

ANNUAL STATEMENT

For the Year Ended December 31 , 2024

OF THE CONDITION AND AFFAIRS OF THE

THE EASTERN OHIO MUTUAL FIRE & TORNADO INSURANCE COMPANY

ORGANIZED UNDER THE LAWS OF THE STATE OF OHIO

Made to the

INSURANCE COMMISSIONER OF THE STATE OF OHIO

Pursuant to the Laws thereof

NAIC Company Code

10331

Home Office

3873 Cleveland Rd

Street and Number

Wooster

City

44691

Zip Code

OH

Mail Address

3873 Cleveland Rd

Street and Number

Wooster

City

44691

Zip Code

OH

Main Administrative Office

(330) 345-8100

Telephone Number

Organized

June 21, 1895

Commenced Business

October 1895

Annual Statement Contact Person

Timothy Suppes

Telephone Number

(330) 345-8100

Contact Person Email Address

tim_suppes@wayneinsgroup.com

OFFICERS

President

Timothy Suppes

Vice President

Asst Secretary

James Suppes

Treasurer

Kevin Luster

DIRECTORS

(ALL DIRECTORS MUST BE SHOWN)

Timothy Suppes	Andrew Shod	James Suppes	Edward Gresser
Kevin Luster			

State of Ohio
County of
Wayne

Timothy Suppes

President and

James Suppes

Asst Secretary of the

THE EASTERN OHIO MUTUAL FIRE & TORNADO INSURANCE COMPANY

, being duly sworn each for himself/herself deposes and says, that they are the above described officers of said reporting entity, and that on the reporting period stated above all 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, with the schedules and explanations herein contained, annexed or referred to, is a full and correct 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, according to the best of their information, knowledge and belief, respectively.

Subscribed and sworn to before me, this 26 day of February 2025

Notary Public



President

Secretary

Signature of Person Preparing Statement

ANNUAL STATEMENT FOR THE YEAR

THE EASTERN OHIO MUTUAL FIRE & TORNADO INSURANCE COMPANY

2024

ASSETS

		Assets Current Year	Nonadmitted Assets Current Year	Net Admitted Assets Current Year	Net Admitted Assets Prior Year
1	Bonds (Schedule D - Part 1)	0.00	0.00	0.00	0.00
2	Preferred stocks, common stocks and mutual funds (Schedule D - Part 2)	0.00	0.00	0.00	14,731.32
3	Real estate (less liens, encumbrances) (Schedule A)	0.00	0.00	0.00	16,827.98
4	Cash (Schedule E)	0.00	0.00	0.00	435,090.22
5	Short-term investments		0.00	0.00	
6	Aggregate write-ins for invested assets		0.00	0.00	
7	Subtotals, cash and invested assets	0.00	0.00	0.00	466,649.52
8	Investment income due and accrued		0.00	0.00	
9.1	Assessments or premiums in the course of collection (including agents balances)		0.00	0.00	
9.2	Deferred premiums, agents' balances and installments booked but deferred and not yet due		0.00	0.00	
9.3	Earned but unbilled premiums (post assessment)		0.00	0.00	
10.1	Amounts recoverable from reinsurers		0.00	0.00	
10.2	Funds held by or deposited with reinsured companies		0.00	0.00	
11.1	Current federal income tax recoverable and interest thereon		0.00	0.00	
11.2	Net deferred tax asset		0.00	0.00	
12	Electronic data processing equipment and software		0.00	0.00	
13	Furniture and equipment		0.00	0.00	
14	Receivables from parent, subsidiaries and affiliates		0.00	0.00	
15	Aggregate write-ins for other than invested assets	0.00	0.00	0.00	0.00
16	Total Assets	0.00	0.00	0.00	466,649.52
	Details of Write-Ins for Assets:				
1501				0.00	
1502				0.00	
1503				0.00	
1598	Summary or remaining write-ins from overflow page	0.00	0.00	0.00	0.00
1599	Total aggregate write-ins	0.00	0.00	0.00	0.00

ANNUAL STATEMENT FOR THE YEAR
THE EASTERN OHIO MUTUAL FIRE & TORNADO INSURANCE COMPANY

2024

LIABILITIES, SURPLUS AND OTHER FUNDS

		Current Year	Prior Year
1	Unpaid Losses (Underwriting Exhibit - Part 2A)	0.00	7,000.00
2	Unpaid loss adjustment expenses (Underwriting Exhibit - Part 2A)	0.00	0.00
3	Commissions due and payable to agents		-1,004.54
4	Other expenses (excluding taxes, licenses and fees)		5,344.82
5	Taxes, licenses and fees (excluding federal income taxes)		
6	Current federal income taxes (including \$0 on realized capital gains (losses))		10,399.00
7	Net deferred tax liability		
8	Borrowed money and interest thereon		
9	Unearned assessment/premium reserve		97,212.20
10	Advance premium		
11	Ceded reinsurance premiums payable		21,666.00
12	Funds held by company under reinsurance treaties		
13	Amounts withheld or retained by company for account of others		-5,637.16
14	Provision for unauthorized reinsurance		
15	Payable to parent, subsidiaries and affiliates		
16	Aggregate write-ins for liabilities	0.00	0.00
17	Total liabilities	0.00	134,980.32
18	Surplus as regards policyholders	0.00	331,669.20
19	Total liabilities and surplus	0.00	466,649.52
	Details of Write-Ins for Liabilities:		
1601			
1602			
1603			
1698	Summary or remaining write-ins from overflow page	0.00	0.00
1699	Total aggregate write-ins	0.00	0.00

ANNUAL STATEMENT FOR THE YEAR
THE EASTERN OHIO MUTUAL FIRE & TORNADO INSURANCE COMPANY
STATEMENT OF INCOME

2024

		Current Year	Prior Year
	UNDERWRITING INCOME		
1.1	Gross Assessments/Premiums earned	448.00	775,647.05
1.2	Less: Return Assessments/Premiums earned	0.00	116,971.00
1.3	Direct Assessments/Premiums earned	448.00	658,676.05
1.4	Deduct premiums for reinsurance ceded (Reinsurance Schedule)	0.00	259,429.36
1.5	Add premiums received for reinsurance assumed (Reinsurance Schedule)	0.00	
1.6	Net Assessments/Premiums earned	448.00	399,246.69
	DEDUCTIONS		
2	Losses incurred (Underwriting Exhibit - Part 2)	3,220.17	246,054.57
3	Loss expenses incurred (Expense Exhibit)	1,326.62	23,133.05
4	Other underwriting expenses incurred (Expense Exhibit)	221,238.40	281,823.61
5	Aggregate write-ins for underwriting deductions	0.00	0.00
6	Total underwriting deductions	225,785.19	551,011.23
7	Net underwriting gain (loss)	-225,337.19	-151,764.54
	INVESTMENT INCOME		
8	Net investment income earned	13,995.46	20,954.99
9	Net realized capital gains (losses) less capital gains tax	58,682.38	78,398.93
10	Net investment gain (loss)	72,677.84	99,353.92
	OTHER INCOME		
11	Net gain (loss) from agents' or premium balances charged off		
12	Finance and service charges not included in premiums		
13	Aggregate write-ins for miscellaneous income	54,567.22	34,376.65
14	Total other income	54,567.22	34,376.65
15	Net income, after capital gains tax and before federal income taxes	-98,092.13	-18,033.97
16	Federal income taxes incurred	56.00	13,428.00
17	Net income	-98,148.13	-31,461.97
	SURPLUS ACCOUNT		
18	Surplus as regards policyholders, December 31 prior year	331,669.20	418,066.00
19	Net income	-98,148.13	-31,461.97
20	Change in net unrealized capital gains or (losses) less capital gains tax	1,506.90	-55,450.58
21	Change in net deferred income tax		
22	Change in nonadmitted assets (Exhibit of Nonadmitted Assets)	4,558.25	515.75
23	Change in provision for reinsurance		
24	Aggregate write-ins for gains and losses in surplus	-239,586.22	0.00
25	Change in surplus as regards policyholders for the year	-331,669.20	-86,396.80
26	Surplus as regards policyholders, December 31 current year	0.00	331,669.20
	DETAILS OF WRITE-INS		
0501			
0502			
0503			
0599	Total Aggregate write-ins for underwriting deductions	0.00	0.00
1301	Commissions	11,578.17	6,573.23
1302	Miscellaneous	42,989.05	27,803.42
1303			
1304			
1399	Total Aggregate write-ins for miscellaneous income	54,567.22	34,376.65
2401	Surplus to Washington Mutual Insurance in Merger	-239,586.22	
2402			
2499	Total Aggregate write-ins for gains and losses in surplus	-239,586.22	0.00

ANNUAL STATEMENT FOR THE YEAR
THE EASTERN OHIO MUTUAL FIRE & TORNADO INSURANCE COMPANY

2024

CASH FLOW STATEMENT

		Current Year	Prior Year
Cash from Operations			
1	Premiums/Assessments collected net of reinsurance	-118,430.20	197,930.89
2	Net investment income	14,728.53	29,076.09
3	Miscellaneous income	54,567.22	34,376.65
4	Total	-49,134.45	261,383.63
5	Benefit and loss related payments	10,220.17	239,054.57
6	Commissions, expenses paid and aggregate write-ins for deductions	226,905.30	349,008.54
7	Federal and foreign income taxes paid (recovered)	17,055.00	490.00
8	Total	254,180.47	588,553.11
9	Net cash from operations	-303,314.92	-327,169.48
Cash from Investments			
10	Proceeds from investments sold, matured or repaid:		
10.1	Bonds		202,090.21
10.2	Stocks	66,000.00	335,410.78
10.3	Real estate	28,171.04	
10.4	Net gains (losses) on cash, cash equivalents and short- term investments		
10.5	Miscellaneous proceeds		
10.6	Total investment proceeds	94,171.04	537,500.99
11	Cost of investments acquired (long-term only):		
11.1	Bonds		
11.2	Stocks		1,458.04
11.3	Real estate	14,927.83	
11.4	Miscellaneous applications		
11.5	Total investments acquired	14,927.83	1,458.04
11.6	Net cash from investments	79,243.21	536,042.95
Cash from Financing and Miscellaneous Sources			
12.1	Borrowed funds (cash provided/applied)		
12.2	Other cash provided (applied)	-211,018.51	515.75
13	Net cash from financing and miscellaneous sources	-211,018.51	515.75
RECONCILLIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
14	Net change in cash, cash equivalents and short-term investments	-435,090.22	209,389.22
15.1	Beginning of year (cash, cash equivalents and short-term investments)	435,090.22	225,701.00
15.2	End of year (cash, cash equivalents and short-term investments)	0.00	435,090.22

ANNUAL STATEMENT FOR THE YEAR
THE EASTERN OHIO MUTUAL FIRE & TORNADO INSURANCE COMPANY

2024

EXPENSE EXHIBIT

		Current Year
	Claim Adjusting:	
1.1	Direct	0.00
1.2	Reinsurance assumed	0.00
1.3	Reinsurance ceded excluding contingent (commission and brokerage)	0.00
1.4	Net claim adjusting	0.00
	Commission and Brokerage:	
2.1	Direct commission and brokerage	0.00
2.2	Reinsurance assumed excluding contingent	0.00
2.3	Reinsurance ceded excluding contingent (commission and brokerage)	0.00
2.4	Contingent - direct (commission and brokerage)	0.00
2.5	Contingent - reinsurance assumed (commission and brokerage)	0.00
2.6	Contingent - reinsurance ceded (commission and brokerage)	0.00
2.7	Policy and membership fees (commission and brokerage)	0.00
2.8	Net commission and brokerage	0.00
3	Allowances to managers and agents	40.38
4	Advertising	0.00
5	Boards, bureaus and associations	700.60
6	Surveys and underwriting reports	0.00
7	Audit of assureds' records	0.00
	Salary and related items:	
8.1	Salaries	84,351.70
8.2	Payroll taxes	7,313.10
9	Employee relations and welfare	39,010.50
10	Insurance	17,085.81
11	Directors' fees	
12	Travel and travel items	647.14
13	Rent and rent items	4,470.36
14	Equipment	0.00
15	Cost or depreciation of EDP equipment and software	4,558.25
16	Printing and stationery	2,940.38
17	Postage, telephone, exchange and express	985.70
18	Legal and auditing	15,402.50
19	Loss adjustment expenses	1,326.62
18	Investment expenses	0.00
19	Totals	178,833.04
	Taxes, licenses and fees:	
20.1	State and local insurance taxes	
20.2	Insurance department licenses and fees	4,350.00
20.3	All other (excluding federal income and real estate)	0.00
20.4	Total taxes, licenses and fees	4,350.00
21	Real estate expenses	1,838.74
22	Real estate taxes	996.63
23	Aggregate write-ins for miscellaneous expenses	36,546.61
24	Total expenses incurred (a)	222,565.02
25	Less unpaid expenses - current year	
26	Add unpaid expenses - prior year	4,340.28
27	Total expenses paid	226,905.30
	Details of Write-Ins:	
2301	Bank Fees	1,677.43
2302	Utilities	1,644.18
2303	Management Services	33,225.00
2304		
2305		
2399	Total Write-ins	36,546.61

(a) Includes management fees of \$0 to affiliates and \$0 to non-affiliates

ANNUAL STATEMENT FOR THE YEAR2024

THE EASTERN OHIO MUTUAL FIRE & TORNADO INSURANCE COMPANY

INSURANCE IN FORCE

		Amount (dollars)	Number
1	In force December 31 of previous year (to equal prior year's statement)	4,000	4
2	Written during the year		
3	Total	4,000	4
4	Deduct those expired and cancelled	4,000	4
5	In force December 31 of current year	0	0
6	Deduct amount reinsured	0	XXX
7	Net amount in force	0	XXX

UNDERWRITING EXHIBIT - PART 2
LOSSES INCURRED

1	2	3	4	5	6
Lines of Business	Direct Losses Incurred	Losses Incurred on Reinsurance Assumed	Deduct: Reinsurance Recovered on Incurred Losses	Deduct: Salvage and Subrogation Converted To Cash	* Net Losses Incurred Columns 2 and 3 minus Columns 4 and 5
Property	3,220.17				3,220.17
					-
					-
					-
					-
					-
OVERFLOW AMOUNTS					-
Totals	\$ 3,220.17	\$ -	\$ -	\$ -	\$ 3,220.17

* Total should equal Line 2, Page 4, Current Year.

UNDERWRITING EXHIBIT - PART 2A
UNPAID LOSSES and LOSS ADJUSTMENT EXPENSES

1	2	3	4	5	6
Lines of Business	Direct Unpaid Losses	Unpaid Losses on Reinsurance Assumed	Deduct: Reinsurance Recoverable on Unpaid Losses	** Unpaid Loss Adjustment Expenses	*** Net Unpaid Losses Columns 2 and 3 minus Column 4
					-
					-
					-
					-
					-
					-
OVERFLOW AMOUNTS					-
Totals	\$ -	\$ -	\$ -	\$ -	\$ -

** Total should equal Line 2, Page 3, Current Year.

*** Total should equal Line 1, Page 3, Current Year.

EXHIBIT OF NONADMITTED ASSETS

		Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets
1	Bonds			0.00
2	Preferred and common stocks and mutual funds			0.00
3	Real estate (less liens, encumbrances)			0.00
4	Cash			0.00
5	Short-term investments			0.00
6	Aggregate write-ins for invested assets			0.00
7	Subtotals, cash and invested assets	0.00	0.00	0.00
8	Investment income due and accrued			0.00
9.1	Assessments or premiums in the course of collection (including agents balances)			0.00
9.2	Premium receivable for advance pay			0.00
9.3	Earned but unbilled premiums (post assessment)			0.00
10.1	Amounts recoverable from reinsurers			0.00
10.2	Funds held by or deposited with reinsured companies			0.00
11.1	Current federal income tax recoverable and interest thereon			0.00
11.2	Net deferred tax asset			0.00
12	Electronic data processing equipment and software			0.00
13	Furniture and equipment		4,558.25	4,558.25
14	Receivables from parent, subsidiaries and affiliates			0.00
15	Aggregate write-ins for other than invested assets	0.00	0.00	0.00
16	Total Assets	0.00	4,558.25	4,558.25
	Details of Write-Ins for Assets:			
1501		0.00	0.00	0.00
1502		0.00	0.00	0.00
1503		0.00	0.00	0.00
1598	Summary or remaining write-ins from overflow page	0.00	0.00	0.00
1599	Total aggregate write-ins	0.00	0.00	0.00

SCHEDULE A

Showing All Real Estate OWNED December 31 of Current Year

1	2	3	4	5	6	7	8	9	10
Description of Property	Date Acquired	Name of Vendor	Actual Cost	Current Year Acquisitions or Permanent Improvements	Accumulated Depreciation	Amount of Encumbrances	Book Value End of Current Year (Col. 4+5-6-7) *	Gross Income Current Year (Real Estate)	Gross Expenses Current Year (Real Estate)
							-		
							-		
							-		
							-		
							-		
OVERFLOW AMOUNTS							-		
Totals	XXX	XXX	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

*Total to agree with Page 2, Line 3, Current Year.

FURNITURE, FIXTURES and AUTOMOBILES

Showing All Furniture, Fixtures and Automobiles OWNED December 31 of Current Year

1	2	3	4	5	6	7	8
Description	Date Acquired	Name of Vendor	Actual Cost	Current Year Acquisitions or Permanent Improvements	Accumulated Depreciation	Amount of Encumbrances	Book Value End of Current Year (Col. 4+5-6-7)
							-
							-
							-
							-
							-
							-
							-
							-
							-
							-
							-
							-
							-
OVERFLOW AMOUNTS							-
Totals	XXX	XXX	\$ -	\$ -	\$ -	\$ -	\$ -

XXX	Totals		XXX		XXX		XXX		\$	-	\$	-	\$	-	
-----	--------	--	-----	--	-----	--	-----	--	----	---	----	---	----	---	--

*The items with reference to each issue of bonds or stocks acquired at public offerings may be totaled in one line and the word "various" inserted in Columns 2 and 3.

REINSURANCE SCHEDULE
Reinsurance Ceded and Reinsurance Assumed

[illegible]

*Total to agree with Page 4, Line 1.4, Current Year.
 **Total to agree with Page 4, Line 1.5, Current Year.

COMPENSATION SCHEDULE

Show all salaries, commissions, claim adjustment expenses, directors fees and expenses, and travel items paid in the current year for the top 5 officers/employees and all directors, travel or car allowances, if paid, are to be included.

1	2	3	4	5 Claim Adjustment Expenses	6 Directors Fees & Expenses	7 Travel & Travel Items	8 All Other	9
Name of Payee	Title	Salaries	Commissions					Total
Officers/Employees:								\$ -
Kevin Luster	Secretary / Treasurer	57,243.42						\$ 57,243.42
								\$ -
4)								\$ -
5)								\$ -
								\$ -
Directors:								
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
Totals	XXXX	\$ 57,243.42	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 57,243.42

GENERAL INTERROGATORIES

(Answer all questions and attach additional sheets if necessary.)

1. Company's retention: Fire _____ Wind _____ Other _____

1a. Retention before reinsurance applies for: Catastrophe Reinsurance _____ Aggregate excess of loss _____

2. What is the largest risk assumed and retained: _____

3. What kind of perils are being covered? _____

4. Have the by-laws been amended during the current year? _____ NO _____ If so, were such amendments filed with the Ohio Department of Insurance? _____ NO _____

5. In what counties does the Company operate: _____

6. Name of Principal Officer and amount of bond. _____ TIMOTHY SUPPES \$250,000

7. Are all of the persons who handle funds of the Company bonded? _____ Yes _____ No _____
State the name and amount of each bond on each, except person named in Item 6 above. _____

8. Does the Company have an annual audit conducted by an independent CPA? _____

9. State the number of members holding policies in the Company. _____ 0 _____

10. Was an annual report of the Company made available to each policyholder? _____ YES _____ If so, did such report agree with the annual statement filed with the Ohio Department of Insurance? _____ YES _____

11. State as of what date the latest examination of the Company was made by the Ohio Department of Insurance. _____ 12/31/2019

12. How many assessments were made during the year? _____ 0 _____ Date of last assessment _____ 12/31/2023

13. Did the assessment provide for all losses, expenses and all other liabilities prior to the date of assessment? _____

14. Rate of policy fee _____

15. State the amount of borrowed money since date of last assessment _____ 0 interest thereon _____ N/A

16. Does any person, firm, corporation or association have any claim, contingent or otherwise, against this Company which is NOT included in the liabilities on page 2 of this statement? _____ Yes _____ No _____ X _____
If yes, give the amount, terms for payment and reasons why such were not recorded as a liability on page 2 of this statement. _____

2024

Showing All Balances (according to Company's Records) Carried in Each Bank or Savings and Loan

All Columns Must Be Completed for Each Deposit, CD, Checking Account, etc.

*Total to agree with Page 2, Line 4, Current Year.

ORGANIZATIONAL CHART

LIST ALL ENTITIES THAT ARE MEMBERS OF AN INSURANCE COMPANY HOLDING SYSTEM AS
DEFINED IN ORC 3901.32

ANNUAL STATEMENT FOR THE YEAR
THE EASTERN OHIO MUTUAL FIRE & TORNADO INSURANCE COMPANY
Overflow Page for Write-ins

2024

Additional Write-ins for Assets:

		Assets Current Year	Nonadmitted Assets Current Year	Net Admitted Assets Current Year	Net Admitted Assets Prior Year
1504				0.00	
1505	NONE			0.00	
1506				0.00	
1597	Summary of remaining write-ins for Line 15 page 2	0.00	0.00	0.00	0.00

Additional Write-ins for Liabilities:

		Current Year	Prior Year
1604			
1605	NONE		
1606			
1697	Summary of remaining write-ins for Line 16 page 3	0.00	0.00

Additional Write-ins for Statement of Income:

		Current Year	Prior Year
	NONE		
	Summary of remaining write-ins for Statement of Income page 4	0.00	0.00

Additional Write-ins for Nonadmitted Assets:

		Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets
1504				0.00
1505	NONE			0.00
1506				0.00
1597	Summary of remaining write-ins for Line 15 page 9	0.00	0.00	0.00

Overflow Page for Investments Owned
SCHEDULE D - PART 1

Showing all BONDS Owned on December 31 of Current Year

1 Cusip #	2 Description Give complete and accurate description of all bonds owned.	3 From Whom Acquired	4 Date Acquired	5 Par Value	6 Actual Cost	7 Book Value / Amortized Value*	8 Market Value December 31 of Current Year	Interest			12 Increase by Adjustment, in Book Value During Year	13 Decrease by Adjustment, in Book Value During Year	14 Amount of Interest due and accrued Dec. 31, Current year, on bonds in default as to principal or interest	15 Maturity Date	16 NAIC Designation
								9 Rate (%)	10 Amount Due and Accrued Dec. 31 of Current Year on bonds not in default	11 Gross Am't Received During Year					
XXX	Totals to Page 11	XXX	XXX	\$ -	\$ -	\$ -	\$ -	XXX	\$ -	\$ -	\$ -	\$ -	\$ -	XXX	XXX
* Annual Statement Value															

SCHEDULE D - PART 2

Showing all Preferred & Common Stocks and Mutual Funds Owned December 31 of Current Year

1	2 Description	3	4	5	6	7	8 Rate	9	10	Dividends		13	14
---	------------------	---	---	---	---	---	-----------	---	----	-----------	--	----	----

[illegible]