



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

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

HOME AND FARM INSURANCE COMPANY

NAIC Group Code 0046 0046 NAIC Company Code 17639 Employer's ID Number 35-1630739
(Current) (Prior)

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

Incorporated/Organized 01/29/1985 Commenced Business 03/05/1985

Statutory Home Office One Heritage Place, Piqua, OH, US 45356
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office One Heritage Place
(Street and Number)
Piqua, OH, US 45356 937-778-5000
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address One Heritage Place, Piqua, OH, US 45356
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records One Heritage Place
(Street and Number)
Piqua, OH, US 45356 937-778-5000
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address N/A

Statutory Statement Contact Craig Allen Curcio, 937-778-5000
(Name) (Area Code) (Telephone Number)
craig.curcio@buckeye-ins.com 937-778-5019
(E-mail Address) (FAX Number)

OFFICERS

President John Michael Brooks Treasurer Jerry Christopher Collins
Secretary Lisa Lyn Wesner

OTHER

DIRECTORS OR TRUSTEES

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

State of Ohio SS
County of Miami

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

John Michael Brooks
President

Lisa Lyn Wesner
Secretary

Jerry Christopher Collins
Treasurer

Subscribed and sworn to before me this _____ day of _____

- a. Is this an original filing? Yes [X] No []
b. If no,
1. State the amendment number.....
2. Date filed
3. Number of pages attached.....



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046

BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2023

NAIC Company Code 17639

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include various insurance lines like Fire, Multiple Peril Crop, Federal Flood, etc., and a Total (a) row.

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

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046

BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2023

NAIC Company Code 17639

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	561	636	0	194	0	0	0	0	0	0	90	10
3. Farmowners Multiple Peril	1,285,821	1,178,339	0	636,021	730,758	444,560	118,348	7,810	7,810	0	205,458	23,423
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	7,781	7,191	0	3,953	4,630	4,630	0	0	0	0	1,243	142
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	299,788	274,941	0	147,432	55,270	165,445	232,000	84	84	0	47,910	5,462
19.3 Commercial Auto No-Fault (Personal Injury Protection)												
19.4 Other Commercial Auto Liability												
21.1 Private Passenger Auto Physical Damage	353,682	300,348	0	172,745	226,925	257,825	31,500	180	180	0	56,523	6,444
21.2 Commercial Auto Physical Damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and Theft												
27. Boiler and Machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a)	1,947,433	1,761,455	0	960,345	1,017,583	872,460	381,848	8,074	8,074	0	311,224	35,481
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 8,084

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

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0046

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2023

NAIC Company Code 17639

Table with 12 columns: Line of Business, Direct Premiums Written, Direct Premiums Earned, Dividends Paid or Credited to Policyholders on Direct Business, Direct Unearned Premium Reserves, Direct Losses Paid (deducting salvage), Direct Losses Incurred, Direct Losses Unpaid, Direct Defense and Cost Containment Expense Paid, Direct Defense and Cost Containment Expense Incurred, Direct Defense and Cost Containment Expense Unpaid, Commissions and Brokerage Expenses, Taxes, Licenses and Fees. Rows include Fire, Allied Lines, Multiple Peril Crop, Federal Flood, Private Crop, Private Flood, Farmowners Multiple Peril, Homeowners Multiple Peril, Commercial Multiple Peril (Non-Liability Portion), Commercial Multiple Peril (Liability Portion), Mortgage Guaranty, Ocean Marine, Inland Marine, Financial Guaranty, Medical Professional Liability - Occurrence, Medical Professional Liability - Claims-Made, Earthquake, Comprehensive (hospital and medical) ind (b), Comprehensive (hospital and medical) group (b), Credit A&H (Group and Individual), Vision Only (b), Dental Only (b), Disability Income (b), Medicare Supplement (b), Medicaid Title XIX (b), Medicare Title XVIII (b), Long-Term Care (b), Federal Employees Health Benefits Plan (b), Other Health (b), Workers' Compensation, Other Liability - Occurrence, Other Liability - Claims-Made, Excess Workers' Compensation, Products Liability - Occurrence, Products Liability - Claims-Made, Private Passenger Auto No-Fault (Personal Injury Protection), Other Private Passenger Auto Liability, Commercial Auto No-Fault (Personal Injury Protection), Other Commercial Auto Liability, Private Passenger Auto Physical Damage, Commercial Auto Physical Damage, Aircraft (all perils), Fidelity, Surety, Burglary and Theft, Boiler and Machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate Write-Ins for Other Lines of Business, Total (a), DETAILS OF WRITE-INS, 3401, 3402, 3403, 3498, 3499.

(a) Finance and service charges not included in Lines 1 to 35 \$ 8,084

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under indemnity only products 0

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE F - PART 1

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On		8 Cols. 6 + 7	9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE								
31-6035649	.16713	Buckeye State Mutual Insurance Company	OH	1,931	344	158	502		465	1,019	2,000			
0199999		Affiliates - U.S. Intercompany Pooling		1,931	344	158	502	0	465	1,019	2,000	0	0	0
0499999		Total - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0
0799999		Total - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0
0899999		Total - Affiliates		1,931	344	158	502	0	465	1,019	2,000	0	0	0
1299999		Total - Pools and Associations		0	0	0	0	0	0	0	0	0	0	0
9999999		Totals		1,931	344	158	502	0	465	1,019	2,000	0	0	0

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

1 ID Number	2 NAIC Com- pany Code	3 Name of Company	4 Date of Contract	5 Original Premium	6 Reinsurance Premium
NONE					

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties		
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers				
31-6035649	16713	Buckeye State Mutual Insurance Company	OH		1,639	354	16	160		144		857		1,531		398	34	1,099	300		
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling					1,639	354	16	160	0	144	0	857	0	1,531	0	398	34	1,099	300		
0499999. Total Authorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0899999. Total Authorized - Affiliates					1,639	354	16	160	0	144	0	857	0	1,531	0	398	34	1,099	300		
13-1675535	25364	Swiss Reinsurance America Corporation	NY		19					2		2		4		8		(4)			
31-4259550	14621	Motorists Mutual Insurance Company	OH		3					2		2		4		2		2			
Farm Bureau Mutual Insurance Company of																					
38-1316179	21555	Michigan	MI		4					2		2		4		3		1			
39-0712210	18767	Church Mutual Insurance Company	WI		4					2		2		4		3		1			
52-1952955	10357	Renaissance Reinsurance U.S. Inc.	MD		23					9		10		19		14		5			
Kentucky Farm Bureau Mutual Insurance																					
61-0392792	22993	Company	KY		4					2		2		4		2		2			
95-3187355	35300	Allianz Global Risks US Insurance Company	IL		9									0				0			
42-0234980	21415	Employers Mutual Casualty Company	IA		13					5		6		11		8		3			
36-2661954	10103	American Agricultural Insurance Company	IN		14					6		6		12		9		3			
13-3031176	38636	Partner Reinsurance Company of the U.S.	NY		4					2		2		4		2		2			
Farmers Mutual Hail Insurance Company Of																					
42-0245840	13897	Iowa	IA		10					4		4		8		6		2			
42-0245990	14117	Grinnell Mutual Reinsurance Company	IA		37					12		13		25		18		7			
04-1543470	23043	Liberty Mutual Insurance Company	MA		46					13		15		28		21		7			
05-0316605	21482	Factory Mutual Insurance Company	RI		32							16		16		5		11			
13-4924125	10227	Munich Reinsurance America, Inc.	DE		1							0		0		0		0			
13-5616275	19453	Transatlantic Reinsurance Company	NY		1									0				0			
0999999. Total Authorized - Other U.S. Unaffiliated Insurers					224	0	0	0	0	61	0	82	0	143	0	101	0	42	0		
AA-1340125		Hannover Rück SE	DEU		65					20		22		42		31		11			
1299999. Total Authorized - Other Non-U.S. Insurers					65	0	0	0	0	20	0	22	0	42	0	31	0	11	0		
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)					1,928	354	16	160	0	225	0	961	0	1,716	0	530	34	1,152	300		
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2299999. Total Unauthorized - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-1340028		DEVK Rückversicherungs-und Beteiligungs-AG	DEU		5									0				0			
AA-1560350		Farm Mutual Reinsurance Plan Inc.	CAN		7									0				0			
Helvetia Schweizerische																					
AA-1460080		Versicherungsgesellschaft	CHE		6									0				0	13		
AA-5324100		Taiping Reinsurance Company Limited	HKG		2					2				0				0			
2699999. Total Unauthorized - Other Non-U.S. Insurers					20	0	0	0	0	0	0	0	0	0	0	0	0	0	13		
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					20	0	0	0	0	0	0	0	0	0	0	0	0	0	0	13	
3299999. Total Certified - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3599999. Total Certified - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3699999. Total Certified - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On								16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties		
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions		15 Columns 7 through 14 Totals	17 Ceded Balances Payable			18 Other Amounts Due to Reinsurers	
5099999. Total Reciprocal Jurisdiction - Affiliates						0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)						0	0	0	0	0	0	0	0	0	0	0	0	0	0	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)						1,948	354	16	160	0	225	0	961	0	1,716	0	530	34	1,152	313
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)						0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9999999 Totals						1,948	354	16	160	0	225	0	961	0	1,716	0	530	34	1,152	313

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
31-6035649	Buckeye State Mutual Insurance Company					732	799	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling	0	0	XXX	0	732	799	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
0899999	Total Authorized - Affiliates	0	0	XXX	0	732	799	0	0	0	0	0	0	0	0	XXX	0
13-1675535	Swiss Reinsurance America Corporation					4	0	0	4	5	5	0	0	0	2	0	0
31-4259550	Motorists Mutual Insurance Company					2	2	0	2	5	2	3	0	0	3	0	0
38-1316179	Farm Bureau Mutual Insurance Company of Michigan					3	1	0	4	5	3	2	0	0	5	0	0
39-0712210	Church Mutual Insurance Company					3	1	0	4	5	3	2	0	0	3	0	0
52-1952955	Renaissance Reinsurance U.S. Inc.					14	5	0	19	23	14	9	0	0	9	0	0
61-0392792	Kentucky Farm Bureau Mutual Insurance Company					2	2	0	4	5	2	3	0	0	3	0	0
95-3187355	Allianz Global Risks US Insurance Company					0	0	0	0	0	0	0	0	0	4	0	0
42-0234980	Employers Mutual Casualty Company					8	3	0	11	13	8	5	0	0	5	0	0
36-2661954	American Agricultural Insurance Company					9	3	0	12	14	9	5	0	0	5	0	0
13-3031176	Partner Reinsurance Company of the U.S.					2	2	0	4	5	2	3	0	0	3	0	0
42-0245840	Farmers Mutual Hail Insurance Company Of Iowa					6	2	0	8	10	6	4	0	0	4	0	0
42-0245990	Grinnell Mutual Reinsurance Company					18	7	0	25	30	18	12	0	0	12	0	0
04-1543470	Liberty Mutual Insurance Company					21	7	0	28	34	21	13	0	0	13	0	0
05-0316605	Factory Mutual Insurance Company					5	11	0	16	19	5	14	0	0	14	0	0
13-4924125	Munich Reinsurance America, Inc.					0	0	0	0	0	0	0	0	0	2	0	0
13-5616275	Transatlantic Reinsurance Company					0	0	0	0	0	0	0	0	0	2	0	0
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	0	0	XXX	0	97	46	0	143	172	98	74	0	0	74	XXX	0
AA-1340125	Hannover Rück SE					31	11	0	42	50	31	19	0	0	19	2	0
1299999	Total Authorized - Other Non-U.S. Insurers	0	0	XXX	0	31	11	0	42	50	31	19	0	0	19	XXX	0
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	0	XXX	0	860	856	0	185	222	129	93	0	0	93	XXX	0
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
2299999	Total Unauthorized - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
AA-1340028	DEVK Rückversicherungs-und Beteiligungs-AG					0	0	0	0	0	0	0	0	0	3	0	0
AA-1560350	Farm Mutual Reinsurance Plan Inc.					0	0	0	0	0	0	0	0	0	4	0	0
AA-1460080	Helvetia Schweizerische Versicherungsgesellschaft					0	0	0	0	0	0	0	0	0	2	0	0
AA-5324100	Taiping Reinsurance Company Limited					0	0	0	0	0	0	0	0	0	3	0	0
2699999	Total Unauthorized - Other Non-U.S. Insurers	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3299999	Total Certified - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999	Total Certified - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
3699999	Total Certified - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		0	0	XXX	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	
5099999. Total Reciprocal Jurisdiction - Affiliates		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		0	0	XXX	0	860	856	0	185	222	129	93	0	93	XXX	0	
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
9999999 Totals		0	0	XXX	0	860	856	0	185	222	129	93	0	93	XXX	0	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)	44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37	Overdue				43											
		Current	38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days												
31-6035649	Buckeye State Mutual Insurance Company	370								370	0	0	0.0	0.0	0.0	0.0	XXX	0
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling	370	0	0	0	0	0	0	0	370	0	0	0.0	0.0	0.0	0.0	XXX	0
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
0899999	Total Authorized - Affiliates	370	0	0	0	0	0	0	0	370	0	0	0.0	0.0	0.0	0.0	XXX	0
13-1675535	Swiss Reinsurance America Corporation									0	0	0	0.0	0.0	0.0	0.0	YES	0
31-4259550	Motorists Mutual Insurance Company									0	0	0	0.0	0.0	0.0	0.0	YES	0
38-1316179	Farm Bureau Mutual Insurance Company of Michigan									0	0	0	0.0	0.0	0.0	0.0	YES	0
39-0712210	Church Mutual Insurance Company									0	0	0	0.0	0.0	0.0	0.0	YES	0
52-1952955	Renaissance Reinsurance U.S. Inc.									0	0	0	0.0	0.0	0.0	0.0	YES	0
61-0392792	Kentucky Farm Bureau Mutual Insurance Company									0	0	0	0.0	0.0	0.0	0.0	YES	0
95-3187355	Allianz Global Risks US Insurance Company									0	0	0	0.0	0.0	0.0	0.0	YES	0
42-0234980	Employers Mutual Casualty Company									0	0	0	0.0	0.0	0.0	0.0	YES	0
36-2661954	American Agricultural Insurance Company									0	0	0	0.0	0.0	0.0	0.0	YES	0
13-3031176	Partner Reinsurance Company of the U.S.									0	0	0	0.0	0.0	0.0	0.0	YES	0
42-0245840	Farmers Mutual Hail Insurance Company Of Iowa									0	0	0	0.0	0.0	0.0	0.0	YES	0
42-0245990	Grinnell Mutual Reinsurance Company									0	0	0	0.0	0.0	0.0	0.0	YES	0
04-1543470	Liberty Mutual Insurance Company									0	0	0	0.0	0.0	0.0	0.0	YES	0
05-0316605	Factory Mutual Insurance Company									0	0	0	0.0	0.0	0.0	0.0	YES	0
13-4924125	Munich Reinsurance America, Inc.									0	0	0	0.0	0.0	0.0	0.0	YES	0
13-5616275	Transatlantic Reinsurance Company									0	0	0	0.0	0.0	0.0	0.0	YES	0
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
AA-1340125	Hannover Rück SE									0	0	0	0.0	0.0	0.0	0.0	YES	0
1299999	Total Authorized - Other Non-U.S. Insurers	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	370	0	0	0	0	0	370	0	0	370	0	0	0.0	0.0	0.0	XXX	0
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
2299999	Total Unauthorized - Affiliates	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
AA-1340028	DEVK Rückversicherungs-und Beteiligungs-AG									0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1560350	Farm Mutual Reinsurance Plan Inc.									0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-1460080	Helvetia Schweizerische Versicherungsgesellschaft									0	0	0	0.0	0.0	0.0	0.0	YES	0
AA-5324100	Taiping Reinsurance Company Limited									0	0	0	0.0	0.0	0.0	0.0	YES	0
2699999	Total Unauthorized - Other Non-U.S. Insurers	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
3299999	Total Certified - Affiliates - U.S. Non-Pool	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0
3599999	Total Certified - Affiliates - Other (Non-U.S.)	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46+48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37	Overdue				43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)										
		Current	38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days											
3699999. Total Certified - Affiliates		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
5099999. Total Reciprocal Jurisdiction - Affiliates		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		370	0	0	0	0	370	0	0	370	0	0.0	0.0	0.0	XXX	0	
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0	
9999999 Totals		370	0	0	0	0	370	0	0	370	0	0.0	0.0	0.0	XXX	0	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 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		
31-6035649	Buckeye State 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	
0499999	Total Authorized - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0799999	Total Authorized - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0899999	Total Authorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1675535	Swiss Reinsurance America Corporation	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
31-4259550	Motorists Mutual Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
38-1316179	Farm Bureau Mutual Insurance Company of Michigan	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
39-0712210	Church Mutual Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
52-1952955	Renaissance Reinsurance U.S. Inc.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
61-0392792	Kentucky Farm Bureau Mutual Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
95-3187355	Allianz Global Risks US Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0234980	Employers Mutual Casualty Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36-2661954	American Agricultural Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-3031176	Partner Reinsurance Company of the U.S.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0245840	Farmers Mutual Hail Insurance Company Of Iowa	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0245990	Grinnell Mutual Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
04-1543470	Liberty Mutual Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
05-0316605	Factory Mutual Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-4924125	Munich Reinsurance America, Inc.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-5616275	Transatlantic Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0999999	Total Authorized - Other U.S. Unaffiliated Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340125	Hannover Rück SE	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1299999	Total Authorized - Other Non-U.S. Insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2299999	Total Unauthorized - Affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340028	DEVK Rückversicherungs- und Beteiligungs-AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1560350	Farm Mutual Reinsurance Plan Inc.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1460080	Helvetia Schweizerische Versicherungsgesellschaft	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-5324100	Taiping Reinsurance Company Limited	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2699999	Total Unauthorized - Other Non-U.S. Insurers			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	
3299999	Total Certified - Affiliates - U.S. Non-Pool			XXX	0	0	0	0	XXX	XXX	0	0	0	0	0	0	0	
3599999	Total Certified - Affiliates - Other (Non-U.S.)			XXX	0	0	0	0	XXX	XXX	0	0	0	0	0	0	0	
3699999	Total Certified - Affiliates			XXX	0	0	0	0	XXX	XXX	0	0	0	0	0	0	0	
4299999	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)			XXX	0	0	0	0	XXX	XXX	0	0	0	0	0	0	0	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 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		
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool				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	
5099999. Total Reciprocal Jurisdiction - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	
9999999 Totals				XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance				
			71	72	73	74	75	76	77	78	
			Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	Complete if Col. 52 = "Yes"; Otherwise Enter 0	Complete if Col. 52 = "No"; Otherwise Enter 0	Provision for Amounts Ceded to Authorized and Reciprocal Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)	
31-6035649	Buckeye State Mutual Insurance Company	0	XXX	XXX	0	0	0	0	XXX	XXX	0
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling	0	XXX	XXX	0	0	0	0	XXX	XXX	0
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	0	XXX	XXX	0
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	0	XXX	XXX	0
0899999	Total Authorized - Affiliates	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-1675535	Swiss Reinsurance America Corporation	0	XXX	XXX	0	0	0	0	XXX	XXX	0
31-4259550	Motorists Mutual Insurance Company	0	XXX	XXX	0	0	0	0	XXX	XXX	0
38-1316179	Farm Bureau Mutual Insurance Company of Michigan	0	XXX	XXX	0	0	0	0	XXX	XXX	0
39-0712210	Church Mutual Insurance Company	0	XXX	XXX	0	0	0	0	XXX	XXX	0
52-1952955	Renaissance Reinsurance U.S. Inc.	0	XXX	XXX	0	0	0	0	XXX	XXX	0
61-0392792	Kentucky Farm Bureau Mutual Insurance Company	0	XXX	XXX	0	0	0	0	XXX	XXX	0
95-3187355	Allianz Global Risks US Insurance Company	0	XXX	XXX	0	0	0	0	XXX	XXX	0
42-0234980	Employers Mutual Casualty Company	0	XXX	XXX	0	0	0	0	XXX	XXX	0
36-2661954	American Agricultural Insurance Company	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-3031176	Partner Reinsurance Company of the U.S.	0	XXX	XXX	0	0	0	0	XXX	XXX	0
42-0245840	Farmers Mutual Hail Insurance Company Of Iowa	0	XXX	XXX	0	0	0	0	XXX	XXX	0
42-0245990	Grinnell Mutual Reinsurance Company	0	XXX	XXX	0	0	0	0	XXX	XXX	0
04-1543470	Liberty Mutual Insurance Company	0	XXX	XXX	0	0	0	0	XXX	XXX	0
05-0316605	Factory Mutual Insurance Company	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-4924125	Munich Reinsurance America, Inc.	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-5616275	Transatlantic Reinsurance Company	0	XXX	XXX	0	0	0	0	XXX	XXX	0
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1340125	Hannover Rück SE	0	XXX	XXX	0	0	0	0	XXX	XXX	0
1299999	Total Authorized - Other Non-U.S. Insurers	0	XXX	XXX	0	0	0	0	XXX	XXX	0
1499999	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	XXX	XXX	0	0	0	0	XXX	XXX	0
1899999	Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	0	XXX	XXX	XXX	0	0	XXX	0
2199999	Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	0	XXX	XXX	XXX	0	0	XXX	0
2299999	Total Unauthorized - Affiliates	0	0	0	XXX	XXX	XXX	0	0	XXX	0
AA-1340028	DEVK Rückversicherungs-und Beteiligungs-AG	0	0	0	XXX	XXX	XXX	0	0	XXX	0
AA-1560350	Farm Mutual Reinsurance Plan Inc.	0	0	0	XXX	XXX	XXX	0	0	XXX	0
AA-1460080	Helvetia Schweizerische Versicherungsgesellschaft	0	0	0	XXX	XXX	XXX	0	0	XXX	0
AA-5324100	Taiping Reinsurance Company Limited	0	0	0	XXX	XXX	XXX	0	0	XXX	0
2699999	Total Unauthorized - Other Non-U.S. Insurers	0	0	0	XXX	XXX	XXX	0	0	XXX	0
2899999	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	0	0	XXX	XXX	XXX	0	0	XXX	0
3299999	Total Certified - Affiliates - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3599999	Total Certified - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3699999	Total Certified - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE F - PART 4

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

1 Issuing or Confirming Bank Reference Number Used in Col. 23 of Sch F Part 3	2 Letters of Credit Code	3 American Bankers Association (ABA) Routing Number	4 Issuing or Confirming Bank Name	5 Letters of Credit Amount
NONE				
Total				

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

	1 <u>Name of Reinsurer</u>	2 <u>Commission Rate</u>	3 <u>Ceded Premium</u>
1.	Hannover Rück SE	25.000	65
2.		
3.		
4.		
5.		

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

	1 <u>Name of Reinsurer</u>	2 <u>Total Recoverables</u>	3 <u>Ceded Premiums</u>	4 <u>Affiliated</u>
6.	Buckeye State Mutual Insurance Company	1,531	1,639	Yes [X] No []
7.	Hannover Rück SE	42	65	Yes [] No [X]
8.	Liberty Mutual Insurance Company	28	46	Yes [] No [X]
9.	Grinnell Mutual Reinsurance Company	25	37	Yes [] No [X]
10.	Renaissance Reinsurance U.S. Inc.	19	23	Yes [] No [X]

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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	6,757,794	(312,587)	6,445,207
2. Premiums and considerations (Line 15)	892,392	(465,330)	427,062
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	369,575	(369,575)	0
4. Funds held by or deposited with reinsured companies (Line 16.2)	2,000,000	(2,000,000)	0
5. Other assets	283,044	(127,894)	155,150
6. Net amount recoverable from reinsurers		3,686,947	3,686,947
7. Protected cell assets (Line 27)	0		0
8. Totals (Line 28)	10,302,805	411,561	10,714,366
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	660,916	381,847	1,042,763
10. Taxes, expenses, and other obligations (Lines 4 through 8)	179,421	74,362	253,783
11. Unearned premiums (Line 9)	1,018,676	960,344	1,979,020
12. Advance premiums (Line 10)	28,751		28,751
13. Dividends declared and unpaid (Line 11.1 and 11.2)	0		0
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	530,342	(530,342)	0
15. Funds held by company under reinsurance treaties (Line 13)	312,587	(312,587)	0
16. Amounts withheld or retained by company for account of others (Line 14)			0
17. Provision for reinsurance (Line 16)	0		0
18. Other liabilities	163,649	(162,063)	1,586
19. Total liabilities excluding protected cell business (Line 26)	2,894,342	411,561	3,305,903
20. Protected cell liabilities (Line 27)			0
21. Surplus as regards policyholders (Line 37)	7,408,463	XXX	7,408,463
22. Totals (Line 38)	10,302,805	411,561	10,714,366

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

If yes, give full explanation:

Schedule H - Part 1 - Analysis of Underwriting Operations

N O N E

Schedule H - Part 2 - Reserves and Liabilities

N O N E

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

N O N E

Schedule H - Part 4 - Reinsurance

N O N E

Schedule H - Part 5 - Health Claims

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
SCHEDULE P - PART 1A - HOMEOWNERS/FAROWNERS

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
2. 2014.....	1,489.....	501.....	988.....	1,095.....	438.....	9.....	3.....	57.....	9.....	5.....	711.....	197.....
3. 2015.....	1,421.....	458.....	963.....	786.....	260.....	9.....	3.....	42.....	8.....	7.....	566.....	129.....
4. 2016.....	1,363.....	344.....	1,019.....	902.....	211.....	14.....	5.....	49.....	2.....	4.....	747.....	150.....
5. 2017.....	1,247.....	245.....	1,002.....	906.....	259.....	6.....	1.....	38.....	1.....	1.....	689.....	138.....
6. 2018.....	1,013.....	234.....	779.....	520.....	31.....	3.....	0.....	28.....	0.....	3.....	520.....	91.....
7. 2019.....	988.....	226.....	762.....	636.....	162.....	5.....	3.....	32.....	2.....	14.....	506.....	108.....
8. 2020.....	1,003.....	197.....	806.....	498.....	40.....	2.....	0.....	29.....	1.....	4.....	488.....	67.....
9. 2021.....	1,012.....	178.....	834.....	728.....	180.....	3.....	1.....	41.....	0.....	16.....	591.....	76.....
10. 2022.....	1,047.....	187.....	860.....	700.....	155.....	5.....	2.....	33.....	0.....	12.....	581.....	67.....
11. 2023.....	1,137.....	233.....	904.....	770.....	154.....	2.....	1.....	32.....	3.....	1.....	646.....	74.....
12. Totals.....	XXX.....	XXX.....	XXX.....	7,541.....	1,890.....	58.....	19.....	381.....	26.....	67.....	6,045.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2018.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2019.....	3.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....	0.....
8. 2020.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
9. 2021.....	0.....	1.....	8.....	2.....	0.....	0.....	1.....	0.....	0.....	0.....	1.....	6.....	0.....
10. 2022.....	4.....	0.....	16.....	5.....	0.....	0.....	2.....	1.....	1.....	0.....	3.....	17.....	0.....
11. 2023.....	24.....	3.....	62.....	20.....	0.....	0.....	11.....	3.....	7.....	0.....	7.....	78.....	5.....
12. Totals.....	31.....	4.....	86.....	27.....	0.....	0.....	14.....	4.....	8.....	0.....	11.....	104.....	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
	1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....		0.....	XXX.....
2. 2014.....	1,161.....	450.....	711.....	78.0.....	89.8.....	72.0.....	0.....	0.....	0.0.....	0.....	0.....
3. 2015.....	837.....	271.....	566.....	58.9.....	59.2.....	58.8.....	0.....	0.....	0.0.....	0.....	0.....
4. 2016.....	965.....	218.....	747.....	70.8.....	63.4.....	73.3.....	0.....	0.....	0.0.....	0.....	0.....
5. 2017.....	950.....	261.....	689.....	76.2.....	106.5.....	68.8.....	0.....	0.....	0.0.....	0.....	0.....
6. 2018.....	551.....	31.....	520.....	54.4.....	13.2.....	66.8.....	0.....	0.....	0.0.....	0.....	0.....
7. 2019.....	676.....	167.....	509.....	68.4.....	73.9.....	66.8.....	0.....	0.....	0.0.....	3.....	0.....
8. 2020.....	529.....	41.....	488.....	52.7.....	20.8.....	60.5.....	0.....	0.....	0.0.....	0.....	0.....
9. 2021.....	781.....	184.....	597.....	77.2.....	103.4.....	71.6.....	0.....	0.....	0.0.....	5.....	1.....
10. 2022.....	761.....	163.....	598.....	72.7.....	87.2.....	69.5.....	0.....	0.....	0.0.....	15.....	2.....
11. 2023.....	908.....	184.....	724.....	79.9.....	79.0.....	80.1.....	0.....	0.....	0.0.....	63.....	15.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	86.....	18.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
2. 2014.....	638.....	197.....	441.....	406.....	108.....	12.....	2.....	36.....	2.....	15.....	342.....	150.....
3. 2015.....	623.....	177.....	446.....	459.....	129.....	17.....	3.....	37.....	3.....	15.....	378.....	133.....
4. 2016.....	607.....	128.....	479.....	402.....	76.....	15.....	3.....	35.....	(1).....	13.....	374.....	130.....
5. 2017.....	567.....	57.....	510.....	398.....	32.....	19.....	5.....	33.....	1.....	10.....	412.....	108.....
6. 2018.....	461.....	52.....	409.....	241.....	14.....	10.....	3.....	25.....	(3).....	13.....	262.....	80.....
7. 2019.....	444.....	52.....	392.....	286.....	53.....	6.....	1.....	25.....	(1).....	8.....	264.....	78.....
8. 2020.....	430.....	41.....	389.....	195.....	27.....	6.....	1.....	29.....	(1).....	6.....	203.....	57.....
9. 2021.....	409.....	41.....	368.....	209.....	20.....	3.....	0.....	26.....	0.....	6.....	218.....	60.....
10. 2022.....	405.....	39.....	366.....	157.....	0.....	0.....	0.....	32.....	0.....	6.....	189.....	63.....
11. 2023.....	428.....	42.....	386.....	120.....	0.....	0.....	0.....	27.....	0.....	2.....	147.....	54.....
12. Totals.....	XXX.....	XXX.....	XXX.....	2,873.....	459.....	88.....	18.....	305.....	0.....	94.....	2,789.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2018.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2019.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2020.....	9.....	0.....	0.....	0.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....	10.....	0.....
9. 2021.....	19.....	0.....	3.....	1.....	3.....	0.....	2.....	1.....	2.....	0.....	1.....	27.....	1.....
10. 2022.....	36.....	0.....	6.....	2.....	1.....	0.....	3.....	1.....	2.....	0.....	4.....	45.....	1.....
11. 2023.....	67.....	0.....	26.....	7.....	1.....	0.....	20.....	6.....	7.....	0.....	4.....	108.....	5.....
12. Totals.....	131.....	0.....	35.....	10.....	6.....	0.....	25.....	8.....	11.....	0.....	9.....	190.....	7.....

	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.....	0.....	0.....	XXX.....	0.....	0.....
2. 2014.....	454.....	112.....	342.....	71.2.....	56.9.....	77.6.....	0.....	0.....	0.0.....	0.....	0.....
3. 2015.....	513.....	135.....	378.....	82.3.....	76.3.....	84.8.....	0.....	0.....	0.0.....	0.....	0.....
4. 2016.....	452.....	78.....	374.....	74.5.....	60.9.....	78.1.....	0.....	0.....	0.0.....	0.....	0.....
5. 2017.....	450.....	38.....	412.....	79.4.....	66.7.....	80.8.....	0.....	0.....	0.0.....	0.....	0.....
6. 2018.....	276.....	14.....	262.....	59.9.....	26.9.....	64.1.....	0.....	0.....	0.0.....	0.....	0.....
7. 2019.....	317.....	53.....	264.....	71.4.....	101.9.....	67.3.....	0.....	0.....	0.0.....	0.....	0.....
8. 2020.....	240.....	27.....	213.....	55.8.....	65.9.....	54.8.....	0.....	0.....	0.0.....	9.....	1.....
9. 2021.....	267.....	22.....	245.....	65.3.....	53.7.....	66.6.....	0.....	0.....	0.0.....	21.....	6.....
10. 2022.....	237.....	3.....	234.....	58.5.....	7.7.....	63.9.....	0.....	0.....	0.0.....	40.....	5.....
11. 2023.....	268.....	13.....	255.....	62.6.....	31.0.....	66.1.....	0.....	0.....	0.0.....	86.....	22.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	156.....	34.....

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

N O N E

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

N O N E

Schedule P - Part 1E - Commercial Multiple Peril

N O N E

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
2. 2014.....	59.....	39.....	20.....	42.....	34.....	0.....	0.....	1.....	0.....	0.....	0.....	9.....
3. 2015.....	60.....	39.....	21.....	7.....	2.....	1.....	1.....	0.....	0.....	0.....	0.....	5.....
4. 2016.....	61.....	37.....	24.....	3.....	0.....	1.....	0.....	1.....	0.....	0.....	0.....	5.....
5. 2017.....	56.....	35.....	21.....	50.....	45.....	0.....	0.....	1.....	0.....	0.....	0.....	6.....
6. 2018.....	42.....	29.....	13.....	15.....	8.....	0.....	0.....	0.....	0.....	0.....	0.....	7.....
7. 2019.....	28.....	27.....	1.....	73.....	70.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....
8. 2020.....	30.....	28.....	2.....	0.....	0.....	3.....	2.....	0.....	0.....	0.....	0.....	1.....
9. 2021.....	32.....	31.....	1.....	100.....	98.....	0.....	0.....	0.....	0.....	0.....	0.....	2.....
10. 2022.....	33.....	31.....	2.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
11. 2023.....	35.....	33.....	2.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
12. Totals.....	XXX.....	XXX.....	XXX.....	290.....	257.....	5.....	3.....	3.....	0.....	0.....	0.....	38.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2014.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2018.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2019.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
8. 2020.....	51.....	48.....	0.....	0.....	1.....	1.....	0.....	0.....	0.....	0.....	0.....	3.....	0.....
9. 2021.....	0.....	0.....	5.....	4.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....	0.....
10. 2022.....	0.....	0.....	9.....	9.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
11. 2023.....	0.....	0.....	33.....	31.....	0.....	0.....	1.....	0.....	0.....	0.....	0.....	3.....	0.....
12. Totals.....	51.....	48.....	47.....	44.....	1.....	1.....	1.....	0.....	0.....	0.....	0.....	7.....	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.....	0.....		0.....	XXX.....
2. 2014.....	43.....	34.....	9.....	72.9.....	87.2.....	45.0.....	0.....	0.....	0.0.....	0.....	0.....
3. 2015.....	8.....	3.....	5.....	13.3.....	7.7.....	23.8.....	0.....	0.....	0.0.....	0.....	0.....
4. 2016.....	5.....	0.....	5.....	8.2.....	0.0.....	20.8.....	0.....	0.....	0.0.....	0.....	0.....
5. 2017.....	51.....	45.....	6.....	91.1.....	128.6.....	28.6.....	0.....	0.....	0.0.....	0.....	0.....
6. 2018.....	15.....	8.....	7.....	35.7.....	27.6.....	53.8.....	0.....	0.....	0.0.....	0.....	0.....
7. 2019.....	73.....	70.....	3.....	260.7.....	259.3.....	300.0.....	0.....	0.....	0.0.....	0.....	0.....
8. 2020.....	55.....	51.....	4.....	183.3.....	182.1.....	200.0.....	0.....	0.....	0.0.....	3.....	0.....
9. 2021.....	105.....	102.....	3.....	328.1.....	329.0.....	300.0.....	0.....	0.....	0.0.....	1.....	0.....
10. 2022.....	9.....	9.....	0.....	27.3.....	29.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
11. 2023.....	34.....	31.....	3.....	97.1.....	93.9.....	150.0.....	0.....	0.....	0.0.....	2.....	1.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	6.....	1.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE
(\$000 OMITTED)

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

NONE

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

NONE

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
SCHEDULE P - PART 11 - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY AND THEFT)
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	1	0	0	0	0	0	0	(1)	XXX
2. 2022	123	24	99	73	8	0	0	3	0	11	68	XXX	
3. 2023	122	19	103	70	12	1	0	3	0	0	62	XXX	
4. Totals	XXX	XXX	XXX	143	21	1	0	6	0	11	129	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior	0	0	0	0	0	0	0	0	0	0	0	0	0
2. 2022	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2023	2	0	0	0	0	0	0	0	1	0	1	3	0
4. Totals	2	0	0	0	0	0	0	0	1	0	1	3	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	0	0	XXX	0	0
2. 2022	76	8	68	61.8	33.3	68.7	0	0	0.0	0	0
3. 2023	77	12	65	63.1	63.2	63.1	0	0	0.0	2	1
4. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	2	1

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	(1).....	2.....	0.....	0.....	0.....	0.....	2.....	(3).....	XXX.....
2. 2022.....	389.....	35.....	354.....	303.....	33.....	1.....	0.....	20.....	0.....	34.....	291.....	86.....
3. 2023.....	461.....	27.....	434.....	318.....	2.....	1.....	0.....	20.....	0.....	17.....	337.....	84.....
4. Totals.....	XXX.....	XXX.....	XXX.....	620.....	37.....	2.....	0.....	40.....	0.....	53.....	625.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....	(2).....	0.....	2.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	2.....	0.....	0.....
2. 2022.....	(2).....	0.....	4.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	2.....	2.....	0.....
3. 2023.....	(8).....	0.....	15.....	0.....	0.....	0.....	2.....	1.....	2.....	0.....	18.....	10.....	2.....
4. Totals.....	(12).....	0.....	21.....	0.....	0.....	0.....	2.....	1.....	2.....	0.....	22.....	12.....	2.....

	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.....	0.....		0.....	XXX.....
2. 2022.....	326.....	33.....	293.....	83.8.....	94.3.....	82.8.....	0.....	0.....	0.0.....	2.....	0.....
3. 2023.....	350.....	3.....	347.....	75.9.....	11.1.....	80.0.....	0.....	0.....	0.0.....	7.....	3.....
4. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	9.....	3.....

Schedule P - Part 1K - Fidelity/Surety

NONE

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

NONE

Schedule P - Part 1M - International

NONE

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

NONE

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

NONE

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

NONE

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

NONE

Schedule P - Part 1R - Section 2 - Products Liability - Claims-Made

NONE

Schedule P - Part 1S - Financial Guaranty/Mortgage Guaranty

NONE

Schedule P - Part 1T - Warranty

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE P - PART 2A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	11 One Year	12 Two Year
1. Prior.....	26	40	33	44	40	41	28	25	23	23	0	(2)
2. 2014.....	676	655	658	661	663	663	663	663	663	663	0	0
3. 2015.....	XXX	547	524	532	532	532	532	532	532	532	0	0
4. 2016.....	XXX	XXX	694	694	710	700	696	700	700	700	0	0
5. 2017.....	XXX	XXX	XXX	664	662	666	652	652	652	652	0	0
6. 2018.....	XXX	XXX	XXX	XXX	498	494	496	489	490	492	2	3
7. 2019.....	XXX	XXX	XXX	XXX	XXX	489	494	483	479	479	0	(4)
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	490	470	467	460	(7)	(10)
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	581	553	556	3	(25)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	566	564	(2)	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	688	XXX	XXX
12. Totals											(4)	(38)

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

1. Prior.....	176	137	126	128	129	129	128	122	122	122	0	0
2. 2014.....	294	329	307	306	310	308	308	308	308	308	0	0
3. 2015.....	XXX	285	342	353	348	346	344	344	344	344	0	0
4. 2016.....	XXX	XXX	300	369	354	340	339	339	338	338	0	(1)
5. 2017.....	XXX	XXX	XXX	345	409	396	379	380	380	380	0	0
6. 2018.....	XXX	XXX	XXX	XXX	272	254	243	237	240	234	(6)	(3)
7. 2019.....	XXX	XXX	XXX	XXX	XXX	277	260	252	238	238	0	(14)
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	214	202	188	183	(5)	(19)
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	238	215	217	2	(21)
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	226	200	(26)	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	221	XXX	XXX
12. Totals											(35)	(58)

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

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						
9. 2021.....	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		XXX
12. Totals												

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

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						
9. 2021.....	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		XXX
12. Totals											XXX	XXX

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

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						
9. 2021.....	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		XXX
12. Totals											XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	11 One Year	12 Two Year
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						
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

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

1. Prior.....												
2. 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	XXX					
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior.....												
2. 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	XXX					
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

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

1. Prior.....	5	1	0	0	0	0	0	0	0	0	0	0
2. 2014.....	17	13	9	8	8	8	8	8	8	8	0	0
3. 2015.....	XXX	11	9	6	5	5	5	5	5	5	0	0
4. 2016.....	XXX	XXX	11	18	14	4	4	4	4	4	0	0
5. 2017.....	XXX	XXX	XXX	11	9	6	5	5	5	5	0	0
6. 2018.....	XXX	XXX	XXX	XXX	17	7	7	7	7	7	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	1	4	3	3	3	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	4	3	3
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	2	3	1	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	0	(1)	XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	XXX	XXX
12. Totals											3	3

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

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						
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	11 One Year	12 Two Year
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10	9	8	(1)	(2)
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	62	65	3	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61	XXX	XXX
4. Totals											2	(2)

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	13	11	4	(7)	(9)
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	284	273	(11)	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	325	XXX	XXX
4. Totals											(18)	(9)

SCHEDULE P - PART 2K - FIDELITY/SURETY

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
4. Totals												

NONE

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

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2. 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
4. Totals												

NONE

SCHEDULE P - PART 2M - INTERNATIONAL

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						
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
12. Totals												

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

Schedule P - Part 2T - Warranty

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE P - PART 3A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023		
1. Prior.....	000.....	20.....	23.....	43.....	41.....	41.....	28.....	25.....	23.....	23.....	5.....
2. 2014.....	567.....	625.....	651.....	654.....	663.....	663.....	663.....	663.....	663.....	663.....	113.....	84.....
3. 2015.....	XXX.....	423.....	506.....	515.....	532.....	532.....	532.....	532.....	532.....	532.....	73.....	56.....
4. 2016.....	XXX.....	XXX.....	575.....	678.....	685.....	689.....	694.....	700.....	700.....	700.....	79.....	71.....
5. 2017.....	XXX.....	XXX.....	XXX.....	579.....	641.....	655.....	652.....	652.....	652.....	652.....	80.....	58.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	438.....	481.....	487.....	488.....	489.....	492.....	53.....	38.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	416.....	468.....	475.....	476.....	476.....	62.....	46.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	401.....	451.....	460.....	460.....	53.....	14.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	435.....	546.....	550.....	60.....	16.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	533.....	548.....	53.....	14.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	617.....	56.....	13.....

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

1. Prior.....	000.....	80.....	112.....	122.....	127.....	127.....	128.....	122.....	122.....	122.....	1.....
2. 2014.....	154.....	244.....	279.....	299.....	306.....	308.....	308.....	308.....	308.....	308.....	79.....	71.....
3. 2015.....	XXX.....	140.....	238.....	322.....	340.....	343.....	344.....	344.....	344.....	344.....	66.....	67.....
4. 2016.....	XXX.....	XXX.....	162.....	274.....	314.....	334.....	337.....	337.....	338.....	338.....	60.....	70.....
5. 2017.....	XXX.....	XXX.....	XXX.....	179.....	304.....	365.....	377.....	380.....	380.....	380.....	53.....	55.....
6. 2018.....	XXX.....	XXX.....	XXX.....	XXX.....	136.....	210.....	222.....	225.....	230.....	234.....	41.....	39.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	125.....	205.....	237.....	238.....	238.....	42.....	36.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	83.....	142.....	167.....	173.....	47.....	10.....
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	99.....	161.....	192.....	50.....	9.....
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	113.....	157.....	52.....	10.....
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	120.....	41.....	8.....

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

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.....	XXX.....					
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

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

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.....	XXX.....					
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

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.....	XXX.....					
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1	2	3	4	5	6	7	8	9	10			
	2014	2015	2016	2017	2018	2019	2020	2021	2022	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.....	XXX.....						
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				

NONE

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

1. Prior.....	000.....												
2. 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.....	XXX.....						
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				

NONE

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

1. Prior.....	000.....											XXX.....	XXX.....
2. 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.....	XXX.....								XXX.....	XXX.....
7. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
9. 2021.....	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.....		XXX.....	XXX.....

NONE

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

1. Prior.....	000.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	7	7	8	8	8	8	8	8	8	8	8	1	0
3. 2015.....	XXX	2	5	5	5	5	5	5	5	5	5	1	0
4. 2016.....	XXX	XXX	1	1	1	4	4	4	4	4	4	0	0
5. 2017.....	XXX	XXX	XXX	1	2	5	5	5	5	5	5	1	0
6. 2018.....	XXX	XXX	XXX	XXX	0	0	7	7	7	7	7	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	0	3	3	3	3	3	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	1	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	2	2	2	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0

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.....	XXX.....								
8. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
**SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
 EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023		
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	9	8	XXX	XXX
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61	65	XXX	XXX
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	59	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	000	7	4		
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	286	271	76	10
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	317	71	11

SCHEDULE P - PART 3K - FIDELITY/SURETY

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

NONE

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

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

NONE

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	XXX							XXX	XXX
7. 2019.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2021.....	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	XXX

NONE

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 3R - Section 1 - Product Liability - Occurrence

N O N E

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

N O N E

Schedule P - Part 3S - Financial Guaranty/Mortgage Guaranty

N O N E

Schedule P - Part 3T - Warranty

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE P - PART 4A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	20	10	0	0	0	0	0	0	0	0
2. 2014.....	43	15	5	0	0	0	0	0	0	0
3. 2015.....	XXX	57	11	4	0	0	0	0	0	0
4. 2016.....	XXX	XXX	47	11	4	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	47	9	5	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	35	11	5	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	37	10	5	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	41	10	6	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	47	10	7
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43	12
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50

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

1. Prior.....	67	12	0	0	0	0	0	0	0	0
2. 2014.....	63	35	9	0	0	0	0	0	0	0
3. 2015.....	XXX	55	35	9	0	0	0	0	0	0
4. 2016.....	XXX	XXX	59	38	12	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	70	43	10	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	70	21	10	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	77	19	8	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	73	17	6	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	66	12	3
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	53	6
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33

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

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				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

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				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

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				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

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

NONE

SCHEDULE P - PART 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

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

NONE

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

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

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

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	0	0
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	0
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	31	7	2
2. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	4
3. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16

SCHEDULE P - PART 4K - FIDELITY/SURETY

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

NONE

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

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

NONE

SCHEDULE P - PART 4M - INTERNATIONAL

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				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 4T - Warranty

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	23	5	0	0	0	0	0	0	0	0
2. 2014.....	91	111	112	113	113	113	113	113	113	113
3. 2015.....	XXX	56	72	73	73	73	73	73	73	73
4. 2016.....	XXX	XXX	62	78	79	79	79	79	79	79
5. 2017.....	XXX	XXX	XXX	66	79	80	80	80	80	80
6. 2018.....	XXX	XXX	XXX	XXX	46	52	53	53	53	53
7. 2019.....	XXX	XXX	XXX	XXX	XXX	49	61	62	62	62
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	45	52	53	53
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	38	59	60
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44	53
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	56

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	1	1	1	0	0	0	0	0	0	0
2. 2014.....	26	1	1	0	0	0	0	0	0	0
3. 2015.....	XXX	18	1	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	19	1	1	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	14	0	0	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	6	0	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	8	1	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	6	1	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	17	5	0	(1)	0	0	0	0	0	0
2. 2014.....	187	196	197	197	197	197	197	197	197	197
3. 2015.....	XXX	119	129	129	129	129	129	129	129	129
4. 2016.....	XXX	XXX	140	150	151	150	150	150	150	150
5. 2017.....	XXX	XXX	XXX	130	137	138	138	138	138	138
6. 2018.....	XXX	XXX	XXX	XXX	86	90	91	91	91	91
7. 2019.....	XXX	XXX	XXX	XXX	XXX	102	108	108	108	108
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	64	67	67	67
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	64	75	76
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	64	67
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	74

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	19	1	0	0	0	0	0	0	0	0
2. 2014.....	65	77	78	79	79	79	79	79	79	79
3. 2015.....	XXX	50	63	65	66	66	66	66	66	66
4. 2016.....	XXX	XXX	44	57	59	60	60	60	60	60
5. 2017.....	XXX	XXX	XXX	41	51	53	53	53	53	53
6. 2018.....	XXX	XXX	XXX	XXX	33	40	41	41	41	41
7. 2019.....	XXX	XXX	XXX	XXX	XXX	32	41	42	42	42
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	37	46	47	47
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	40	49	50
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	42	52
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	41

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	5	2	0	0	0	0	0	0	0	0
2. 2014.....	19	4	2	1	0	0	0	0	0	0
3. 2015.....	XXX	22	5	1	0	0	0	0	0	0
4. 2016.....	XXX	XXX	20	4	1	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	14	3	1	0	0	0	0
6. 2018.....	XXX	XXX	XXX	XXX	9	1	0	0	0	0
7. 2019.....	XXX	XXX	XXX	XXX	XXX	8	1	0	0	0
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	6	1	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	1	1
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	1
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	18	1	(2)	0	0	0	0	0	0	0
2. 2014.....	140	149	150	151	150	150	150	150	150	150
3. 2015.....	XXX	123	132	133	133	133	133	133	133	133
4. 2016.....	XXX	XXX	117	128	129	130	130	130	130	130
5. 2017.....	XXX	XXX	XXX	99	107	109	108	108	108	108
6. 2018.....	XXX	XXX	XXX	XXX	75	80	80	80	80	80
7. 2019.....	XXX	XXX	XXX	XXX	XXX	74	78	78	78	78
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	51	57	57	57
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	55	59	60
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	58	63
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	54

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 1A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 2A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Occurrence - Section 3A

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 1B

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 2B

N O N E

Schedule P - Part 5F - Medical Professional Liability - Claims-Made - Section 3B

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
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	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2014.....	1	1	1	1	1	1	1	1	1	1
3. 2015.....	XXX	1	1	1	1	1	1	1	1	1
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	1	1	1	1	1	1	1
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	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2014.....	0	98	0	0	0	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0	0	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0	0	0	0	0	0
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	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2014.....	1	99	1	1	1	1	1	1	1	1
3. 2015.....	XXX	1	1	1	1	1	1	1	1	1
4. 2016.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2017.....	XXX	XXX	XXX	1	1	1	1	1	1	1
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	0	0	0	0
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

Schedule P - Part 5T - Warranty - Section 1

NONE

Schedule P - Part 5T - Warranty - Section 2

NONE

Schedule P - Part 5T - Warranty - Section 3

NONE

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

NONE

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

NONE

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

N O N E

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

N O N E

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL
SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 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					
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 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					
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

**SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE
SECTION 1A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2014	2 2015	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	59	59	59	59	59	59	59	59	59	59	59
3. 2015.....	XXX	60	60	60	60	60	60	60	60	60	60
4. 2016.....	XXX	XXX	61	61	61	61	61	61	61	61	61
5. 2017.....	XXX	XXX	XXX	56	56	56	56	56	56	56	56
6. 2018.....	XXX	XXX	XXX	XXX	42	42	42	42	42	42	42
7. 2019.....	XXX	XXX	XXX	XXX	XXX	28	28	28	28	28	28
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	30	30	30	30	30
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	32	32	32	32
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33	33	33
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35	35
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35
13. Earned Premiums (Sch P-Pt. 1)	59	60	61	56	42	28	30	32	33	35	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.....	0	0	0	0	0	0	0	0	0	0	0
2. 2014.....	39	39	39	39	39	39	39	39	39	39	39
3. 2015.....	XXX	39	39	39	39	39	39	39	39	39	39
4. 2016.....	XXX	XXX	37	37	37	37	37	37	37	37	37
5. 2017.....	XXX	XXX	XXX	35	35	35	35	35	35	35	35
6. 2018.....	XXX	XXX	XXX	XXX	29	29	29	29	29	29	29
7. 2019.....	XXX	XXX	XXX	XXX	XXX	27	27	27	27	27	27
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	28	28	28	28	28
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	31	31	31	31
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	31	31	31
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33	33
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33
13. Earned Premiums (Sch P-Pt. 1)	39	39	37	35	29	27	28	31	31	33	XXX

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

N O N E

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

N O N E

Schedule P - Part 6M - International - Section 1

N O N E

Schedule P - Part 6M - International - Section 2

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (\$000 OMITTED)
SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	104		0.0	942		0.0
2. Private Passenger Auto Liability/ Medical	190		0.0	400		0.0
3. Commercial Auto/Truck Liability/ Medical			0.0	0		0.0
4. Workers' Compensation			0.0	0		0.0
5. Commercial Multiple Peril			0.0	0		0.0
6. Medical Professional Liability - Occurrence			0.0	0		0.0
7. Medical Professional Liability - Claims - Made			0.0	0		0.0
8. Special Liability			0.0	0		0.0
9. Other Liability - Occurrence	7		0.0	1		0.0
10. Other Liability - Claims-Made			0.0	0		0.0
11. Special Property	3		0.0	106		0.0
12. Auto Physical Damage	12		0.0	481		0.0
13. Fidelity/Surety			0.0	0		0.0
14. Other			0.0	0		0.0
15. International			0.0	0		0.0
16. Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX	XXX	XXX
17. Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX	XXX	XXX
18. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX	XXX	XXX
19. Products Liability - Occurrence			0.0	0		0.0
20. Products Liability - Claims-Made			0.0	0		0.0
21. Financial Guaranty/Mortgage Guaranty			0.0	0		0.0
22. Warranty			0.0	0		0.0
23. Totals	316	0	0.0	1,931	0	0.0

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (Continued)

SECTION 4

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XXX						
7. 2019.....	XXX	XXX	XXX	XXX	XXX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 5

Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023
1. Prior.....										
2. 2014.....										
3. 2015.....	XXX									
4. 2016.....	XXX	XXX								
5. 2017.....	XXX	XXX	XX							
6. 2018.....	XXX	XXX	XX	XXX						
7. 2019.....	XXX	XXX	XXX	XXX	XXX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (\$000 OMITTED)**

SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	104		0.0	942		0.0
2. Private Passenger Auto Liability/Medical	190		0.0	400		0.0
3. Commercial Auto/Truck Liability/Medical			0.0	0		0.0
4. Workers' Compensation			0.0	0		0.0
5. Commercial Multiple Peril			0.0	0		0.0
6. Medical Professional Liability - Occurrence			0.0	0		0.0
7. Medical Professional Liability - Claims - Made			0.0	0		0.0
8. Special Liability			0.0	0		0.0
9. Other Liability - Occurrence	7		0.0	1		0.0
10. Other Liability - Claims-Made			0.0	0		0.0
11. Special Property	3		0.0	106		0.0
12. Auto Physical Damage	12		0.0	481		0.0
13. Fidelity/Surety			0.0	0		0.0
14. Other			0.0	0		0.0
15. International			0.0	0		0.0
16. Reinsurance - Nonproportional Assumed Property			0.0	0		0.0
17. Reinsurance - Nonproportional Assumed Liability			0.0	0		0.0
18. Reinsurance - Nonproportional Assumed Financial Lines			0.0	0		0.0
19. Products Liability - Occurrence			0.0	0		0.0
20. Products Liability - Claims-Made			0.0	0		0.0
21. Financial Guaranty/Mortgage Guaranty			0.0	0		0.0
22. Warranty			0.0	0		0.0
23. Totals	316	0	0.0	1,931	0	0.0

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 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	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1 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	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (Continued)
SECTION 4

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
	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	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 5

Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR END (\$000 OMITTED)									
	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	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 6

Years in Which Policies Were Issued	INCURRED ADJUSTABLE COMMISSIONS REPORTED AT YEAR END (\$000 OMITTED)									
	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	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 7

Years in Which Policies Were Issued	RESERVES FOR COMMISSION ADJUSTMENTS AT YEAR END (\$000 OMITTED)									
	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	XX							
6. 2018.....	XXX	XXX	XX	XX						
7. 2019.....	XXX	XXX	XX	XXX	XX					
8. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SCHEDULE P INTERROGATORIES

- 1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.
- 1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? Yes [] No [X]
If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:
- 1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)? \$
- 1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No [X]
- 1.4 Does the company report any DDR reserve as loss or loss adjustment expense reserve? Yes [] No [X]
- 1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A [X]
- 1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601	Prior		
1.602	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	0	0

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

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

- 5. What were the net premiums in force at the end of the year for:
(in thousands of dollars)
 - 5.1 Fidelity
 - 5.2 Surety

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

7.2 (An extended statement may be attached.)
.....

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

Allocated by States and Territories

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

Table with 16 columns: Group Code, Group Name, NAIC Company Code, ID Number, Federal RSSD, CIK, Name of Securities Exchange if Publicly Traded (U.S. or International), Names of Parent, Subsidiaries Or Affiliates, Domiciliary Location, Relationship to Reporting Entity, Directly Controlled by (Name of Entity/Person), Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other), If Control is Ownership Provide Percentage, Ultimate Controlling Entity(ies)/Person(s), Is an SCA Filing Required? (Yes/No), *

Table with 2 columns: Asterisk, Explanation

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
	31-0784063	Hetuck Insurance Agency, Inc.					(3,000)				(3,000)	
16713	31-6035649	Buckeye State Mutual Insurance Company					169,800		*		169,800	(10,000)
17639	31-1630739	Home and Farm Insurance Company					(166,800)		*		(166,800)	10,000
9999999 Control Totals			0	0	0	0	0	0	XXX	0	0	0

SCHEDULE Y

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

1 Insurers in Holding Company	2 Owners with Greater Than 10% Ownership	3 Ownership Percentage Column 2 of Column 1	4 Granted Disclaimer of Control/ Affiliation of Column 2 Over Column 1 (Yes/No)	5 Ultimate Controlling Party	6 U.S. Insurance Groups or Entities Controlled by Column 5	7 Ownership Percentage (Column 5 of Column 6)	8 Granted Disclaimer of Control/ Affiliation of Column 5 Over Column 6 (Yes/No)
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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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

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

SUPPLEMENTAL FILINGS

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

MARCH FILING	
11. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
12. Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
15. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
16. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
17. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	NO
18. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
19. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES
20. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES
21. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
22. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
23. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
25. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
26. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
27. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?	NO
28. Will the Exhibit of Other Liabilities by Lines of Business be filed with the state of domicile and the NAIC by March 1?	NO
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

Explanations:

- 11.
- 12.
- 13.
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- 35.
- 37.
- 38.

Bar Codes:

11. SIS Stockholder Information Supplement [Document Identifier 420]



12. Financial Guaranty Insurance Exhibit [Document Identifier 240]



13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]



14. Supplement A to Schedule T [Document Identifier 455]



15. Trusteed Surplus Statement [Document Identifier 490]



16. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

17. Reinsurance Summary Supplemental Filing [Document Identifier 401]



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



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



22. Bail Bond Supplement [Document Identifier 500]



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



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



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



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



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



28. Exhibit of Other Liabilities by Lines of Business [Document Identifier 570]



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]



NONE



SUPPLEMENT FOR THE YEAR 2023 OF THE HOME AND FARM INSURANCE COMPANY
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: Ohio

NAIC Group Code 0046

NAIC Company Code 17639

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	
2. Health	
3. Homeowners	YES
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	YES
11. Short-Term Limited Duration Health Plans	
12. Travel	