56	56				12
4. 2016.....	452	452	399	399	69	69	183	183	42	42				11
5. 2017.....	698	698	617	617	102	102	282	282	66	66				6
6. 2018.....	1,726	1,726	1,526	1,526	263	263	698	698	162	162				21
7. 2019.....	1,485	1,485	1,313	1,313	325	325	601	601	139	139				39
8. 2020.....	1,632	1,632	1,442	1,442	514	514	660	660	153	153				50
9. 2021.....	3,302	3,302	2,919	2,919	717	717	1,336	1,336	326	326				95
10. 2022.....	5,947	5,947	5,257	5,257	942	942	2,406	2,406	613	613				186
11. 2023	10,903	10,903	9,638	9,638	1,010	1,010	4,412	4,412	1,071	1,071				364
12. Totals	26,741	26,741	23,639	23,639	4,071	4,071	10,821	10,821	2,630	2,630				784

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2014.....	6,706	6,706		33.3	33.3						
3. 2015.....	16,652	16,652		45.9	45.9						
4. 2016.....	13,392	13,392		37.1	37.1						
5. 2017.....	16,630	16,630		45.2	45.2						
6. 2018.....	15,997	15,997		42.5	42.5						
7. 2019.....	18,150	18,150		46.6	46.6						
8. 2020.....	17,622	17,622		42.2	42.2						
9. 2021.....	22,410	22,410		48.3	48.3						
10. 2022.....	35,123	35,123		60.5	60.5						
11. 2023	32,741	32,741		48.9	48.9						
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

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 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO**  
**SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**  
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX.....	
2. 2014.....	6,474	6,474										1	
3. 2015.....	9,143	9,143										4	
4. 2016.....	8,982	8,982		3,351	3,351							6	
5. 2017.....	8,607	8,607		2,100	2,100							6	
6. 2018.....	8,564	8,564										2	
7. 2019.....	8,826	8,826					8	8				6	
8. 2020.....	9,602	9,602		38	38	0	0	0	0			3	
9. 2021.....	10,417	10,417				9	9					5	
10. 2022.....	11,391	11,391		1	1							3	
11. 2023	12,802	12,802										1	
12. Totals	XXX	XXX	XXX	5,490	5,490	17	17	0	0			XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2016.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2017.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2018.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2019.....	1,350	1,350	9,606	9,606			114	114	170	170			2
8. 2020.....	200	200	1,423	1,423	22	22	17	17	25	25			3
9. 2021.....	200	200	1,423	1,423	22	22	17	17	25	25			
10. 2022.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11. 2023	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....			
12. Totals	1,550	1,550	11,029	11,029	22	22	131	131	195	195			5

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....
2. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2016.....	3,351	3,351		37.3	37.3						.....
5. 2017.....	2,100	2,100		24.4	24.4						.....
6. 2018.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2019.....	11,248	11,248		127.5	127.5						.....
8. 2020.....	38	38		0.4	0.4						.....
9. 2021.....	1,696	1,696		16.3	16.3						.....
10. 2022.....	1	1		0.0	0.0						.....
11. 2023	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX.....	
2. 2014.....	1.....	1.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
3. 2015.....	2.....	2.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
4. 2016.....	0.....	0.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
5. 2017.....	22.....	22.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	3.....	
6. 2018.....	11.....	11.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
7. 2019.....	103.....	103.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
8. 2020.....	250.....	250.....	.....	108.....	108.....	60.....	60.....	2.....	2.....	.....	.....	4.....	
9. 2021.....	364.....	364.....	.....	38.....	38.....	13.....	13.....	16.....	16.....	.....	.....	5.....	
10. 2022.....	503.....	503.....	.....	10.....	10.....	5.....	5.....	14.....	14.....	.....	.....	4.....	
11. 2023.....	539.....	539.....	.....	.....	.....	14.....	14.....	.....	.....	.....	.....	9.....	
12. Totals	XXX	XXX	XXX	156	156	92	92	32	32	.....	.....	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	.....	.....			
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2016.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2017.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2018.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2019.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8. 2020.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9. 2021.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10. 2022.....	45.....	45.....	69.....	69.....	10.....	10.....	26.....	26.....	4.....	4.....	.....	.....	1.....
11. 2023.....	20.....	20.....	30.....	30.....	59.....	59.....	12.....	12.....	9.....	9.....	.....	.....	7.....
12. Totals	65.....	65.....	99.....	99.....	69.....	69.....	37.....	37.....	13.....	13.....	.....	.....	8.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	.....	.....	.....	.....	.....	.....	.....	.....		.....	.....
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	XXX.....	.....
2. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2016.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2017.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2018.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2019.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8. 2020.....	170.....	170.....	.....	67.9.....	67.9.....	.....	.....	.....	.....	.....	.....
9. 2021.....	67.....	67.....	.....	18.4.....	18.4.....	.....	.....	.....	.....	.....	.....
10. 2022.....	182.....	182.....	.....	36.2.....	36.2.....	.....	.....	.....	.....	.....	.....
11. 2023.....	144.....	144.....	.....	26.8.....	26.8.....	.....	.....	.....	.....	.....	.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	.....	XXX	.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**SCHEDULE P - PART 1I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,  
EARTHQUAKE, BURGLARY AND THEFT)**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX									XXX	
2. 2022	71	71										XXX	
3. 2023	13	13										XXX	
4. Totals	XXX	XXX	XXX									XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior																
2. 2022																
3. 2023			2	2			0	0	0	0						
4. Totals			2	2			0	0	0	0						

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2022											
3. 2023	2	2		16.2	16.2						
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO**  
**SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....	(19).....	(19).....	13.....	13.....	1.....	1.....	97.....	.....	XXX.....	
2. 2022.....	5,302.....	5,302.....	.....	4,110.....	4,110.....	138.....	138.....	26.....	26.....	786.....	.....	1,197.....	
3. 2023.....	5,426.....	5,426.....	.....	2,711.....	2,711.....	84.....	84.....	3.....	3.....	429.....	.....	741.....	
4. Totals.....	XXX.....	XXX.....	XXX.....	6,801.....	6,801.....	236.....	236.....	30.....	30.....	1,312.....	.....	XXX.....	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior.....	110.....	110.....	(23).....	(23).....	.....	.....	8.....	8.....	4.....	4.....	.....	.....	12.....			
2. 2022.....	23.....	23.....	(5).....	(5).....	8.....	8.....	2.....	2.....	1.....	1.....	.....	.....	34.....			
3. 2023.....	931.....	931.....	(194).....	(194).....	1.....	1.....	70.....	70.....	32.....	32.....	.....	.....	131.....			
4. Totals.....	1,064.....	1,064.....	(222).....	(222).....	9.....	9.....	80.....	80.....	37.....	37.....	.....	.....	177.....			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	.....	.....
2. 2022.....	4,302.....	4,302.....	.....	81.1.....	81.1.....	.....	.....	.....	.....	.....	.....
3. 2023.....	3,639.....	3,639.....	.....	67.1.....	67.1.....	.....	.....	.....	.....	.....	.....
4. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	.....	.....

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**

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**SCHEDULE P - PART 1R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX.....	
2. 2014.....	2.....	2.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
3. 2015.....	2.....	2.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
4. 2016.....	2.....	2.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
5. 2017.....	2.....	2.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
6. 2018.....	2.....	2.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
7. 2019.....	0.....	0.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
8. 2020.....	0.....	0.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
9. 2021.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
10. 2022.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
11. 2023.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	
12. Totals	XXX	XXX	XXX	.....	.....	.....	.....	.....	.....	.....	.....	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2016.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2017.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2018.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2019.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8. 2020.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9. 2021.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10. 2022.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11. 2023	.....	.....	0	0	.....	.....	0	0	0	0	.....	.....	.....
12. Totals	.....	.....	0	0	.....	.....	0	0	0	0	.....	.....	.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	.....
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....	XXX.....	.....	.....
2. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2016.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2017.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2018.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2019.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8. 2020.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9. 2021.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10. 2022.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11. 2023	0	0	.....	.....	.....	.....	.....	.....	.....	.....	.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	XXX	.....	.....

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**

Schedule P - Part 2A - Homeowners/Farmowners

**N O N E**

Schedule P - Part 2B - Private Passenger Auto Liability/Medical

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 2E - Commercial Multiple Peril

**N O N E**

Schedule P - Part 2F - Section 1 - Medical Professional Liability - Occurrence

**N O N E**

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

**N O N E**

Schedule P - Part 2G - Special Liability (Ocean Marine, Aircraft (all perils), Boiler and Machinery)

**N O N E**

Schedule P - Part 2H - Section 1 - Other Liability - Occurrence

**N O N E**

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

**N O N E**

Schedule P - Part 2I - Special Property

**N O N E**

Schedule P - Part 2J - Auto Physical Damage

**N O N E**

Schedule P - Part 2K - Fidelity/Surety

**N O N E**

Schedule P - Part 2L - Other (Including Credit, Accident and Health)

**N O N E**

Schedule P - Part 2M - International

**N O N E**

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 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.....000.....												
2. 2014.....												
3. 2015.....XXX.....												
4. 2016.....XXX.....XXX.....												
5. 2017.....XXX.....XXX.....XXX.....												
6. 2018.....XXX.....XXX.....XXX.....X.....												
7. 2019.....XXX.....XXX.....XXX.....XXX.....												
8. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....												
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												

**NONE**

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

1. Prior.....000.....												
2. 2014.....												
3. 2015.....XXX.....												
4. 2016.....XXX.....XXX.....												
5. 2017.....XXX.....XXX.....XXX.....												
6. 2018.....XXX.....XXX.....XXX.....X.....												
7. 2019.....XXX.....XXX.....XXX.....XX.....												
8. 2020.....XXX.....XXX.....XXX.....XX.....XX.....												
9. 2021.....XXX.....XXX.....XXX.....XXX.....XX.....X.....												
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												

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

1. Prior.....000.....												4
2. 2014.....												220
3. 2015.....XXX.....												315
4. 2016.....XXX.....XXX.....												330
5. 2017.....XXX.....XXX.....XXX.....												331
6. 2018.....XXX.....XXX.....XXX.....XXX.....												316
7. 2019.....XXX.....XXX.....XXX.....XXX.....XXX.....												400
8. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												325
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												443
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												465
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												272

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

1. Prior.....000.....												37
2. 2014.....												174
3. 2015.....XXX.....												351
4. 2016.....XXX.....XXX.....												427
5. 2017.....XXX.....XXX.....XXX.....												535
6. 2018.....XXX.....XXX.....XXX.....XXX.....												598
7. 2019.....XXX.....XXX.....XXX.....XXX.....XXX.....												603
8. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												578
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												539
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												456
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												243

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

1. Prior.....000.....												
2. 2014.....												319
3. 2015.....XXX.....												548
4. 2016.....XXX.....XXX.....												443
5. 2017.....XXX.....XXX.....XXX.....												480
6. 2018.....XXX.....XXX.....XXX.....XXX.....												428
7. 2019.....XXX.....XXX.....XXX.....XXX.....XXX.....												442
8. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												326
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												381
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												469
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												231

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.....000.....												
2. 2014.....												
3. 2015.....XXX.....												
4. 2016.....XXX.....XXX.....												
5. 2017.....XXX.....XXX.....XXX.....												
6. 2018.....XXX.....XXX.....XXX.....XXX.....												
7. 2019.....XXX.....XXX.....XXX.....XXX.....XXX.....												
8. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												

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

1. Prior.....000.....												
2. 2014.....												
3. 2015.....XXX.....												
4. 2016.....XXX.....XXX.....												
5. 2017.....XXX.....XXX.....XXX.....												
6. 2018.....XXX.....XXX.....XXX.....XXX.....												
7. 2019.....XXX.....XXX.....XXX.....XXX.....XX.....												
8. 2020.....XXX.....XXX.....XXX.....XXX.....XX.....XX.....												
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XX.....												
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XX.....												
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												

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

1. Prior.....000.....												
2. 2014.....												
3. 2015.....XXX.....												
4. 2016.....XXX.....XXX.....												
5. 2017.....XXX.....XXX.....XXX.....												
6. 2018.....XXX.....XXX.....XXX.....XXX.....												
7. 2019.....XXX.....XXX.....XXX.....XXX.....XX.....												
8. 2020.....XXX.....XXX.....XXX.....XXX.....XX.....XX.....												
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XX.....												
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XX.....												
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												

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

1. Prior.....000.....												
2. 2014.....												1
3. 2015.....XXX.....												4
4. 2016.....XXX.....XXX.....												4
5. 2017.....XXX.....XXX.....XXX.....												2
6. 2018.....XXX.....XXX.....XXX.....XXX.....												5
7. 2019.....XXX.....XXX.....XXX.....XXX.....XX.....												2
8. 2020.....XXX.....XXX.....XXX.....XXX.....XX.....XX.....												4
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XX.....												2
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XX.....												2
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												1

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

1. Prior.....000.....												
2. 2014.....												
3. 2015.....XXX.....												
4. 2016.....XXX.....XXX.....												
5. 2017.....XXX.....XXX.....XXX.....												
6. 2018.....XXX.....XXX.....XXX.....XXX.....												
7. 2019.....XXX.....XXX.....XXX.....XXX.....XX.....												
8. 2020.....XXX.....XXX.....XXX.....XXX.....XX.....XX.....												
9. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XX.....												
10. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XX.....												
11. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023		
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
2. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
3. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....

**NONE**

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

1. Prior.....	XXX.....	000.....	.....	.....	.....							
2. 2022.....	XXX.....	.....	612.....	551.....								
3. 2023.....	XXX.....	.....	248.....	362.....								

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

1. Prior.....	XXX.....	.....	XXX.....	XXX.....								
2. 2022.....	XXX.....	.....	XXX.....	XXX.....								
3. 2023.....	XXX.....	.....	XXX.....	XXX.....								

**NONE**

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

1. Prior.....	XXX.....	000.....	.....	XXX.....	XXX.....							
2. 2022.....	XXX.....	.....	XXX.....	XXX.....								
3. 2023.....	XXX.....	.....	XXX.....	XXX.....								

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

1. Prior.....	000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX.....	XXX.....
2. 2014.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX.....	XXX.....
3. 2015.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX.....	XXX.....
4. 2016.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX.....	XXX.....
5. 2017.....	XXX.....	XXX.....	XXX.....	.....	.....	.....	.....	.....	.....	.....	XXX.....	XXX.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XX.....	.....	.....	.....	.....	.....	.....	XXX.....	XXX.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XX.....	.....	.....	.....	.....	.....	.....	XXX.....	XXX.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....	.....	.....	.....	.....	.....	XXX.....	XXX.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....	.....	.....	.....	.....	XXX.....	XXX.....
10. 2022.....	XXX.....	.....	XXX.....	XXX.....								
11. 2023.....	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**

Schedule P - Part 4A - Homeowners/Farmowners  
**N O N E**

Schedule P - Part 4B - Private Passenger Auto Liability/Medical  
**N O N E**

Schedule P - Part 4C - Commercial Auto/Truck Liability/Medical  
**N O N E**

Schedule P - Part 4D - Workers' Compensation (Excluding Excess Workers' Compensation)  
**N O N E**

Schedule P - Part 4E - Commercial Multiple Peril  
**N O N E**

Schedule P - Part 4F - Section 1 - Medical Professional Liability - Occurrence  
**N O N E**

Schedule P - Part 4F - Section 2 - Medical Professional Liability - Claims-Made  
**N O N E**

Schedule P - Part 4G - Special Liability

**N O N E**

Schedule P - Part 4H - Section 1 - Other Liability - Occurrence

**N O N E**

Schedule P - Part 4H - Section 2 - Other Liability - Claims-Made

**N O N E**

Schedule P - Part 4I - Special Property

**N O N E**

Schedule P - Part 4J - Auto Physical Damage

**N O N E**

Schedule P - Part 4K - Fidelity/Surety

**N O N E**

Schedule P - Part 4L - Other (Including Credit, Accident and Health)

**N O N E**

Schedule P - Part 4M - International

**N O N E**

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**

Schedule P - Part 5A - Homeowners/Farmowners - Section 1

**N O N E**

Schedule P - Part 5A - Homeowners/Farmowners - Section 2

**N O N E**

Schedule P - Part 5A - Homeowners/Farmowners - Section 3

**N O N E**

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 1

**N O N E**

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 2

**N O N E**

Schedule P - Part 5B - Private Passenger Auto Liability/Medical - Section 3

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL  
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	6	3	1							
2. 2014	133	206	216	219	220	220	220	220	220	220
3. 2015	XXX	234	296	303	307	309	312	313	314	315
4. 2016	XXX	XXX	195	281	300	307	313	325	327	330
5. 2017	XXX	XXX	XXX	210	289	308	319	326	330	331
6. 2018	XXX	XXX	XXX	XXX	205	289	302	304	309	316
7. 2019	XXX	XXX	XXX	XXX	XXX	234	349	375	392	400
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	182	293	313	325
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	262	406	443
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	301	465
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	272

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	4	1								
2. 2014	112	9	2							
3. 2015	XXX	103	16	9	5	5	3	1	1	
4. 2016	XXX	XXX	141	43	24	18	14	4	3	1
5. 2017	XXX	XXX	XXX	113	26	16	9	4	2	1
6. 2018	XXX	XXX	XXX	XXX	98	15	13	13	10	7
7. 2019	XXX	XXX	XXX	XXX	XXX	160	48	33	19	13
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	162	44	26	21
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	247	68	46
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	235	75
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	231

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	12									
2. 2014	413	447	452	454	455	455	455	455	455	455
3. 2015	XXX	677	709	714	715	717	718	718	719	719
4. 2016	XXX	XXX	677	733	739	743	745	747	748	749
5. 2017	XXX	XXX	XXX	653	690	701	708	710	712	712
6. 2018	XXX	XXX	XXX	XXX	617	657	671	675	678	682
7. 2019	XXX	XXX	XXX	XXX	XXX	764	850	870	876	879
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	673	727	738	747
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	923	1,006	1,029
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	996	1,089
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	953

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**SCHEDULE P - PART 5D - WORKERS' COMPENSATION**

(EXCLUDING EXCESS WORKERS' COMPENSATION)

**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	55	15	4	6	3	2	4		1	2
2. 2014	39	114	143	150	158	172	172	173	173	174
3. 2015	XXX	93	242	289	314	325	337	345	348	351
4. 2016	XXX	XXX	120	285	349	380	398	411	422	427
5. 2017	XXX	XXX	XXX	138	379	456	487	509	524	535
6. 2018	XXX	XXX	XXX	XXX	183	457	518	544	572	598
7. 2019	XXX	XXX	XXX	XXX	XXX	235	468	538	574	603
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	224	460	537	578
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	211	461	539
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	220	456
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	243

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	31	18	15	10	7	7	3	4	4	3
2. 2014	117	41	19	14	8	4	4	2	3	3
3. 2015	XXX	206	77	45	27	20	15	10	9	8
4. 2016	XXX	XXX	236	95	46	28	18	13	6	8
5. 2017	XXX	XXX	XXX	328	100	49	28	16	15	11
6. 2018	XXX	XXX	XXX	XXX	368	104	56	43	30	20
7. 2019	XXX	XXX	XXX	XXX	XXX	289	85	45	25	15
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	293	97	49	28
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	314	82	39
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	296	91
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	266

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior	95	3	1	1		2		1	1	1
2. 2014	172	189	199	202	204	214	214	214	215	216
3. 2015	XXX	350	391	414	424	429	436	440	442	444
4. 2016	XXX	XXX	424	489	511	525	536	544	548	555
5. 2017	XXX	XXX	XXX	556	621	656	672	682	696	703
6. 2018	XXX	XXX	XXX	XXX	697	767	783	798	814	830
7. 2019	XXX	XXX	XXX	XXX	XXX	669	757	792	808	827
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	653	755	790	810
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	658	739	783
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	627	723
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	650

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL**  
**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....	5.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2014.....	125.....	.260.....	284.....	300.....	310.....	316.....	.318.....	318.....	.319.....	.319.....
3. 2015.....	XXX.....	.297.....	465.....	.508.....	.523.....	.532.....	.538.....	.542.....	.546.....	.548.....
4. 2016.....	XXX.....	XXX.....	218.....	.369.....	.406.....	.421.....	.429.....	.434.....	.438.....	.443.....
5. 2017.....	XXX.....	XXX.....	XXX.....	.251.....	.414.....	.439.....	.456.....	.466.....	.475.....	.480.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	.218.....	.348.....	.390.....	.409.....	.419.....	.428.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.217.....	.345.....	.390.....	.418.....	.442.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.147.....	.270.....	.306.....	.326.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.170.....	.318.....	.381.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.242.....	.469.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	231.....

**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2014.....	270.....	.86.....	.37.....	.23.....	.13.....	.7.....	.1.....	.1.....	.....	.....
3. 2015.....	XXX.....	.368.....	106.....	.61.....	.45.....	.29.....	.22.....	.17.....	.13.....	.12.....
4. 2016.....	XXX.....	XXX.....	.337.....	.107.....	.55.....	.34.....	.30.....	.20.....	.15.....	.11.....
5. 2017.....	XXX.....	XXX.....	XXX.....	.336.....	.103.....	.71.....	.40.....	.29.....	.12.....	.6.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	.286.....	.124.....	.68.....	.45.....	.28.....	.21.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.320.....	.142.....	.102.....	.64.....	.39.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.380.....	.115.....	.83.....	.50.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.369.....	.156.....	.95.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.479.....	.186.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.364.....

**SECTION 3**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....	16.....	.....	.....	1.....	.....	.....	.....	.....	.....	1.....
2. 2014.....	592.....	.698.....	706.....	.718.....	.721.....	.723.....	.723.....	.724.....	.724.....	.724.....
3. 2015.....	XXX.....	1,106.....	1,219.....	1,248.....	1,264.....	1,267.....	1,271.....	1,273.....	1,275.....	1,276.....
4. 2016.....	XXX.....	XXX.....	881.....	.984.....	1,016.....	1,024.....	1,033.....	1,034.....	1,037.....	1,039.....
5. 2017.....	XXX.....	XXX.....	XXX.....	.989.....	1,077.....	1,096.....	1,101.....	1,106.....	1,110.....	1,113.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	.852.....	.964.....	.979.....	.991.....	.997.....	1,003.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.877.....	.975.....	1,013.....	1,023.....	1,033.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.886.....	.981.....	.1,017.....	1,024.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.839.....	.985.....	1,018.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,101.....	1,306.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,025.....

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 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE**  
**SECTION 1A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior										
2. 2014										
3. 2015	XXX									
4. 2016	XXX	XXX			1	2	2	2	2	2
5. 2017	XXX	XXX	XXX						1	1
6. 2018	XXX	XXX	XXX	XXX						
7. 2019	XXX	XXX	XXX	XXX	XXX					
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	1
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 2A**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior			1	1	1	1	1	1		
2. 2014			1							
3. 2015	XXX		1	1						
4. 2016	XXX	XXX	2	2	1					
5. 2017	XXX	XXX	XXX		3	3	3	3	2	
6. 2018	XXX	XXX	XXX	XXX						
7. 2019	XXX	XXX	XXX	XXX	XXX	1	1	1	2	2
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX		3	3
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 3A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior			1							
2. 2014			1	1	1	1	1	1	1	1
3. 2015	XXX		4	4	4	4	4	4	4	4
4. 2016	XXX	XXX	5	6	6	6	6	6	6	6
5. 2017	XXX	XXX	XXX		4	5	5	6	6	6
6. 2018	XXX	XXX	XXX	XXX		1	1	2	2	2
7. 2019	XXX	XXX	XXX	XXX	XXX	4	4	4	5	6
8. 2020	XXX	XXX	XXX	XXX	XXX	XXX	2	3	3	3
9. 2021	XXX	XXX	XXX	XXX	XXX	XXX	2	2	5	5
10. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	3	3
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE**  
**SECTION 1B**

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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX.....									
4. 2016.....	XXX.....	XXX.....								
5. 2017.....	XXX.....	XXX.....	XXX.....							
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1	1	1	2
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX			1
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	XXX		1
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SECTION 2B**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX.....									
4. 2016.....	XXX.....	XXX.....								
5. 2017.....	XXX.....	XXX.....	XXX.....							
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2	1	1	
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	2	2	
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	XXX	3	1
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7

**SECTION 3B**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX.....									
4. 2016.....	XXX.....	XXX.....								
5. 2017.....	XXX.....	XXX.....	XXX.....	3	3	3	3	3	3	3
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	4	4	4	4
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	5	5	5
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	XXX	4	4
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9

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**

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO**  
**SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL**  
**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	992	(7)	8,744	8,741	8,741	8,739	8,739	8,739	8,739	8,739	
2. 2014.....	4,705	8,750	8,744	8,741	8,741	8,739	8,739	8,739	8,739	8,739	
3. 2015.....	XXX	4,920	9,052	9,040	9,040	9,039	9,039	9,039	9,039	9,039	
4. 2016.....	XXX	XXX	4,402	8,529	8,546	8,546	8,546	8,546	8,546	8,546	
5. 2017.....	XXX	XXX	XXX	4,603	9,018	9,017	9,017	9,017	9,017	9,017	
6. 2018.....	XXX	XXX	XXX	XXX	5,398	11,084	11,067	11,067	11,067	11,067	
7. 2019.....	XXX	XXX	XXX	XXX	XXX	6,693	13,219	13,234	13,234	13,233	(1)
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	8,883	17,813	17,798	17,798	
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,414	19,634	19,624	(9)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,448	19,183	9,735
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,719	10,719
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20,444
13. Earned Premiums (Sch P-Pt. 1)	5,697	8,958	8,528	8,715	9,828	12,376	15,392	18,358	19,653	20,444	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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	992	(7)	8,744	8,741	8,741	8,739	8,739	8,739	8,739	8,739	
2. 2014.....	4,705	8,750	8,744	8,741	8,741	8,739	8,739	8,739	8,739	8,739	
3. 2015.....	XXX	4,920	9,052	9,040	9,040	9,039	9,039	9,039	9,039	9,039	
4. 2016.....	XXX	XXX	4,402	8,529	8,546	8,546	8,546	8,546	8,546	8,546	
5. 2017.....	XXX	XXX	XXX	4,603	9,018	9,017	9,017	9,017	9,017	9,017	
6. 2018.....	XXX	XXX	XXX	XXX	5,398	11,084	11,067	11,067	11,067	11,067	
7. 2019.....	XXX	XXX	XXX	XXX	XXX	6,693	13,219	13,234	13,234	13,233	(1)
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	8,883	17,813	17,798	17,798	
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,414	19,634	19,624	(9)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9,448	19,183	9,735
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,719	10,719
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20,444
13. Earned Premiums (Sch P-Pt. 1)	5,697	8,958	8,528	8,715	9,828	12,376	15,392	18,358	19,653	20,444	XXX

**SCHEDULE P - PART 6D - WORKERS' COMPENSATION**

**(EXCLUDING EXCESS WORKERS' COMPENSATION)**

**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	2,588	(133)	0	(5)	0	8,790	8,790	8,790	8,790	8,790	
2. 2014.....	4,343	8,783	8,794	8,792	8,792	8,792	8,790	8,790	8,790	8,790	
3. 2015.....	XXX	9,337	16,622	16,918	16,948	16,935	16,935	16,935	16,935	16,935	
4. 2016.....	XXX	XXX	11,102	20,627	20,740	20,739	20,702	20,702	20,702	20,702	
5. 2017.....	XXX	XXX	XXX	13,709	24,759	25,052	24,982	25,124	24,977	24,958	(19)
6. 2018.....	XXX	XXX	XXX	XXX	14,024	25,042	24,990	24,980	24,979	24,980	1
7. 2019.....	XXX	XXX	XXX	XXX	XXX	12,766	22,972	22,333	22,322	22,321	(1)
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	12,490	21,186	21,326	21,318	(8)
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,154	21,674	21,915	241
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,197	21,752	9,555
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,972	10,972
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20,742
13. Earned Premiums (Sch P-Pt. 1)	6,931	13,645	18,398	23,522	25,218	24,062	22,535	20,343	21,697	20,742	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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	2,588	(133)	0	(5)	0	8,792	8,792	8,790	8,790	8,790	
2. 2014.....	4,343	8,783	8,794	8,792	8,792	8,792	8,790	8,790	8,790	8,790	
3. 2015.....	XXX	9,337	16,622	16,918	16,948	16,935	16,935	16,935	16,935	16,935	
4. 2016.....	XXX	XXX	11,102	20,627	20,740	20,739	20,702	20,702	20,702	20,702	
5. 2017.....	XXX	XXX	XXX	13,709	24,759	25,052	24,982	25,124	24,977	24,958	(19)
6. 2018.....	XXX	XXX	XXX	XXX	14,024	25,042	24,990	24,980	24,979	24,980	1
7. 2019.....	XXX	XXX	XXX	XXX	XXX	12,766	22,972	22,333	22,322	22,321	(1)
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	12,490	21,186	21,326	21,318	(8)
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,154	21,674	21,915	241
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,197	21,752	9,555
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,972	10,972
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20,742
13. Earned Premiums (Sch P-Pt. 1)	6,931	13,645	18,398	23,522	25,218	24,062	22,535	20,343	21,697	20,742	XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	2,070	(3)	0								
2. 2014.....	18,067	34,780	34,739	34,739	34,739	34,739	34,739	34,739	34,739	34,739	
3. 2015.....	XXX	19,564	38,178	38,175	38,175	38,175	38,175	38,175	38,175	38,175	
4. 2016.....	XXX	XXX	17,493	36,221	36,244	36,244	36,244	36,244	36,244	36,244	
5. 2017.....	XXX	XXX	XXX	18,098	37,443	37,344	37,344	37,344	37,344	37,344	
6. 2018.....	XXX	XXX	XXX	XXX	18,312	38,149	38,118	38,118	38,118	38,118	
7. 2019.....	XXX	XXX	XXX	XXX	XXX	19,218	39,857	39,868	39,868	39,868	
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	21,103	43,376	43,348	43,348	
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24,099	51,588	51,570	(18)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	30,602	61,385	30,782
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36,179	36,179
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	66,943
13. Earned Premiums (Sch P-Pt. 1)	20,137	36,275	36,066	36,821	37,680	38,957	41,711	46,383	58,063	66,943	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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	2,070	(3)	0								
2. 2014.....	18,067	34,780	34,739	34,739	34,739	34,739	34,739	34,739	34,739	34,739	
3. 2015.....	XXX	19,564	38,178	38,175	38,175	38,175	38,175	38,175	38,175	38,175	
4. 2016.....	XXX	XXX	17,493	36,221	36,244	36,244	36,244	36,244	36,244	36,244	
5. 2017.....	XXX	XXX	XXX	18,098	37,443	37,344	37,344	37,344	37,344	37,344	
6. 2018.....	XXX	XXX	XXX	XXX	18,312	38,149	38,118	38,118	38,118	38,118	
7. 2019.....	XXX	XXX	XXX	XXX	XXX	19,218	39,857	39,868	39,868	39,868	
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	21,103	43,376	43,348	43,348	
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24,099	51,588	51,570	(18)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	30,602	61,385	30,782
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36,179	36,179
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	66,943
13. Earned Premiums (Sch P-Pt. 1)	20,137	36,275	36,066	36,821	37,680	38,957	41,711	46,383	58,063	66,943	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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	1,723	0		(3)		(2)					
2. 2014.....	4,751	8,895	8,895	8,893	8,893	8,891	8,891	8,891	8,891	8,891	
3. 2015.....	XXX	4,999	9,292	9,290	9,303	9,301	9,301	9,301	9,301	9,301	
4. 2016.....	XXX	XXX	4,689	8,586	8,586	8,584	8,584	8,584	8,584	8,584	
5. 2017.....	XXX	XXX	XXX	4,717	8,692	8,692	8,692	8,692	8,692	8,692	
6. 2018.....	XXX	XXX	XXX	XXX	4,575	8,611	8,617	8,617	8,617	8,617	
7. 2019.....	XXX	XXX	XXX	XXX	XXX	4,797	9,217	9,217	9,217	9,217	
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	5,175	10,103	10,104	10,104	
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,489	10,840	10,843	3
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,039	12,207	6,168
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,631	6,631
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,802
13. Earned Premiums (Sch P-Pt. 1)	6,474	9,143	8,982	8,607	8,564	8,826	9,602	10,417	11,391	12,802	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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	1,723	0		(3)		(2)					
2. 2014.....	4,751	8,895	8,895	8,893	8,893	8,891	8,891	8,891	8,891	8,891	
3. 2015.....	XXX	4,999	9,292	9,290	9,303	9,301	9,301	9,301	9,301	9,301	
4. 2016.....	XXX	XXX	4,689	8,586	8,586	8,584	8,584	8,584	8,584	8,584	
5. 2017.....	XXX	XXX	XXX	4,717	8,692	8,692	8,692	8,692	8,692	8,692	
6. 2018.....	XXX	XXX	XXX	XXX	4,575	8,611	8,617	8,617	8,617	8,617	
7. 2019.....	XXX	XXX	XXX	XXX	XXX	4,797	9,217	9,217	9,217	9,217	
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	5,175	10,103	10,104	10,104	
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,489	10,840	10,843	3
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,039	12,207	6,168
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,631	6,631
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,802
13. Earned Premiums (Sch P-Pt. 1)	6,474	9,143	8,982	8,607	8,564	8,826	9,602	10,417	11,391	12,802	XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**SCHEDULE P - PART 6H - OTHER LIABILITY - CLAIMS-MADE**

**SECTION 1B**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....	1	1	1	1	1	1	1	1	1	1	
3. 2015.....	XXX	2	2	2	2	2	2	2	2	2	
4. 2016.....	XXX	XXX		20	20	20	20	20	20	20	
5. 2017.....	XXX	XXX	XXX	1	2	2	2	2	2	2	
6. 2018.....	XXX	XXX	XXX	XXX	10	35	35	35	35	35	
7. 2019.....	XXX	XXX	XXX	XXX	XXX	78	178	178	178	178	
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	150	322	322	322	
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	192	459	459	
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	237	547	310
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	229	229
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	539
13. Earned Premiums (Sch P-Pt. 1)		1	2	0	22	11	103	250	364	503	539
											XXX

**SECTION 2B**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....	1	1	1	1	1	1	1	1	1	1	
3. 2015.....	XXX	2	2	2	2	2	2	2	2	2	
4. 2016.....	XXX	XXX		20	20	20	20	20	20	20	
5. 2017.....	XXX	XXX	XXX	1	2	2	2	2	2	2	
6. 2018.....	XXX	XXX	XXX	XXX	10	35	35	35	35	35	
7. 2019.....	XXX	XXX	XXX	XXX	XXX	78	178	178	178	178	
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	150	322	322	322	
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	192	459	459	
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	237	547	310
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	229	229
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	539
13. Earned Premiums (Sch P-Pt. 1)		1	2	0	22	11	103	250	364	503	539
											XXX

**SCHEDULE P - PART 6M - INTERNATIONAL**

**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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX									
6. 2018.....	XXX	XXX									
7. 2019.....	XXX	XXX									
8. 2020.....	XXX	XXX									
9. 2021.....	XXX	XXX									
10. 2022.....	XXX	XXX									
11. 2023.....	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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX									
6. 2018.....	XXX	XXX									
7. 2019.....	XXX	XXX									
8. 2020.....	XXX	XXX									
9. 2021.....	XXX	XXX									
10. 2022.....	XXX	XXX									
11. 2023.....	XXX	XXX									
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**SCHEDULE P - PART 6N - REINSURANCE - NONPROPORTIONAL ASSUMED PROPERTY**  
**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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX	X								
6. 2018.....	XXX	XXX	X	X							
7. 2019.....	XXX	XXX	X	X	X						
8. 2020.....	XXX	XXX	X	X	X						
9. 2021.....	XXX	XXX	X	X	X						
10. 2022.....	XXX	XXX	X	X	X						
11. 2023.....	XXX	XXX	XXX	XXX	XXX						
12. Totals.....	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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX	X								
6. 2018.....	XXX	XXX	X	X							
7. 2019.....	XXX	XXX	X	X	X						
8. 2020.....	XXX	XXX	X	X	X						
9. 2021.....	XXX	XXX	X	X	X						
10. 2022.....	XXX	XXX	X	X	X						
11. 2023.....	XXX	XXX	XXX	XXX	XXX						
12. Totals.....	XXX	XXX	XXX	XXX	XXX						
13. Earned Premiums (Sch P-Pt. 1)											XXX

**SCHEDULE P - PART 6O - REINSURANCE - NONPROPORTIONAL ASSUMED LIABILITY**  
**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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX	X								
6. 2018.....	XXX	XXX	X	X							
7. 2019.....	XXX	XXX	X	X	X						
8. 2020.....	XXX	XXX	X	X	X						
9. 2021.....	XXX	XXX	X	X	X						
10. 2022.....	XXX	XXX	X	X	X						
11. 2023.....	XXX	XXX	XXX	XXX	XXX						
12. Totals.....	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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX	X								
6. 2018.....	XXX	XXX	X	X							
7. 2019.....	XXX	XXX	X	X	X						
8. 2020.....	XXX	XXX	X	X	X						
9. 2021.....	XXX	XXX	X	X	X						
10. 2022.....	XXX	XXX	X	X	X						
11. 2023.....	XXX	XXX	XXX	XXX	XXX						
12. Totals.....	XXX	XXX	XXX	XXX	XXX						
13. Earned Premiums (Sch P-Pt. 1)											XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

**SCHEDULE P - PART 6R - PRODUCTS LIABILITY - OCCURRENCE**  
**SECTION 1A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	2										
2. 2014.....	0	2	2	2	2	2	2	2	2	2	
3. 2015.....	XXX	0	2	2	2	2	2	2	2	2	
4. 2016.....	XXX	XXX	0	2	2	2	2	2	2	2	
5. 2017.....	XXX	XXX	XXX	0	2	2	2	2	2	2	
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
11. 2023.....	XXX	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)		2	2	2	2	2	0	0			

**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 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	2										
2. 2014.....	0	2	2	2	2	2	2	2	2	2	
3. 2015.....	XXX	0	2	2	2	2	2	2	2	2	
4. 2016.....	XXX	XXX	0	2	2	2	2	2	2	2	
5. 2017.....	XXX	XXX	XXX	0	2	2	2	2	2	2	
6. 2018.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
11. 2023.....	XXX	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)		2	2	2	2	2	0	0			

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

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX									
6. 2018.....	XXX	XXX									
7. 2019.....	XXX	XXX									
8. 2020.....	XXX	XXX									
9. 2021.....	XXX	XXX									
10. 2022.....	XXX	XXX									
11. 2023.....	XXX	XXX									
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											

**SECTION 2B**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....											
2. 2014.....											
3. 2015.....	XXX										
4. 2016.....	XXX	XXX									
5. 2017.....	XXX	XXX									
6. 2018.....	XXX	XXX									
7. 2019.....	XXX	XXX									
8. 2020.....	XXX	XXX									
9. 2021.....	XXX	XXX									
10. 2022.....	XXX	XXX									
11. 2023.....	XXX	XXX									
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 7B - Section 1 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 2 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 3 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 4 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 5 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 6 - Reinsurance Loss Sensitive Contracts

**N O N E**

Schedule P - Part 7B - Section 7 - Reinsurance Loss Sensitive Contracts

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**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 [ ]

1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? ..... Yes [ ] No [ ]

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 [ ]

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 2014 .....		
1.603 2015 .....		
1.604 2016 .....		
1.605 2017 .....		
1.606 2018 .....		
1.607 2019 .....		
1.608 2020 .....		
1.609 2021 .....		
1.610 2022 .....		
1.611 2023 .....		
1.612 Totals .....		

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? ..... Yes [ X ] No [ ]

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

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

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

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

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

(in thousands of dollars) ..... 5.1 Fidelity .....  
 ..... 5.2 Surety .....

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

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

7.2 (An extended statement may be attached.)

#3 Adjusting & Other Expenses - The ADO payments in this statement, are actual accident year claim payments. The ADO reserves are a combination of actual accident year data and BULK estimates determined by actuarial data. ....

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

Allocated by States and Territories

States, Etc.	Direct Business Only					
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama .....	AL					
2. Alaska .....	AK					
3. Arizona .....	AZ					
4. Arkansas .....	AR					
5. California .....	CA					
6. Colorado .....	CO					
7. Connecticut .....	CT					
8. Delaware .....	DE					
9. District of Columbia .....	DC					
10. Florida .....	FL					
11. Georgia .....	GA					
12. Hawaii .....	HI					
13. Idaho .....	ID					
14. Illinois .....	IL					
15. Indiana .....	IN					
16. Iowa .....	IA					
17. Kansas .....	KS					
18. Kentucky .....	KY					
19. Louisiana .....	LA					
20. Maine .....	ME					
21. Maryland .....	MD					
22. Massachusetts .....	MA					
23. Michigan .....	MI					
24. Minnesota .....	MN					
25. Mississippi .....	MS					
26. Missouri .....	MO					
27. Montana .....	MT					
28. Nebraska .....						
29. Nevada .....	N					
30. New Hampshire .....	NH					
31. New Jersey .....	NJ					
32. New Mexico .....	NM					
33. New York .....	NY					
34. North Carolina .....	NC					
35. North Dakota .....	ND					
36. Ohio .....	OH					
37. Oklahoma .....	OK					
38. Oregon .....	OR					
39. Pennsylvania .....	PA					
40. Rhode Island .....	RI					
41. South Carolina .....	SC					
42. South Dakota .....	SD					
43. Tennessee .....	TN					
44. Texas .....	TX					
45. Utah .....	UT					
46. Vermont .....	VT					
47. Virginia .....	VA					
48. Washington .....	WA					
49. West Virginia .....	WV					
50. Wisconsin .....	WI					
51. Wyoming .....	WY					
52. American Samoa .....	AS					
53. Guam .....	GU					
54. Puerto Rico .....	PR					
55. U.S. Virgin Islands .....	VI					
56. Northern Mariana Islands .....	MP					
57. Canada .....	CAN					
58. Aggregate Other Alien .....	OT					
59. Total .....						

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

## 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.

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

## **SCHEDULE Y**

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

## SCHEDULE Y

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

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO**  
**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.

**MARCH FILING**

	<b>Responses</b>
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 Trusted 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?	YES
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
28. Will the Exhibit of Other Liabilities by Lines of Business be filed with the state of domicile and the NAIC by March 1?	YES
29. Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1?	YES

**APRIL FILING**

30. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
31. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
32. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	NO
33. Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1?	NO
34. Will the Cybersecurity and Identity Theft Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	YES
35. 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
36. Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?	YES
37. Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO

**AUGUST FILING**

38. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO
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**Explanations:**

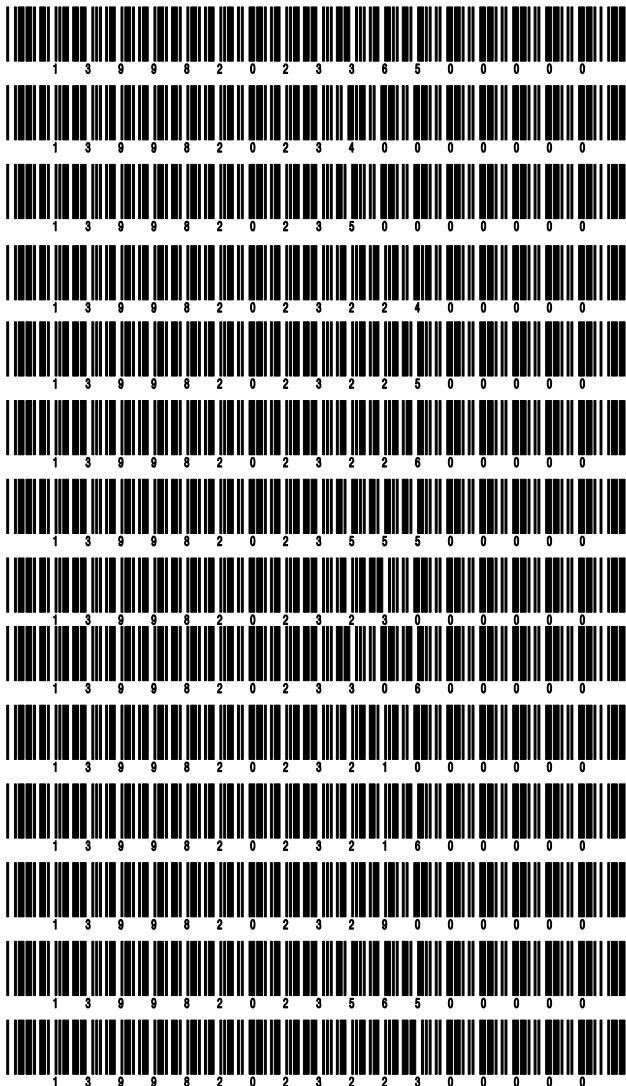
11.	12.	13.	14.	15.	16.	17.	18.	21.	22.	24.	25.	26.	27.	30.	31.	32.	33.	35.	37.	38.
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**Bar Codes:**

11. SIS Stockholder Information Supplement [Document Identifier 420]	 1 3 9 9 8 2 0 2 3 4 2 0 0 0 0 0 0
12. Financial Guaranty Insurance Exhibit [Document Identifier 240]	 1 3 9 9 8 2 0 2 3 2 4 0 0 0 0 0 0
13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	 1 3 9 9 8 2 0 2 3 3 6 0 0 0 0 0 0
14. Supplement A to Schedule T [Document Identifier 455]	 1 3 9 9 8 2 0 2 3 4 5 5 0 0 0 0 0
15. Trusted Surplus Statement [Document Identifier 490]	 1 3 9 9 8 2 0 2 3 3 8 5 0 0 0 0 0
16. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]	 1 3 9 9 8 2 0 2 3 4 0 1 0 0 0 0 0
17. Reinsurance Summary Supplemental Filing [Document Identifier 401]	 1 3 9 9 8 2 0 2 3 4 0 1 0 0 0 0 0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**OVERFLOW PAGE FOR WRITE-INS**

**NONE**



SUPPLEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

## DIRECTOR AND OFFICER INSURANCE COVERAGE SUPPLEMENT

For The Year Ended December 31, 2023  
(To Be Filed by March 1)

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

Direct Premiums		Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
1 Written	2 Earned	3 Paid	4 Incurred	5 Paid	6 Incurred	7 Claims Made	8 Occurrence
\$ .....	\$ .....	\$ .....	\$ .....	\$ .....	\$ .....	..... %	..... %

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 [  ] 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 [  ] 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: ..... \$ ..... 167,567

2.32 Amount estimated using reasonable assumptions: ..... \$ .....

2.4 If the answer to question 2.1 is yes, please provide the following:

Direct Losses		Direct Defense and Cost Containment		Percentage of In Force Policies	
1 Paid	2 Paid + Change in Case Reserves	3 Paid	4 Paid + Change in Case Reserves	5 Claims Made	6 Occurrence
\$ .....	\$ .....	\$ .....	\$ .....	..... %	..... %



SUPPLEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO

## **EXHIBIT OF OTHER LIABILITIES BY LINES OF BUSINESS**

**AS REPORTED ON LINE 17 OF THE EXHIBIT OF PREMIUMS AND LOSSES**

(To Be Filed by March 1)

NAIC Group Code 0201

NAIC Company Code 13998

	Direct Business Only			
	Prior Year		Current Year	
	1 Written Premium	2 Written Premium	3 Losses Paid (deducting salvage)	4 Losses Unpaid (Case Base)
1. Completed operations .....	8,159	8,419		
2. Errors & omissions (E&O) .....	530,481	506,395	4,149	65,000
3. Directors & officers (D&O) .....				
4. Environmental liability .....				
5. Excess workers' compensation .....				
6. Commercial excess & umbrella .....	11,641,181	13,099,504		1,550,000
7. Personal umbrella .....				
8. Employment liability .....	11,459	9,618		
9. Aggregate write-ins for facilities & premises (CGL) .....	512,414	488,202		
10. Internet & cyber liability .....	4,798	3,603		
11. Aggregate write-ins for other .....	158	746		
12. Total ASL 17 - other liability (sum of Lines 1 through 11)	12,708,650	14,116,487	4,149	1,615,000
<b>DETAILS OF WRITE-INS</b>				
0901. Premises and Operations Liability .....	49,736	44,705		
0902. Municipal Liability .....	462,678	443,497		
0903. .....				
0998. Summary of remaining write-ins for Line 9 from overflow page .....				
0999. Totals (Lines 0901 thru 0903 plus 0998)(Line 9 above)	512,414	488,202		
1101. Aggregate of other lines of business less than 10% of category .....	158	746		
1102. .....				
1103. .....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....				
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	158	746		



SUPPLEMENT FOR THE YEAR 2023 OF THE UTICA NATIONAL INSURANCE COMPANY OF OHIO  
**MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR**

For The Year Ended December 31, 2023  
(To Be Filed by March 1)

**FOR THE STATE OF:**

NAIC Group Code 0201

NAIC Company Code 13998

MCAS LINE OF BUSINESS	NONE	MCAS Reportable
1. Disability Income .....		Premium/Considerations
2. Health .....		(Yes/No)
3. Homeowners .....		
4. Individual Annuity .....		
5. Individual Life .....		
6. Lender-Placed Home and Auto .....		
7. Long-Term Care .....		
8. Other Health .....		
9. Private Flood .....		
10. Private Passenger Auto .....		
11. Short-Term Limited Duration Health Plans .....		
12. Travel .....		