



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

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

United Mutual Insurance Company

NAIC Group Code 0963 0963 NAIC Company Code 10719 Employer's ID Number 39-0274490
(Current) (Prior)

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

Incorporated/Organized 06/16/1878 Commenced Business 06/16/1878

Statutory Home Office 1725 Hopley Avenue, Bucyrus, OH, US 44820-0111
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office _____ 1725 Hopley Avenue
(Street and Number)
Bucyrus, OH, US 44820-0111 _____, 419-562-3011
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 1725 Hopley Avenue, Bucyrus, OH, US 44820-0111
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records _____ 1725 Hopley Avenue
(City or Town, State, Country and Zip Code) (Street and Number)
Bucyrus, OH, US 44820-0111 _____, _____ 419-562-3011
(Area Code) (Telephone Number)

Internet Website Address www.unitedmutualinsurance.com

Statutory Statement Contact _____ Teri Ann Miller _____ 419-563-0697

(Name) _____ (Area Code) (Telephone Number)
tmiller@omig.com _____ 877-753-0580
(E-mail Address) _____ (FAX Number)

OFFICERS

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

Todd Marshall Boyer, Vice President Corporate Communications	OTHER Chad Philip Combs, Vice President Personal Lines Underwriting	John Richard DeLucia, Vice President Claims
David Alan Grove, Vice President Product Management James Brady McCormack, Vice President Information Systems	Gary Thomas Johnson, Vice President Commercial Lines Underwriting Mendi Harris Riddle, Vice President Sales	Susan Elizabeth Kent, Vice President Business Analytics 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 County of Crawford SS

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

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



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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0963	BUSINESS IN THE STATE OF Ohio		DURING THE YEAR 2024							NAIC Company Code	10719	
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 1 Direct Premiums Written	4 2 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Unearned Premium Reserves	6 Direct Losses Paid (deducting salvage)	7 Direct Losses Incurred	8 Direct Losses Unpaid	9 Direct Defense and Cost Containment Expense Paid	10 Direct Defense and Cost Containment Expense Incurred	11 Direct Defense and Cost Containment Expense Unpaid	12 Commissions and Brokerage Expenses
		1 Direct Premiums Written	2 Dividends Paid or Credited to Policyholders on Direct Business										
1. Fire													
2.1 Allied Lines													
2.2 Multiple Peril Crop													
2.3 Federal Flood													
2.4. Private Crop													
2.5 Private Flood													
3. Farmersowners Multiple Peril													
4. Homeowners Multiple Peril													
5.1 Commercial Multiple Peril (Non-Liability Portion)													
5.2 Commercial Multiple Peril (Liability Portion)													
6. Mortgage Guaranty													
8. Ocean Marine													
9.1 Inland Marine													
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) ind (b)													
13.2 Comprehensive (hospital and medical) group (b)													
14. Credit A&H (Group and Individual)													
15.1 Vision Only (b)													
15.2 Dental Only (b)													
15.3 Disability Income (b)													
15.4 Medicare Supplement (b)													
15.5 Medicaid Title XIX (b)													
15.6 Medicare Title XVIII (b)													
15.7 Long-Term Care (b)													
15.8 Federal Employees Health Benefits Plan (b)													
15.9 Other Health (b)													
16. Workers' Compensation													
17.1 Other Liability - Occurrence													
17.2 Other Liability - Claims-Made													
17.3 Excess Workers' Compensation													
18.1 Products Liability - Occurrence													
18.2 Products Liability - Claims-Made													
19.1 Private Passenger Auto No-Fault (Personal Injury Protection)													
19.2 Other Private Passenger Auto Liability													
19.3 Commercial Auto No-Fault (Personal Injury Protection)													
19.4 Other Commercial Auto Liability													
21.1 Private Passenger Auto Physical Damage													
21.2 Commercial Auto Physical Damage													
22. Aircraft (all perils)													
23. Fidelity													
24. Surety													
26. Burglary and Theft													
27. Boiler and Machinery													
28. Credit													
29. International													
30. Warranty													
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)													
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) Finance and service charges not included in Lines 1 to 35 \$

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



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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0963	BUSINESS IN THE STATE OF Wisconsin		DURING THE YEAR 2024							NAIC Company Code	10719	
Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1 Direct Premiums Written	2 Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire	493,023		480,373		256,998	263,833	248,282	7,500	7,500			70,898	10,642
2.1 Allied Lines	804,951		754,553		436,994	135,361	139,819	18,876	9,854	9,854		120,459	17,376
2.2 Multiple Peril Crop													
2.3 Federal Flood													
2.4. Private Crop													
2.5 Private Flood													
3. Farmers Multiple Peril	2,800,912		2,640,957		1,467,519	1,434,682	1,529,922	323,333	41,088	41,088		419,079	60,458
4. Homeowners Multiple Peril	3,487,690		3,074,769		1,933,701	1,829,867	1,535,576	462,500	56,909	56,909	12,000	508,878	75,283
5.1 Commercial Multiple Peril (Non-Liability Portion)	319,441		286,581		171,430	48,851	52,351	15,500	1,960	1,960		48,766	6,895
5.2 Commercial Multiple Peril (Liability Portion)													
6. Mortgage Guaranty													
8. Ocean Marine													
9.1 Inland Marine													
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) Ind (b)													
13.2 Comprehensive (hospital and medical) group (b)													
14. Credit A&H (Group and Individual)													
15.1 Vision Only (b)													
15.2 Dental Only (b)													
15.3 Disability Income (b)													
15.4 Medicare Supplement (b)													
15.5 Medicaid Title XIX (b)													
15.6 Medicare Title XVIII (b)													
15.7 Long-Term Care (b)													
15.8 Federal Employees Health Benefits Plan (b)													
15.9 Other Health (b)													
16. Workers' Compensation													
17.1 Other Liability - Occurrence	43,199		37,747		25,263							6,902	.932
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	109,234		21,863		87,371		50,000	50,000	25,000	25,000	17,686	2,358	
19.3 Commercial Auto No-Fault (Personal Injury Protection)													
19.4 Other Commercial Auto Liability													
21.1 Private Passenger Auto Physical Damage	164,998		32,697		132,241	14,223	54,223	40,000	12	12,012	12,000	26,705	3,560
21.2 Commercial Auto Physical Damage													
22. Aircraft (all perils)													
23. Fidelity													
24. Surety													
26. Burglary and Theft	105		3			102						17	2
27. Boiler and Machinery													
28. Credit													
29. International													
30. Warranty													
31. Reins nonproportional assumed property	XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business													
35. Total (a)	8,223,493		7,329,543		4,511,619	3,726,817	3,610,173	910,209	117,323	154,323	49,000	1,219,390	177,506
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) Finance and service charges not included in Lines 1 to 35 \$ 326,969

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



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

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code	0963	BUSINESS IN THE STATE OF		Grand Total	DURING THE YEAR		2024	NAIC Company Code	10719					
		Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken	3	4	5	6	7	8	9	10	11	12
		1	2	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees	
1. Fire	493,023		480,373		256,998	263,833	248,282	7,500	7,500	7,500	7,500	70,898	10,642	
2.1 Allied Lines	804,951		754,553		436,994	135,361	139,819	18,876	9,854	9,854	9,854	120,459	17,376	
2.2 Multiple Peril Crop														
2.3 Federal Flood														
2.4 Private Crop														
2.5 Private Flood														
3. Farmowners Multiple Peril	2,800,912		2,640,957		1,467,519	1,434,682	1,529,922	323,333	41,088	41,088	41,088	41,088	419,079	60,458
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5.1 Commercial Multiple Peril (Non-Liability Portion)	319,441		286,581		171,430	48,851	52,351	15,500	1,960	1,960	1,960	1,960	48,766	6,895
5.2 Commercial Multiple Peril (Liability Portion)														
6. Mortgage Guaranty														
8. Ocean Marine														
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10. Financial Guaranty														
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11.2 Medical Professional Liability - Claims-Made														
12. Earthquake														
13.1 Comprehensive (hospital and medical) Ind (b)														
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18.1 Products Liability - Occurrence														
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19.1 Private Passenger Auto No-Fault (Personal Injury Protection)														
19.2 Other Private Passenger Auto Liability	109,234		21,863		87,371		50,000	50,000	25,000	25,000	25,000	25,000	17,686	2,358
19.3 Commercial Auto No-Fault (Personal Injury Protection)														
19.4 Other Commercial Auto Liability														
21.1 Private Passenger Auto Physical Damage	164,998		32,697		132,241	14,223	54,223	40,000	12	12,012	12,012	12,000	26,705	3,560
21.2 Commercial Auto Physical Damage														
22. Aircraft (all perils)														
23. Fidelity														
24. Surety														
26. Burglary and Theft	105		3			102							17	2
27. Boiler and Machinery														
28. Credit														
29. International														
30. Warranty														
31. Reins nonproportional assumed property	XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX		XXX		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business														
35. Total (a)	8,223,493		7,329,543		4,511,619	3,726,817	3,610,173	910,209	117,323	154,323	49,000	1,219,390	177,506	
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) Finance and service charges not included in Lines 1 to 35 \$ 326,969

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

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

SCHEDULE F - PART 1

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On		8	9	10	11	12	13	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE								
34-4320350	10202	OHIO MUTUAL INSURANCE COMPANY	OH	12,292		1,841	1,841	1,841		6,171				
0199999	Affiliates - U.S. Intercompany Pooling			12,292		1,841	1,841			6,171				
0499999	Total - U.S. Non-Pool													
0799999	Total - Other (Non-U.S.)													
0899999	Total - Affiliates			12,292		1,841	1,841			6,171				
1299999	Total - Pools and Associations													
9999999	Totals			12,292		1,841	1,841			6,171				

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

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

NONE

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

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties	
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commiss- ions	15 Columns 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers			
34-4320350 ..	10202 ..	OHIO MUTUAL INSURANCE COMPANY	OH.....		7,564			705		195		4,351		5,251				5,251		
0199999 ..	Total Authorized - Affiliates - U.S. Intercompany Pooling				7,564			705		195		4,351		5,251				5,251		
0499999 ..	Total Authorized - Affiliates - U.S. Non-Pool																			
0799999 ..	Total Authorized - Affiliates - Other (Non-U.S.)																			
0899999 ..	Total Authorized - Affiliates				7,564			705		195		4,351		5,251				5,251		
06-1182357 ..	22730 ..	ALLIED WORLD INSURANCE COMPANY	NH.....		22															
36-2661954 ..	10103 ..	AMERICAN AGRICULTURAL INSURANCE COMPANY	IN.....		16															
06-1430254 ..	10348 ..	ARCH REINSURANCE COMPANY	DE.....		23															
42-0234980 ..	21415 ..	EMPLOYERS MUTUAL CASUALTY CO	IA.....		1														(1)	
05-0316605 ..	21482 ..	FACTORY MUTUAL INSURANCE COMPANY	RI.....		211				10				113		123		37 .....		.86
42-0245840 ..	13897 ..	FARMERS MUTUAL HAIL INSURANCE COMPANY	IA.....		2															
13-2673100 ..	22039 ..	GENERAL REINSURANCE CORPORATION	DE.....		105								41 .....		.41		7 .....		.34
47-0698507 ..	23680 ..	ODYSSEY REINSURANCE COMPANY	CT.....		14															
52-1952955 ..	10357 ..	RENAISSANCE REINSURANCE US INC	MD.....		1															
13-1675535 ..	25364 ..	SWISS REINSURANCE AMERICA CORPORATION	NY.....		34														(1)	
13-3031176 ..	38636 ..	PARTNER REINSURANCE COMPANY OF THE U.S.	NY.....																	
23-2423138 ..	23850 ..	TOKIO MARINE SPECIALTY INS CO	DE.....		7														2	
43-0613000 ..	23388 ..	SHELTER MUTUAL INSURANCE COMPANY	MO.....		7															
0999999 ..	Total Authorized - Other U.S. Unaffiliated Insurers				443				10					160		170		50		120
AA-9995035 ..	00000 ..	MUTUAL REINSURANCE BUREAU	IL.....		19															
1199999 ..	Total Authorized - Pools - Voluntary Pools				19															
AA-1126609 ..	00000 ..	LLOYD'S SYNDICATE #0609	GBR.....		2															
AA-1128121 ..	00000 ..	LLOYD'S SYNDICATE #2121	GBR.....		5															
AA-1120171 ..	00000 ..	LLOYD'S SYNDICATE #1856	GBR.....		7															
AA-1126004 ..	00000 ..	LLOYD'S SYNDICATE #4444	GBR.....		9															
1299999 ..	Total Authorized - Other Non-U.S. Insurers				23															
1499999 ..	Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)				8,049				715		195		4,511		5,421		50		5,371	
1899999 ..	Total Unauthorized - Affiliates - U.S. Non-Pool																			
2199999 ..	Total Unauthorized - Affiliates - Other (Non-U.S.)																			
2299999 ..	Total Unauthorized - Affiliates																			
AA-1340004 ..	00000 ..	R&V VERSICHERUNG AG	DEU.....		53															
2699999 ..	Total Unauthorized - Other Non-U.S. Insurers				53															
2899999 ..	Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)				53															
3299999 ..	Total Certified - Affiliates - U.S. Non-Pool																			
3599999 ..	Total Certified - Affiliates - Other (Non-U.S.)																			
3699999 ..	Total Certified - Affiliates																			
4299999 ..	Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																			
4699999 ..	Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool																			
4999999 ..	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)																			
5099999 ..	Total Reciprocal Jurisdiction - Affiliates																			
RJ-3191435 ..	00000 ..	CONDUIT REINS LTD	BMU.....		17															
RJ-1120191 ..	00000 ..	CONVEX INS UK LTD	GBR.....		27												1		(1)	
RJ-3191400 ..	00000 ..	CONVEX RE LTD	BMU.....		10															
RJ-3194122 ..	00000 ..	DAVINCI REINSURANCE LTD	BMU.....		10															
RJ-3191289 ..	00000 ..	FIDELIS INSURANCE BERMUDA LTD	BMU.....		35												1		(1)	
RJ-3190339 ..	00000 ..	RENAISSANCE REINSURANCE LTD	BMU.....		10															

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

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									16 Amount in Dispute included in Column 15	17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers	19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals					
RJ-3191388 ..	.00000 ..	VERMEER REINSURANCE LTD	BMU .....		.12														
5499999. Total Reciprocal Jurisdiction - Other Non-U.S. Insurers					121												2		(2)
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 50999999, 5199999, 5299999, 5399999 and 5499999)					121												2		(2)
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)					8,223				715		195		4,511		5,421		52		5,369
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)					8,223				715		195		4,511		5,421		52		5,369
9999999 Totals																			41

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

SCHEDULE F - PART 3 (Continued)Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Credit Risk)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk										36 Credit Risk on Un- collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)		
		21	22	23	24				Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Recoverable (Col. 28 * 120%)	30	31	32	33	34	
34-4320350 ..	OHIO MUTUAL INSURANCE COMPANY .....	.....	.....	.....	.....	.....	5,251	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling	XXX	.....	.....	.....	5,251	.....	.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0499999. Total Authorized - Affiliates - U.S. Non-Pool	XXX	.....	.....	.....	.....	.....	.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0799999. Total Authorized - Affiliates - Other (Non-U.S.)	XXX	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX	.....	.....	.....	.....
0899999. Total Authorized - Affiliates	XXX	.....	.....	.....	5,251	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX	.....
06-1182357 .. ALLIED WORLD INSURANCE COMPANY	3.....	.....
36-2661954 .. AMERICAN AGRICULTURAL INSURANCE COMPANY	3.....	.....
06-1430254 .. ARCH RE INSURANCE COMPANY	2.....	.....
42-0234980 .. EMPLOYERS MUTUAL CASUALTY CO	3.....	.....
05-0316605 .. FACTORY MUTUAL INSURANCE COMPANY	37	86	.....	.....	123	148	37	111	.....	.....	.....	.....	.....	111.....	2.....
42-0245840 .. FARMERS MUTUAL HAIL INSURANCE COMPANY	41	49	48	1	.....	.....	.....	.....	.....	4.....	.....
13-2673100 .. GENERAL REINSURANCE CORPORATION	1.....	.....
47-0698507 .. ODYSSEY REINSURANCE COMPANY	2.....	.....
52-1952955 .. RENAISSANCE REINSURANCE US INC	2.....	.....
13-1675535 .. SWISS RE INSURANCE AMERICA CORPORATION	2.....	.....
13-3031176 .. PARTNER REINSURANCE COMPANY OF THE U.S.	4	2	6	7	4	3	.....	.....	.....	2.....	.....
23-2423138 .. TOKIO MARINE SPECIALTY INS CO	3.....	2.....	2.....	.....
43-0613000 .. SHELTER MUTUAL INSURANCE COMPANY	3.....	.....
0999999. Total Authorized - Other U.S. Unaffiliated Insurers	XXX	.....	.....	82	88	.....	.....	170	204	89	115	.....	.....	.....	115	XXX	.....	.....	2
AA-9995035 .. MUTUAL REINSURANCE BUREAU	3.....	.....	.....	.....
1199999. Total Authorized - Pools - Voluntary Pools	XXX	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX	.....	.....
AA-1126609 .. LLOYD'S SYNDICATE #0609	3.....	.....	.....
AA-1128121 .. LLOYD'S SYNDICATE #2121	3.....	.....	.....	.....
AA-1120171 .. LLOYD'S SYNDICATE #1856	3.....	.....	.....	.....
AA-1126004 .. LLOYD'S SYNDICATE #4444	3.....	.....	.....	.....
1299999. Total Authorized - Other Non-U.S. Insurers	XXX	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX	.....	.....
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	XXX	.....	.....	82	5,339	.....	.....	170	204	89	115	.....	.....	.....	115	XXX	.....	.....	2
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool	XXX	.....	.....	.....	.....	.....	.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)	XXX	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX	.....	.....	.....
2299999. Total Unauthorized - Affiliates	XXX	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX	.....	.....	.....
AA-1340004 .. R&V VERSICHERUNG AG	3.....	.....	.....	.....
2699999. Total Unauthorized - Other Non-U.S. Insurers	XXX	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX	.....	.....	.....
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	XXX	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX	.....	.....	.....
3299999. Total Certified - Affiliates - U.S. Non-Pool	XXX	.....	.....	.....	.....	.....	.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3599999. Total Certified - Affiliates - Other (Non-U.S.)	XXX	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX	.....	.....	.....
3699999. Total Certified - Affiliates	XXX	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX	.....	.....	.....
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	XXX	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	XXX	.....	.....	.....

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

SCHEDULE F - PART 3 (Continued)Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)
(Credit Risk)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk										36 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	
		21	22	23	24				Single Beneficiary Trusts & Other Allowable Collateral	Total Funds Held, Payables & Collateral	Net Recoverable Net of Funds Held & Collateral	Applicable Sch. F Penalty (Col. 78)	Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Recoverable (Col. 28 * 120%)	30	31	32	33	34	35	36 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool				XXX									XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)				XXX															XXX		
5099999. Total Reciprocal Jurisdiction - Affiliates				XXX															XXX		
RJ-3191435 .. CONDUIT REINS LTD																			4		
RJ-1120191 .. CONVEX INS UK LTD																			3		
RJ-3191400 .. CONVEX RE LTD																			3		
RJ-3194122 .. DAVINCI REINSURANCE LTD																			3		
RJ-3191289 .. FIDELIS INSURANCE BERMUDA LTD																			3		
RJ-3190339 .. RENAISSANCE REINSURANCE LTD																			2		
RJ-3191388 .. VERMEER REINSURANCE LTD																			3		
5499999. Total Reciprocal Jurisdiction - Other Non-U.S. Insurers				XXX															XXX		
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)				XXX															XXX		
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)				XXX			82	5,339			170	204	89	115				115	XXX	2	
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)				XXX			82	5,339			170	204	89	115				XXX	XXX	XXX	
9999999 Totals				XXX														115	XXX	2	

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

SCHEDULE F - PART 3 (Continued)

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Current	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 43-44)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46+48])	51 Percentage More Than 120 Days Overdue (Col. 41/Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50	
			Overdue																
			37 1 - 29 Days	38 30 - 90 Days	39 91 - 120 Days	40 Over 120 Days	41 Total Overdue Cols. 38+39 +40+41												
34-432030 ..	OHIO MUTUAL INSURANCE COMPANY .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling																			XXX
0499999. Total Authorized - Affiliates - U.S. Non-Pool																			XXX
0799999. Total Authorized - Affiliates - Other (Non-U.S.)																			XXX
0899999. Total Authorized - Affiliates																			XXX
06-1182357 ..	ALLIED WORLD INSURANCE COMPANY .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
36-2661954 ..	AMERICAN AGRICULTURAL INSURANCE COMPANY .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
06-1430254 ..	ARCH REINSURANCE COMPANY .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
42-0234980 ..	EMPLOYERS MUTUAL CASUALTY CO .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
05-0316605 ..	FACTORY MUTUAL INSURANCE COMPANY .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
42-0245840 ..	FARMERS MUTUAL HAIL INSURANCE COMPANY .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
13-2673100 ..	GENERAL REINSURANCE CORPORATION .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
47-0698507 ..	ODYSSEY REINSURANCE COMPANY .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
52-1952955 ..	RENAISSANCE REINSURANCE US INC .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
13-1675535 ..	SWISS REINSURANCE AMERICA CORPORATION .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
13-3031176 ..	PARTNER REINSURANCE COMPANY OF THE U.S. .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
23-2423138 ..	TOKIO MARINE SPECIALTY INS CO .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
43-0613000 ..	SHELTER MUTUAL INSURANCE COMPANY .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
0999999. Total Authorized - Other U.S. Unaffiliated Insurers																			XXX
AA-9995035 ..	MUTUAL REINSURANCE BUREAU .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
1199999. Total Authorized - Pools - Voluntary Pools																			XXX
AA-1126609 ..	LLOYD'S SYNDICATE #0609 .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
AA-1128121 ..	LLOYD'S SYNDICATE #2121 .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
AA-1120171 ..	LLOYD'S SYNDICATE #1856 .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
AA-1126004 ..	LLOYD'S SYNDICATE #4444 .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
1299999. Total Authorized - Other Non-U.S. Insurers																			XXX
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)																			XXX
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool																			XXX
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)																			XXX
2299999. Total Unauthorized - Affiliates																			XXX
AA-1340004 ..	R&V VERSICHERUNG AG .....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	YES.....
2699999. Total Unauthorized - Other Non-U.S. Insurers																			XXX
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)																			XXX
3299999. Total Certified - Affiliates - U.S. Non-Pool																			XXX
3599999. Total Certified - Affiliates - Other (Non-U.S.)																			XXX

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

SCHEDULE F - PART 3 (Continued)

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Current	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Col. 46+48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50										
			Overdue																									
			37	38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38+39 +40+41																				
3699999. Total Certified - Affiliates																		XXX										
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																		XXX										
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool																		XXX										
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)																		XXX										
5099999. Total Reciprocal Jurisdiction - Affiliates																		XXX										
RJ-3191435 .. CONDUIT REINS LTD																		YES										
RJ-1120191 .. CONVEX INS UK LTD																		YES										
RJ-3191400 .. CONVEX RE LTD																		YES										
RJ-3194122 .. DAVINCI REINSURANCE LTD																		YES										
RJ-3191289 .. FIDELIS INSURANCE BERMUDA LTD																		YES										
RJ-3190339 .. RENAISSANCE REINSURANCE LTD																		YES										
RJ-3191388 .. VERMEER REINSURANCE LTD																		YES										
5499999. Total Reciprocal Jurisdiction - Other Non-U.S. Insurers																		XXX										
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)																		XXX										
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)																		XXX										
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																		XXX										
9999999 Totals																		XXX										

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

SCHEDULE F - PART 3 (Continued)

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

(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)		
		54	55	56	57	58	59	60	61	62	63	64	65	66	67	68			
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67			
34-4320350 ..	OHIO MUTUAL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0499999. Total Authorized - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0899999. Total Authorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
06-1182357 ..	ALLIED WORLD INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
36-2661954 ..	AMERICAN AGRICULTURAL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
06-1430254 ..	ARCH RE INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
42-0234980 ..	EMPLOYERS MUTUAL CASUALTY CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
05-0316605 ..	FACTORY MUTUAL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
42-0245840 ..	FARMERS MUTUAL HAIL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-2673100 ..	GENERAL REINSURANCE CORPORATION	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
47-0698507 ..	ODYSSEY REINSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
52-1952955 ..	RENAISSANCE REINSURANCE US INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-1675535 ..	SWISS RE INSURANCE AMERICA CORPORATION	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
13-3031176 ..	PARTNER REINSURANCE COMPANY OF THE U.S.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
23-2423138 ..	TOKIO MARINE SPECIALTY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
43-0613000 ..	SHELTER MUTUAL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
0999999. Total Authorized - Other U.S. Unaffiliated Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-9995035 ..	MUTUAL REINSURANCE BUREAU	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
1199999. Total Authorized - Pools - Voluntary Pools		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1126609 ..	LLOYD'S SYNDICATE #0609	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1128121 ..	LLOYD'S SYNDICATE #2121	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1120171 ..	LLOYD'S SYNDICATE #1856	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1126004 ..	LLOYD'S SYNDICATE #4444	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
1299999. Total Authorized - Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
2299999. Total Unauthorized - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
AA-1340004 ..	R&V VERSICHERUNG AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
2699999. Total Unauthorized - Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3299999. Total Certified - Affiliates - U.S. Non-Pool		XXX						XXX	XXX										
3599999. Total Certified - Affiliates - Other (Non-U.S.)		XXX						XXX	XXX										
3699999. Total Certified - Affiliates		XXX						XXX	XXX										
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX						XXX	XXX										

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

SCHEDULE F - PART 3 (Continued)

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

(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)			
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0	66	67	68			
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([(Col. 20 + Col. 21 + Col. 22 + Col. 24) / Col. 58])	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67			
4699999.	Total Reciprocal Jurisdiction - U.S. Non-Pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
4999999.	Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5099999.	Total Reciprocal Jurisdiction - Affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
RJ-3191435 ..	CONDUIT REINS LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
RJ-1120191 ..	CONVEX INS UK LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
RJ-3191400 ..	CONVEX RE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
RJ-3194122 ..	DAVINCI REINSURANCE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
RJ-3191289 ..	FIDELIS INSURANCE BERMUDA LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
RJ-3190339 ..	RENAISSANCE REINSURANCE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
RJ-3191388 ..	VERMEER REINSURANCE LTD	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5499999.	Total Reciprocal Jurisdiction - Other Non-U.S. Insurers	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5699999.	Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5799999.	Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	XXX						XXX	XXX											
5899999.	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)	XXX						XXX	XXX											
9999999 Totals		XXX						XXX	XXX											

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

SCHEDULE F - PART 3 (Continued)

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

(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	70 Provision for Unauthorized Reinsurance		70 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		70 Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
34-4320350 ..	OHIO MUTUAL INSURANCE COMPANY	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling			XXX.....	XXX.....				XXX.....	XXX.....	
0499999. Total Authorized - Affiliates - U.S. Non-Pool			XXX.....	XXX.....				XXX.....	XXX.....	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)			XXX.....	XXX.....				XXX.....	XXX.....	
0899999. Total Authorized - Affiliates			XXX.....	XXX.....				XXX.....	XXX.....	
06-1182357 ..	ALLIED WORLD INSURANCE COMPANY	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	
36-2661954 ..	AMERICAN AGRICULTURAL INSURANCE COMPANY	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	
06-1430254 ..	ARCI REINSURANCE COMPANY	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	
42-0234980 ..	EMPLOYERS MUTUAL CASUALTY CO	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	
05-0316605 ..	FACTORY MUTUAL INSURANCE COMPANY	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	
42-0245840 ..	FARMERS MUTUAL HAIL INSURANCE COMPANY	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	
13-2673100 ..	GENERAL REINSURANCE CORPORATION	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	
47-0698507 ..	ODYSSEY REINSURANCE COMPANY	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	
52-1952955 ..	RENAISSANCE REINSURANCE US INC	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	
13-1675535 ..	SWISS REINSURANCE AMERICA CORPORATION	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	
13-3031176 ..	PARTNER REINSURANCE COMPANY OF THE U.S.	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	
23-2423138 ..	TOKIO MARINE SPECIALTY INS CO	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	
43-0613000 ..	SHELTER MUTUAL INSURANCE COMPANY	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	
0999999. Total Authorized - Other U.S. Unaffiliated Insurers		XXX.....	XXX.....					XXX.....	XXX.....	
AA-9995035 ..	MUTUAL REINSURANCE BUREAU	XXX.....	XXX.....					XXX.....	XXX.....	
1199999. Total Authorized - Pools - Voluntary Pools		XXX.....	XXX.....					XXX.....	XXX.....	
AA-1126609 ..	LLOYD'S SYNDICATE #0609	XXX.....	XXX.....					XXX.....	XXX.....	
AA-1128121 ..	LLOYD'S SYNDICATE #2121	XXX.....	XXX.....					XXX.....	XXX.....	
AA-1120171 ..	LLOYD'S SYNDICATE #1856	XXX.....	XXX.....					XXX.....	XXX.....	
AA-1126004 ..	LLOYD'S SYNDICATE #4444	XXX.....	XXX.....					XXX.....	XXX.....	
1299999. Total Authorized - Other Non-U.S. Insurers		XXX.....	XXX.....					XXX.....	XXX.....	
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		XXX.....	XXX.....					XXX.....	XXX.....	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool				XXX.....	XXX.....	XXX.....			XXX.....	
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)				XXX.....	XXX.....	XXX.....			XXX.....	
2299999. Total Unauthorized - Affiliates				XXX.....	XXX.....	XXX.....			XXX.....	
AA-1340004 ..	R&V VERSICHERUNG AG			XXX.....	XXX.....	XXX.....			XXX.....	
2699999. Total Unauthorized - Other Non-U.S. Insurers				XXX.....	XXX.....	XXX.....			XXX.....	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)				XXX.....	XXX.....	XXX.....			XXX.....	
3299999. Total Certified - Affiliates - U.S. Non-Pool		XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....	
3599999. Total Certified - Affiliates - Other (Non-U.S.)		XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....	
3699999. Total Certified - Affiliates		XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....	

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

SCHEDULE F - PART 3 (Continued)

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

(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
				72	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75	76	77	78	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool			XXX	XXX				XXX	XXX		
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)			XXX	XXX				XXX	XXX		
5099999. Total Reciprocal Jurisdiction - Affiliates			XXX	XXX				XXX	XXX		
RJ-3191435 .. CONDUIT REINS LTD ..			XXX	XXX				XXX	XXX		
RJ-1120191 .. CONVEX INS UK LTD ..			XXX	XXX				XXX	XXX		
RJ-3191400 .. CONVEX RE LTD ..			XXX	XXX				XXX	XXX		
RJ-3194122 .. DAVINCI REINSURANCE LTD ..			XXX	XXX				XXX	XXX		
RJ-3191289 .. FIDELIS INSURANCE BERMUDA LTD ..			XXX	XXX				XXX	XXX		
RJ-3190339 .. RENAISSANCE REINSURANCE LTD ..			XXX	XXX				XXX	XXX		
RJ-3191386 .. VERMEER REINSURANCE LTD ..			XXX	XXX				XXX	XXX		
5499999. Total Reciprocal Jurisdiction - Other Non-U.S. Insurers			XXX	XXX				XXX	XXX		
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)			XXX	XXX				XXX	XXX		
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)											
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)											
9999999 Totals											

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

SCHEDULE F - PART 4

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

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

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

	<u>1</u> Name of Reinsurer	<u>2</u> Commission Rate	<u>3</u> Ceded Premium
1.	FACTORY MUTUAL INSURANCE COMPANY	35.000	211
2.		
3.		
4.		
5.		

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

	<u>1</u> Name of Reinsurer	<u>2</u> Total Recoverables	<u>3</u> Ceded Premiums	<u>4</u> Affiliated
6.	OHIO MUTUAL INSURANCE COMPANY	5,252	7,564	Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>]
7.	FACTORY MUTUAL INSURANCE COMPANY	123	211	Yes [<input type="checkbox"/>] No [<input checked="" type="checkbox"/>]
8.	GENERAL REINSURANCE CORPORATION	41	105	Yes [<input type="checkbox"/>] No [<input checked="" type="checkbox"/>]
9.	TOKIO MARINE SPECIALTY INS CO	6	7	Yes [<input type="checkbox"/>] No [<input checked="" type="checkbox"/>]
10.	.....			Yes [<input type="checkbox"/>] No [<input type="checkbox"/>]

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

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

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	19,213,374		19,213,374
2. Premiums and considerations (Line 15)	3,220,596		3,220,596
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)			
4. Funds held by or deposited with reinsured companies (Line 16.2)			
5. Other assets	924,680		924,680
6. Net amount recoverable from reinsurers		5,329,094	5,329,094
7. Protected cell assets (Line 27)			
8. Totals (Line 28)	23,358,650	5,329,094	28,687,744
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	4,916,481	910,209	5,826,690
10. Taxes, expenses, and other obligations (Lines 4 through 8)	664,522		664,522
11. Unearned premiums (Line 9)	6,171,446	4,511,619	10,683,065
12. Advance premiums (Line 10)	85,205		85,205
13. Dividends declared and unpaid (Line 11.1 and 11.2)			
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	52,075	(52,075)	
15. Funds held by company under reinsurance treaties (Line 13)	40,659	(40,659)	
16. Amounts withheld or retained by company for account of others (Line 14)			
17. Provision for reinsurance (Line 16)			
18. Other liabilities	9,246		9,246
19. Total liabilities excluding protected cell business (Line 26)	11,939,634	5,329,094	17,268,728
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	11,419,016	XXX	11,419,016
22. Totals (Line 38)	23,358,650	5,329,094	28,687,744

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

Yes [] No []

If yes, give full explanation: Ohio Mutual Insurance Company and its wholly owned subsidiaries, United Ohio Insurance Company, Casco Indemnity Company, and United Mutual Insurance Company entered into a pooling agreement whereby all underwriting results are pooled and then split 23% to Ohio Mutual, 65% to United Ohio, 9% to Casco Indemnity, and 3% to United Mutual.

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

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS

	Total		Comprehensive (Hospital and Medical) Individual		Comprehensive (Hospital and Medical) Group		Medicare Supplement		Vision Only		Dental Only		Federal Employees Health Benefits Plan	
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %
1. Premiums written	6	XXX	XXX		XXX		XXX		XXX		XXX		XXX	
2. Premiums earned	6	XXX	XXX		XXX		XXX		XXX		XXX		XXX	
3. Incurred claims														
4. Cost containment expenses														
5. Incurred claims and cost containment expenses (Lines 3 and 4)														
6. Increase in contract reserves														
7. Commissions (a)	1	16.7												
8. Other general insurance expenses	1	16.7												
9. Taxes, licenses and fees														
10. Total other expenses incurred	2	33.3												
11. Aggregate write-ins for deductions														
12. Gain from underwriting before dividends or refunds	4	66.7												
13. Dividends or refunds														
14. Gain from underwriting after dividends or refunds	4	66.7												
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)														

	Medicare Title XVIII		Medicaid Title XIX		Credit A&H		Disability Income		Long-Term Care		Other Health		
	15 Amount	16 %	17 Amount	18 %	19 Amount	20 %	21 Amount	22 %	23 Amount	24 %	25 Amount	26 %	
1. Premiums written		XXX	XXX		XXX		XXX		XXX		XXX	6	XXX
2. Premiums earned		XXX	XXX		XXX		XXX		XXX		XXX	6	XXX
3. Incurred claims													
4. Cost containment expenses													
5. Incurred claims and cost containment expenses (Lines 3 and 4)													
6. Increase in contract reserves													
7. Commissions (a)												1	16.7
8. Other general insurance expenses												1	16.7
9. Taxes, licenses and fees													
10. Total other expenses incurred												2	33.3
11. Aggregate write-ins for deductions												4	66.7
12. Gain from underwriting before dividends or refunds												4	66.7
13. Dividends or refunds													
14. Gain from underwriting after dividends or refunds													
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)													

(a) Includes \$ reported as "Contract, membership and other fees retained by agents."

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)
PART 2. - RESERVES AND LIABILITIES

	1 Total	2 Comprehensive (Hospital and Medical) Individual	3 Comprehensive (Hospital and Medical) Group	4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Medicare Title XVIII	9 Medicaid Title XIX	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
A. Premium Reserves:													
1. Unearned premiums	2												2
2. Advance premiums													
3. Reserve for rate credits													
4. Total premium reserves, current year	2												2
5. Total premium reserves, prior year													
6. Increase in total premium reserves	2												2
B. Contract Reserves:													
1. Additional reserves (a)													
2. Reserve for future contingent benefits													
3. Total contract reserves, current year													
4. Total contract reserves, prior year													
5. Increase in contract reserves													
C. Claim Reserves and Liabilities:													
1. Total current year													
2. Total prior year													
3. Increase													

PART 3. - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES

	1 Total	2 Comprehensive (Hospital and Medical) Individual	3 Comprehensive (Hospital and Medical) Group	4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Medicare Title XVIII	9 Medicaid Title XIX	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
1. Claims paid during the year:													
1.1 On claims incurred prior to current year													
1.2 On claims incurred during current year													
2. Claim reserves and liabilities, December 31, current year:													
2.1 On claims incurred prior to current year													
2.2 On claims incurred during current year													
3. Test:													
3.1 Lines 1.1 and 2.1													
3.2 Claim reserves and liabilities, December 31, prior year													
3.3 Line 3.1 minus Line 3.2													

PART 4. - REINSURANCE

	1 Total	2 Comprehensive (Hospital and Medical) Individual	3 Comprehensive (Hospital and Medical) Group	4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefits Plan	8 Medicare Title XVIII	9 Medicaid Title XIX	10 Credit A&H	11 Disability Income	12 Long-Term Care	13 Other Health
A. Reinsurance Assumed:													
1. Premiums written	6												6
2. Premiums earned													
3. Incurred claims													
4. Commissions													
B. Reinsurance Ceded:													
1. Premiums written													
2. Premiums earned													
3. Incurred claims													
4. Commissions													

(a) Includes \$ premium deficiency reserve.

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

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Comprehensive (Hospital and Medical) Individual	2 Comprehensive (Hospital and Medical) Group	3 Medicare Supplement	4 Vision Only	5 Dental Only	6 Federal Employees Health Benefits Plan	7 Medicare Title XVIII	8 Medicaid Title XIX	9 Credit A&H	10 Disability Income	11 Long-Term Care	12 Other Health	13 Total
A. Direct:													
1. Incurred claims													
2. Beginning claim reserves and liabilities													
3. Ending claim reserves and liabilities													
4. Claims paid													
B. Assumed Reinsurance:													
1. Incurred claims													
2. Beginning claim reserves and liabilities													
3. Ending claim reserves and liabilities													
4. Claims paid													
C. Ceded Reinsurance:													
1. Incurred claims													
2. Beginning claim reserves and liabilities													
3. Ending claim reserves and liabilities													
4. Claims paid													
D. Net:													
1. Incurred claims													
2. Beginning claim reserves and liabilities													
3. Ending claim reserves and liabilities													
4. Claims paid													
E. Net Incurred Claims and Cost Containment Expenses:													
1. Incurred claims and cost containment expenses													
2. Beginning reserves and liabilities													
3. Ending reserves and liabilities													
4. Paid claims and cost containment expenses													

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....	
2. 2015.....	1,864	197	1,667	.661	24	17		74			13	728	
3. 2016.....	1,899	198	1,701	.665	37	19		83			14	730	
4. 2017.....	1,946	197	1,749	1,134	187	36	2	103	7		19	1,077	
5. 2018.....	2,071	199	1,872	.855	60	24		80	1		14	.898	
6. 2019.....	2,245	179	2,066	1,231	102	33		97	7		30	1,252	
7. 2020.....	2,353	188	2,165	1,182	28	24		101	1		10	1,278	
8. 2021.....	2,489	212	2,277	1,344	81	33		103	3		17	1,396	
9. 2022.....	2,766	308	2,458	2,279	361	44	11	143	4		13	2,090	
10. 2023.....	3,185	327	2,858	2,482	44	65		157			19	2,660	
11. 2024	3,799	390	3,409	2,570	336	58	7	183			13	2,468	
12. Totals	XXX	XXX	XXX	14,403	1,260	353	20	1,124	23		162	14,577	
												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.....																
2. 2015.....																
3. 2016.....																
4. 2017.....																
5. 2018.....																
6. 2019.....																
7. 2020.....	1		2				1					4				
8. 2021.....	8		9				4					21				
9. 2022.....	28		24	1			11					62				
10. 2023.....	49		63	7			28		5			138	1			
11. 2024	283	48	247	26			44		31			531	9			
12. Totals	369	48	345	34			88		36			756	10			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2015.....	.752	.24	.728	.40.3	12.2	.43.7				3.0	
3. 2016.....	.767	.37	.730	.40.4	18.7	.42.9				3.0	
4. 2017.....	1,273	196	1,077	.65.4	99.5	.61.6				3.0	
5. 2018.....	959	.61	898	.46.3	30.7	.48.0				3.0	
6. 2019.....	1,361	109	1,252	.60.6	60.9	.60.6				3.0	
7. 2020.....	1,311	.29	1,282	.55.7	15.4	.59.2				3.0	.3
8. 2021.....	1,501	.84	1,417	.60.3	39.6	.62.2				3.0	17
9. 2022.....	2,529	377	2,152	.91.4	122.4	.87.6				3.0	51
10. 2023.....	2,849	.51	2,798	.89.5	15.6	.97.9				3.0	105
11. 2024	3,416	417	2,999	.89.9	106.9	.88.0				3.0	456
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		124

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....								1	XXX.....	
2. 2015.....	1,285	7	1,278	.838	.4	.33		.95			37	962	
3. 2016.....	1,372	7	1,365	.904	.1	.30		.99			28	1,032	
4. 2017.....	1,519	10	1,509	.951	.2	.34		.99			35	1,082	
5. 2018.....	1,740	8	1,732	1,117		.71		.103			37	1,291	
6. 2019.....	1,929	8	1,921	1,275		.81		.101			33	1,457	
7. 2020.....	1,810	4	1,806	.944	.9	.46		.80			22	1,061	
8. 2021.....	1,822	11	1,811	1,059	.2	.37		.81			25	1,175	
9. 2022.....	1,824	12	1,812	1,140		.29		.81			23	1,250	
10. 2023.....	1,905	13	1,892	.989		.11		.82			24	1,082	
11. 2024	2,053	14	2,039	546		.3		.73			10	622	
12. Totals	XXX	XXX	XXX	9,763	18	375		894			275	11,014	
												XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....	2											2	
2. 2015.....													
3. 2016.....	5		2									7	
4. 2017.....	4		2									6	
5. 2018.....	2		2									5	
6. 2019.....	.31		11									49	1
7. 2020.....	.23		6									.36	1
8. 2021.....	.38		24									.77	1
9. 2022.....	110		78	1								.234	4
10. 2023.....	242		217	3								.542	10
11. 2024	342		468	6								936	34
12. Totals	799		810	10								1,894	51

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	2	
2. 2015.....	966	4	962	75.2	57.1	75.3				3.0	
3. 2016.....	1,040	1	1,039	75.8	14.3	76.1				3.0	7
4. 2017.....	1,090	2	1,088	71.8	20.0	72.1				3.0	.6
5. 2018.....	1,296		1,296	74.5		74.8				3.0	4
6. 2019.....	1,506		1,506	78.1		78.4				3.0	42
7. 2020.....	1,106	9	1,097	61.1	225.0	60.7				3.0	29
8. 2021.....	1,254	2	1,252	68.8	18.2	69.1				3.0	62
9. 2022.....	1,485	1	1,484	81.4	8.3	81.9				3.0	187
10. 2023.....	1,627	3	1,624	85.4	23.1	85.8				3.0	456
11. 2024	1,564	6	1,558	76.2	42.9	76.4				3.0	804
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	1,599	295

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....	
2. 2015.....	491	28	463	330	47	22	1	29		5	333	28	
3. 2016.....	510	33	477	316	34	27	2	29		1	336	26	
4. 2017.....	531	39	492	253		25		31		6	309	27	
5. 2018.....	554	22	532	244	8	16		30		4	282	27	
6. 2019.....	575	12	563	378	11	22		28		4	417	26	
7. 2020.....	608	8	600	260	16	17	1	23		6	283	21	
8. 2021.....	653	4	649	305	6	15		22		3	336	16	
9. 2022.....	705	5	700	294	5	10		18		2	317	8	
10. 2023.....	786	5	781	223		5		17		15	245	15	
11. 2024	891	6	885	106		1		5		1	112	5	
12. Totals	XXX	XXX	XXX	2,709	127	160	4	232		47	2,970	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2015.....													
3. 2016.....													
4. 2017.....	2		1								3		
5. 2018.....			10				2				12		
6. 2019.....	2		15	1			3		1		20		
7. 2020.....	13		8	1			4		1		25		
8. 2021.....	25		24	2			7		2		56		
9. 2022.....	29		99	11			13		4		134	1	
10. 2023.....	88		119	22			20		8		.213	2	
11. 2024	98	2	178	18			26		25		307	5	
12. Totals	257	2	454	55			75		41		770	8	

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2015.....	381	48	333	77.6	171.4	71.9			3.0		
3. 2016.....	372	36	336	72.9	109.1	70.4			3.0		
4. 2017.....	312		312	58.8		63.4			3.0	.3	
5. 2018.....	302	8	294	54.5	36.4	55.3			3.0	10	2
6. 2019.....	449	12	437	78.1	100.0	77.6			3.0	16	4
7. 2020.....	326	18	308	53.6	225.0	51.3			3.0	20	5
8. 2021.....	400	8	392	61.3	200.0	60.4			3.0	47	9
9. 2022.....	467	16	451	66.2	320.0	64.4			3.0	117	17
10. 2023.....	480	22	458	61.1	440.0	58.6			3.0	185	28
11. 2024	439	20	419	49.3	333.3	47.3			3.0	256	51
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	654	116

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

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....	
2. 2015.....													
3. 2016.....													
4. 2017.....													
5. 2018.....													
6. 2019.....													
7. 2020.....													
8. 2021.....													
9. 2022.....													
10. 2023.....													
11. 2024.....													
12. Totals	XXX	XXX	XXX									XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior.....																
2. 2015.....																
3. 2016.....																
4. 2017.....																
5. 2018.....																
6. 2019.....																
7. 2020.....																
8. 2021.....																
9. 2022.....																
10. 2023.....																
11. 2024.....																
12. Totals																

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)				Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense	35 Losses Unpaid		36 Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....			
2. 2015.....												
3. 2016.....												
4. 2017.....												
5. 2018.....												
6. 2019.....												
7. 2020.....												
8. 2021.....												
9. 2022.....												
10. 2023.....												
11. 2024.....												
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX			

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

SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....			1						1.....	
2. 2015.....	777	98	.679	304	21	.89	2	32		5	.402	34.....	
3. 2016.....	820	102	.718	325	16	.78		37		7	.424	31.....	
4. 2017.....	847	104	.743	330	21	.58		33		8	.400	30.....	
5. 2018.....	865	85	.780	305	10	.76	2	33		3	.402	28.....	
6. 2019.....	917	80	.837	411	11	.83		33		12	.516	29.....	
7. 2020.....	986	92	.894	333	24	.36	2	32		5	.375	27.....	
8. 2021.....	1,073	90	.983	314	10	.31		27		7	.362	20.....	
9. 2022.....	1,186	111	1,075	446	56	.29	2	29		6	.446	11.....	
10. 2023.....	1,326	113	1,213	547	38	.21		39		11	.569	28.....	
11. 2024	1,483	132	1,351	377	35	10	1	31		3	382	20.....	
12. Totals	XXX	XXX	XXX	3,692	242	512	9	326		67	4,279	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2015.....	6		3				6					15	
3. 2016.....													
4. 2017.....	4		2				3		1			10	
5. 2018.....	33	7	18	4			39					79	
6. 2019.....	18		9			19		2				48	1
7. 2020.....	4		23	3		10						34	
8. 2021.....	18		15			14						47	1
9. 2022.....	25		34	9		24		1				75	1
10. 2023.....	23		64	10		52		6				135	2
11. 2024	107	10	183	38		74		21				337	3
12. Totals	238	17	351	64		241		31				780	8

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2015.....	440	23	.417	.56.6	23.5	.61.4			3.0	.9	.6
3. 2016.....	440	16	424	.53.7	15.7	.59.1			3.0		
4. 2017.....	431	21	410	.50.9	20.2	.55.2			3.0	.6	.4
5. 2018.....	504	23	481	.58.3	27.1	.61.7			3.0	.40	.39
6. 2019.....	575	11	564	.62.7	13.8	.67.4			3.0	.27	.21
7. 2020.....	438	29	409	.44.4	31.5	.45.7			3.0	.24	.10
8. 2021.....	419	10	409	.39.0	11.1	.41.6			3.0	.33	.14
9. 2022.....	588	67	521	.49.6	60.4	.48.5			3.0	.50	.25
10. 2023.....	752	48	704	.56.7	42.5	.58.0			3.0	.77	.58
11. 2024	803	84	719	54.1	63.6	53.2			3.0	242	95
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	508	272

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....	
2. 2015.....	221	99	122	50	27	3		4			30	4	
3. 2016.....	205	100	105	59	27	5		4			41	4	
4. 2017.....	188	104	84	46	23	3		7			33	2	
5. 2018.....	195	111	84	67	50	9		6			32	1	
6. 2019.....	206	124	82	81	70	1		5			17	1	
7. 2020.....	221	80	141	244	151	2		8			103	1	
8. 2021.....	237	73	164	51	7	2		5			51	1	
9. 2022.....	260	92	168	40	15	2		10			37		
10. 2023.....	294	115	179	4		2		4			10		
11. 2024	337	138	199	2				1			3		
12. Totals	XXX	XXX	XXX	644	370	29		54			357	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2015.....													
3. 2016.....													
4. 2017.....	4		2				4					10	
5. 2018.....	36	33	18	17			10					14	
6. 2019.....													
7. 2020.....			1						1			2	
8. 2021.....	2		1				22					25	
9. 2022.....			13	7			5		2			13	
10. 2023.....	7		26	2			4		2			37	
11. 2024	36		165	71			17		7			154	
12. Totals	85	33	226	97			62		12			255	

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2015.....	57	27	30	25.8	27.3	24.6			3.0		
3. 2016.....	68	27	41	33.2	27.0	39.0			3.0		
4. 2017.....	66	23	43	35.1	22.1	51.2			3.0	.6	4
5. 2018.....	146	100	46	74.9	90.1	54.8			3.0	4	10
6. 2019.....	87	70	17	42.2	56.5	20.7			3.0		
7. 2020.....	256	151	105	115.8	188.8	74.5			3.0	1	1
8. 2021.....	83	7	76	35.0	9.6	46.3			3.0	3	22
9. 2022.....	72	22	50	27.7	23.9	29.8			3.0	6	7
10. 2023.....	49	2	47	16.7	1.7	26.3			3.0	31	6
11. 2024	228	71	157	67.7	51.4	78.9			3.0	130	24
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	181	74

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SCHEDULE P - PART 1H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....	
2. 2015.....													
3. 2016.....													
4. 2017.....													
5. 2018.....													
6. 2019.....													
7. 2020.....													
8. 2021.....													
9. 2022.....													
10. 2023.....													
11. 2024.....													
12. Totals	XXX	XXX	XXX									XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2015.....													
3. 2016.....													
4. 2017.....													
5. 2018.....													
6. 2019.....													
7. 2020.....													
8. 2021.....													
9. 2022.....													
10. 2023.....													
11. 2024.....													
12. Totals													

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2015.....											
3. 2016.....											
4. 2017.....											
5. 2018.....											
6. 2019.....											
7. 2020.....											
8. 2021.....											
9. 2022.....											
10. 2023.....											
11. 2024.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
**SCHEDULE P - PART 1I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY AND THEFT)**
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX									XXX	
2. 2015	656	51	605	233		7		27		13	267	XXX	
3. 2016	661	50	611	201		6		23		4	230	XXX	
4. 2017	647	46	601	223	3	8		24		7	252	XXX	
5. 2018	642	45	597	175		8		18		4	201	XXX	
6. 2019	635	35	600	250	5	6		21	1	6	271	XXX	
7. 2020	642	37	605	270		6		23		11	299	XXX	
8. 2021	660	43	617	300	8	7		24		10	323	XXX	
9. 2022	691	52	639	448	44	10	2	29		12	441	XXX	
10. 2023	770	60	710	506	8	15		33		15	546	XXX	
11. 2024	902	62	840	458	40	14	1	32			463	XXX	
12. Totals	XXX	XXX	XXX	3,064	108	87	3	254	1	82	3,293	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																
2. 2015																
3. 2016																
4. 2017																
5. 2018																
6. 2019																
7. 2020																
8. 2021																
9. 2022																
10. 2023			2					1				3				
11. 2024	36	1	31	3				5		4		72	1			
12. Totals	36	1	33	3				6		4		75	1			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2015	267		267	40.7		44.1			3.0		
3. 2016	230		230	34.8		37.6			3.0		
4. 2017	255	3	252	39.4	6.5	41.9			3.0		
5. 2018	201		201	31.3		33.7			3.0		
6. 2019	277	6	271	43.6	17.1	45.2			3.0		
7. 2020	299		299	46.6		49.4			3.0		
8. 2021	331	8	323	50.2	18.6	52.4			3.0		
9. 2022	487	46	441	70.5	88.5	69.0			3.0		
10. 2023	557	8	549	72.3	13.3	77.3			3.0	2	1
11. 2024	580	45	535	64.3	72.6	63.7			3.0	63	9
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	65	10

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

SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....	(1).....	.....	.....	.....	.....	.....	1	(1).....	XXX.....
2. 2015.....	1,168	26	1,142	739	2	15	.....	92	.....	.112	.844	.....
3. 2016.....	1,242	27	1,215	.763	1	9	.....	98	.....	.127	.869	.....
4. 2017.....	1,371	27	1,344	.831	.....	9	.....	100	.....	.134	.940	.....
5. 2018.....	1,598	31	1,567	.992	.....	10	.....	117	.....	.185	1,119	.....
6. 2019.....	1,809	27	1,782	1,138	.....	13	.....	114	.....	.212	1,265	.....
7. 2020.....	1,792	26	1,766	1,041	1	10	.....	110	.....	.200	1,160	.....
8. 2021.....	1,931	32	1,899	1,274	.....	8	.....	120	.....	.274	1,402	.....
9. 2022.....	2,104	45	2,059	1,656	24	9	1	126	.....	.319	1,766	.....
10. 2023.....	2,463	62	2,401	1,709	.....	11	.....	126	.....	.303	1,846	.....
11. 2024	2,902	79	2,823	1,560	21	8	.....	129	.....	190	1,676	24
12. Totals	XXX	XXX	XXX	11,702	49	102	1	1,132	.....	2,057	12,886	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21							
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2016.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2017.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2018.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2019.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2020.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8. 2021.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9. 2022.....	1	.....	1	.....	.....	.....	.....	.....	.....	.....	2	.....	.....	
10. 2023.....	2	.....	27	.....	.....	1	.....	2	.....	.....	.32	.....	.....	
11. 2024	156	.....	174	2	.....	5	.....	20	.....	.....	353	24	.....		
12. Totals	159	.....	202	2	.....	6	.....	22	.....	.....	387	24	.....		

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	.....
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.....	.....
2. 2015.....	846	2	844	72.4	7.7	73.9	.....	.....	3.0	.....	.....
3. 2016.....	870	1	869	70.0	3.7	71.5	.....	.....	3.0	.....	.....
4. 2017.....	940	.....	940	68.6	.....	69.9	.....	.....	3.0	.....	.....
5. 2018.....	1,119	.....	1,119	70.0	.....	71.4	.....	.....	3.0	.....	.....
6. 2019.....	1,265	.....	1,265	69.9	.....	71.0	.....	.....	3.0	.....	.....
7. 2020.....	1,161	1	1,160	64.8	3.8	65.7	.....	.....	3.0	.....	.....
8. 2021.....	1,402	.....	1,402	72.6	.....	73.8	.....	.....	3.0	.....	.....
9. 2022.....	1,793	.25	1,768	.85.2	.55.6	.85.9	.....	.....	3.0	2	.....
10. 2023.....	1,878	.....	1,878	.76.2	.....	.78.2	.....	.....	3.0	.29	3
11. 2024	2,052	23	2,029	70.7	29.1	71.9	.....	.....	3.0	328	25
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....	XXX	359	28

Schedule P - Part 1K - Fidelity/Surety

N O N E

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

N O N E

Schedule P - Part 1M - International

N O N E

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SCHEDULE P - PART 1R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....	
2. 2015.....	6.....		6.....										
3. 2016.....	6.....		6.....										
4. 2017.....	6.....		6.....	1.....								1.....	
5. 2018.....	6.....		6.....	1.....								1.....	
6. 2019.....	6.....		6.....										
7. 2020.....	6.....		6.....										
8. 2021.....	7.....		7.....	1.....								1.....	
9. 2022.....	7.....		7.....										
10. 2023.....	9.....		9.....	1.....								1.....	
11. 2024	10		10										
12. Totals	XXX	XXX	XXX	4							4	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrog- ation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstand- ing Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2015.....													
3. 2016.....													
4. 2017.....													
5. 2018.....													
6. 2019.....													
7. 2020.....													
8. 2021.....													
9. 2022.....													
10. 2023.....													
11. 2024													
12. Totals													

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2015.....										3.0	
3. 2016.....										3.0	
4. 2017.....	1.....		1.....	16.7.....		16.7.....				3.0	
5. 2018.....	1.....		1.....	16.7.....		16.7.....				3.0	
6. 2019.....										3.0	
7. 2020.....										3.0	
8. 2021.....	1.....		1.....	14.3.....		14.3.....				3.0	
9. 2022.....										3.0	
10. 2023.....	1.....		1.....	11.1.....		11.1.....				3.0	
11. 2024										3.0	
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

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

N O N E

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

N O N E

Schedule P - Part 1T - Warranty

N O N E

Schedule P - Part 1U - Pet Insurance Plans

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

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	56	53	53	50	51	50	50	48	47	47		(1)
2. 2015	702	665	654	662	660	654	653	653	653	654	1	1
3. 2016	XXX	740	671	666	648	648	646	646	646	647	1	1
4. 2017	XXX	XXX	1,026	985	977	975	976	982	982	981	(1)	(1)
5. 2018	XXX	XXX	XXX	861	827	822	817	820	820	819	(1)	(1)
6. 2019	XXX	XXX	XXX	XXX	1,169	1,147	1,137	1,159	1,163	1,162	(1)	3
7. 2020	XXX	XXX	XXX	XXX	XXX	1,244	1,217	1,193	1,182	1,182		(11)
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	1,347	1,318	1,313	1,317	4	(1)
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,160	2,049	2,013	(36)	(147)
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,766	2,636	(130)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,785	XXX	XXX
											12. Totals	(163) (157)

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

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

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

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

SCHEDULE I - PART II COMMERCIAL MOULDED PARTS													
1.	Prior	267	250	236	249	240	248	245	242	243	244	1	2
2.	2015	332	336	368	403	382	372	368	379	384	385	1	6
3.	2016	XXX	369	374	369	391	404	396	397	393	387	(6)	(10)
4.	2017	XXX	XXX	402	364	389	372	385	378	370	376	6	(2)
5.	2018	XXX	XXX	XXX	365	379	415	469	477	426	448	22	(29)
6.	2019	XXX	XXX	XXX	XXX	471	552	522	543	507	529	22	(14)
7.	2020	XXX	XXX	XXX	XXX	XXX	453	422	421	415	377	(38)	(44)
8.	2021	XXX	XXX	XXX	XXX	XXX	XXX	463	381	438	382	(56)	1
9.	2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	614	602	491	(111)	(123)
10.	2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	741	659	(82)	XXX
11.	2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	667	XXX	XXX
12. Totals											(241)	(213)	

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

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 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.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XX								
7. 2020.....	XXX	XXX	XXX	XX	XX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX							
9. 2022.....	XXX	XXX	XXX	XXX	XXX							
10. 2023.....	XXX	XXX	XXX	XXX	XXX							XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX						XXX	XXX
											12. Totals	

NONE**SCHEDULE P - PART 2F - SECTION 2 - MEDICAL PROFESSIONAL LIABILITY - CLAIMS-MADE**

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XX	XX							
8. 2021.....	XXX	XXX	XXX	XX	XX	XX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XX	XX					
10. 2023.....	XXX					XXX	XXX	XXX	XXX	XXX	XXX					XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
											12. Totals	

NONE**SCHEDULE P - PART 2G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),
BOILER AND MACHINERY)**

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XX	XX							
8. 2021.....	XXX	XXX	XXX	XX	XX	XX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XX	XX					
10. 2023.....	XXX					XXX	XXX	XXX	XXX	XXX	XXX					XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
											12. Totals	

NONE**SCHEDULE P - PART 2H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**

1. Prior.....	84	89	92	77	74	74	73	73	73	73		
2. 2015.....	46	42	29	35	27	26	26	26	26	26		
3. 2016.....	XXX	64	56	51	41	37	37	37	37	37		
4. 2017.....	XXX	XXX	53	39	32	35	34	33	35	36	1	3
5. 2018.....	XXX	XXX	XXX	35	36	24	24	28	41	40	(1)	12
6. 2019.....	XXX	XXX	XXX	XXX	25	17	21	14	12	12		(2)
7. 2020.....	XXX	XXX	XXX	XXX	170	174	106	97	96	(1)		(10)
8. 2021.....	XXX	XXX	XXX	XXX	XXX	58	120	63	71	8		(49)
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	79	56	38	(18)		(41)
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	73	41	(32)	XXX	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	149	XXX	XXX	
											12. Totals	(43)
												(87)

NONE**SCHEDULE P - PART 2H - SECTION 2 - OTHER LIABILITY - CLAIMS-MADE**

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XX	XX							
8. 2021.....	XXX	XXX	XXX	XX	XX	XX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XX	XX					
10. 2023.....	XXX					XXX	XXX	XXX	XXX	XXX	XXX					XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
											12. Totals	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
**SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,
EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 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.....												
2. 2015.....	270	240	238	240	240	240	240	240	240	240		
3. 2016.....	XXX	219	208	207	207	207	207	207	207	207		
4. 2017.....	XXX	XXX	232	228	227	227	227	227	227	228	1	1
5. 2018.....	XXX	XXX	XXX	199	184	182	182	182	182	183	1	1
6. 2019.....	XXX	XXX	XXX	XXX	269	250	251	251	251	251		
7. 2020.....	XXX	XXX	XXX	XXX	XXX	299	282	276	276	276		
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	310	304	299	299		(5)
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	430	415	412	(3)	(18)
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	565	516	(49)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	499	XXX	XXX
											12. Totals	(50)
												(21)

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....											(1)	(1)
2. 2015.....	819	758	755	755	753	752	753	752	752	752		
3. 2016.....	XXX	852	779	773	772	771	772	771	771	771		
4. 2017.....	XXX	XXX	888	847	844	842	842	842	841	840	(1)	(2)
5. 2018.....	XXX	XXX	XXX	1,090	1,013	1,009	1,007	1,004	1,003	1,002	(1)	(2)
6. 2019.....	XXX	XXX	XXX	XXX	1,245	1,154	1,154	1,153	1,152	1,151	(1)	(2)
7. 2020.....	XXX	XXX	XXX	XXX	XXX	1,148	1,056	1,054	1,052	1,050	(2)	(4)
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	1,402	1,289	1,285	1,282	(3)	(7)
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,816	1,662	1,642	(20)	(174)
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,893	1,750	(143)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,880	XXX	XXX
											12. Totals	(172)
												(192)

SCHEDULE P - PART 2K - FIDELITY/SURETY

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XX							
8. 2021.....	XXX	XXX	XXX	XXX	XX	XX						
9. 2022.....	XXX	XXX	XXX	XXX	XX	XX	XX					
10. 2023.....	XXX		XXX									
11. 2024	XXX	XXX										
											12. Totals	

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

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XX							
8. 2021.....	XXX	XXX	XXX	XXX	XX	XX						
9. 2022.....	XXX	XXX	XXX	XXX	XX	XX	XX					
10. 2023.....	XXX		XXX									
11. 2024	XXX	XXX										
											12. Totals	

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XX							
8. 2021.....	XXX	XXX	XXX	XXX	XX	XX						
9. 2022.....	XXX	XXX	XXX	XXX	XX	XX	XX					
10. 2023.....	XXX		XXX									
11. 2024	XXX	XXX										
											12. Totals	

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

**SCHEDULE P - PART 2N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY**

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.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

**SCHEDULE P - PART 2O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX											
10. 2023.....	XXX				XXX							
11. 2024	XXX		XXX	XXX								
12. Totals												

**SCHEDULE P - PART 2P - REINSURANCE
NONPROPORTIONAL ASSUMED FINANCIAL LINES**

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XXX	XX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX											
10. 2023.....	XXX				XXX							
11. 2024	XXX		XXX	XXX								
12. Totals												

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

SCHEDULE P - PART 2R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 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.....	1	1	1	1	1	1	1	1	1	1	1	
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX				4	2	2	2	2		
5. 2018.....	XXX	XXX	XXX	1	1	1	1	1	1	1		
6. 2019.....	XXX	XXX	XXX	XXX		1	1					
7. 2020.....	XXX	XXX	XXX	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX		1	1	1	1		
9. 2022.....	XXX	XXX	XXX	XXX	XXX							
10. 2023.....	XXX	XXX	XXX	XXX	XXX							
11. 2024	XXX	XXX	XXX	XXX	XXX							
12. Totals											(2)	(1)

SCHEDULE P - PART 2R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XX								
8. 2021.....	XXX	XXX	XXX	XX								
9. 2022.....	XXX	XXX	XXX	XXX								
10. 2023.....	XXX	XXX	XXX	XXX								
11. 2024	XXX	XXX	XXX	XXX								
12. Totals												

SCHEDULE P - PART 2S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XX								
8. 2021.....	XXX	XXX	XXX	XX								
9. 2022.....	XXX	XXX	XXX	XXX								
10. 2023.....	XXX	XXX	XXX	XXX								
11. 2024	XXX	XXX	XXX	XXX								
12. Totals												

SCHEDULE P - PART 2T - WARRANTY

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XX								
8. 2021.....	XXX	XXX	XXX	XX								
9. 2022.....	XXX	XXX	XXX	XX								
10. 2023.....	XXX	XXX	XXX	XXX								
11. 2024	XXX	XXX	XXX	XXX								
12. Totals												

SCHEDULE P - PART 2U - PET INSURANCE PLANS

1. Prior.....												
2. 2015.....												
3. 2016.....	XXX											
4. 2017.....	XXX	XXX										
5. 2018.....	XXX	XXX	XXX									
6. 2019.....	XXX	XXX	XXX	XXX								
7. 2020.....	XXX	XXX	XXX	XX								
8. 2021.....	XXX	XXX	XXX	XX								
9. 2022.....	XXX	XXX	XXX	XX								
10. 2023.....	XXX	XXX	XXX	XXX								
11. 2024	XXX	XXX	XXX	XXX								
12. Totals												

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024		
1. Prior.....	000.....	37.....	38.....	40.....	41.....	42.....	45.....	47.....	47.....	47.....	1.....	.....
2. 2015.....	500.....	620.....	636.....	643.....	644.....	652.....	653.....	653.....	653.....	654.....	70.....	17.....
3. 2016.....	XXX.....	549.....	626.....	634.....	644.....	645.....	646.....	646.....	646.....	647.....	67.....	15.....
4. 2017.....	XXX.....	XXX.....	775.....	941.....	957.....	967.....	972.....	974.....	980.....	981.....	94.....	20.....
5. 2018.....	XXX.....	XXX.....	XXX.....	624.....	774.....	805.....	813.....	817.....	820.....	819.....	76.....	17.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	937.....	1,096.....	1,121.....	1,153.....	1,159.....	1,162.....	104.....	23.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	976.....	1,140.....	1,177.....	1,176.....	1,178.....	103.....	20.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,049.....	1,253.....	1,277.....	1,296.....	82.....	9.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,609.....	1,918.....	1,951.....	27.....	5.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,111.....	2,503.....	146.....	13.....
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,285	100	8

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

1. Prior.....	000.....	331.....	361.....	373.....	377.....	381.....	381.....	380.....	379.....	379.....	8.....	.....
2. 2015.....	400.....	640.....	773.....	833.....	855.....	861.....	863.....	866.....	867.....	867.....	92.....	16.....
3. 2016.....	XXX.....	398.....	690.....	815.....	897.....	911.....	922.....	934.....	934.....	933.....	90.....	18.....
4. 2017.....	XXX.....	XXX.....	436.....	713.....	875.....	934.....	960.....	963.....	979.....	983.....	95.....	18.....
5. 2018.....	XXX.....	XXX.....	XXX.....	495.....	805.....	969.....	1,086.....	1,129.....	1,184.....	1,188.....	115.....	21.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	525.....	885.....	1,076.....	1,232.....	1,326.....	1,356.....	121.....	21.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	379.....	664.....	817.....	935.....	981.....	80.....	18.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	443.....	821.....	1,005.....	1,094.....	67.....	11.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	531.....	974.....	1,169.....	41.....	11.....	11.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	597.....	1,000.....	99.....	16.....	16.....
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	549	59	7	.....					

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

1. Prior.....	000.....	93.....	161.....	169.....	210.....	214.....	214.....	209.....	209.....	209.....	2.....	.....
2. 2015.....	98.....	148.....	196.....	260.....	275.....	292.....	295.....	304.....	304.....	304.....	25.....	3.....
3. 2016.....	XXX.....	86.....	161.....	234.....	247.....	276.....	296.....	296.....	307.....	307.....	23.....	3.....
4. 2017.....	XXX.....	XXX.....	92.....	165.....	211.....	256.....	265.....	275.....	275.....	278.....	23.....	4.....
5. 2018.....	XXX.....	XXX.....	XXX.....	90.....	147.....	205.....	246.....	250.....	251.....	252.....	23.....	4.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	111.....	197.....	264.....	349.....	378.....	389.....	23.....	3.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	79.....	164.....	203.....	237.....	260.....	19.....	2.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	93.....	171.....	266.....	314.....	15.....	1.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	97.....	215.....	299.....	6.....	1.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	109.....	228.....	12.....	1.....	1.....
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	107	.....	.....						

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

1. Prior.....	000.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. 2015.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
3. 2016.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
4. 2017.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
5. 2018.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
6. 2019.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
7. 2020.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
8. 2021.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
9. 2022.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
10. 2023.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.....	.....

NONE

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	000.....	165.....	199.....	205.....	217.....	224.....	235.....	237.....	243.....	244.....	3.....	.....
2. 2015.....	142.....	202.....	238.....	306.....	339.....	352.....	359.....	362.....	368.....	370.....	28.....	6.....
3. 2016.....	XXX.....	186.....	263.....	288.....	323.....	341.....	365.....	372.....	382.....	387.....	25.....	6.....
4. 2017.....	XXX.....	XXX.....	182.....	257.....	282.....	321.....	334.....	346.....	358.....	367.....	24.....	6.....
5. 2018.....	XXX.....	XXX.....	173.....	236.....	293.....	321.....	341.....	367.....	369.....	371.....	23.....	5.....
6. 2019.....	XXX.....	XXX.....	XXX.....	217.....	334.....	395.....	431.....	456.....	483.....	488.....	24.....	4.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	206.....	287.....	323.....	338.....	343.....	349.....	23.....	4.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	195.....	265.....	320.....	335.....	347.....	17.....	2.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	280.....	401.....	417.....	428.....	8.....	2.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	422.....	530.....	530.....	23.....	3.....
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	351	15	2	.....						

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

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024		
1. Prior.....000.....												
2. 2015.....												
3. 2016.....XXX.....												
4. 2017.....XXX.....XXX.....												
5. 2018.....XXX.....XXX.....XXX.....												
6. 2019.....XXX.....XXX.....XXX.....XXX.....												
7. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....												
8. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
9. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
10. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
11. 2024.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												

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

1. Prior.....000.....												
2. 2015.....												
3. 2016.....XXX.....												
4. 2017.....XXX.....XXX.....												
5. 2018.....XXX.....XXX.....XXX.....												
6. 2019.....XXX.....XXX.....XXX.....XXX.....												
7. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....												
8. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
9. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
10. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
11. 2024.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												

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

1. Prior.....000.....											XXX.....	XXX.....
2. 2015.....											XXX.....	XXX.....
3. 2016.....XXX.....											XXX.....	XXX.....
4. 2017.....XXX.....XXX.....											XXX.....	XXX.....
5. 2018.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
6. 2019.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
7. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
8. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
9. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
10. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
11. 2024.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....

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

1. Prior.....000.....31.....46.....64.....64.....71.....73.....73.....73.....73.....73.....	4.....	12.....	21.....	26.....	26.....	26.....	26.....	26.....	26.....	26.....	3.....	1.....
2. 2015.....												
3. 2016.....XXX.....												
4. 2017.....XXX.....XXX.....												
5. 2018.....XXX.....XXX.....XXX.....												
6. 2019.....XXX.....XXX.....XXX.....XXX.....												
7. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....												
8. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
9. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
10. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
11. 2024.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												

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

1. Prior.....000.....31.....46.....64.....64.....71.....73.....73.....73.....73.....73.....	4.....	12.....	21.....	26.....	26.....	26.....	26.....	26.....	26.....	26.....	3.....	1.....
2. 2015.....												
3. 2016.....XXX.....												
4. 2017.....XXX.....XXX.....												
5. 2018.....XXX.....XXX.....XXX.....												
6. 2019.....XXX.....XXX.....XXX.....XXX.....												
7. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....												
8. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
9. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
10. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												
11. 2024.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....												

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

SCHEDULE P - PART 3I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2015 2015	2 2016 2016	3 2017 2017	4 2018 2018	5 2019 2019	6 2020 2020	7 2021 2021	8 2022 2022	9 2023 2023	10 2024 2024		
1. Prior.....	000.....										XXX.....	.XXX.....
2. 2015.....	210.....	239.....	238.....	240.....	240.....	240.....	240.....	240.....	240.....	240.....	XXX.....	.XXX.....
3. 2016.....	XXX.....	170.....	203.....	207.....	207.....	207.....	207.....	207.....	207.....	207.....	XXX.....	.XXX.....
4. 2017.....	XXX.....	XXX.....	190.....	226.....	227.....	227.....	227.....	227.....	227.....	228.....	XXX.....	.XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....	152.....	181.....	182.....	182.....	182.....	182.....	183.....	XXX.....	.XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	224.....	250.....	251.....	251.....	251.....	251.....	XXX.....	.XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	243.....	278.....	276.....	276.....	276.....	XXX.....	.XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	259.....	300.....	299.....	299.....	XXX.....	.XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	354.....	412.....	412.....	XXX.....	.XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	480.....	513.....	XXX.....	.XXX.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	431.....	XXX.....	XXX.....

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	000.....										(1).....	
2. 2015.....	724.....	758.....	754.....	751.....	753.....	752.....	752.....	752.....	752.....	752.....	752.....	
3. 2016.....	XXX.....	756.....	777.....	773.....	772.....	771.....	771.....	771.....	771.....	771.....	771.....	
4. 2017.....	XXX.....	XXX.....	793.....	845.....	843.....	842.....	841.....	842.....	841.....	841.....	840.....	
5. 2018.....	XXX.....	XXX.....	XXX.....	953.....	1,009.....	1,007.....	1,004.....	1,004.....	1,003.....	1,002.....		
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	1,098.....	1,151.....	1,151.....	1,153.....	1,152.....	1,151.....		
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,002.....	1,052.....	1,053.....	1,052.....	1,050.....		
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,210.....	1,285.....	1,283.....	1,282.....		
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,516.....	1,648.....	1,640.....		
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,578.....	1,720.....		
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,547.....		

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior.....	000.....											XXX.....
2. 2015.....												XXX.....
3. 2016.....	XXX.....											XXX.....
4. 2017.....	XXX.....	XXX.....										XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....									XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XX							XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XX	XXX						XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	XXX	XX					XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	XXX	XXX	XXX				XXX.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	XXX	XXX	XXX	XXX			XXX.....

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

1. Prior.....	000.....											XXX.....
2. 2015.....												XXX.....
3. 2016.....	XXX.....											XXX.....
4. 2017.....	XXX.....	XXX.....										XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....									XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XX							XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XX	XX	XX					XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XX	XX	XX	XX				XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	XXX	XXX	XXX				XXX.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	XXX	XXX	XXX	XXX			XXX.....

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior.....	000.....											XXX.....
2. 2015.....												XXX.....
3. 2016.....	XXX.....											XXX.....
4. 2017.....	XXX.....	XXX.....										XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....									XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XX							XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XX	XX	XX	XX				XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XX	XX	XX	XX				XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	XXX	XXX	XXX				XXX.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	XXX	XXX	XXX	XXX			XXX.....

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

**SCHEDULE P - PART 3N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY**

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.....											XXX.....	XXX.....
2. 2015.....											XXX.....	XXX.....
3. 2016.....XXX.....											XXX.....	XXX.....
4. 2017.....XXX.....XXX.....											XXX.....	XXX.....
5. 2018.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
6. 2019.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
7. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
8. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
9. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
10. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
11. 2024.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....

**SCHEDULE P - PART 3O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

1. Prior.....000.....											XXX.....	XXX.....
2. 2015.....											XXX.....	XXX.....
3. 2016.....XXX.....											XXX.....	XXX.....
4. 2017.....XXX.....XXX.....											XXX.....	XXX.....
5. 2018.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
6. 2019.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
7. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
8. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
9. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
10. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
11. 2024.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....

**SCHEDULE P - PART 3P - REINSURANCE
NONPROPORTIONAL ASSUMED FINANCIAL LINES**

1. Prior.....000.....											XXX.....	XXX.....
2. 2015.....											XXX.....	XXX.....
3. 2016.....XXX.....											XXX.....	XXX.....
4. 2017.....XXX.....XXX.....											XXX.....	XXX.....
5. 2018.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
6. 2019.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
7. 2020.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
8. 2021.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
9. 2022.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
10. 2023.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....
11. 2024.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....XXX.....											XXX.....	XXX.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SCHEDULE P - PART 3R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024		
1. Prior.....	000.....	1.....	1.....	1.....	1.....	1.....	1.....	1.....	1.....	1.....	1.....	1.....
2. 2015.....												
3. 2016.....	XXX.....											
4. 2017.....	XXX.....	XXX.....					2.....	2.....	2.....	2.....	1.....	
5. 2018.....	XXX.....	XXX.....	XXX.....	1.....	1.....	1.....	1.....	1.....	1.....	1.....	1.....	
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			1.....	1.....	1.....	
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			1.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		

SCHEDULE P - PART 3R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

1. Prior.....	000.....											
2. 2015.....												
3. 2016.....	XXX.....											
4. 2017.....	XXX.....	XXX.....										
5. 2018.....	XXX.....	XXX.....	XXX.....									
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....							
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....	XX.....						
9. 2022.....	XXX.....											
10. 2023.....	XXX.....											
11. 2024.....	XXX.....											

SCHEDULE P - PART 3S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

1. Prior.....	000.....											XXX.....
2. 2015.....												XXX.....
3. 2016.....	XXX.....											XXX.....
4. 2017.....	XXX.....	XXX.....										XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....									XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....							XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....	XX.....						XXX.....
9. 2022.....	XXX.....					XXX.....						
10. 2023.....	XXX.....				XXX.....							
11. 2024.....	XXX.....			XXX.....								

SCHEDULE P - PART 3T - WARRANTY

1. Prior.....	000.....											
2. 2015.....												
3. 2016.....	XXX.....											
4. 2017.....	XXX.....	XXX.....										
5. 2018.....	XXX.....	XXX.....	XXX.....									
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....							
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....	XX.....						
9. 2022.....	XXX.....											
10. 2023.....	XXX.....											
11. 2024.....	XXX.....											

SCHEDULE P - PART 3U - PET INSURANCE PLANS

1. Prior.....	000.....											
2. 2015.....												
3. 2016.....	XXX.....											
4. 2017.....	XXX.....	XXX.....										
5. 2018.....	XXX.....	XXX.....	XXX.....									
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....							
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XX.....	XX.....						
9. 2022.....	XXX.....											
10. 2023.....	XXX.....											
11. 2024.....	XXX.....											

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	13	6	5	3	3	3	2			
2. 2015.....	68	17	7	7	6	1				
3. 2016.....	XXX.....	87	19	14	2	1				
4. 2017.....	XXX.....	XXX.....	84	19	11	4	2	3	1	
5. 2018.....	XXX.....	XXX.....	XXX.....	87	20	8	2	1		
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	94	19	8	3	3	
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	124	.36	.13	5	3
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	136	.38	23	13
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	226	.72	.34
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	320	.84
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	265

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

1. Prior.....	111	.37	17	8	2					
2. 2015.....	226	119	.31	11	8	4	1			
3. 2016.....	XXX.....	235	112	31	.17	12	9	.4	3	2
4. 2017.....	XXX.....	XXX.....	289	118	.76	12	6	.5	3	2
5. 2018.....	XXX.....	XXX.....	XXX.....	404	177	37	41	.29	14	3
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	334	148	96	.65	37	17
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	329	.130	.73	.35	12
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	356	162	.112	.36
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	408	.214	.117
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.453	.281
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	531

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

1. Prior.....	45	66	12	.5	1					
2. 2015.....	112	59	.38	11	15	3	4			
3. 2016.....	XXX.....	90	.66	64	.32	15	3	3		
4. 2017.....	XXX.....	XXX.....	124	71	45	46	13	.4	7	1
5. 2018.....	XXX.....	XXX.....	XXX.....	149	84	85	.57	.23	9	12
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	160	120	.66	.23	30	17
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	123	130	.54	16	11
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	152	132	61	.29
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	187	.148	101
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.211	.117
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	186

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

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XXX.....							
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....									
10. 2023.....	XXX.....									
11. 2024	XXX	XXX								

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	101	.53	.23	23	10	11	5	1		
2. 2015.....	120	.73	.53	50	.27	9	4	.10	10	9
3. 2016.....	XXX.....	113	.73	45	.36	34	16	.17	7	
4. 2017.....	XXX.....	XXX.....	143	73	62	28	.27	.18	6	5
5. 2018.....	XXX.....	XXX.....	XXX.....	125	98	72	.97	.90	36	.53
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	164	158	.85	.76	21	.28
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	191	.103	.86	.67	.30
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.209	.94	.99	.29
9. 2022.....	XXX.....	.225	.173	.49						
10. 2023.....	XXX.....	.221	.106							
11. 2024	XXX	XXX	219							

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XX.....						
7. 2020.....	XXX.....	XXX.....	XX.....	XXX.....	XX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

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

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XXX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XX.....	XX.....	XX.....					
8. 2021.....	XXX.....	XXX.....	XX.....	XX.....	XX.....	XX.....				
9. 2022.....	XXX.....	XXX.....	XX.....	XXX.....	XX.....	XX.....	XX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

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

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XXX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XX.....	XX.....	XX.....					
8. 2021.....	XXX.....	XXX.....	XX.....	XX.....	XX.....	XX.....				
9. 2022.....	XXX.....	XXX.....	XX.....	XXX.....	XX.....	XX.....	XX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

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

1. Prior.....	26	22	22	6	5	1				
2. 2015.....	31	23	7	10						
3. 2016.....	XXX.....	46	27	16	6					
4. 2017.....	XXX.....	XXX.....	32	18	8	8	5	3	5	6
5. 2018.....	XXX.....	XXX.....	XXX.....	28	25	6	3	2	12	11
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	20	9	10	2		
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	112	97	7	2	1
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	47	84	16	.23
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	53	29	11
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	66	28
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	111

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

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XXX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XX.....	XX.....	XX.....					
8. 2021.....	XXX.....	XXX.....	XX.....	XX.....	XX.....					
9. 2022.....	XXX.....	XXX.....	XX.....	XXX.....	XX.....	XX.....				
10. 2023.....	XXX.....									
11. 2024.....	XXX.....									

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SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY, AND THEFT)

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	1									
2. 2015.....	24	1								
3. 2016.....	XXX.....	14	2							
4. 2017.....	XXX.....	XXX.....	12	1						
5. 2018.....	XXX.....	XXX.....	XXX.....	17	1					
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	19					
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	12	2			
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	14	1		
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	17	2	
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	58	3
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	33

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior.....	1							1		
2. 2015.....	53	1	1	2				1		
3. 2016.....	XXX.....	44	2					1		
4. 2017.....	XXX.....	XXX.....	41	2	1			1		
5. 2018.....	XXX.....	XXX.....	XXX.....	58	2	1		2		
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	65	2	3			
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	67	4	2		
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	89	3	1	
9. 2022.....	XXX.....	125	13	1						
10. 2023.....	XXX.....	158	28							
11. 2024.....	XXX.....	177								

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XXX.....							
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....									
10. 2023.....	XXX.....									
11. 2024.....	XXX.....									

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

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XXX.....							
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....									
10. 2023.....	XXX.....									
11. 2024.....	XXX.....									

SCHEDULE P - PART 4M - INTERNATIONAL

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XXX.....							
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....									
10. 2023.....	XXX.....									
11. 2024.....	XXX.....									

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**SCHEDULE P - PART 4N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XX.....	XX.....						
6. 2019.....	XXX.....	XXX.....	XX.....	XX.....						
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SCHEDULE P - PART 4O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY**

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XX.....						
7. 2020.....	XXX.....	XXX.....	XX.....	XX.....	XX.....					
8. 2021.....	XXX.....	XXX.....	XX.....	XX.....	XX.....	XX.....				
9. 2022.....	XXX.....	XXX.....	XX.....	XXX.....	XXX.....	XXX.....	XX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

**SCHEDULE P - PART 4P - REINSURANCE
NONPROPORTIONAL ASSUMED FINANCIAL LINES**

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XX.....						
7. 2020.....	XXX.....	XXX.....	XX.....	XX.....	XX.....					
8. 2021.....	XXX.....	XXX.....	XX.....	XX.....	XX.....	XX.....				
9. 2022.....	XXX.....	XXX.....	XX.....	XXX.....	XXX.....	XXX.....	XX.....			
10. 2023.....	XXX.....									
11. 2024	XXX	XXX								

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SCHEDULE P - PART 4R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....				1.....				
5. 2018.....	XXX.....	XXX.....	XXX.....							
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		1.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

SCHEDULE P - PART 4R - SECTION 2 - PRODUCTS LIABILITY - CLAIMS-MADE

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XXX.....							
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....									
10. 2023.....	XXX.....									
11. 2024.....	XXX.....									

SCHEDULE P - PART 4S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XXX.....							
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....									
10. 2023.....	XXX.....									
11. 2024.....	XXX.....									

SCHEDULE P - PART 4T - WARRANTY

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XXX.....							
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....									
10. 2023.....	XXX.....									
11. 2024.....	XXX.....									

SCHEDULE P - PART 4U - PET INSURANCE PLANS

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XXX.....							
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....									
10. 2023.....	XXX.....									
11. 2024.....	XXX.....									

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SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	2	1								
2. 2015.....	59	68	69	70	70	70	70	70	70	70
3. 2016.....	XXX.....	54	64	66	66	66	67	67	67	67
4. 2017.....	XXX.....	XXX.....	71	90	93	94	94	94	94	94
5. 2018.....	XXX.....	XXX.....	XXX.....	61	74	76	76	76	76	76
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	87	103	104	104	104	104
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	90	102	102	103	103
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	77	80	82	82
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	5	26	.27
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	XXX	129	146
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	100

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	2	1	1	1						
2. 2015.....	9	2	1							
3. 2016.....	XXX.....	10	1	1						
4. 2017.....	XXX.....	XXX.....	13	3	1	1				
5. 2018.....	XXX.....	XXX.....	XXX.....	12	1					
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	13	1	1			
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	9	1			
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	10	1	1	
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	17	1	
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	XXX	13	1
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	1	1								
2. 2015.....	82	86	.87	87	87	87	87	87	87	.87
3. 2016.....	XXX.....	.77	80	82	82	82	82	82	82	82
4. 2017.....	XXX.....	XXX.....	100	113	114	114	114	114	114	114
5. 2018.....	XXX.....	XXX.....	XXX.....	87	92	93	93	93	93	.93
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	120	127	128	128	128	127
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	117	123	123	123	123
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	95	89	91	.91
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	24	32	.32
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX	XXX	154	160
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	117

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SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	11	5	2	1						
2. 2015.....	57	80	87	90	91	92	92	92	92	92
3. 2016.....	XXX.....	53	80	86	89	89	90	90	90	90
4. 2017.....	XXX.....	XXX.....	61	84	91	93	94	94	95	95
5. 2018.....	XXX.....	XXX.....	XXX.....	70	102	110	114	114	115	115
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	77	110	118	118	120	121
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	56	76	76	79	80
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	57	57	64	67
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		34	41
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	66	99
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	59

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	4	2	1	1						
2. 2015.....	37	13	3	1	1					
3. 2016.....	XXX.....	47	11	4	1	1				
4. 2017.....	XXX.....	XXX.....	39	11	3	1	1			
5. 2018.....	XXX.....	XXX.....	XXX.....	47	12	5	2	1		
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	46	11	5	2	1	1
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	31	8	4	1	1
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	36	8	3	1
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	39	9	4
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	33	10
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	34

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....		3	1	1						
2. 2015.....	103	108	107	107	108	108	108	108	108	108
3. 2016.....	XXX.....	111	107	107	108	108	108	108	108	108
4. 2017.....	XXX.....	XXX.....	110	111	112	113	113	113	113	113
5. 2018.....	XXX.....	XXX.....	XXX.....	129	134	136	137	136	136	136
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	135	142	144	141	142	143
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	99	101	.97	98	99
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	103	75	78	.79
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	.39	53	56
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	108	125
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	100

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SCHEDULE P - PART 5C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	2	1	1							
2. 2015.....	16	21	23	24	25	25	25	25	25	25
3. 2016.....	XXX.....	14	20	22	22	22	23	23	23	23
4. 2017.....	XXX.....	XXX.....	14	21	23	23	23	23	23	23
5. 2018.....	XXX.....	XXX.....	XXX.....	14	21	22	23	23	23	23
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	16	22	23	23	23	23
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	13	19	19	19	19
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	14	14	15	15
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		6	6
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	12	12
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	2	1								
2. 2015.....	8	3	1	1						
3. 2016.....	XXX.....	7	2	1						
4. 2017.....	XXX.....	XXX.....	6	2	1					
5. 2018.....	XXX.....	XXX.....	XXX.....	6	2	1				
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	5	2	1			
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	5	1	1		
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	5	1	1	
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	5	2	1
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	5	2
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	1									
2. 2015.....	25	28	28	28	28	28	28	28	28	28
3. 2016.....	XXX.....	23	25	26	26	26	26	26	26	26
4. 2017.....	XXX.....	XXX.....	23	26	27	27	27	27	27	27
5. 2018.....	XXX.....	XXX.....	XXX.....	22	26	27	27	27	27	27
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	23	27	27	27	27	26
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	20	22	22	22	21
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	20	17	17	16
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	5	8	8
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	18	15
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5

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

SCHEDULE P - PART 5D - WORKERS' COMPENSATION**(EXCLUDING EXCESS WORKERS' COMPENSATION)****SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE**SECTION 2**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	3	2	1							
2. 2015	16	22	25	26	27	27	27	27	28	28
3. 2016	XXX	15	21	23	24	25	25	25	25	25
4. 2017	XXX	XXX	16	20	22	23	24	24	24	24
5. 2018	XXX	XXX	XXX	14	20	21	22	22	23	23
6. 2019	XXX	XXX	XXX	XXX	16	22	23	23	24	24
7. 2020	XXX	XXX	XXX	XXX	XXX	18	22	22	23	23
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	15	15	16	17
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX		7	8
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18	23
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	3	2	1	1						
2. 2015	7	4	3	2	1					
3. 2016	XXX	6	3	2	2	1	1			
4. 2017	XXX	XXX	5	3	2	1	1			
5. 2018	XXX	XXX	XXX	6	2	2	1	1		
6. 2019	XXX	XXX	XXX	XXX	5	3	2	2	1	1
7. 2020	XXX	XXX	XXX	XXX	XXX	4	1	1	1	
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	4	2	1	1
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	1	1
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	2
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	2	1								
2. 2015	27	31	33	33	33	33	34	34	34	34
3. 2016	XXX	25	29	31	31	31	31	31	31	31
4. 2017	XXX	XXX	24	28	29	30	30	30	30	30
5. 2018	XXX	XXX	XXX	23	26	27	28	27	27	28
6. 2019	XXX	XXX	XXX	XXX	23	28	30	29	29	29
7. 2020	XXX	XXX	XXX	XXX	XXX	25	28	27	28	27
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	21	18	19	20
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	10	11
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	24	28
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	1.....									
2. 2015.....	1.....	2.....	2.....	2.....	2.....	2.....	3.....	3.....	3.....	3.....
3. 2016.....	XXX.....	1.....	2.....	3.....	3.....	3.....	3.....	3.....	3.....	3.....
4. 2017.....	XXX.....	XXX.....	1.....	1.....	1.....	2.....	2.....	2.....	2.....	2.....
5. 2018.....	XXX.....	XXX.....	XXX.....	1.....	1.....	1.....	1.....	1.....	1.....	1.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	1.....	1.....	1.....	1.....	1.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	1.....	1.....	1.....	1.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	1.....	1.....	1.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	1.....									
2. 2015.....	1.....									
3. 2016.....	XXX.....		1.....							
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XXX.....							
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....			
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....										
2. 2015.....	3.....	3.....	4.....	4.....	4.....	4.....	4.....	4.....	4.....	4.....
3. 2016.....	XXX.....	2.....	4.....	4.....	4.....	4.....	4.....	4.....	4.....	4.....
4. 2017.....	XXX.....	XXX.....	2.....	2.....	2.....	2.....	2.....	2.....	2.....	2.....
5. 2018.....	XXX.....	XXX.....	XXX.....	1.....	2.....	2.....	2.....	2.....	2.....	1.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	2.....	2.....	1.....	1.....	1.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	2.....	2.....	2.....	1.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	1.....	1.....	1.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

Schedule P - Part 5T - Warranty - Section 1

N O N E

Schedule P - Part 5T - Warranty - Section 2

N O N E

Schedule P - Part 5T - Warranty - Section 3

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior.....											
2. 2015.....	491	491	491	491	491	491	491	491	491	491	
3. 2016.....	XXX	510	510	510	510	510	510	510	510	510	
4. 2017.....	XXX	XXX	531	531	531	531	531	531	531	531	
5. 2018.....	XXX	XXX	XXX	554	554	554	554	554	554	554	
6. 2019.....	XXX	XXX	XXX	XXX	575	575	575	575	575	575	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	608	608	608	608	608	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	653	653	653	653	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	705	705	705	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	786	786	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	891	891
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	891
13. Earned Premiums (Sch P-Pt. 1)		491	510	531	554	575	608	653	705	786	891
											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior.....											
2. 2015.....	28	28	28	28	28	28	28	28	28	28	
3. 2016.....	XXX	33	33	33	33	33	33	33	33	33	
4. 2017.....	XXX	XXX	39	39	39	39	39	39	39	39	
5. 2018.....	XXX	XXX	XXX	22	22	22	22	22	22	22	
6. 2019.....	XXX	XXX	XXX	XXX	12	12	12	12	12	12	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	8	8	8	8	8	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	4	4	4	4	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	5	5	5	5	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	5	5	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	6	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6
13. Earned Premiums (Sch P-Pt. 1)		28	33	39	22	12	8	4	5	5	XXX

SCHEDULE P - PART 6D - WORKERS' COMPENSATION
(EXCLUDING EXCESS WORKERS' COMPENSATION)
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX	X	XXX							
6. 2019.....	XXX	XXX	X	XXX	X						
7. 2020.....	XXX	XXX	X	XXX	X	X					
8. 2021.....	XXX	XXX	X	XXX	X	X	X				
9. 2022.....	XXX	XXX	X	XXX	X	X	X	X			
10. 2023.....	XXX	XXX	X	XXX	X	X	X	XXX			
11. 2024.....	XXX	XXX	X	XXX	X	X	X	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX	X	XXX							
6. 2019.....	XXX	XXX	X	XXX	X						
7. 2020.....	XXX	XXX	X	XXX	X	X					
8. 2021.....	XXX	XXX	X	XXX	X	X	X				
9. 2022.....	XXX	XXX	X	XXX	X	X	X	X			
10. 2023.....	XXX	XXX	X	XXX	X	X	X	XXX			
11. 2024.....	XXX	XXX	X	XXX	X	X	X	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

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

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL
SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior.....											
2. 2015.....	777	777	777	777	777	777	777	777	777	777	
3. 2016.....	XXX	820	820	820	820	820	820	820	820	820	
4. 2017.....	XXX	XXX	847	847	847	847	847	847	847	847	
5. 2018.....	XXX	XXX	XXX	865	865	865	865	865	865	865	
6. 2019.....	XXX	XXX	XXX	XXX	917	917	917	917	917	917	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	986	986	986	986	986	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	1,073	1,073	1,073	1,073	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,186	1,186	1,186	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,326	1,326	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,483	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,483
13. Earned Premiums (Sch P-Pt. 1)	777	820	847	865	917	986	1,073	1,186	1,326	1,483	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior.....											
2. 2015.....	98	98	98	98	98	98	98	98	98	98	
3. 2016.....	XXX	102	102	102	102	102	102	102	102	102	
4. 2017.....	XXX	XXX	104	104	104	104	104	104	104	104	
5. 2018.....	XXX	XXX	XXX	85	85	85	85	85	85	85	
6. 2019.....	XXX	XXX	XXX	XXX	80	80	80	80	80	80	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	92	92	92	92	92	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	90	90	90	90	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	111	111	111	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	113	113	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	132	132	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	132
13. Earned Premiums (Sch P-Pt. 1)	98	102	104	85	80	92	90	111	113	132	XXX

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

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior.....											
2. 2015.....	221	221	221	221	221	221	221	221	221	221	
3. 2016.....	XXX	205	205	205	205	205	205	205	205	205	
4. 2017.....	XXX	XXX	188	188	188	188	188	188	188	188	
5. 2018.....	XXX	XXX	XXX	195	195	195	195	195	195	195	
6. 2019.....	XXX	XXX	XXX	XXX	206	206	206	206	206	206	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	221	221	221	221	221	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	237	237	237	237	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	260	260	260	260	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	294	294	294	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	337	337	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	337
13. Earned Premiums (Sch P-Pt. 1)	221	205	188	195	206	221	237	260	294	337	XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior.....											
2. 2015.....	.99	.99	.99	.99	.99	.99	.99	.99	.99	.99	
3. 2016.....	XXX	100	100	100	100	100	100	100	100	100	
4. 2017.....	XXX	XXX	104	104	104	104	104	104	104	104	
5. 2018.....	XXX	XXX	XXX	111	111	111	111	111	111	111	
6. 2019.....	XXX	XXX	XXX	XXX	124	124	124	124	124	124	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	80	80	80	80	80	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	73	73	73	73	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	92	92	92	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	115	115	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	138	138	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	138
13. Earned Premiums (Sch P-Pt. 1)	99	100	104	111	124	80	73	92	115	138	XXX

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

N O N E

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

N O N E

Schedule P - Part 6M - International - Section 1

N O N E

Schedule P - Part 6M - International - Section 2

N O N E

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

N O N E

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

N O N E

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

N O N E

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

N O N E

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

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

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior.....											
2. 2015.....	6	6	6	6	6	6	6	6	6	6	
3. 2016.....	XXX	6	6	6	6	6	6	6	6	6	
4. 2017.....	XXX	XXX	6	6	6	6	6	6	6	6	
5. 2018.....	XXX	XXX	XXX	6	6	6	6	6	6	6	
6. 2019.....	XXX	XXX	XXX	XXX	6	6	6	6	6	6	
7. 2020.....	XXX	XXX	XXX	XXX	XXX	6	6	6	6	6	
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	7	7	7	7	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	7	7	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9	9	
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10
13. Earned Premiums (Sch P-Pt. 1)		6	6	6	6	6	6	7	7	9	10
											XXX

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX	XXX								
6. 2019.....	XXX	XXX	XXX	XXX							
7. 2020.....	XXX	XXX	XXX	XXX	XXX						
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

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

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX	XXX								
6. 2019.....	XXX	XXX	XXX	XXX							
7. 2020.....	XXX	XXX	XXX	X	XXX	X					
8. 2021.....	XXX	XXX	XXX	X	XXX	X	X				
9. 2022.....	XXX	XXX	XXX	X	XXX	X	X	X			
10. 2023.....	XXX	XXX	XXX	X	XXX	X	X	XXX			
11. 2024.....	XXX	XXX	XXX	X	XXX	X	X	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX	XXX								
6. 2019.....	XXX	XXX	XXX	X	XXX	X					
7. 2020.....	XXX	XXX	XXX	X	XXX	X	X				
8. 2021.....	XXX	XXX	XXX	X	XXX	X	X	X			
9. 2022.....	XXX	XXX	XXX	X	XXX	X	X	XXX			
10. 2023.....	XXX	XXX	XXX	X	XXX	X	X	XXX	XXX		
11. 2024.....	XXX	XXX	XXX	X	XXX	X	X	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (\$000 OMITTED)
SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	756			3,748		
2. Private Passenger Auto Liability/ Medical	1,894			2,110		
3. Commercial Auto/Truck Liability/ Medical	770			918		
4. Workers' Compensation						
5. Commercial Multiple Peril	780			1,409		
6. Medical Professional Liability - Occurrence						
7. Medical Professional Liability - Claims - Made						
8. Special Liability						
9. Other Liability - Occurrence	255			206		
10. Other Liability - Claims-Made						
11. Special Property	75			915		
12. Auto Physical Damage	387			2,976		
13. Fidelity/Surety						
14. Other						
15. International						
16. Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX	XXX	XXX
17. Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX	XXX	XXX
18. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX	XXX	XXX
19. Products Liability - Occurrence				10		
20. Products Liability - Claims-Made						
21. Financial Guaranty/Mortgage Guaranty						
22. Warranty						
23. Pet Insurance Plans						
24. Totals	4,917			12,292		

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										
	1 2015	2	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	2024
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX	XX								
5. 2018.....	XXX	XXX	XX	XX							
6. 2019.....	XXX	XXX	XX	XX	XX						
7. 2020.....	XXX	XXX	XX	XXX	XXX						
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)										
	1 2015	2	3 2016	4 2017	5 2018	6 2019	7 2020	8 2021	9 2022	10 2023	2024
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX	XX								
5. 2018.....	XXX	XXX	XX	XX							
6. 2019.....	XXX	XXX	XX	XX	XX						
7. 2020.....	XXX	XXX	XX	XXX	XXX						
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (Continued)
SECTION 4

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 5

Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XXX.....						
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (\$000 OMITTED)
SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	756			3,748		
2. Private Passenger Auto Liability/Medical	1,894			2,110		
3. Commercial Auto/Truck Liability/Medical	770			.918		
4. Workers' Compensation						
5. Commercial Multiple Peril	780			1,409		
6. Medical Professional Liability - Occurrence						
7. Medical Professional Liability - Claims - Made						
8. Special Liability						
9. Other Liability - Occurrence	255			206		
10. Other Liability - Claims-Made						
11. Special Property	75			915		
12. Auto Physical Damage	387			2,976		
13. Fidelity/Surety						
14. Other						
15. International						
16. Reinsurance - Nonproportional Assumed Property						
17. Reinsurance - Nonproportional Assumed Liability						
18. Reinsurance - Nonproportional Assumed Financial Lines						
19. Products Liability - Occurrence				10		
20. Products Liability - Claims-Made						
21. Financial Guaranty/Mortgage Guaranty						
22. Warranty						
23. Pet Insurance Plans						
24. Totals	4,917			12,292		

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XX.....						
7. 2020.....	XXX.....	XXX.....	XX.....	XXX.....	XXX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

SECTION 3

Years in Which Policies Were Issued	BULK AND INCURRED BUT NOT REPORTED RESERVES FOR LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XX.....						
7. 2020.....	XXX.....	XXX.....	XX.....	XXX.....	XX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (Continued)
SECTION 4

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XX.....						
7. 2020.....	XXX.....	XXX.....	XX.....	XXX.....	XX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SECTION 5

Years in Which Policies Were Issued	NET RESERVE FOR PREMIUM ADJUSTMENTS AND ACCRUED RETROSPECTIVE PREMIUMS AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XX.....						
7. 2020.....	XXX.....	XXX.....	XX.....	XXX.....	XX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SECTION 6

Years in Which Policies Were Issued	INCURRED ADJUSTABLE COMMISSIONS REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XX.....						
7. 2020.....	XXX.....	XXX.....	XX.....	XXX.....	XX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 7

Years in Which Policies Were Issued	RESERVES FOR COMMISSION ADJUSTMENTS AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....										
2. 2015.....										
3. 2016.....	XXX.....									
4. 2017.....	XXX.....	XXX.....								
5. 2018.....	XXX.....	XXX.....	XX.....							
6. 2019.....	XXX.....	XXX.....	XX.....	XX.....						
7. 2020.....	XXX.....	XXX.....	XX.....	XXX.....	XX.....					
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

SCHEDULE P INTERROGATORIES

1. The following questions relate to yet-to-be-issued Extended Reporting Endorsements (EREs) arising from Death, Disability, or Retirement (DDR) provisions in Medical Professional Liability Claims Made insurance policies. EREs provided for reasons other than DDR are not to be included.

1.1 Does the company issue Medical Professional Liability Claims Made insurance policies that provide tail (also known as an extended reporting endorsement, or "ERE") benefits in the event of Death, Disability, or Retirement (DDR) at a reduced charge or at no additional cost? Yes [] No [X]
If the answer to question 1.1 is "no", leave the following questions blank. If the answer to question 1.1 is "yes", please answer the following questions:

1.2 What is the total amount of the reserve for that provision (DDR Reserve), as reported, explicitly or not, elsewhere in this statement (in dollars)? \$

1.3 Does the company report any DDR reserve as Unearned Premium Reserve per SSAP #65? Yes [] No [X]

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

1.5 If the company reports DDR reserve as Unearned Premium Reserve, does that amount match the figure on the Underwriting and Investment Exhibit, Part 1A - Recapitulation of all Premiums (Page 7) Column 2, Lines 11.1 plus 11.2? Yes [] No [] N/A [X]

1.6 If the company reports DDR reserve as loss or loss adjustment expense reserve, please complete the following table corresponding to where these reserves are reported in Schedule P:

Years in Which Premiums Were Earned and Losses Were Incurred	DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
	1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601 Prior		
1.602 2015		
1.603 2016		
1.604 2017		
1.605 2018		
1.606 2019		
1.607 2020		
1.608 2021		
1.609 2022		
1.610 2023		
1.611 2024		
1.612 Totals		

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

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

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

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

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

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

(in thousands of dollars)

5.1 Fidelity
5.2 Surety

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

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

7.2 (An extended statement may be attached.)

Effective January 1, 2024, United Mutual Insurance Company joined the Ohio Mutual Insurance Group intercompany pooling agreement. As a result, the updated pooling percentages are as follows: Ohio Mutual Insurance Company – 23%, United Ohio Insurance Company – 65%; Casco Indemnity Company – 9%, United Mutual Insurance Company – 3%. The Schedule P for all accident years has been restated with the Company's new pooling percentage.

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

Allocated by States and Territories

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

NONE

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

SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

NONExistent

NINE

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

SCHEDULE Y

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

Ohio Mutual Insurance Company (Lead Company) (23%), United Ohio Insurance Company (65%), Casco Indemnity Company (9%), United Mutual Insurance Company (3%)

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

SCHEDULE Y

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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

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

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

	MARCH FILING	
11. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO	
12. Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO	
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO	
14. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO	
15. Will the Trusted Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO	
16. Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO	
17. Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1?	YES	
18. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO	
19. Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?	YES	
20. Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES	
21. Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO	
22. Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO	
23. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO	
24. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO	
25. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO	
26. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO	
27. Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?	NO	
28. Will the Exhibit of Other Liabilities by Lines of Business be filed with the state of domicile and the NAIC by March 1?	YES	
29. Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1?	YES	
	APRIL FILING	
30. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO	
31. Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO	
32. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES	
33. Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1?	NO	
34. Will the Cybersecurity Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	YES	
35. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?	NO	
36. Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?	NO	
37. Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO	
	AUGUST FILING	
38. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO	

Explanations:

- 11.
- 12.
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Bar Codes:

- 11. SIS Stockholder Information Supplement [Document Identifier 420]
- 12. Financial Guaranty Insurance Exhibit [Document Identifier 240]
- 13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]
- 14. Supplement A to Schedule T [Document Identifier 455]
- 15. Trusted Surplus Statement [Document Identifier 490]
- 16. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]
- 18. Medicare Part D Coverage Supplement [Document Identifier 365]



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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



22. Bail Bond Supplement [Document Identifier 500]



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



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



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



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



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



30. Credit Insurance Experience Exhibit [Document Identifier 230]



31. Long-Term Care Experience Reporting Forms [Document Identifier 306]



33. Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]



35. Life, Health & Annuity Guaranty Association Assessable Premium Exhibit -
Parts 1 and 2 [Document Identifier 290]



36. Private Flood Insurance Supplement [Document Identifier 560]



37. Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]



38. Management's Report of Internal Control Over Financial Reporting
[Document Identifier 223]



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

Additional Write-ins for Statement of Income Line 14

	1 Current Year	2 Prior Year
1404. Rental and Related Services	18,000	.....
1405. Gain on Sale of Vehicles	21,658	.....
1497. Summary of remaining write-ins for Line 14 from overflow page	39,658	



SUPPLEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
REINSURANCE SUMMARY SUPPLEMENTAL FILING FOR GENERAL INTERROGATORY 9 (PART 2)

For The Year Ended December 31, 2024

To Be Filed by March 1

(A) Financial Impact

	1 As Reported	2 Interrogatory 9 Reinsurance Effect	3 Restated Without Interrogatory 9 Reinsurance
A01. Assets	23,358,650		23,358,650
A02. Liabilities	11,939,634		11,939,634
A03. Surplus as regards to policyholders	11,419,016		11,419,016
A04. Income before taxes	1,286,005		1,286,005

(B) Summary of Reinsurance Contract Terms	(C) Management's Objectives

D. If the response to General Interrogatory 9.4 (Part 2 Property & Casualty Interrogatories) is yes, explain below why the contracts are treated differently for GAAP and SAP.



SUPPLEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company

EXHIBIT OF OTHER LIABILITIES BY LINES OF BUSINESS

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

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

OF THE EXHIBIT
(To Be Filed by March 1)

NAIC Group Code 0963

NAIC Company Code 10719

	Direct Business Only			
	Prior Year		Current Year	
	1 Written Premium	2 Written Premium	3 Losses Paid (deducting salvage)	4 Losses Unpaid (Case Base)
1. Completed operations				
2. Errors & omissions (E&O)				
3. Directors & officers (D&O)				
4. Environmental liability				
5. Excess workers' compensation				
6. Commercial excess & umbrella		31,395		
7. Personal umbrella		11,534		
8. Employment liability				
9. Aggregate write-ins for facilities & premises (CGL)				
10. Internet & cyber liability				
11. Aggregate write-ins for other		270		
12. Total ASL 17 - other liability (sum of lines 1 through 11)		43,199		
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)				
1101. Dwelling Fire Liability		270		
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)		270		



SUPPLEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed by March 1)

FOR THE STATE OF: Ohio

NAIC Group Code 0963

NAIC Company Code 10719

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO.....
2. Health	NO.....
3. Homeowners	NO.....
4. Individual Annuity	NO.....
5. Individual Life	NO.....
6. Lender-Placed Home and Auto	NO.....
7. Long-Term Care	NO.....
8. Other Health	NO.....
9. Private Flood	NO.....
10. Private Passenger Auto	NO.....
11. Short-Term Limited Duration Health Plans	NO.....
12. Travel	NO



SUPPLEMENT FOR THE YEAR 2024 OF THE United Mutual Insurance Company
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2024
(To Be Filed by March 1)

FOR THE STATE OF: Wisconsin

NAIC Group Code 0963

NAIC Company Code 10719

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability Income	NO.....
2. Health	NO.....
3. Homeowners	YES.....
4. Individual Annuity	NO.....
5. Individual Life	NO.....
6. Lender-Placed Home and Auto	NO.....
7. Long-Term Care	NO.....
8. Other Health	NO.....
9. Private Flood	NO.....
10. Private Passenger Auto	YES.....
11. Short-Term Limited Duration Health Plans	NO.....
12. Travel	NO