



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2024
OF THE CONDITION AND AFFAIRS OF THE

Ohio Mutual Insurance Company

NAIC Group Code	0963 (Current)	0963 (Prior)	NAIC Company Code	10202	Employer's ID Number	34-4320350
Organized under the Laws of	OHIO		State of Domicile or Port of Entry	OH		
Country of Domicile	United States of America					
Incorporated/Organized	03/05/1901		Commenced Business	03/05/1901		
Statutory Home Office	1725 Hopley Avenue (Street and Number)		Bucyrus, OH, US 44820-0111 (City or Town, State, Country and Zip Code)			
Main Administrative Office	1725 Hopley Avenue (Street and Number)		Bucyrus, OH, US 44820-0111 (City or Town, State, Country and Zip Code) 419-562-3011 (Area Code) (Telephone Number)			
Mail Address	1725 Hopley Avenue (Street and Number or P.O. Box)		Bucyrus, OH, US 44820-0111 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	1725 Hopley Avenue (Street and Number)		Bucyrus, OH, US 44820-0111 (City or Town, State, Country and Zip Code) 419-562-3011 (Area Code) (Telephone Number)			
Internet Website Address	www.omiq.com					
Statutory Statement Contact	Teri Ann Miller (Name)		419-563-0697 (Area Code) (Telephone Number)			
	tmiller@omiq.com (E-mail Address)		877-753-0580 (FAX Number)			

OFFICERS

President Mark Clarence Russell Secretary Thomas Eugene Woolley
Treasurer Andrew Michael Wallen

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

DIRECTORS OR TRUSTEES

Neeru Arora Karen Riley Haefling Albert Michael Heister
Dawn Marie Kink Susan Porter John Redon Purse
Mark Clarence Russell Charles Henry Self Thomas Eugene Woolley

State of Ohio SS
County of Crawford

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

Mark Clarence Russell
President and CEO

Andrew Michael Wallen
Treasurer and CFO

Marcella Sloane Smith
Assistant Secretary

Subscribed and sworn to before me this
day of

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	71,786,772		71,786,772	70,688,859
2. Stocks (Schedule D):				
2.1 Preferred stocks				
2.2 Common stocks	315,046,154	26,317	315,019,837	279,551,983
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens				
3.2 Other than first liens				
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances)	5,805,206		5,805,206	6,191,681
4.2 Properties held for the production of income (less \$ encumbrances)				
4.3 Properties held for sale (less \$ encumbrances)				
5. Cash (\$ 1,008,714 , Schedule E - Part 1), cash equivalents (\$ 9,632,546 , Schedule E - Part 2) and short-term investments (\$, Schedule DA)	10,641,260		10,641,260	22,397,713
6. Contract loans (including \$ premium notes)				
7. Derivatives (Schedule DB)				
8. Other invested assets (Schedule BA)				
9. Receivable for securities				
10. Securities lending reinvested collateral assets (Schedule DL)				
11. Aggregate write-ins for invested assets				
12. Subtotals, cash and invested assets (Lines 1 to 11)	403,279,392	26,317	403,253,075	378,830,236
13. Title plants less \$ charged off (for Title insurers only)				
14. Investment income due and accrued	525,765		525,765	521,292
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	2,910,716		2,910,716	3,030,685
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)	21,780,521		21,780,521	22,641,695
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	2,676,921		2,676,921	408,349
16.2 Funds held by or deposited with reinsured companies				
16.3 Other amounts receivable under reinsurance contracts				
17. Amounts receivable relating to uninsured plans				
18.1 Current federal and foreign income tax recoverable and interest thereon				1,025,383
18.2 Net deferred tax asset	440,353		440,353	697,694
19. Guaranty funds receivable or on deposit				
20. Electronic data processing equipment and software	2,894,300	2,894,300		
21. Furniture and equipment, including health care delivery assets (\$)	240,132	240,132		
22. Net adjustment in assets and liabilities due to foreign exchange rates				
23. Receivables from parent, subsidiaries and affiliates	3,153,777		3,153,777	
24. Health care (\$) and other amounts receivable				
25. Aggregate write-ins for other-than-invested assets				
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	437,901,877	3,160,749	434,741,128	407,155,334
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28. Total (Lines 26 and 27)	437,901,877	3,160,749	434,741,128	407,155,334
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)				
2501.				
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page				
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)				

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company
LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)	30,643,735	35,903,510
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6) .....	.....	.....
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)	7,049,282	8,236,083
4. Commissions payable, contingent commissions and other similar charges	3,039,607	2,179,063
5. Other expenses (excluding taxes, licenses and fees)	71,543	69,487
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	202,062	155,987
7.1 Current federal and foreign income taxes (including \$ 579,971 on realized capital gains (losses))	1,578,239	.....
7.2 Net deferred tax liability .....	.....	.....
8. Borrowed money \$ and interest thereon \$ .....	.....	.....
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ 160,275,573 and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$ for medical loss ratio rebate per the Public Health Service Act)	47,314,423	47,962,201
10. Advance premium	653,239	648,045
11. Dividends declared and unpaid:		
11.1 Stockholders .....	.....	.....
11.2 Policyholders .....	.....	.....
12. Ceded reinsurance premiums payable (net of ceding commissions)	661,242	676,691
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)	569,083	460,278
14. Amounts withheld or retained by company for account of others .....	.....	.....
15. Remittances and items not allocated .....	.....	.....
16. Provision for reinsurance (including \$ certified) (Schedule F, Part 3, Column 78) .....	.....	.....
17. Net adjustments in assets and liabilities due to foreign exchange rates .....	.....	.....
18. Drafts outstanding .....	.....	.....
19. Payable to parent, subsidiaries and affiliates .....	.....	2,563,961
20. Derivatives .....	.....	.....
21. Payable for securities .....	.....	.....
22. Payable for securities lending .....	.....	.....
23. Liability for amounts held under uninsured plans .....	.....	.....
24. Capital notes \$ and interest thereon \$ .....	.....	.....
25. Aggregate write-ins for liabilities .....	.....	.....
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	91,782,455	98,855,306
27. Protected cell liabilities .....	.....	.....
28. Total liabilities (Lines 26 and 27)	91,782,455	98,855,306
29. Aggregate write-ins for special surplus funds .....	.....	.....
30. Common capital stock	5,000,000	5,000,000
31. Preferred capital stock .....	.....	.....
32. Aggregate write-ins for other-than-special surplus funds .....	.....	.....
33. Surplus notes .....	.....	.....
34. Gross paid in and contributed surplus .....	.....	.....
35. Unassigned funds (surplus)	337,958,673	303,300,028
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$ ..... ) .....	.....	.....
36.2 shares preferred (value included in Line 31 \$ ..... ) .....	.....	.....
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	342,958,673	308,300,028
38. TOTALS (Page 2, Line 28, Col. 3)	434,741,128	407,155,334
DETAILS OF WRITE-INS		
2501. .....	.....	.....
2502. .....	.....	.....
2503. .....	.....	.....
2598. Summary of remaining write-ins for Line 25 from overflow page .....	.....	.....
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	.....	.....
2901. .....	.....	.....
2902. .....	.....	.....
2903. .....	.....	.....
2998. Summary of remaining write-ins for Line 29 from overflow page .....	.....	.....
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	.....	.....
3201. .....	.....	.....
3202. .....	.....	.....
3203. .....	.....	.....
3298. Summary of remaining write-ins for Line 32 from overflow page .....	.....	.....
3299. Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)	.....	.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company
STATEMENT OF INCOME

	1 Current Year	2 Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4).....	88,591,273	89,484,941
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7)	52,750,776	64,332,118
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1)	6,084,003	7,320,791
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2)	28,841,359	28,106,260
5. Aggregate write-ins for underwriting deductions .....	.....	.....
6. Total underwriting deductions (Lines 2 through 5)	87,676,138	99,759,169
7. Net income of protected cells .....	.....	.....
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	915,135	(10,274,228)
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17)	3,484,499	15,098,420
10. Net realized capital gains (losses) less capital gains tax of \$579,971 (Exhibit of Capital Gains (Losses))	2,181,796	2,169,879
11. Net investment gain (loss) (Lines 9 + 10)	5,666,295	17,268,299
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$43,824 amount charged off \$405,779)	(361,955)	(357,045)
13. Finance and service charges not included in premiums	12	24
14. Aggregate write-ins for miscellaneous income	249,647	258,817
15. Total other income (Lines 12 through 14)	(112,296)	(98,204)
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	6,469,134	6,895,867
17. Dividends to policyholders .....	.....	.....
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	6,469,134	6,895,867
19. Federal and foreign income taxes incurred	1,001,468	(1,588,254)
20. Net income (Line 18 minus Line 19)(to Line 22)	5,467,666	8,484,121
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	308,300,028	311,052,574
22. Net income (from Line 20)	5,467,666	8,484,121
23. Net transfers (to) from Protected Cell accounts .....	.....	.....
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$287,456	28,317,028	(11,964,625)
25. Change in net unrealized foreign exchange capital gain (loss) .....	.....	.....
26. Change in net deferred income tax	30,115	(112,906)
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)	843,836	840,864
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1) .....	.....	.....
29. Change in surplus notes .....	.....	.....
30. Surplus (contributed to) withdrawn from protected cells .....	.....	.....
31. Cumulative effect of changes in accounting principles .....	.....	.....
32. Capital changes:		
32.1 Paid in .....	.....	.....
32.2 Transferred from surplus (Stock Dividend) .....	.....	.....
32.3 Transferred to surplus .....	.....	.....
33. Surplus adjustments:		
33.1 Paid in .....	.....	.....
33.2 Transferred to capital (Stock Dividend) .....	.....	.....
33.3 Transferred from capital .....	.....	.....
34. Net remittances from or (to) Home Office .....	.....	.....
35. Dividends to stockholders .....	.....	.....
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1) .....	.....	.....
37. Aggregate write-ins for gains and losses in surplus .....	.....	.....
38. Change in surplus as regards policyholders for the year (Lines 22 through 37)	34,658,645	(2,752,546)
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	342,958,673	308,300,028
DETAILS OF WRITE-INS		
0501. .....	.....	.....
0502. .....	.....	.....
0503. .....	.....	.....
0598. Summary of remaining write-ins for Line 5 from overflow page .....	.....	.....
0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above) .....	.....	.....
1401. Rental and Related Services	248,083	248,083
1402. Other Income	1,564	10,734
1403. .....	.....	.....
1498. Summary of remaining write-ins for Line 14 from overflow page .....	.....	.....
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	249,647	258,817
3701. .....	.....	.....
3702. .....	.....	.....
3703. .....	.....	.....
3798. Summary of remaining write-ins for Line 37 from overflow page .....	.....	.....
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above) .....	.....	.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company
CASH FLOW

	1 Current Year	2 Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	88,914,383	92,596,401
2. Net investment income	3,971,109	15,673,010
3. Miscellaneous income	(112,296)	(98,204)
4. Total (Lines 1 through 3)	92,773,196	108,171,207
5. Benefit and loss related payments	60,279,123	62,485,392
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions	34,361,767	33,555,877
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$ 579,971 tax on capital gains (losses)	(1,022,183)	(1,071,001)
10. Total (Lines 5 through 9)	93,618,707	94,970,268
11. Net cash from operations (Line 4 minus Line 10)	(845,511)	13,200,939
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	13,172,270	9,728,914
12.2 Stocks	7,709,284	13,007,114
12.3 Mortgage loans		
12.4 Real estate		
12.5 Other invested assets		
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		322
12.7 Miscellaneous proceeds		
12.8 Total investment proceeds (Lines 12.1 to 12.7)	20,881,554	22,736,350
13. Cost of investments acquired (long-term only):		
13.1 Bonds	14,372,899	8,443,005
13.2 Stocks	11,726,930	20,046,120
13.3 Mortgage loans		
13.4 Real estate	83,736	47,189
13.5 Other invested assets		
13.6 Miscellaneous applications		
13.7 Total investments acquired (Lines 13.1 to 13.6)	26,183,565	28,536,314
14. Net increase/(decrease) in contract loans and premium notes		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(5,302,011)	(5,799,964)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes		
16.2 Capital and paid in surplus, less treasury stock		
16.3 Borrowed funds		
16.4 Net deposits on deposit-type contracts and other insurance liabilities		
16.5 Dividends to stockholders		
16.6 Other cash provided (applied)	(5,608,931)	2,210,448
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(5,608,931)	2,210,448
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(11,756,453)	9,611,423
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	22,397,713	12,786,290
19.2 End of period (Line 18 plus Line 19.1)	10,641,260	22,397,713

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS EARNED

Line of Business	1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums Dec. 31 Prior Year - per Col. 3, Last Year's Part 1	3 Unearned Premiums Dec. 31 Current Year - per Col. 5 Part 1A	4 Premiums Earned During Year (Cols. 1 + 2 - 3)
1. Fire	6,405,324	3,053,701	3,614,515	5,844,510
2.1 Allied lines	228,311	115,934	129,789	214,456
2.2 Multiple peril crop				
2.3 Federal flood				
2.4 Private crop				
2.5 Private flood				
3. Farmowners multiple peril	7,870,713	3,568,376	4,064,968	7,374,121
4. Homeowners multiple peril	20,863,981	9,687,080	11,794,385	18,756,676
5.1 Commercial multiple peril (non-liability portion)	6,038,391	2,847,040	3,155,922	5,729,509
5.2 Commercial multiple peril (liability portion)	4,766,008	2,105,362	2,242,169	4,629,201
6. Mortgage guaranty				
8. Ocean marine				
9.1 Inland marine	244,236	127,494	123,663	248,067
9.2 Pet insurance plans				
10. Financial guaranty				
11.1 Medical professional liability - occurrence				
11.2 Medical professional liability - claims-made				
12. Earthquake				
13.1 Comprehensive (hospital and medical) individual				
13.2 Comprehensive (hospital and medical) group				
14. Credit accident and health (group and individual)				
15.1 Vision only				
15.2 Dental only				
15.3 Disability income				
15.4 Medicare supplement				
15.5 Medicaid Title XIX				
15.6 Medicare Title XVIII				
15.7 Long-term care				
15.8 Federal employees health benefits plan				
15.9 Other health	48	18	18	48
16. Workers' compensation				
17.1 Other liability - occurrence	1,580,835	647,465	701,643	1,526,657
17.2 Other liability - claims-made				
17.3 Excess workers' compensation				
18.1 Products liability - occurrence	76,899	37,297	37,916	76,280
18.2 Products liability - claims-made				
19.1 Private passenger auto no-fault (personal injury protection)				
19.2 Other private passenger auto liability	16,172,942	6,679,829	7,220,567	15,632,204
19.3 Commercial auto no-fault (personal injury protection)				
19.4 Other commercial auto liability	7,039,923	3,190,545	3,449,691	6,780,777
21.1 Private passenger auto physical damage	18,708,420	7,668,585	8,685,185	17,691,820
21.2 Commercial auto physical damage	4,110,059	1,868,940	2,024,333	3,954,666
22. Aircraft (all perils)				
23. Fidelity				
24. Surety				
26. Burglary and theft	135,319	66,621	69,659	132,281
27. Boiler and machinery				
28. Credit				
29. International				
30. Warranty				
31. Reinsurance - nonproportional assumed property				
32. Reinsurance - nonproportional assumed liability				
33. Reinsurance - nonproportional assumed financial lines				
34. Aggregate write-ins for other lines of business				
35. TOTALS	94,241,409	41,664,287	47,314,423	88,591,273
DETAILS OF WRITE-INS				
3401.				
3402.				
3403.				
3498. Summary of remaining write-ins for Line 34 from overflow page				
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)				

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1A - RECAPITULATION OF ALL PREMIUMS

Line of Business	1 Amount Unearned (Running One Year or Less from Date of Policy) (a)	2 Amount Unearned (Running More Than One Year from Date of Policy) (a)	3 Earned But Unbilled Premium	4 Reserve for Rate Credits and Retrospective Adjustments Based on Experience	5 Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4
1. Fire	3,614,515				3,614,515
2.1 Allied lines	129,789				129,789
2.2 Multiple peril crop					
2.3 Federal flood					
2.4 Private crop					
2.5 Private flood					
3. Farmowners multiple peril	4,064,968				4,064,968
4. Homeowners multiple peril	11,794,385				11,794,385
5.1 Commercial multiple peril (non-liability portion)	3,155,922				3,155,922
5.2 Commercial multiple peril (liability portion)	2,242,169				2,242,169
6. Mortgage guaranty					
8. Ocean marine					
9.1 Inland marine	123,663				123,663
9.2 Pet insurance plans					
10. Financial guaranty					
11.1 Medical professional liability - occurrence					
11.2 Medical professional liability - claims-made					
12. Earthquake					
13.1 Comprehensive (hospital and medical) individual					
13.2 Comprehensive (hospital and medical) group					
14. Credit accident and health (group and individual)					
15.1 Vision only					
15.2 Dental only					
15.3 Disability income					
15.4 Medicare supplement					
15.5 Medicaid Title XIX					
15.6 Medicare Title XVIII					
15.7 Long-term care					
15.8 Federal employees health benefits plan					
15.9 Other health	18				18
16. Workers' compensation					
17.1 Other liability - occurrence	701,643				701,643
17.2 Other liability - claims-made					
17.3 Excess workers' compensation					
18.1 Products liability - occurrence	37,916				37,916
18.2 Products liability - claims-made					
19.1 Private passenger auto no-fault (personal injury protection)					
19.2 Other private passenger auto liability	7,220,567				7,220,567
19.3 Commercial auto no-fault (personal injury protection)					
19.4 Other commercial auto liability	3,449,691				3,449,691
21.1 Private passenger auto physical damage	8,685,185				8,685,185
21.2 Commercial auto physical damage	2,024,333				2,024,333
22. Aircraft (all perils)					
23. Fidelity					
24. Surety					
26. Burglary and theft	69,659				69,659
27. Boiler and machinery					
28. Credit					
29. International					
30. Warranty					
31. Reinsurance - nonproportional assumed property					
32. Reinsurance - nonproportional assumed liability					
33. Reinsurance - nonproportional assumed financial lines					
34. Aggregate write-ins for other lines of business					
35. TOTALS	47,314,423				47,314,423
36. Accrued retrospective premiums based on experience					
37. Earned but unbilled premiums					
38. Balance (Sum of Line 35 through 37)					47,314,423
DETAILS OF WRITE-INS					
3401.					
3402.					
3403.					
3498. Summary of remaining write-ins for Line 34 from overflow page					
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)					

(a) State here basis of computation used in each case

Property premiums are determined by location covered. Casualty premiums are determined by insured address.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

Line of Business	Direct Business (a)	1	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1+2+3-4-5
		2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates		
1. Fire	2,235,423	25,787,844	3,186	21,443,913	177,216	6,405,324	
2.1 Allied lines		992,655		764,344		228,311	
2.2 Multiple peril crop							
2.3 Federal flood							
2.4 Private crop							
2.5 Private flood							
3. Farmowners multiple peril	18,536,209	18,284,097	21,908	26,349,778	2,621,723	7,870,713	
4. Homeowners multiple peril	59,324,980	36,504,691	73,974	69,848,982	5,190,682	20,863,981	
5.1 Commercial multiple peril (non-liability portion)		26,253,873		20,215,482		6,038,391	
5.2 Commercial multiple peril (liability portion)		20,721,775		15,955,767		4,766,008	
6. Mortgage guaranty							
8. Ocean marine							
9.1 Inland marine	16,607	1,046,246	19	817,659	.977	.244,236	
9.2 Pet insurance plans							
10. Financial guaranty							
11.1 Medical professional liability - occurrence							
11.2 Medical professional liability - claims-made							
12. Earthquake							
13.1 Comprehensive (hospital and medical) individual							
13.2 Comprehensive (hospital and medical) group							
14. Credit accident and health (group and individual)							
15.1 Vision only							
15.2 Dental only							
15.3 Disability income							
15.4 Medicare supplement							
15.5 Medicaid Title XIX							
15.6 Medicare Title XVIII							
15.7 Long-term care							
15.8 Federal employees health benefits plan							
15.9 Other health		210		162		48	
16. Workers' compensation							
17.1 Other liability - occurrence	169,629	6,704,721		5,292,362	1,153	1,580,835	
17.2 Other liability - claims-made							
17.3 Excess workers' compensation							
18.1 Products liability - occurrence		334,346		.257,447		.76,899	
18.2 Products liability - claims-made							
19.1 Private passenger auto no-fault (personal injury protection)							
19.2 Other private passenger auto liability	40,830,187	29,764,548		.54,144,190	.277,603	.16,172,942	
19.3 Commercial auto no-fault (personal injury protection)							
19.4 Other commercial auto liability		30,608,360		23,568,437		7,039,923	
21.1 Private passenger auto physical damage	54,445,305	28,500,080	25,769	62,632,535	1,630,199	18,708,420	
21.2 Commercial auto physical damage		17,869,822		13,759,763		4,110,059	
22. Aircraft (all perils)							
23. Fidelity							
24. Surety							
26. Burglary and theft	49,987	538,706		.453,028	.346	.135,319	
27. Boiler and machinery							
28. Credit							
29. International							
30. Warranty							
31. Reinsurance - nonproportional assumed property	XXX						
32. Reinsurance - nonproportional assumed liability	XXX						
33. Reinsurance - nonproportional assumed financial lines	XXX						
34. Aggregate write-ins for other lines of business							
35. TOTALS	175,608,327	243,911,974	124,856	315,503,849	9,899,899	94,241,409	
DETAILS OF WRITE-INS							
3401.							
3402.							
3403.							
3498. Summary of remaining write-ins for Line 34 from overflow page							
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)							

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [] No [X]

If yes: 1. The amount of such installment premiums \$

2. Amount at which such installment premiums would have been reported had they been reported on an annualized basis \$

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5	6	7	8
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)				
1. Fire	721,978	13,632,999	11,077,557	3,277,420	453,584	555,387	3,175,617	54.3
2.1 Allied lines		285,165	219,577	65,588	26,533	29,986	62,135	29.0
2.2 Multiple peril crop								
2.3 Federal flood								
2.4 Private crop								
2.5 Private flood								
3. Farmowners multiple peril	17,906,812	10,534,733	22,858,389	5,583,156	1,454,704	1,412,990	5,624,970	76.3
4. Homeowners multiple peril	45,934,128	22,969,892	54,100,778	14,803,242	3,386,509	4,284,814	13,904,937	74.1
5.1 Commercial multiple peril (non-liability portion)	12,176,006	9,375,524		2,800,482	1,060,468	952,695	2,908,255	50.8
5.2 Commercial multiple peril (liability portion)	4,070,056	3,133,943		936,113	2,836,083	3,430,610	341,586	7.4
6. Mortgage guaranty								
8. Ocean marine								
9.1 Inland marine		253,110	194,895	58,215	8,416	13,837	52,794	21.3
9.2 Pet insurance plans								
10. Financial guaranty								
11.1 Medical professional liability - occurrence								
11.2 Medical professional liability - claims-made								
12. Earthquake								
13.1 Comprehensive (hospital and medical) individual								
13.2 Comprehensive (hospital and medical) group								
14. Credit accident and health (group and individual)								
15.1 Vision only								
15.2 Dental only								
15.3 Disability income								
15.4 Medicare supplement								
15.5 Medicaid Title XIX								
15.6 Medicare Title XVIII								
15.7 Long-term care								
15.8 Federal employees health benefits plan								
15.9 Other health								
16. Workers' compensation								
17.1 Other liability - occurrence	5,000	428,286	333,630	99,656	1,392,082	924,539	567,199	37.2
17.2 Other liability - claims-made								
17.3 Excess workers' compensation								
18.1 Products liability - occurrence		17,000	13,090	3,910		11,730	(7,820)	(10.3)
18.2 Products liability - claims-made								
19.1 Private passenger auto no-fault (personal injury protection)								
19.2 Other private passenger auto liability	21,481,432	20,494,320	32,324,151	9,651,601	12,257,175	11,383,076	10,525,700	67.3
19.3 Commercial auto no-fault (personal injury protection)								
19.4 Other commercial auto liability		12,517,245	9,638,279	2,878,966	5,012,817	5,296,006	2,595,777	38.3
21.1 Private passenger auto physical damage	31,700,322	15,112,815	36,172,728	10,640,409	2,231,570	2,083,827	10,788,152	61.0
21.2 Commercial auto physical damage		9,127,666	7,028,303	2,099,363	513,488	430,889	2,181,962	55.2
22. Aircraft (all perils)								
23. Fidelity								
24. Surety								
26. Burglary and theft	12,244	106,316	91,291	27,269	10,306	8,063	29,512	22.3
27. Boiler and machinery								
28. Credit								
29. International								
30. Warranty								
31. Reinsurance - nonproportional assumed property	XXX							
32. Reinsurance - nonproportional assumed liability	XXX							
33. Reinsurance - nonproportional assumed financial lines	XXX							
34. Aggregate write-ins for other lines of business								
35. TOTALS	117,761,916	121,725,609	186,562,135	52,925,390	30,643,735	30,818,349	52,750,776	59.5
DETAILS OF WRITE-INS								
3401.								
3402.								
3403.								
3498. Summary of remaining write-ins for Line 34 from overflow page								
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)								

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8	9
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire	35,000	1,084,651	862,131	257,520	12,542	847,709	664,187	453,584	69,858
2.1 Allied lines		15,876	12,225	3,651		99,489	76,607	26,533	2,834
2.2 Multiple peril crop									
2.3 Federal flood									
2.4 Private crop									
2.5 Private flood									
3. Farmowners multiple peril	2,333,442	1,244,993	3,035,017	543,418	2,519,085	1,661,186	3,268,985	1,454,704	349,767
4. Homeowners multiple peril	5,220,893	3,387,816	6,690,800	1,917,909	4,026,738	2,937,872	5,496,010	3,386,509	601,425
5.1 Commercial multiple peril (non-liability portion)		2,942,196	2,265,491	676,705		1,668,535	1,284,772	1,060,468	110,085
5.2 Commercial multiple peril (liability portion)		4,442,967	3,421,085	1,021,882		7,887,831	6,073,630	2,836,083	1,972,672
6. Mortgage guaranty									
8. Ocean marine									
9.1 Inland marine		28,193	21,708	6,485		8,394	6,463	8,416	1,067
9.2 Pet insurance plans									
10. Financial guaranty									
11.1 Medical professional liability - occurrence									
11.2 Medical professional liability - claims-made									
12. Earthquake									
13.1 Comprehensive (hospital and medical) individual								(a)	
13.2 Comprehensive (hospital and medical) group								(a)	
14. Credit accident and health (group and individual)									
15.1 Vision only								(a)	
15.2 Dental only								(a)	
15.3 Disability income								(a)	
15.4 Medicare supplement								(a)	
15.5 Medicaid Title XIX								(a)	
15.6 Medicare Title XVIII								(a)	
15.7 Long-term care								(a)	
15.8 Federal employees health benefits plan								(a)	
15.9 Other health								(a)	
16. Workers' compensation									
17.1 Other liability - occurrence	3,000	1,723,009	1,329,027	396,982	1,436	4,325,087	3,331,423	1,392,082	570,111
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	15,468,680	11,156,283	20,501,222	6,123,741	13,256,426	13,705,013	20,828,005	12,257,175	2,268,347
19.3 Commercial auto no-fault (personal injury protection)									
19.4 Other commercial auto liability		8,483,677	6,532,430	1,951,247		13,311,171	10,249,601	5,012,817	890,383
21.1 Private passenger auto physical damage	2,229,533	1,903,556	3,182,479	950,610	3,390,250	2,221,354	4,330,644	2,231,570	165,663
21.2 Commercial auto physical damage		1,150,791	886,109	264,682		1,081,763	832,957	513,488	45,902
22. Aircraft (all perils)									
23. Fidelity									
24. Surety									
26. Burglary and theft		5,000	3,850	1,150	2,756	37,053	30,653	10,306	1,168
27. Boiler and machinery									
28. Credit									
29. International									
30. Warranty									
31. Reinsurance - nonproportional assumed property	XXX			XXX					
32. Reinsurance - nonproportional assumed liability	XXX			XXX					
33. Reinsurance - nonproportional assumed financial lines	XXX			XXX					
34. Aggregate write-ins for other lines of business									
35. TOTALS	25,290,548	37,569,008	48,743,574	14,115,982	23,209,233	49,792,457	56,473,937	30,643,735	7,049,282
DETAILS OF WRITE-INS									
3401.									
3402.									
3403.									
3498. Summary of remaining write-ins for Line 34 from overflow page									
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)									

(a) Including \$ for present value of life indemnity claims reported in Lines 13 and 15.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
1. Claim adjustment services:				
1.1 Direct	2,750,863			2,750,863
1.2 Reinsurance assumed				
1.3 Reinsurance ceded	75,767			75,767
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3)	2,675,096			2,675,096
2. Commission and brokerage:				
2.1 Direct excluding contingent		14,994,270		14,994,270
2.2 Reinsurance assumed, excluding contingent		6,265		6,265
2.3 Reinsurance ceded, excluding contingent		696,500		696,500
2.4 Contingent - direct		1,816,008		1,816,008
2.5 Contingent - reinsurance assumed				
2.6 Contingent - reinsurance ceded		101,110		101,110
2.7 Policy and membership fees				
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)		16,018,933		16,018,933
3. Allowances to managers and agents				
4. Advertising	107,177	331,956		.439,133
5. Boards, bureaus and associations	171,078	358,486		529,564
6. Surveys and underwriting reports	229,141	763,682		992,823
7. Audit of assureds' records				
8. Salary and related items:				
8.1 Salaries	1,490,588	5,123,913		6,614,501
8.2 Payroll taxes	97,893	364,999		462,892
9. Employee relations and welfare	352,873	1,114,986		1,467,859
10. Insurance	42,913	133,394		.176,307
11. Directors' fees	41,650	101,366		143,016
12. Travel and travel items	30,593	103,012		.133,605
13. Rent and rent items	33,374	103,742		.137,116
14. Equipment	284,574	884,507		1,169,081
15. Cost or depreciation of EDP equipment and software	120,916	375,864		496,780
16. Printing and stationery	2,491	57,167		59,658
17. Postage, telephone and telegraph, exchange and express	96,031	298,109		394,140
18. Legal and auditing	306,468	970,824	291,032	1,568,324
19. Totals (Lines 3 to 18)	3,407,760	11,086,007	291,032	14,784,799
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$		1,597,155		1,597,155
20.2 Insurance department licenses and fees	1,147	126,932		128,079
20.3 Gross guaranty association assessments				
20.4 All other (excluding federal and foreign income and real estate)				
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)	1,147	1,724,087		1,725,234
21. Real estate expenses				
22. Real estate taxes		12,332		12,332
23. Reimbursements by uninsured plans				
24. Aggregate write-ins for miscellaneous expenses				
25. Total expenses incurred	6,084,003	28,841,359	291,032	(a) 35,216,394
26. Less unpaid expenses - current year	7,049,282	3,241,669	71,543	10,362,494
27. Add unpaid expenses - prior year	8,236,083	2,335,240	69,297	10,640,620
28. Amounts receivable relating to uninsured plans, prior year				
29. Amounts receivable relating to uninsured plans, current year				
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	7,270,804	27,934,930	288,786	35,494,520
DETAILS OF WRITE-INS				
2401.				
2402.				
2403.				
2498. Summary of remaining write-ins for Line 24 from overflow page				
2499. Totals (Lines 2401 through 2403 plus 2498)(Line 24 above)				

(a) Includes management fees of \$ to affiliates and \$ 291,031 to non-affiliates.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company
EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a)	16,354
1.1 Bonds exempt from U.S. tax	(a)	381,210
1.2 Other bonds (unaffiliated)	(a)	2,248,229
1.3 Bonds of affiliates	(a)	
2.1 Preferred stocks (unaffiliated)	(b)	
2.11 Preferred stocks of affiliates	(b)	
2.2 Common stocks (unaffiliated)	1,144,865	1,148,314
2.21 Common stocks of affiliates		
3. Mortgage loans	(c)	
4. Real estate	(d)	16,600
5. Contract loans		16,600
6. Cash, cash equivalents and short-term investments	(e)	435,034
7. Derivative instruments	(f)	
8. Other invested assets		
9. Aggregate write-ins for investment income		
10. Total gross investment income	4,241,268	4,245,741
11. Investment expenses		(g)
12. Investment taxes, licenses and fees, excluding federal income taxes		(g)
13. Interest expense		(h)
14. Depreciation on real estate and other invested assets		(i)
15. Aggregate write-ins for deductions from investment income		
16. Total deductions (Lines 11 through 15)		761,242
17. Net investment income (Line 10 minus Line 16)		3,484,499
DETAILS OF WRITE-INS		
0901.		
0902.		
0903.		
0998. Summary of remaining write-ins for Line 9 from overflow page		
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)		
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow page		
1599. Totals (Lines 1501 through 1503 plus 1598) (Line 15, above)		

(a) Includes \$ 184,049 accrual of discount less \$ 202,676 amortization of premium and less \$ 31,474 paid for accrued interest on purchases.

(b) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued dividends on purchases.

(c) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.

(d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.

(e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.

(f) Includes \$ accrual of discount less \$ amortization of premium.

(g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.

(h) Includes \$ interest on surplus notes and \$ interest on capital notes.

(i) Includes \$ 470,211 depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds					
1.1 Bonds exempt from U.S. tax	(13,317)		(13,317)		
1.2 Other bonds (unaffiliated)	(70,769)		(70,769)		
1.3 Bonds of affiliates					
2.1 Preferred stocks (unaffiliated)					
2.11 Preferred stocks of affiliates					
2.2 Common stocks (unaffiliated)	2,845,851		2,845,851	1,368,841	
2.21 Common stocks of affiliates				27,235,645	
3. Mortgage loans					
4. Real estate					
5. Contract loans					
6. Cash, cash equivalents and short-term investments					
7. Derivative instruments					
8. Other invested assets					
9. Aggregate write-ins for capital gains (losses)					
10. Total capital gains (losses)	2,761,765		2,761,765	28,604,486	
DETAILS OF WRITE-INS					
0901.					
0902.					
0903.					
0998. Summary of remaining write-ins for Line 9 from overflow page					
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)					

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company
EXHIBIT OF NON-ADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D)			
2. Stocks (Schedule D):			
2.1 Preferred stocks			
2.2 Common stocks	26,317	26,186	(131)
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens			
3.2 Other than first liens			
4. Real estate (Schedule A):			
4.1 Properties occupied by the company			
4.2 Properties held for the production of income			
4.3 Properties held for sale			
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)			
6. Contract loans			
7. Derivatives (Schedule DB)			
8. Other invested assets (Schedule BA)			
9. Receivables for securities			
10. Securities lending reinvested collateral assets (Schedule DL)			
11. Aggregate write-ins for invested assets			
12. Subtotals, cash and invested assets (Lines 1 to 11)	26,317	26,186	(131)
13. Title plants (for Title insurers only)			
14. Investment income due and accrued			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection			
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due			
15.3 Accrued retrospective premiums and contracts subject to redetermination			
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers			
16.2 Funds held by or deposited with reinsured companies			
16.3 Other amounts receivable under reinsurance contracts			
17. Amounts receivable relating to uninsured plans			
18.1 Current federal and foreign income tax recoverable and interest thereon			
18.2 Net deferred tax asset			
19. Guaranty funds receivable or on deposit			
20. Electronic data processing equipment and software	2,894,300	3,785,486	891,186
21. Furniture and equipment, including health care delivery assets	240,132	192,913	(47,219)
22. Net adjustment in assets and liabilities due to foreign exchange rates			
23. Receivables from parent, subsidiaries and affiliates			
24. Health care and other amounts receivable			
25. Aggregate write-ins for other-than-invested assets			
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	3,160,749	4,004,585	843,836
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
28. Total (Lines 26 and 27)	3,160,749	4,004,585	843,836
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page			
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)			
2501.			
2502.			
2503.			
2598. Summary of remaining write-ins for Line 25 from overflow page			
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)			

NOTES TO FINANCIAL STATEMENTS

NOTE 1 Summary of Significant Accounting Policies and Going Concern
A. Accounting Practices

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

The ODI recognizes only statutory accounting practices prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures Manual has been adopted as a component of prescribed or permitted accounting practices by the State of Ohio.

A reconciliation of the Company's net income and capital and surplus between NAIC Statutory Accounting Practices and practices prescribed and permitted by the State of Ohio is shown below:

	SSAP #	F/S Page	F/S Line #	2024	2023
NET INCOME					
(1) State basis (Page 4, Line 20, Columns 1 & 2)	XXX	XXX	XXX	\$ 5,467,666	\$ 8,484,121
(2) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:					
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 5,467,666	\$ 8,484,121
SURPLUS					
(5) State basis (Page 3, Line 37, Columns 1 & 2)	XXX	XXX	XXX	\$ 342,958,673	\$ 308,300,028
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:					
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 342,958,673	\$ 308,300,028

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

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for direct business and are based on reports received from ceding companies for reinsurance.

Expenses incurred in connection with acquiring new insurance business, including such acquisition costs as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

In addition, the Company uses the following accounting policies:

- (1) All short-term investments are stated at amortized cost.
- (2) Bonds not backed by other loans are stated at either amortized cost, using the scientific interest method or the lower of amortized cost or fair market value. The company holds no SVO-Identified bond ETFs reported on Schedule D-1.
- (3) Unaffiliated common stocks are stated at fair market value. The Company has no subsidiaries or affiliates in which the company has an interest of 20% or more.
- (4) Preferred stocks are reported at a value based on their NAIC designation by the Securities Valuation Office (SVO) and the related net unrealized capital gains (losses) are reported in unassigned surplus along with any adjustment for federal income taxes. Redeemable preferred stocks are stated at amortized cost using the interest method. RP1-RP2 designations are stated at book value. RP3-RP6 designations are stated at lower of book or fair value. P1-P2 designations are stated at fair value and preferred stocks rated NAIC 3 or lower are stated at the lower of cost or fair market value.
- (5) The Company has no mortgage loans.
- (6) Loan-backed securities are stated at either amortized cost, using the interest method or the lower of amortized cost or fair market value. The retrospective adjustment method is used to value all securities except for interest only securities, EITF 99-20 eligible securities or securities where the yield has become negative are valued using the prospective method.
- (7) The Company has no subsidiaries. The Company's insurance affiliate is Casco Indemnity Company and United Mutual Insurance Company and the Company's non-insurance affiliates are Centurion Financial, Inc., Ohio United Agency, Inc., and United Premium Budget Service, Inc. The Company is wholly-owned by Ohio Mutual Insurance Company.
- (8) The Company has no ownership interest in any significant joint ventures, partnerships or limited liability companies.
- (9) The Company owns no derivative instruments.
- (10) The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 53, Property-Casualty Contracts-Premiums.
- (11) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.
- (12) The Company has not modified its capitalization policy from the prior period.
- (13) The Company does not engage in pharmaceutical rebate receivables.

D. Going Concern

Not applicable.

NOTE 2 Accounting Changes and Corrections of Errors

Not applicable.

NOTE 3 Business Combinations and Goodwill
A. Not applicable.
B. Statutory Merger

On May 19, 2023, the Ohio Mutual Insurance Group announced that it had reached an agreement to merge Wisconsin-based United Mutual Insurance Company as a subsidiary under Ohio Mutual's mutual holding company structure. The transaction was completed with regulatory approval from the Ohio Department of Insurance and the Wisconsin Office of Insurance, effective October 1, 2023. Following the transaction, United Mutual Insurance Company is now an Ohio-domiciled reorganized stock insurance company and is a wholly-owned subsidiary of Ohio Mutual Insurance Company.

C. Not applicable.
D. Not applicable.

NOTES TO FINANCIAL STATEMENTS

NOTE 4 Discontinued Operations

Not applicable.

NOTE 5 Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans
Not applicable.

B. Debt Restructuring
Not applicable.

C. Reverse Mortgages
Not applicable.

D. Loan-Backed Securities

(1) Prepayment assumptions for mortgage-backed securities, collateralized mortgage obligations and other structured securities were generated using a purchased prepayment model. The prepayment model uses a number of factors to estimate prepayment activity including the time of year (seasonality), current levels of interest rates (refinancing incentive), economic activity (including housing turnover) and term and age of the underlying collateral (burnout, seasoning). On an ongoing basis, the rate of prepayment is monitored and the model is calibrated to reflect actual experience, market factors, and viewpoint.

(2) Not applicable.

(3) Not applicable.

(4) a) The aggregate amount of unrealized losses:

1. Less than 12 Months	\$ (409,237)
2. 12 Months or Longer	\$ (2,088,390)

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

1. Less than 12 Months	\$ 15,599,573
2. 12 Months or Longer	\$ 16,730,604

(5) Management regularly reviews the value of the Company's investments. If the value of any investment falls below its cost basis, the decline is analyzed to determine whether it is an other-than-temporary decline in value. To make this determination for each security, the following is considered: (1) the length of time and the extent to which the fair value has been below cost, (2) the financial condition and near-term prospects of the issuer of the security, including any specific events that may affect its operations or earnings potential, and (3) management's intent and ability to hold the security long enough for it to recover its value. Management concluded that unrealized losses were not other-than-temporary on the basis that the Company had the ability and intent to hold the investments for a period of time sufficient for a forecasted market price recovery up to or beyond the cost of the investment. Also, in management's opinion, evidence indicating the cost of the investment was recoverable within a reasonable period of time outweighed evidence to the contrary in considering the severity and duration of the impairment in relation to the forecasted market price recovery.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions
Not applicable.

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing
Not applicable.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing
Not applicable.

H. Repurchase Agreements Transactions Accounted for as a Sale
Not applicable.

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale
Not applicable.

J. Real Estate
Not applicable.

K. Low Income Housing tax Credits (LIHTC)
Not applicable.

NOTES TO FINANCIAL STATEMENTS

L. Restricted Assets

1. Restricted Assets (Including Pledged)

Restricted Asset Category	Gross (Admitted & Nonadmitted) Restricted					
	Current Year				6	7
	1	2	3	4		
Restricted Asset Category	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account Restricted Assets	Protected Cell Account Assets Supporting G/A Activity (b)	Total (1 plus 3)	Total From Prior Year Increase/ (Decrease) (5 minus 6)
a. Subject to contractual obligation for which liability is not shown					\$ -	\$ -
b. Collateral held under security lending agreements					\$ -	\$ -
c. Subject to repurchase agreements					\$ -	\$ -
d. Subject to reverse repurchase agreements					\$ -	\$ -
e. Subject to dollar repurchase agreements					\$ -	\$ -
f. Subject to dollar reverse repurchase agreements					\$ -	\$ -
g. Placed under option contracts					\$ -	\$ -
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock					\$ -	\$ -
i. FHLB capital stock					\$ -	\$ -
j. On deposit with states	\$ 3,293,945				\$ 3,293,945	\$ 2,024,869 \$ 1,269,076
k. On deposit with other regulatory bodies					\$ -	\$ -
l. Pledged collateral to FHLB (including assets backing funding agreements)					\$ -	\$ -
m. Pledged as collateral not captured in other categories					\$ -	\$ -
n. Other restricted assets					\$ -	\$ -
o. Total Restricted Assets (Sum of a through n)	\$ 3,293,945	\$ -	\$ -	\$ -	\$ 3,293,945	\$ 2,024,869 \$ 1,269,076

(a) Subset of Column 1

(b) Subset of Column 3

Restricted Asset Category	Current Year			
	8	9	Percentage	
			10	11
Restricted Asset Category	Total Non-admitted Restricted	Total Admitted Restricted (5 minus 8)	Gross (Admitted & Non-admitted) Restricted to Total Assets (c)	Admitted Restricted to Total Admitted Assets (d)
a. Subject to contractual obligation for which liability is not shown		\$ -	0.000%	0.000%
b. Collateral held under security lending agreements		\$ -	0.000%	0.000%
c. Subject to repurchase agreements		\$ -	0.000%	0.000%
d. Subject to reverse repurchase agreements		\$ -	0.000%	0.000%
e. Subject to dollar repurchase agreements		\$ -	0.000%	0.000%
f. Subject to dollar reverse repurchase agreements		\$ -	0.000%	0.000%
g. Placed under option contracts		\$ -	0.000%	0.000%
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock		\$ -	0.000%	0.000%
i. FHLB capital stock		\$ -	0.000%	0.000%
j. On deposit with states	\$ 3,293,945		0.752%	0.758%
k. On deposit with other regulatory bodies		\$ -	0.000%	0.000%
l. Pledged collateral to FHLB (including assets backing funding agreements)		\$ -	0.000%	0.000%
m. Pledged as collateral not captured in other categories		\$ -	0.000%	0.000%
n. Other restricted assets		\$ -	0.000%	0.000%
o. Total Restricted Assets (Sum of a through n)	\$ -	\$ 3,293,945	0.752%	0.758%

(c) Column 5 divided by Asset Page, Column 1, Line 28

(d) Column 9 divided by Asset Page, Column 3, Line 28

2. Not applicable.

3. Not applicable.

4. Not applicable.

M. Working Capital Finance Investments
Not applicable.N. Offsetting and Netting of Assets and Liabilities
Not applicable.O. 5GI Securities
Not applicable.P. Short Sales
Not applicable.

NOTES TO FINANCIAL STATEMENTS

Q. Prepayment Penalty and Acceleration Fees

	<u>General Account</u>	<u>Protected Cell</u>
1. Number of CUSIPs	5	
2. Aggregate Amount of Investment Income	\$ 5,110	

R. Reporting Entity's Share of Cash Pool by Asset Type
Not applicable.S. Aggregate Collateral Loans by Qualifying Investment Collateral
Not applicable.**NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies**

Not applicable.

NOTE 7 Investment Income

A. Not applicable.

B. Not applicable.

C. The gross, nonadmitted and admitted amounts for interest income due and accrued.

Interest Income Due and Accrued	Amount
1. Gross	\$ 525,765
2. Nonadmitted	\$ 525,765
3. Admitted	\$ 525,765

D. Not applicable.

E. Not applicable.

NOTE 8 Derivative Instruments

Not applicable.

NOTE 9 Income Taxes

A. The components of the net deferred tax asset/(liability) at the end of current period are as follows:

1.

	As of End of Current Period			12/31/2023			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
(a) Gross Deferred Tax Assets	\$ 2,914,511	\$ 386	\$ 2,914,897	\$ 2,925,408	\$ 363	\$ 2,925,771	\$ (10,897)	\$ 23	\$ (10,874)
(b) Statutory Valuation Allowance Adjustment			\$ -			\$ -	\$ -	\$ -	\$ -
(c) Adjusted Gross Deferred Tax Assets (1a - 1b)	\$ 2,914,511	\$ 386	\$ 2,914,897	\$ 2,925,408	\$ 363	\$ 2,925,771	\$ (10,897)	\$ 23	\$ (10,874)
(d) Deferred Tax Assets Nonadmitted			\$ -			\$ -	\$ -	\$ -	\$ -
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	\$ 2,914,511	\$ 386	\$ 2,914,897	\$ 2,925,408	\$ 363	\$ 2,925,771	\$ (10,897)	\$ 23	\$ (10,874)
(f) Deferred Tax Liabilities	\$ 705,251	\$ 1,769,293	\$ 2,474,544	\$ 746,241	\$ 1,481,836	\$ 2,228,077	\$ (40,990)	\$ 287,457	\$ 246,467
(g) Net Admitted Deferred Tax Asset/(Net Deferred Tax Liability) (1e - 1f)	\$ 2,209,260	\$ (1,768,907)	\$ 440,353	\$ 2,179,167	\$ (1,481,473)	\$ 697,694	\$ 30,093	\$ (287,434)	\$ (257,341)

2.

	As of End of Current Period			12/31/2023			Change		
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total
Admission Calculation Components SSAP No. 101									
(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks	\$ 1,578,239		\$ 1,578,239			\$ -	\$ 1,578,239	\$ -	\$ 1,578,239
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	\$ 1,296,611		\$ 1,296,611	\$ 2,882,179		\$ 2,882,179	\$ (1,585,568)	\$ -	\$ (1,585,568)
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date.	\$ 1,296,611		\$ 1,296,611	\$ 2,882,179		\$ 2,882,179	\$ (1,585,568)	\$ -	\$ (1,585,568)
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold.	XXX	XXX	\$51,377,748	XXX	XXX	\$46,140,350	XXX	XXX	\$ 5,237,398
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities.	\$ 39,661	\$ 386	\$ 40,047	\$ 43,229	\$ 363	\$ 43,592	\$ (3,568)	\$ 23	\$ (3,545)
(d) Deferred Tax Assets Admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ 2,914,511	\$ 386	\$ 2,914,897	\$ 2,925,408	\$ 363	\$ 2,925,771	\$ (10,897)	\$ 23	\$ (10,874)

3.

	2024	2023
a. Ratio Percentage Used To Determine Recovery Period And Threshold Limitation Amount.	1107.377%	1150.015%
b. Amount Of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above.	\$ 342,518,320	\$ 307,602,334

NOTES TO FINANCIAL STATEMENTS

4.

	As of End of Current Period		12/31/2023		Change	
	(1) Ordinary	(2) Capital	(3) Ordinary	(4) Capital	(5) (Col. 1 - 3) Ordinary	(6) (Col. 2 - 4) Capital
Impact of Tax Planning Strategies:						
(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.						
1. Adjusted Gross DTAs amount from Note 9A1(c)	\$ 2,914,511	\$ 386	\$ 2,925,408	\$ 363	\$ (10,897)	\$ 23
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies					0.000%	0.000%
3. Net Admitted Adjusted Gross DTAs amount from Note 9A1(e)	\$ 2,914,511	\$ 386	\$ 2,925,408	\$ 363	\$ (10,897)	\$ 23
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies					0.000%	0.000%

b. Do the Company's tax-planning strategies include the use of reinsurance?

Yes [] No [X]

B. Not applicable.

C. Current income taxes incurred consist of the following major components:

	(1) As of End of Current Period	(2) 12/31/2023	(3) (Col. 1 - 2) Change
1. Current Income Tax			
(a) Federal	\$ 998,268	\$ (1,602,187)	\$ 2,600,455
(b) Foreign	\$ 1,517	\$ 1,278	\$ 239
(c) Subtotal (1a+1b)	\$ 999,785	\$ (1,600,909)	\$ 2,600,694
(d) Federal income tax on net capital gains	\$ 579,971	\$ 576,803	\$ 3,168
(e) Utilization of capital loss carry-forwards			\$ -
(f) Other	\$ 1,683	\$ 12,655	\$ (10,972)
(g) Federal and foreign income taxes incurred (1c+1d+1e+1f)	\$ 1,581,439	\$ (1,011,451)	\$ 2,592,890
2. Deferred Tax Assets:			
(a) Ordinary:			
(1) Discounting of unpaid losses	\$ 384,913	\$ 447,107	\$ (62,194)
(2) Unearned premium reserve	\$ 2,014,642	\$ 2,041,631	\$ (26,989)
(3) Policyholder reserves			\$ -
(4) Investments			\$ -
(5) Deferred acquisition costs			\$ -
(6) Policyholder dividends accrual			\$ -
(7) Fixed assets			\$ -
(8) Compensation and benefits accrual	\$ 327,570	\$ 231,773	\$ 95,797
(9) Pension accrual			\$ -
(10) Receivables - nonadmitted			\$ -
(11) Net operating loss carry-forward		\$ 1,568	\$ (1,568)
(12) Tax credit carry-forward			\$ -
(13) Other	\$ 187,386	\$ 203,329	\$ (15,943)
(99) Subtotal (sum of 2a1 through 2a13)	\$ 2,914,511	\$ 2,925,408	\$ (10,897)
(b) Statutory valuation allowance adjustment			\$ -
(c) Nonadmitted			\$ -
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$ 2,914,511	\$ 2,925,408	\$ (10,897)
(e) Capital:			
(1) Investments	\$ 386	\$ 363	\$ 23
(2) Net capital loss carry-forward			\$ -
(3) Real estate			\$ -
(4) Other			\$ -
(99) Subtotal (2e1+2e2+2e3+2e4)	\$ 386	\$ 363	\$ 23
(f) Statutory valuation allowance adjustment			\$ -
(g) Nonadmitted			\$ -
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$ 386	\$ 363	\$ 23
(i) Admitted deferred tax assets (2d + 2h)	\$ 2,914,897	\$ 2,925,771	\$ (10,874)
3. Deferred Tax Liabilities:			
(a) Ordinary:			
(1) Investments	\$ 41,473	\$ 51,868	\$ (10,395)
(2) Fixed assets	\$ 648,637	\$ 664,092	\$ (15,455)
(3) Deferred and uncollected premium			\$ -
(4) Policyholder reserves			\$ -
(5) Other	\$ 15,141	\$ 30,281	\$ (15,140)
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	\$ 705,251	\$ 746,241	\$ (40,990)
(b) Capital:			
(1) Investments	\$ 1,769,293	\$ 1,481,836	\$ 287,457
(2) Real estate			\$ -
(3) Other			\$ -
(99) Subtotal (3b1+3b2+3b3)	\$ 1,769,293	\$ 1,481,836	\$ 287,457
(c) Deferred tax liabilities (3a99 + 3b99)	\$ 2,474,544	\$ 2,228,077	\$ 246,467
4. Net deferred tax assets/liabilities (2i - 3c)	\$ 440,353	\$ 697,694	\$ (257,341)

NOTES TO FINANCIAL STATEMENTS

D. Among the more significant book to tax adjustments were the following:

	Amount	Tax Effect at 21%	Effective Tax Rate
Income before federal income tax	\$ 7,049,105	\$ 1,480,312	21.00%
Tax exempt investment income	\$ (380,970)	\$ (80,004)	-1.13%
Dividends received deduction	\$ (419,387)	\$ (88,071)	-1.25%
Proration of tax exempt investment income	\$ 200,089	\$ 42,019	0.60%
Lobbying	\$ 9,919	\$ 2,083	0.03%
Disallowable meals and entertainment	\$ 76,324	\$ 16,028	0.23%
Country club dues	\$ 890	\$ 187	0.00%
Change in non-admitted assets	\$ 843,966	\$ 177,233	2.51%
Other	\$ 7,321	\$ 1,537	0.02%
Total	\$ 7,387,257	\$ 1,551,324	22.01%
 Federal and foreign ordinary income taxes incurred		\$ 1,001,468	14.21%
Capital gains tax incurred		\$ 579,971	8.23%
Change in net deferred income tax		\$ (30,115)	-0.43%
Total statutory income taxes		\$ 1,551,324	22.01%

E. Operating Loss and Tax Credit Carryforwards and Protective Tax Deposits

1. The Company had no operating loss or tax credit carryforwards available for tax purposes as of the reporting date. The Company had \$7,466 net operating losses as of 12/31/2023.

2. Federal income taxes incurred in the current and preceding years, which are available for recoupment in the event of future net losses, are as follows:

	Ordinary	Capital	Total
2022	\$ -	\$ -	\$ -
2023	\$ -	\$ -	\$ -
2024	\$ 998,268	\$ 579,971	\$ 1,578,239
	\$ 998,268	\$ 579,971	\$ 1,578,239

3. The Company did not have any protective tax deposits under Section 6603 of the Internal Revenue Code.

F. Consolidated Federal Income Tax Return

1. The Company's federal income tax return is consolidated with the following entities:

Ohio Mutual Insurance Group, Inc.
OMIG Holdings, Inc.
United Ohio Insurance Company
Casco Indemnity Company
United Mutual Insurance Company
Ohio United Agency, Inc.
United Premium Budget Services, Inc.
Centurion Financial, Inc.

2. The method of allocation between the companies is subject to written agreement, approved by the Board of Directors. Allocation is based upon separate return calculations with current credit for net losses.

G. Not applicable.

H. Repatriation Transition Tax (RTT)

Not applicable.

I. Alternative Minimum Tax (AMT) Credit

Not applicable.

NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. The Company is a wholly-owned stock insurance subsidiary of a mutual holding company, OMIG Holdings Inc. OMIG Holdings Inc. is a wholly-owned subsidiary of Ohio Mutual Insurance Group, Inc. (OMIG). OMIG is the ultimate controlling parent for the group. The Company is the sole shareholder and owner of United Ohio Insurance Company (United Ohio), Casco Indemnity Company (Casco), United Mutual Insurance Company (United Mutual), United Premium Budget Service Inc., Centurion Financial Inc., and Ohio United Agency, Inc.

B. The Company has entered into a reinsurance pooling agreement and a separate cost-sharing agreement with United Ohio, Casco, and, effective January 1, 2024, United Mutual. Through the agreements, underwriting activities, operating expenses, and other common costs are proportionately allocated among the companies. See Note 26 for additional information on the pooling agreement.

On December 22, 2023, the Company's subsidiary, United Ohio, paid the Company a \$12,000,000 cash dividend. The ordinary dividend was declared by the Board of Directors on November 9, 2023. The intercompany reinsurance pooling agreement was amended January 1, 2024 to change participation percentages. The cash supplied by the dividend will be utilized to fund the initial pooling settlement as required by the intercompany pooling agreement.

C. Not applicable.

D. At the end of the reporting period, the Company owes its subsidiary, United Ohio, \$3,120,055, the Company's subsidiary, Casco, owes the company \$500,028, and the Company owes its subsidiary, United Mutual, \$72,142 under the terms of the reinsurance pooling agreement, and the Company's subsidiary, United Ohio, owes the Company \$5,845,946 under the terms of the cost sharing agreement.

E. As noted above, the Company has entered into a cost-sharing agreement with United Ohio, Casco, and, effective January 1, 2024, United Mutual. Through the agreement, certain common costs are shared proportionally between the entities.

F. Not applicable.

G. The Company owns and operates its subsidiary companies and participates in an intercompany reinsurance pooling agreement and cost-sharing agreement with its insurance affiliates.

H. Not applicable.

I. The Company owns a 100% interest in United Ohio, whose carrying value exceeds 10% of the admitted assets of the Company. The Company carries United Ohio at \$244,709,818, its statutory equity value in accordance with paragraph 8.b.i. of SSAP 97. The statement value of United Ohio's assets and liabilities as of the reporting date were \$519,359,015 and \$274,649,197, respectively.

J. Not applicable.

NOTES TO FINANCIAL STATEMENTS

K. Not applicable.

L. Not applicable.

M. All SCA Investments

(1) Balance Sheet Value (Admitted and Nonadmitted) All SCAs (Except 8bi Entities)

SCA Entity	Percentage of SCA Ownership	Gross Amount	Admitted Amount	Nonadmitted Amount
a. SSAP No. 97 8a Entities				
Total SSAP No. 97 8a Entities	XXX	\$ -	\$ -	\$ -
b. SSAP No. 97 8b(ii) Entities				
Centurion Financial Inc.	100.0%	\$ -		\$ -
Ohio United Agency Inc.	100.0%	\$ 25,314		\$ 25,314
United Premium Budget Service Inc.	100.0%	\$ 1,003		\$ 1,003
Total SSAP No. 97 8b(ii) Entities	XXX	\$ 26,317	\$ -	\$ 26,317
c. SSAP No. 97 8b(iii) Entities				
Total SSAP No. 97 8b(iii) Entities	XXX	\$ -	\$ -	\$ -
d. SSAP No. 97 8b(iv) Entities				
Total SSAP No. 97 8b(iv) Entities	XXX	\$ -	\$ -	\$ -
e. Total SSAP No. 97 8b Entities (except 8bi entities) (b+c+d)	XXX	\$ 26,317	\$ -	\$ 26,317
f. Aggregate Total (a+ e)	XXX	\$ 26,317	\$ -	\$ 26,317

(2) NAIC Filing Response Information

Not applicable.

N. Not applicable.

O. Not applicable.

NOTE 11 Debt

Not applicable.

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

The Company has no retirement plans, deferred compensation, postemployment benefits or compensated absences or other postretirement benefit plans. All such plans are included in the Company's wholly-owned subsidiary, United Ohio.

NOTE 13 Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

A. The Company has 1,000 shares of common capital stock authorized, issued, and outstanding with a par value of \$5,000.

B. Not applicable.

C. Unless prior approval is received by the ODI, Ohio law limits the amount of dividends that can be paid by an insurance company to the greater of: (a) 10 percent of statutory surplus as of December 31 of the year preceding the dividend payment or (b) 100 percent of statutory net income for the year ended December 31 preceding the dividend payment.

D. Not applicable.

E. The portion of the Company's 2024 surplus that may be paid as ordinary dividends in 2025 is \$34,295,867.

F. Not applicable.

G. Not applicable.

H. Not applicable.

I. Not applicable.

J. The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$ 242,673,440

K. Not applicable.

L. Not applicable.

M. Not applicable.

NOTE 14 Liabilities, Contingencies and Assessments

A. Contingent Commitments

Not applicable.

B. Assessments

The Company has received notification of the insolvency of several companies. It is expected that the insolvency will result in a guaranty fund assessment against the Company at some future date. At this time, the Company is unable to estimate the possible amounts, if any, of such assessments. Accordingly, the Company is unable to determine the impact, if any, such assessments may have on the Company's financial position or results of operations.

C. Gain Contingencies

Not applicable.

D. Claims related extra contractual obligations and bad faith losses stemming from lawsuits

Not applicable.

NOTES TO FINANCIAL STATEMENTS

E. Product Warranties
Not applicable.

F. Joint and Several Liabilities
Not applicable.

G. All Other Contingencies
Not applicable.

NOTE 15 Leases

A. Lessee Operating Lease:

(1) The Company leases computer-related equipment under various operating lease agreements that expire through December 2029. Additionally, the Company leases various automobiles under various operating leases with no commitments exceeding December 31, 2024. The rental expenses for these leases for 2024 and 2023 were \$74,687 and \$96,323, respectively.

(2) a. At December 31, 2024, the minimum aggregate rental commitments are as follows:

	Operating Leases
1. 2025	\$ 259,941
2. 2026	\$ 259,941
3. 2027	\$ 199,941
4. 2028	\$ 207,141
5. 2029	\$ 80,000
6. Thereafter	\$ -
7. Total (sum of 1 through 6)	\$ 1,006,964

(3) Not applicable.

B. Lessor Leases
Not applicable.

NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

Not applicable.

NOTE 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

Not applicable.

NOTE 18 Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

Not applicable.

NOTE 19 Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not applicable.

NOTE 20 Fair Value Measurements

A. Fair value measurements for fixed income and equity securities are based on valuations from independent pricing services that have been approved and monitored periodically by a pricing policy committee.

Generally, the pricing services use a pricing methodology involving the market approach, including pricing models, which use prices and relevant market information regarding a particular security or securities with similar characteristics to establish a valuation. Under certain circumstances, if a vendor price is unavailable, a price may be obtained from a broker.

Investments issued one year or less to maturity, including short-term investments and cash equivalents (less than 90 days to maturity), are valued at amortized cost, which approximates fair value.

Fair Value Hierarchy:

Assets recorded at fair value are categorized based on an evaluation of the various inputs used to measure the fair value. Supporting documentation received from pricing vendors detailing the inputs, models and processes used in the vendor's evaluation process is used to determine the appropriate fair value hierarchy. Market Information obtained from brokers with respect to security valuations is also considered in the pricing hierarchy.

Fair value hierarchy levels include:

Level 1: Fair value is observable in an active market and based on quoted prices in active markets for identical assets.

Level 2: Fair value is based on quoted prices for similar assets in active markets, quoted prices for identical or similar assets in markets that are not active, or prices derived from valuation models that consider various observable market inputs in active markets. Prices obtained from independent pricing services are generally considered Level 2.

Level 3: Unobservable inputs reflecting assumptions that market participants would use, including assumptions about risk. Generally, prices obtained from a broker are considered Level 3.

Net Asset Value (NAV):

Under certain circumstances, as defined in SSAP 100R, an entity may use NAV as a practical expedient to measure fair value. Investments reported at NAV as a practical expedient are excluded from the fair value hierarchy described above. For reconciliation purposes, these investments are identified separately in Footnote 20A and 20C. As of the most recent measurement period, there are no assets that utilize NAV as a practical expedient to measure fair value.

Assets held at fair value as of the reporting date are summarized in the table below. The Company did not hold any liabilities at fair value as of the reporting date.

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Common Stock-Industrial & Misc	\$ 26,976,362		\$ 463,044		\$ 27,439,406
Common Stock-Exchange Traded Funds	\$ 11,477,588				\$ 11,477,588
Total assets at fair value/NAV	\$ 38,453,950	\$ -	\$ 463,044	\$ -	\$ 38,916,994

NOTES TO FINANCIAL STATEMENTS

A reconciliation from the beginning balance to the reporting date for fair value measurements categorized within Level 3 of the fair value hierarchy is below.

Description	Beginning Balance at 01/01/2024	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2024
a. Assets Common Stock-Industrial & Misc	\$ 403,772				\$ 59,272					\$ 463,044
Total Assets	\$ 403,772	\$ -	\$ -	\$ -	\$ 59,272	\$ -	\$ -	\$ -	\$ -	\$ 463,044

Transfers between levels are recognized on the actual date of the event or change in circumstances that caused the transfer.

B.-C. The aggregate fair value for all financial instruments and their corresponding level within the fair value hierarchy are summarized in the table below.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 67,744,586	\$ 71,786,772		\$ 67,744,586			
Common Stocks	\$ 38,916,994	\$ 38,916,994	\$ 38,453,950	\$ 463,044			
Cash & Cash Equivalents	\$ 10,641,260	\$ 10,641,260	\$ 10,641,260				

D. Not Practicable to Estimate Fair Value
Not applicable.

E. NAV as a Practical Expedient
Not applicable.

NOTE 21 Other Items

A. Unusual or Infrequent Items
Not applicable.

B. Troubled Debt Restructuring: Debtors
Not applicable.

C. Other Disclosures
Not applicable.

D. Business Interruption Insurance Recoveries
Not applicable.

E. State Transferable and Non-transferable Tax Credits
Not applicable.

F. Subprime Mortgage Related Risk Exposure

- (1) The Company does not engage in direct subprime residential lending. The Company's exposure to subprime is limited to investments within the fixed income investment portfolio, which contains securities collateralized by mortgages that have characteristics of subprime lending. Such characteristics include an interest rate above prime to borrowers who do not qualify for prime rate loans, borrowers with low credit ratings (FICO scores), unconventionally high initial loan-to-value ratios and borrowers with less than conventional documentation of their income and/or net assets. The Company minimizes risk exposure by holding securities that carry higher credit ratings and by monitoring the underlying collateral performance on an ongoing basis.
- (2) Direct exposure through investments in subprime mortgage loans.
Not applicable.
- (3) Direct exposure through other investments.
Not applicable.
- (4) Underwriting exposure to subprime mortgage risk through Mortgage Guaranty or Financial Guaranty insurance coverage.
Not applicable.

G. Insurance-Linked Securities (ILS) Contracts
Not applicable.

H. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy
Not applicable.

NOTE 22 Events Subsequent

Type I – Recognized Subsequent Events:
Subsequent events have been considered through February 17, 2025 for the statutory statement available to be issued on February 24, 2025.

There were no material Type I events occurring subsequent to the end of the period that merited recognition in these statements that have not already been reflected as required.

Type II – Nonrecognized Subsequent Events:
Subsequent events have been considered through February 17, 2025 for the statutory statement available to be issued on February 24, 2025.

There were no material Type II events occurring subsequent to the end of the period that merited disclosure in these statements that have not already been reflected as required.

NOTE 23 Reinsurance

A. Unsecured Reinsurance Recoverables
Not applicable.

B. Reinsurance Recoverable in Dispute
Not applicable.

NOTES TO FINANCIAL STATEMENTS

C. Reinsurance Assumed and Ceded

(1)	Assumed Reinsurance		Ceded Reinsurance		Net	
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a. Affiliates	\$ 122,521,760	\$ 20,843,372	\$ 158,400,459	\$ 26,947,048	\$ (35,878,699)	\$ (6,103,676)
b. All Other			\$ 1,875,114	\$ 338,016	\$ (1,875,114)	\$ (338,016)
c. Total (a+b)	\$ 122,521,760	\$ 20,843,372	\$ 160,275,573	\$ 27,285,064	\$ (37,753,813)	\$ (6,441,692)
d. Direct Unearned Premium Reserve						\$ 85,068,235

(2)	Direct	Assumed	Ceded	Net	
				\$	-
a. Contingent Commission				\$	-
b. Sliding Scale Adjustments				\$	-
c. Other Profit Commission Arrangements	\$ 43,572			\$	43,572
d. TOTAL (a+b+c)	\$ 43,572	\$ -	\$ -	\$ 43,572	\$ 43,572

(3) Not applicable.

D. Uncollectible Reinsurance
Not applicable.E. Commutation of Reinsurance Reflected in Income and Expenses.
Not applicable.F. Retroactive Reinsurance
Not applicable.G. Reinsurance Accounted for as a Deposit
Not applicable.J. Reinsurance Agreements Qualifying for Reinsurer Aggregation
Not applicable.K. Reinsurance Credit
Not applicable.**NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination**
Not applicable.**NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses**

A. As of December 31, 2024, the Company's liabilities for unpaid losses and loss adjustment expenses, net of reinsurance were \$37,693,000. During 2024, payments for incurred losses and loss adjustment expenses attributable to insured events of prior years were \$15,247,000. Reserves remaining for prior years are now \$17,080,000 as a result of re-estimation of unpaid claims and claim adjustment expenses. There has been \$5,655,000 favorable prior-year development since December 31, 2023 primarily due to decreased estimates of reserves for auto physical damage, commercial multi-peril, commercial auto liability, other liability, farmowners', and homeowners' lines of business, offset slightly by increased estimates of reserves for the private passenger auto liability line of business.

B. The Company did not make any significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses during the year.

NOTE 26 Intercompany Pooling Arrangements

A. The Company is a party to an intercompany pooling agreement with the following affiliated entities:

	NAIC #	Pooling Percentage
Ohio Mutual Insurance Company (Lead Company)	10202	23.0%
United Ohio Insurance Company	13072	65.0%
Casco Indemnity Company	25950	9.0%
United Mutual Insurance Company	10719	3.0%

B. All lines of business are subject to the intercompany pooling agreement.

C. Any cession to non-affiliated reinsurers is prior to the cession of business into the intercompany pool.

D. All members of the intercompany pooling agreement have contractual right of direct recovery from any non-affiliated reinsurers per the terms of each reinsurance agreement.

E. Not applicable.

F. Not applicable.

G. Amounts due to/(from) the lead entity and pool participants are shown below:

	Due to/(from)
Ohio Mutual Insurance Company (Lead Company)	(\$2,692,169.00)
United Ohio Insurance Company	\$3,120,055.00
Casco Indemnity Company	(\$500,028.00)
United Mutual Insurance Company	\$72,142.00

NOTE 27 Structured Settlements

	Loss Reserves Eliminated by Annuities	Unrecorded Loss Contingencies
27A. Structured Settlements	\$ 2,212,397	\$ -

27B. Not applicable.

NOTES TO FINANCIAL STATEMENTS

NOTE 28 Health Care Receivables

Not applicable.

NOTE 29 Participating Policies

Not applicable.

NOTE 30 Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves
2. Date of the most recent evaluation of this liability
3. Was anticipated investment income utilized in the calculation?

02/11/2025

Yes [X] No []

NOTE 31 High Deductibles

Not applicable.

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

Not applicable.

NOTE 33 Asbestos/Environmental Reserves

Not applicable.

NOTE 34 Subscriber Savings Accounts

Not applicable.

NOTE 35 Multiple Peril Crop Insurance

Not applicable.

NOTE 36 Financial Guaranty Insurance

Not applicable.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

**PART 1 - COMMON INTERROGATORIES
 GENERAL**

1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
 If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.

1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [X] No [] N/A []

1.3 State Regulating? Ohio

1.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No [X]

1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]

2.2 If yes, date of change:

3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2020

3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2020

3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 04/04/2022

3.4 By what department or departments?
 Ohio Department of Insurance

3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [] No [] N/A [X]

3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [] N/A [X]

4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
 4.11 sales of new business? Yes [] No [X]
 4.12 renewals? Yes [] No [X]

4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
 4.21 sales of new business? Yes [] No [X]
 4.22 renewals? Yes [] No [X]

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?
 If yes, complete and file the merger history data file with the NAIC. Yes [] No [X]

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

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

6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]

6.2 If yes, give full information

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]

7.2 If yes,
 7.21 State the percentage of foreign control %
 7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity
.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

8.1 Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board? Yes [] No [X]

8.2 If the response to 8.1 is yes, please identify the name of the DIHC.

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]

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

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

8.5 Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company? Yes [] No [X]

8.6 If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule? Yes [] No [X] N/A []

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?

Ernst & Young, LLP, 221 East 4th Street, Suite 2900, Cincinnati, OH 45202

10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [] No [X]

10.2 If the response to 10.1 is yes, provide information related to this exemption:

10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [] No [X]

10.4 If the response to 10.3 is yes, provide information related to this exemption:

10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [X] No [] N/A []

10.6 If the response to 10.5 is no or n/a, please explain.

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?

Alex ZH Chan

Ernst & Young, LL

6070 Poplar Ave Ste 37

Memphis, TN 38119

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]

12.11 Name of real estate holding company ...

12.12 Number of parcels involved

12.13 Total book/adjusted carrying value \$

12.2 If yes, provide explanation

13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No []

13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No []

13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A []

14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []

a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

c. Compliance with applicable governmental laws, rules and regulations;

d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

e. Accountability for adherence to the code.

14.11 If the response to 14.1 is No, please explain:

14.2 Has the code of ethics for senior managers been amended? Yes [] No [X]

14.21 If the response to 14.2 is yes, provide information related to amendment(s).

14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]

14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [] No [X]

15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount
.....

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? Yes [X] No []

17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes [X] No []

18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? Yes [X] No []

FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [] No [X]

20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11 To directors or other officers.....	\$
20.12 To stockholders not officers.....	\$
20.13 Trustees, supreme or grand (Fraternal Only)	\$

20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21 To directors or other officers.....	\$
20.22 To stockholders not officers.....	\$
20.23 Trustees, supreme or grand (Fraternal Only)	\$

21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]

21.2 If yes, state the amount thereof at December 31 of the current year:

21.21 Rented from others.....	\$
21.22 Borrowed from others.....	\$
21.23 Leased from others	\$
21.24 Other	\$

22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [] No [X]

22.2 If answer is yes:

22.21 Amount paid as losses or risk adjustment \$	
22.22 Amount paid as expenses	\$
22.23 Other amounts paid	\$

23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]

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

24.1 Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? Yes [] No [X]

24.2 If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

Name of Third-Party	Is the Third-Party Agent a Related Party (Yes/No)
.....

INVESTMENT

25.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03)..... Yes [X] No []

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

25.02 If no, give full and complete information, relating thereto

25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)

25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions \$

25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$

25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]

25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]

25.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? Yes [] No [] N/A [X]

25.09 For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:

25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$
25.092 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2	\$
25.093 Total payable for securities lending reported on the liability page	\$

26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). Yes [X] No []

26.2 If yes, state the amount thereof at December 31 of the current year:

26.21 Subject to repurchase agreements	\$
26.22 Subject to reverse repurchase agreements	\$
26.23 Subject to dollar repurchase agreements	\$
26.24 Subject to reverse dollar repurchase agreements	\$
26.25 Placed under option agreements	\$
26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock	\$
26.27 FHLB Capital Stock	\$
26.28 On deposit with states	\$
26.29 On deposit with other regulatory bodies	\$
26.30 Pledged as collateral - excluding collateral pledged to an FHLB	\$
26.31 Pledged as collateral to FHLB - including assets backing funding agreements	\$
26.32 Other	\$

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
.....

27.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]

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

LINES 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? Yes [] No []

27.4 If the response to 27.3 is YES, does the reporting entity utilize:

27.41 Special accounting provision of SSAP No. 108	Yes [] No []
27.42 Permitted accounting practice	Yes [] No []
27.43 Other accounting guidance	Yes [] No []

27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:

- The reporting entity has obtained explicit approval from the domiciliary state.
- Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
- Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
- Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No [X]

28.2 If yes, state the amount thereof at December 31 of the current year. \$

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

29.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
Fifth Third Bank	38 Fountain Square Plaza Cincinnati, OH 45263

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

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

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

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?..... Yes [] No [X]

29.04 If yes, give full and complete information relating thereto:

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

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

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

29.0597 For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [X] No []

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [] No [X]

29.06 For those firms or individuals listed in the table for 29.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
105900	New England Asset Management	KUR85E5PS4GQFZTFC130	New England Asset Management is an SEC registered Investment advisor	NO.....

30.1 Does the reporting entity have any diversified mutual funds reported in Schedule D - Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])?..... Yes [X] No []

30.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
46137V-35-7	Inveso S&P 500 EQ Weight ETF	933,100
46432F-84-2	iShares Core MSCI EAFE ETF	7,414,540
922908-76-9	Vanguard US Total Stock Market ETF	3,129,948
30.2999 - Total		11,477,588

30.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
Inveso S&P 500 EQ Weight ETF	BROADCOM	2,426	12/31/2024 ..
Inveso S&P 500 EQ Weight ETF	DARDEN RESTAURANTS	2,146	12/31/2024 ..
Inveso S&P 500 EQ Weight ETF	JABIL	2,053	12/31/2024 ..
Inveso S&P 500 EQ Weight ETF	BOEING	2,053	12/31/2024 ..
Inveso S&P 500 EQ Weight ETF	CENTENE	2,053	12/31/2024 ..
iShares Core MSCI EAFE ETF	ASML HOLDING NV	110,477	12/31/2024 ..
iShares Core MSCI EAFE ETF	NOVO NORDISK CLASS B	109,735	12/31/2024 ..
iShares Core MSCI EAFE ETF	SAP	100,837	12/31/2024 ..
iShares Core MSCI EAFE ETF	NESTLE SA	85,267	12/31/2024 ..
iShares Core MSCI EAFE ETF	TOYOTA MOTOR CORP	80,818	12/31/2024 ..
Vanguard US Total Stock Market ETF	APPLE INC	209,707	12/31/2024 ..
Vanguard US Total Stock Market ETF	MICROSOFT CORP	172,147	12/31/2024 ..
Vanguard US Total Stock Market ETF	NVIDIA CORP	172,147	12/31/2024 ..
Vanguard US Total Stock Market ETF	AMAZON.COM INC	115,808	12/31/2024 ..
Vanguard US Total Stock Market ETF	ALPHABET INC	109,548	12/31/2024 ..

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

31. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds	71,786,772	67,744,586	(4,042,186)
31.2 Preferred stocks			
31.3 Totals	71,786,772	67,744,586	(4,042,186)

31.4 Describe the sources or methods utilized in determining the fair values:

Fair values are based on values either published by the NAIC's Security Valuation Office (SVO) or from an independent pricing service vendor such as: ICE Data Services, ICE BofAML indices, Reuters, Bloomberg, Markit, Markit iBoxx, or PricingDirect. Under certain circumstances, if an SVO price or vendor price is unavailable, a price may be obtained from a broker. Short term securities are valued at amortized cost. Cash Equivalents are valued at amortized cost, including Government (exempt) money market mutual funds. Non-Government money market mutual funds are valued at net present value (NPV).

32.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [] No [X]

32.2 If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [] No []

32.3 If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:
.....

33.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []

33.2 If no, list exceptions:
.....

34. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:
 a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
 b. Issuer or obligor is current on all contracted interest and principal payments.
 c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
 Has the reporting entity self-designated 5GI securities? Yes [] No [X]

35. By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the Purposes and Procedures Manual of the NAIC Investment Analysis Office (P&P Manual) for private letter rating (PLR) securities and the following elements of each self-designated PLGI security:
 a. The security was either:
 i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or
 ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022 which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").
 b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.
 c. The NAIC Designation and NAIC Designation Category were derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.
 d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.
 Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual? Yes [] No [X]

36. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
 a. The shares were purchased prior to January 1, 2019.
 b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
 d. The fund only or predominantly holds bonds in its portfolio.
 e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
 f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.
 Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:
 a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
 b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
 c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
 d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.
 Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? Yes [] No [] N/A [X]

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

38.1 Does the reporting entity directly hold cryptocurrencies? Yes [] No [X]

38.2 If the response to 38.1 is yes, on what schedule are they reported?
.....

39.1 Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies? Yes [] No [X]

39.2 If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?
39.21 Held directly Yes [] No []
39.22 Immediately converted to U.S. dollars Yes [] No []

39.3 If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

1 Name of Cryptocurrency	2 Immediately Converted to USD, Directly Held, or Both	3 Accepted for Payment of Premiums
.....

OTHER

40.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$ 175,724

40.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations, and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
.....

41.1 Amount of payments for legal expenses, if any? \$ 91,874

41.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
Tsibouris & Associates, LLC	81,158

42.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers, or departments of government, if any? \$

42.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers, or departments of government during the period covered by this statement.

1 Name	2 Amount Paid
.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force?	Yes [] No [X]			
1.2	If yes, indicate premium earned on U. S. business only.	\$			
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?	\$			
1.31	Reason for excluding				
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.	\$			
1.5	Indicate total incurred claims on all Medicare Supplement insurance.	\$			
1.6	Individual policies:	Most current three years: 1.61 Total premium earned\$ 1.62 Total incurred claims\$ 1.63 Number of covered lives			
		All years prior to most current three years: 1.64 Total premium earned\$ 1.65 Total incurred claims\$ 1.66 Number of covered lives			
1.7	Group policies:	Most current three years: 1.71 Total premium earned\$ 1.72 Total incurred claims\$ 1.73 Number of covered lives			
		All years prior to most current three years: 1.74 Total premium earned\$ 1.75 Total incurred claims\$ 1.76 Number of covered lives			
2.	Health Test:	<table border="0"> <tr> <td style="width: 100px;"></td> <td style="width: 100px; text-align: center;">1 Current Year</td> <td style="width: 100px; text-align: center;">2 Prior Year</td> </tr> </table>		1 Current Year	2 Prior Year
	1 Current Year	2 Prior Year			
2.1	Premium Numerator	48 57			
2.2	Premium Denominator	88,591,273 89,484,941			
2.3	Premium Ratio (2.1/2.2)	0.000 0.000			
2.4	Reserve Numerator	18 21			
2.5	Reserve Denominator	85,007,440 0.000			
2.6	Reserve Ratio (2.4/2.5)	0.000 0.000			
3.1	Did the reporting entity issue participating policies during the calendar year?	Yes [] No [X]			
3.2	If yes, provide the amount of premium written for participating and/or non-participating policies during the calendar year:	3.21 Participating policies\$ 3.22 Non-participating policies\$			
4.	For mutual reporting Entities and Reciprocal Exchanges only:				
4.1	Does the reporting entity issue assessable policies?	Yes [] No []			
4.2	Does the reporting entity issue non-assessable policies?	Yes [] No []			
4.3	If assessable policies are issued, what is the extent of the contingent liability of the policyholders?	%			
4.4	Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums.	\$			
5.	For Reciprocal Exchanges Only:				
5.1	Does the Exchange appoint local agents?	Yes [] No []			
5.2	If yes, is the commission paid:	5.21 Out of Attorney's-in-fact compensation Yes [] No [] N/A [] 5.22 As a direct expense of the exchange Yes [] No [] N/A []			
5.3	What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact?				
5.4	Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred?	Yes [] No []			
5.5	If yes, give full information				

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?
The Company does not write workers' compensation insurance.

6.2 Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:
The Company's probable maximum loss is determined by Guy Carpenter using both the AIR model and the RMS model. Exposures that comprise the probable maximum loss include personal and commercial properties in Ohio and the New England states as well as farm property in Ohio and the eastern part of Indiana.

6.3 What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?
The Company's primary protection from an excessive loss arising from a concentration of risk is a comprehensive catastrophe reinsurance program with top quality reinsurers. In addition, the Company utilizes an internal concentration of risks metric that should not be exceeded in a given geographic area. The Company has also implemented predictive software to better access the potential risk before and after an event.

6.4 Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence? Yes [X] No []

6.5 If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to uninsured catastrophic loss
.....

7.1 Has this reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?..... Yes [] No [X]

7.2 If yes, indicate the number of reinsurance contracts containing such provisions.

7.3 If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?..... Yes [] No []

8.1 Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured? Yes [] No [X]

8.2 If yes, give full information
.....

9.1 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:
(a) A contract term longer than two years and the contract is noncancelable by the reporting entity during the contract term;
(b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;
(c) Aggregate stop loss reinsurance coverage;
(d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;
(e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or
(f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity. Yes [] No [X]

9.2 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:
(a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or
(b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. Yes [] No [X]

9.3 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:
(a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;
(b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and
(c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.

9.4 Except for transactions meeting the requirements of paragraph 36 of SSAP No. 62R - Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:
(a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or
(b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? Yes [] No [X]

9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.

9.6 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:
(a) The entity does not utilize reinsurance; or, Yes [] No [X]
(b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or Yes [] No [X]
(c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement. Yes [] No [X]

10. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurance a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done? Yes [X] No [] N/A []

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company
GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

11.1 Has the reporting entity guaranteed policies issued by any other entity and now in force? Yes [] No [X]

11.2 If yes, give full information
.....

12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:
12.11 Unpaid losses \$
12.12 Unpaid underwriting expenses (including loss adjustment expenses) \$

12.2 Of the amount on Line 15.3, Page 2, state the amount which is secured by letters of credit, collateral and other funds. \$

12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? Yes [] No [] N/A [X]

12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:
12.41 From %
12.42 To..... %

12.5 Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies? Yes [] No [X]

12.6 If yes, state the amount thereof at December 31 of the current year:
12.61 Letters of Credit \$
12.62 Collateral and other funds..... \$

13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation): \$ 1,000,000

13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? Yes [] No [X]

13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount. 1

14.1 Is the company a cedant in a multiple cedant reinsurance contract? Yes [X] No []

14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:
The Company and its affiliates cede reinsurance independently under a group reinsurance agreement.

14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? Yes [X] No []

14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? Yes [] No []

14.5 If the answer to 14.4 is no, please explain:
.....

15.1 Has the reporting entity guaranteed any financed premium accounts? Yes [] No [X]

15.2 If yes, give full information
.....

16.1 Does the reporting entity write any warranty business? Yes [] No [X]
If yes, disclose the following information for each of the following types of warranty coverage:

	1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct Premium Earned
16.11 Home
16.12 Products
16.13 Automobile
16.14 Other*

* Disclose type of coverage:
.....

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that is exempt from the statutory provision for unauthorized reinsurance? Yes [] No [X]

Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from the statutory provision for unauthorized reinsurance. Provide the following information for this exemption:

17.11 Gross amount of unauthorized reinsurance in Schedule F - Part 3 exempt from the statutory provision for unauthorized reinsurance \$

17.12 Unfunded portion of Interrogatory 17.11 \$

17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11....\$

17.14 Case reserves portion of Interrogatory 17.11 \$

17.15 Incurred but not reported portion of Interrogatory 17.11 \$

17.16 Unearned premium portion of Interrogatory 17.11 \$

17.17 Contingent commission portion of Interrogatory 17.11 \$

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company

GENERAL INTERROGATORIES

PART 2 - PROPERTY AND CASUALTY INTERROGATORIES

18.1 Do you act as a custodian for health savings accounts? Yes [] No [X]

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

18.3 Do you act as an administrator for health savings accounts? Yes [] No [X]

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

19. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [X] No []

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company
FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

	1 2024	2 2023	3 2022	4 2021	5 2020
Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 & 3)					
1. Liability lines (Lines 11, 16, 17, 18 & 19)	108,411,791	99,683,789	92,357,602	88,403,258	86,339,123
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	131,511,649	113,839,819	96,229,192	85,862,276	80,040,707
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	179,721,507	149,162,406	127,072,664	113,427,265	103,903,478
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	210	210	464	817	1,690
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
6. Total (Line 35)	419,645,157	362,686,224	315,659,922	287,693,616	270,284,998
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11, 16, 17, 18 & 19)	24,870,599	26,844,818	24,875,958	23,804,234	23,300,156
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)	29,831,669	30,356,450	25,697,592	22,985,623	21,450,446
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	39,539,093	38,869,518	32,976,203	29,897,542	27,466,100
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	48	57	125	221	456
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
12. Total (Line 35)	94,241,409	96,070,843	83,549,878	76,687,620	72,217,158
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)	915,135	(10,274,228)	(8,541,893)	2,780,579	3,659,233
14. Net investment gain (loss) (Line 11)	5,666,295	17,268,299	2,943,269	2,417,791	1,915,630
15. Total other income (Line 15)	(112,296)	(98,204)	(48,559)	5,702	(194,975)
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)	1,001,468	(1,588,254)	(1,295,374)	1,164,699	(29,280)
18. Net income (Line 20)	5,467,666	8,484,121	(4,351,809)	4,039,373	5,409,168
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	434,741,128	407,155,334	398,419,050	417,242,266	378,431,653
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)	2,910,716	3,030,685	2,532,817	2,377,689	2,454,399
20.2 Deferred and not yet due (Line 15.2)	21,780,521	22,641,695	19,366,193	17,281,660	16,588,614
20.3 Accrued retrospective premiums (Line 15.3)					
21. Total liabilities excluding protected cell business (Page 3, Line 26)	91,782,455	98,855,306	87,366,476	79,667,472	73,654,116
22. Losses (Page 3, Line 1)	30,643,735	35,903,510	34,537,998	29,098,838	26,690,494
23. Loss adjustment expenses (Page 3, Line 3)	7,049,282	8,236,083	7,516,982	6,804,679	6,460,769
24. Unearned premiums (Page 3, Line 9)	47,314,423	47,962,201	41,376,299	37,090,819	35,062,571
25. Capital paid up (Page 3, Lines 30 & 31)	5,000,000	5,000,000	5,000,000	5,000,000	5,000,000
26. Surplus as regards policyholders (Page 3, Line 37)	342,958,673	308,300,028	311,052,574	337,574,794	304,777,537
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	(845,511)	13,200,939	(495,096)	9,938,837	8,310,345
Risk-Based Capital Analysis					
28. Total adjusted capital	342,958,673	308,300,028	311,052,574	337,574,794	304,777,537
29. Authorized control level risk-based capital	30,930,595	26,747,674	22,220,576	21,041,566	20,672,929
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3) x100.0					
30. Bonds (Line 1)	17.8	18.7	19.5	19.1	20.6
31. Stocks (Lines 2.1 & 2.2)	78.1	73.8	75.3	75.5	75.4
32. Mortgage loans on real estate (Lines 3.1 and 3.2)					
33. Real estate (Lines 4.1, 4.2 & 4.3)	1.4	1.6	1.8	1.8	2.2
34. Cash, cash equivalents and short-term investments (Line 5)	2.6	5.9	3.4	3.6	1.8
35. Contract loans (Line 6)					
36. Derivatives (Line 7)					
37. Other invested assets (Line 8)					
38. Receivables for securities (Line 9)					
39. Securities lending reinvested collateral assets (Line 10)					
40. Aggregate write-ins for invested assets (Line 11)					
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds (Schedule D, Summary, Line 12, Col. 1)					
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Col. 1)					
44. Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1)	276,129,160	244,893,515	249,774,919	267,691,950	242,368,556
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10)					
46. Affiliated mortgage loans on real estate					
47. All other affiliated					
48. Total of above Lines 42 to 47	276,129,160	244,893,515	249,774,919	267,691,950	242,368,556
49. Total Investment in Parent included in Lines 42 to 47 above					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)	80.5	79.4	80.3	79.3	79.5

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2024	2 2023	3 2022	4 2021	5 2020
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24)	28,317,028	(11,964,625)	(21,582,651)	28,276,596	20,281,483
52. Dividends to stockholders (Line 35)					
53. Change in surplus as regards policyholders for the year (Line 38)	34,658,645	(2,752,546)	(26,522,220)	32,797,257	24,349,253
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54. Liability lines (Lines 11, 16, 17, 18 & 19)	54,943,283	62,170,927	54,156,178	44,446,700	42,150,461
55. Property lines (Lines 1, 2, 9, 12, 21 & 26)	70,952,615	73,526,197	65,825,519	50,648,622	43,101,365
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	113,591,627	98,396,079	78,827,649	51,651,943	51,098,378
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
58. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
59. Total (Line 35)	239,487,525	234,093,203	198,809,346	146,747,265	136,350,204
Net Losses Paid (Page 9, Part 2, Col. 4)					
60. Liability lines (Lines 11, 16, 17, 18 & 19)	12,634,133	16,786,150	14,565,992	12,000,609	11,380,624
61. Property lines (Lines 1, 2, 9, 12, 21 & 26)	16,168,264	19,837,205	17,610,121	13,675,127	11,637,369
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	24,122,993	26,343,251	19,536,936	13,879,907	13,630,481
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)					
64. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
65. Total (Line 35)	52,925,390	62,966,606	51,713,049	39,555,643	36,648,474
Operating Percentages (Page 4) (Line divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2)	59.5	71.9	72.1	56.2	53.3
68. Loss expenses incurred (Line 3)	6.9	8.2	8.2	7.6	8.2
69. Other underwriting expenses incurred (Line 4)	32.6	31.4	30.5	32.4	33.3
70. Net underwriting gain (loss) (Line 8)	1.0	(11.5)	(10.8)	3.7	5.2
Other Percentages					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	30.7	29.4	29.0	31.6	32.9
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	66.4	80.1	80.3	63.8	61.5
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)	27.5	31.2	26.9	22.7	23.7
One Year Loss Development (\$000 omitted)					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P - Part 2 - Summary, Line 12, Col. 11)	(5,002)	(2,633)	(1,122)	(535)	(776)
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0)	(1.6)	(0.8)	(0.3)	(0.2)	(0.3)
Two Year Loss Development (\$000 omitted)					
76. Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)	(4,635)	(1,631)	(1,128)	(50)	(2,822)
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0)	(1.5)	(0.5)	(0.4)	0.0	(1.1)

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes [] No []

If no, please explain:

SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES**SCHEDULE P - PART 1 - SUMMARY**

(\$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.....	(16).....		10.....					19.....	(6).....	
2. 2015.....	49,601	3,886	45,715	24,190	.957	1,423	20	2,706	1	1,430	27,341	XXX.....	
3. 2016.....	51,485	3,961	47,524	24,784	.889	1,333	17	2,871	2	1,399	28,080	XXX.....	
4. 2017.....	54,088	4,033	50,055	28,896	1,805	1,336	14	3,044	53	1,605	31,404	XXX.....	
5. 2018.....	58,808	3,850	54,958	28,804	.981	1,644	20	2,968	8	1,885	32,407	XXX.....	
6. 2019.....	63,802	3,566	60,236	36,530	1,528	1,840	5	3,054	59	2,285	39,832	XXX.....	
7. 2020.....	64,529	3,327	61,202	32,773	1,759	1,083	25	2,887	8	1,954	34,951	XXX.....	
8. 2021.....	68,018	3,566	64,452	35,631	.884	1,029	6	2,933	27	2,577	38,676	XXX.....	
9. 2022.....	73,162	4,793	68,369	48,322	3,878	1,023	122	3,340	28	2,874	48,657	XXX.....	
10. 2023.....	82,332	5,331	77,001	49,534	.681	1,006	4	3,499	3	2,962	53,351	XXX.....	
11. 2024	94,884	6,292	88,592	43,096	3,319	727	70	3,461		1,663	43,895	XXX	
12. Totals	XXX	XXX	XXX	352,544	16,681	12,454	303	30,763	189	20,653	378,588	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior.....	18.....											18.....	1.....			
2. 2015.....	46.....		23.....				50.....		1.....			120.....				
3. 2016.....	38.....		19.....				3.....		3.....			.63.....				
4. 2017.....	106.....		54.....				56.....		10.....			.226.....	3.....			
5. 2018.....	538.....	310	366.....	154.....			397.....		2.....			.839.....	2.....			
6. 2019.....	395.....		264.....	12.....			218.....		26.....			.891.....	10.....			
7. 2020.....	320.....		306.....	35.....			155.....		25.....			.771.....	11.....			
8. 2021.....	700.....		565.....	24.....			448.....		46.....			1,735.....	24.....			
9. 2022.....	1,478.....		1,908.....	209.....			714.....		103.....			3,994.....	54.....			
10. 2023.....	3,150.....		3,972.....	341.....			1,329.....		331.....			8,441.....	120.....			
11. 2024	8,105	468	11,083	1,257			1,831		1,301			20,595	588			
12. Totals	14,894	778	18,560	2,032			5,201		1,848			37,693	813			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	18.....	
2. 2015.....	28,439	978	27,461	.57.3	25.2	.60.1			23.0	.69	.51
3. 2016.....	29,051	908	28,143	.56.4	22.9	.59.2			23.0	.57	.6
4. 2017.....	33,502	1,872	31,630	.61.9	46.4	.63.2			23.0	.160	.66
5. 2018.....	34,719	1,473	33,246	.59.0	38.3	.60.5			23.0	.440	.399
6. 2019.....	42,327	1,604	40,723	.66.3	45.0	.67.6			23.0	.647	.244
7. 2020.....	37,549	1,827	35,722	.58.2	54.9	.58.4			23.0	.591	.180
8. 2021.....	41,352	941	40,411	.60.8	26.4	.62.7			23.0	.1,241	.494
9. 2022.....	56,888	4,237	52,651	.77.8	88.4	.77.0			23.0	.3,177	.817
10. 2023.....	62,821	1,029	61,792	.76.3	19.3	.80.2			23.0	.6,781	.1,660
11. 2024	69,604	5,114	64,490	.73.4	81.3	.72.8			23.0	.17,463	.3,132
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	30,644	7,049

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements which will reconcile Part 1 with Parts 2 and 4.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company

SCHEDULE P - PART 2 - SUMMARY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior.....	10,170	10,013	9,298	9,239	9,436	9,479	9,342	9,246	9,238	9,222	(16)	(24)
2. 2015.....	26,866	25,654	24,826	24,977	24,918	24,653	24,605	24,695	24,737	24,755	18	60
3. 2016.....	XXX.....	27,407	25,842	25,592	25,534	25,511	25,385	25,342	25,314	25,271	(43)	(71)
4. 2017.....	XXX.....	XXX.....	30,764	29,090	28,971	28,678	28,628	28,577	28,598	28,629	31	52
5. 2018.....	XXX.....	XXX.....	XXX.....	31,692	29,745	29,833	30,654	30,554	30,177	30,284	107	(270)
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	37,358	37,145	37,308	37,758	37,695	37,702	7	(56)
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	35,314	34,152	33,380	33,123	32,818	(305)	(562)
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	38,603	38,101	38,333	37,459	(874)	(642)
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	52,358	50,562	49,236	(1,326)	(3,122)
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	60,566	57,965	(2,601)	XXX.....
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	59,728	XXX	XXX
										12. Totals	(5,002)	(4,635)

SCHEDULE P - PART 3 - SUMMARY

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 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024		
1. Prior.....	000.....	3,966	6,516	7,642	8,548	8,965	9,174	9,163	9,210	9,204	XXX.....	XXX.....
2. 2015.....	15,949	20,110	21,908	23,447	24,018	24,347	24,438	24,565	24,610	24,636	XXX.....	XXX.....
3. 2016.....	XXX.....	16,500	20,964	22,858	23,955	24,432	24,863	25,016	25,172	25,211	XXX.....	XXX.....
4. 2017.....	XXX.....	XXX.....	19,034	24,262	26,182	27,361	27,773	27,989	28,255	28,413	XXX.....	XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....	19,094	24,247	26,647	28,154	28,739	29,388	29,447	XXX.....	XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	23,876	30,040	32,695	35,116	36,291	36,837	XXX.....	XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	22,152	27,609	30,119	31,491	32,072	XXX.....	XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	24,949	31,648	34,480	35,770	XXX.....	XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	33,661	42,870	45,345	XXX.....	XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	40,629	49,855	XXX.....	XXX.....
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	40,434	XXX	XXX

SCHEDULE P - PART 4 - SUMMARY

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)										10
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	2024	
1. Prior.....	4,395	2,667	1,167	696	400	219	80	27	9		
2. 2015.....	4,865	2,244	1,048	689	439	132	74	78	77	73	
3. 2016.....	XXX.....	4,818	2,303	1,302	714	475	228	184	74	22	
4. 2017.....	XXX.....	XXX.....	5,567	2,313	1,564	758	410	263	167	110	
5. 2018.....	XXX.....	XXX.....	XXX.....	6,656	3,120	1,604	1,548	1,123	545	609	
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	6,567	3,510	2,051	1,299	696	470	
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	7,347	3,847	1,801	956	426	
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	7,692	3,950	2,396	989	
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	9,517	4,980	2,413	
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	11,402	4,960	
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,657	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	1 Active Status (a)	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premiums Written for Federal Purchasing Groups (Included in Column 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama	AL	N.							
2. Alaska	AK	N.							
3. Arizona	AZ	N.							
4. Arkansas	AR	N.							
5. California	CA	N.							
6. Colorado	CO	N.							
7. Connecticut	CT	L.							
8. Delaware	DE	N.							
9. District of Columbia	DC	N.							
10. Florida	FL	N.							
11. Georgia	GA	N.							
12. Hawaii	HI	N.							
13. Idaho	ID	N.							
14. Illinois	IL	N.							
15. Indiana	IN	L.	21,192,435	17,385,100		10,921,983	12,386,237	4,834,103	12
16. Iowa	IA	N.							
17. Kansas	KS	N.							
18. Kentucky	KY	N.							
19. Louisiana	LA	N.							
20. Maine	ME	L.							
21. Maryland	MD	N.							
22. Massachusetts	MA	N.							
23. Michigan	MI	N.							
24. Minnesota	MN	N.							
25. Mississippi	MS	N.							
26. Missouri	MO	N.							
27. Montana	MT	N.							
28. Nebraska	NE	N.							
29. Nevada	NV	N.							
30. New Hampshire	NH	L.							
31. New Jersey	NJ	N.							
32. New Mexico	NM	N.							
33. New York	NY	N.							
34. North Carolina	NC	N.							
35. North Dakota	ND	N.							
36. Ohio	OH	L.	154,415,892	145,760,248		106,839,933	107,461,059	43,665,678	
37. Oklahoma	OK	N.							
38. Oregon	OR	N.							
39. Pennsylvania	PA	N.							
40. Rhode Island	RI	L.							
41. South Carolina	SC	N.							
42. South Dakota	SD	N.							
43. Tennessee	TN	L.							
44. Texas	TX	N.							
45. Utah	UT	N.							
46. Vermont	VT	L.							
47. Virginia	VA	L.							
48. Washington	WA	N.							
49. West Virginia	WV	N.							
50. Wisconsin	WI	L.							
51. Wyoming	WY	N.							
52. American Samoa	AS	N.							
53. Guam	GU	N.							
54. Puerto Rico	PR	N.							
55. U.S. Virgin Islands	VI	N.							
56. Northern Mariana Islands	MP	N.							
57. Canada	CAN	N.							
58. Aggregate other alien ..	OT	XXX.							
59. Totals		XXX	175,608,327	163,145,348		117,761,916	119,847,296	48,499,781	12
DETAILS OF WRITE-INS									
58001.		XXX.							
58002.		XXX.							
58003.		XXX.							
58998. Summary of remaining write-ins for Line 58 from overflow page		XXX.							
58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)		XXX							

(a) Active Status Counts:

1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 10 4. Q - Qualified - Qualified or accredited reinsurer.....
 2. R - Registered - Non-domiciled RRGs..... 5. D - Domestic Surplus Lines Insurer (DSL) - Reporting entities
 3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state
 (other than their state of domicile - see DSL)..... 6. N - None of the above - Not allowed to write business in the state... 47

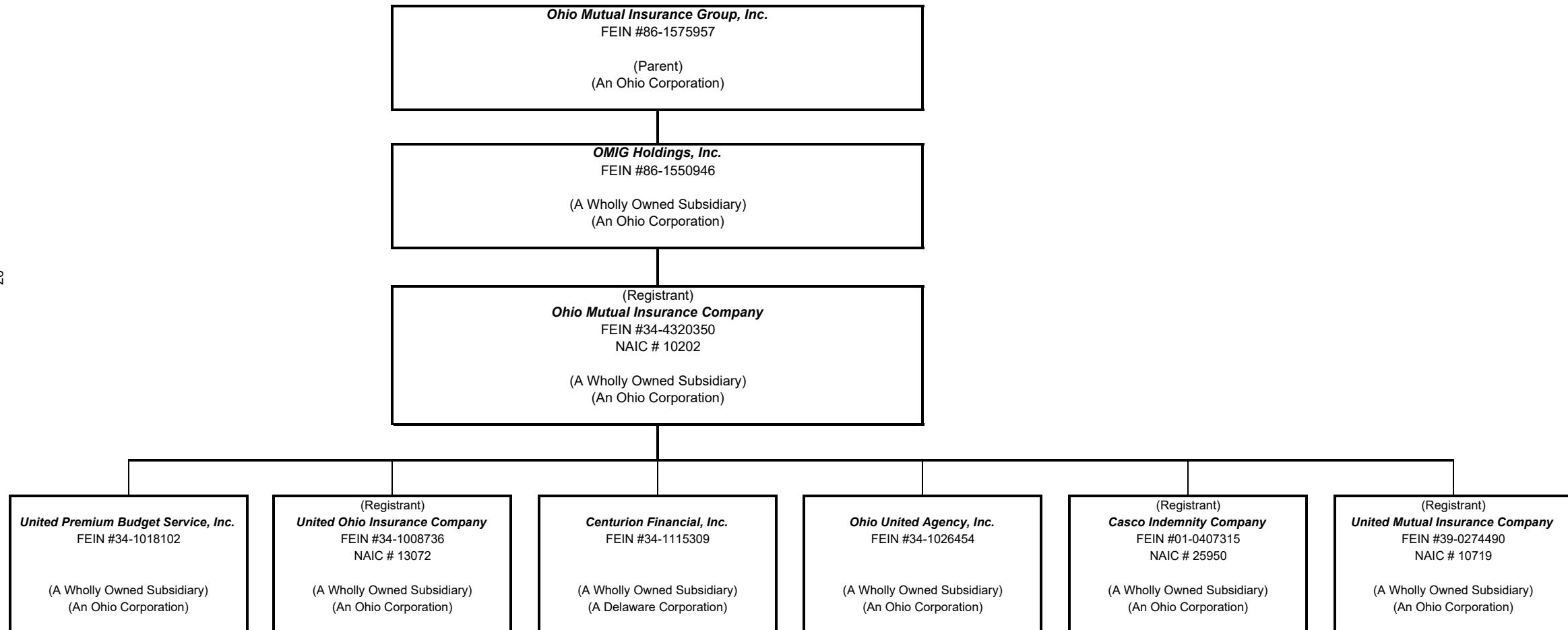
(b) Explanation of basis of allocation of premiums by states, etc.

Property premiums are determined by location covered. Casualty premiums are determined by insured address.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART

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Ohio Mutual Insurance Group



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE Ohio Mutual Insurance Company
OVERFLOW PAGE FOR WRITE-INS

NONE