



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

# ANNUAL STATEMENT

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

# HOME AND FARM INSURANCE COMPANY

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

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

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

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

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

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

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

Internet Website Address N/A

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

## OFFICERS

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

## OTHER

#### **DIRECTORS OR TRUSTEES**

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

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

John Michael Brooks  
President

Lisa Lyn Wesner  
Secretary

Jerry Christopher Collins  
Treasurer

Subscribed and sworn to before me this  
\_\_\_\_\_  
day of \_\_\_\_\_

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

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

NAIC Group Code	0046	BUSINESS IN THE STATE OF	Indiana	DURING THE YEAR 2024								NAIC Company Code	17639
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire .....													
2.1 Allied Lines .....													
2.2 Multiple Peril Crop .....													
2.3 Federal Flood .....													
2.4 Private Crop .....													
2.5 Private Flood .....													
3. Farmowners 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 .....												6,048	
17.2 Other Liability - Claims-Made .....													
17.3 Excess Workers' Compensation .....													
18.1 Products Liability - Occurrence .....													
18.2 Products Liability - Claims-Made .....													
19.1 Private Passenger Auto No-Fault (Personal Injury Protection) .....													
19.2 Other Private Passenger Auto Liability .....													
19.3 Commercial Auto No-Fault (Personal Injury Protection) .....													
19.4 Other Commercial Auto Liability .....													
21.1 Private Passenger Auto Physical Damage .....													
21.2 Commercial Auto Physical Damage .....													
22. Aircraft (all perils) .....													
23. Fidelity .....													
24. Surety .....													
26. Burglary and Theft .....													
27. Boiler and Machinery .....													
28. Credit .....													
29. International .....													
30. Warranty .....													
31. Reins nonproportional assumed property .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business .....	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a) .....	0	0	0	0	0	0	0	0	0	0	0	6,048	
<b>DETAILS OF WRITE-INS</b>													
3401. ....													
3402. ....													
3403. ....													
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0	0

(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 HOME AND FARM INSURANCE COMPANY

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

NAIC Group Code	0046	BUSINESS IN THE STATE OF	Ohio	DURING THE YEAR 2024								NAIC Company Code	17639
Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees	
	1 Direct Premiums Written	2 Direct Premiums Earned											
1. Fire .....													
2.1 Allied Lines .....													
2.2 Multiple Peril Crop .....													
2.3 Federal Flood .....													
2.4 Private Crop .....													
2.5 Private Flood .....	490	495	0	189	0	0	0	0	0	0	0	78	
3. Farmowners Multiple Peril .....	1,513,578	1,422,620	0	726,979	785,002	793,654	127,000	1,247	1,247	0	0	242,231	
4. Homeowners Multiple Peril .....												27,166	
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 .....	7,479	7,850	0	3,582	0	0	0	0	0	0	0	1,197	
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 .....	297,337	298,090	0	146,679	152,672	173,672	253,000	368	368	0	47,585	5,337	
19.3 Commercial Auto No-Fault (Personal Injury Protection) .....													
19.4 Other Commercial Auto Liability .....													
21.1 Private Passenger Auto Physical Damage .....	430,418	390,192	0	212,970	262,242	240,642	9,900	234	234	0	68,883	7,725	
21.2 Commercial Auto Physical Damage .....													
22. Aircraft (all perils) .....													
23. Fidelity .....													
24. Surety .....													
26. Burglary and Theft .....													
27. Boiler and Machinery .....													
28. Credit .....													
29. International .....													
30. Warranty .....													
31. Reins nonproportional assumed property .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
32. Reins nonproportional assumed liability .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
33. Reins nonproportional assumed financial lines .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
34. Aggregate Write-Ins for Other Lines of Business .....	0	0	0	0	0	0	0	0	0	0	0	0	
35. Total (a) .....	2,249,302	2,119,247	0	1,090,399	1,199,916	1,207,968	389,900	1,849	1,849	0	359,974	40,371	
<b>DETAILS OF WRITE-INS</b>													
3401. ....													
3402. ....													
3403. ....													
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 8,056

(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 HOME AND FARM INSURANCE COMPANY

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

NAIC Group Code	0046	BUSINESS IN THE STATE OF	Grand Total	3	4	5	6	7	8	9	10	NAIC Company Code	17639	
		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		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	11	12
Line of Business		Direct Premiums Written	Direct Premiums Earned										Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1. Fire .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.1 Allied Lines .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.2 Multiple Peril Crop .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.3 Federal Flood .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.4 Private Crop .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2.5 Private Flood .....	490	495	0	189	0	0	0	0	0	0	0	0	78	9
3. Farmowners Multiple Peril .....	1,513,578	1,422,620	0	726,979	785,002	793,654	127,000	1,247	1,247	0	0	242,231	27,166	
4. Homeowners Multiple Peril .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5.1 Commercial Multiple Peril (Non-Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5.2 Commercial Multiple Peril (Liability Portion) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6. Mortgage Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8. Ocean Marine .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9.1 Inland Marine .....	7,479	7,850	0	3,582	0	0	0	0	0	0	0	0	1,197	134
9.2 Pet Insurance Plans .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Financial Guaranty .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11.1 Medical Professional Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
11.2 Medical Professional Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Earthquake .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13.1 Comprehensive (hospital and medical) ind (b) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
13.2 Comprehensive (hospital and medical) group (b) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
14. Credit A&H (Group and Individual) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.1 Vision Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.2 Dental Only (b) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.3 Disability Income (b) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.4 Medicare Supplement (b) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.5 Medicaid Title XIX (b) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.6 Medicare Title XVIII (b) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.7 Long-Term Care (b) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.8 Federal Employees Health Benefits Plan (b) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
15.9 Other Health (b) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16. Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17.1 Other Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0	0	6,048
17.2 Other Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
17.3 Excess Workers' Compensation .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18.1 Products Liability - Occurrence .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
18.2 Products Liability - Claims-Made .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.1 Private Passenger Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.2 Other Private Passenger Auto Liability .....	297,337	298,090	0	146,679	152,672	173,672	253,000	368	368	0	47,585	5,337	0	
19.3 Commercial Auto No-Fault (Personal Injury Protection) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
19.4 Other Commercial Auto Liability .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
21.1 Private Passenger Auto Physical Damage .....	430,418	390,192	0	212,970	262,242	240,642	9,900	234	234	0	68,883	7,725	0	
21.2 Commercial Auto Physical Damage .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
22. Aircraft (all perils) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
23. Fidelity .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
24. Surety .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
26. Burglary and Theft .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
27. Boiler and Machinery .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
28. Credit .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
29. International .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
30. Warranty .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
31. Reins nonproportional assumed property .....	XXX	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	XXX
33. Reins nonproportional assumed financial lines .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate Write-Ins for Other Lines of Business .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
35. Total (a) .....	2,249,302	2,119,247	0	1,090,399	1,199,916	1,207,968	389,900	1,849	1,849	0	359,974	46,419		
<b>DETAILS OF WRITE-INS</b>														
3401. ....														
3402. ....														
3403. ....														
3498. Summary of remaining write-ins for Line 34 from overflow page .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above) .....	0	0	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 8,056

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

## **SCHEDULE F - PART 1**

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

## **SCHEDULE F - PART 2**

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

# NONE

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

## SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Company Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commiss- ions	15 Columns 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers		
31-6035649 ..	16713 ..	Buckeye State Mutual Insurance Company .....	OH.....		1,898	371	15	168	0	144	972	0	1,670	457	.65	1,148	300		
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling					1,898	371	15	168	0	144	972	0	1,670	0	457	65	1,148	300	
0499999. Total Authorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0899999. Total Authorized - Affiliates					1,898	371	15	168	0	144	972	0	1,670	0	457	65	1,148	300	
13-1675535 ..	25364 ..	Swiss Reinsurance America Corporation .....	NY.....		.16	0													
31-4259550 ..	14621 ..	Motorists Mutual Insurance Company .....	OH.....		5	0				1									
38-1316179 ..	21555 ..	Farm Bureau Mutual Insurance Company of Michigan .....	MI.....		5	0				1									
39-0712210 ..	18767 ..	Church Mutual Insurance Company .....	WI.....		5	0				1									
52-1952955 ..	10357 ..	Renaissance Reinsurance U.S. Inc. .... Kentucky Farm Bureau Mutual Insurance	MD.....		5	0				2									
61-0392792 ..	22993 ..	Company .....	KY.....		5	0				2									
05-0316605 ..	21482 ..	Factory Mutual Insurance Company .....	RI.....		.31														
13-4924125 ..	10227 ..	Munich Reinsurance America, Inc. ....	DE.....		1														
42-0245990 ..	14117 ..	Grinnell Mutual Reinsurance Company .....	IA.....		.48	0													
04-1543470 ..	23043 ..	Liberty Mutual Insurance Company .....	MA.....		.50														
13-5616275 ..	19453 ..	Transatlantic Reinsurance Company .....	NY.....		.57														
22-200507 ..	26921 ..	Everest Reinsurance Company .....	DE.....		10														
0999999. Total Authorized - Other U.S. Unaffiliated Insurers					238	0	0	0	0	50	0	82	0	132	0	78	0	54	0
AA-1340125 ..	.....	Hanover Rück SE .....	DEU.....		64					20		26				29			
AA-1128791 ..	.....	Lloyd's Underwriter Syndicate No. 2791 .....	GBR.....		14							0			3				
1299999. Total Authorized - Other Non-U.S. Insurers					78	0	0	0	0	20	0	26	0	46	0	32	0	14	0
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)					2,214	371	15	168	0	214	0	1,080	0	1,848	0	567	65	1,216	300
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2299999. Total Unauthorized - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1340028 ..	.....	DEVK Rückversicherungs-und Beteiligungs-AG .....	DEU.....		.36					8		10				12			
AA-1460080 ..	.....	Helvetia Schweizerische Versicherungsgesellschaft .....	CHE.....																
2699999. Total Unauthorized - Other Non-U.S. Insurers					36	0	0	0	0	8	0	10	0	18	0	12	0	6	13
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					36	0	0	0	0	8	0	10	0	18	0	12	0	6	13
3299999. Total Certified - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3599999. Total Certified - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3699999. Total Certified - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5099999. Total Reciprocal Jurisdiction - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)					2,250	371	15	168	0	222	0	1,090	0	1,866	0	579	65	1,222	313
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
9999999 Totals					2,250	371	15	168	0	222	0	1,090	0	1,866	0	579	65	1,222	313

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

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

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

(Credit Risk)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk										35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)		
		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		
31-6035649 ..	Buckeye State Mutual Insurance Company .....	.....	.....	.....	.....	.....	822	.....	848	.....	0	.....	XXX	.....	XXX	.....	XXX	.....	XXX	.....	XXX	.....
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling	0	0	XXX	0	0	822	848	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0499999. Total Authorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0899999. Total Authorized - Affiliates	0	0	XXX	0	0	822	848	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
13-1675535 .. Swiss Reinsurance America Corporation .....	.....	.....	.....	.....	.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
31-4259550 .. Motorists Mutual Insurance Company .....	.....	.....	.....	.....	.....	2	1	0	3	4	2	2	0	0	0	0	0	0	0	0	0	
38-1316179 .. Farm Bureau Mutual Insurance Company of Michigan .....	.....	.....	.....	.....	.....	2	1	0	3	4	2	2	0	0	0	0	0	0	0	0	0	
39-0712210 .. Church Mutual Insurance Company .....	.....	.....	.....	.....	.....	2	1	0	3	4	2	2	0	0	0	0	0	0	0	0	0	
52-1952955 .. Renaissance Reinsurance U.S. Inc. .....	.....	.....	.....	.....	.....	2	2	0	4	5	2	3	0	0	0	0	0	0	0	0	0	
61-0392792 .. Kentucky Farm Bureau Mutual Insurance Company .....	.....	.....	.....	.....	.....	2	2	0	4	5	2	3	0	0	0	0	0	0	0	0	0	
05-0316605 .. Factory Mutual Insurance Company .....	.....	.....	.....	.....	.....	4	11	0	15	18	4	14	0	0	0	0	0	0	0	0	0	
13-4924125 .. Munich Reinsurance America, Inc. .....	.....	.....	.....	.....	.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
42-0245990 .. Grinnell Mutual Reinsurance Company .....	.....	.....	.....	.....	.....	18	15	0	33	40	18	22	0	0	0	0	0	0	0	0	0	
04-1543470 .. Liberty Mutual Insurance Company .....	.....	.....	.....	.....	.....	17	13	0	30	36	17	19	0	0	0	0	0	0	0	0	0	
13-5616275 .. Transatlantic Reinsurance Company .....	.....	.....	.....	.....	.....	21	16	0	37	44	21	23	0	0	0	0	0	0	0	0	0	
22-2005057 .. Everest Reinsurance Company .....	.....	.....	.....	.....	.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
0999999. Total Authorized - Other U.S. Unaffiliated Insurers	0	0	XXX	0	0	70	62	0	132	158	70	88	0	0	0	0	0	0	0	0	0	
AA-1340125 .. Hannover Rück SE .....	.....	.....	.....	.....	.....	29	17	0	46	55	29	26	0	0	0	0	0	0	0	0	0	
AA-1128791 .. Lloyd's Underwriter Syndicate No. 2791 .....	.....	.....	.....	.....	.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
1299999. Total Authorized - Other Non-U.S. Insurers	0	0	XXX	0	0	29	17	0	46	55	29	26	0	0	0	0	0	0	0	0	0	
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	0	0	XXX	0	0	921	927	0	178	214	99	115	0	0	0	0	0	0	0	0	0	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2299999. Total Unauthorized - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
AA-1340028 .. DEVK Rückversicherungs- und Beteiligungs-AG .....	.....	280	.....	0001	.....	18	0	0	18	22	12	10	10	0	0	0	0	0	0	0	0	
AA-1460080 .. Helvetia Schweizerische Versicherungsgesellschaft .....	.....	.....	.....	.....	.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2699999. Total Unauthorized - Other Non-U.S. Insurers	0	280	XXX	0	18	0	0	0	18	22	12	10	10	0	0	0	0	0	0	0	0	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)	0	280	XXX	0	18	0	0	0	18	22	12	10	10	0	0	0	0	0	0	0	0	
3299999. Total Certified - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3599999. Total Certified - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
3699999. Total Certified - Affiliates	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool	0	0	XXX	0	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)	0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk												
		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; 120%)	Stressed Recoverable (Col. 28 * 120%)	30	31	32	33	34	35	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer)
5099999. Total Reciprocal Jurisdiction - Affiliates		0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		0	280	XXX	0	939	927	0	196	235	111	124	10	115	XXX	0	0	3			
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		0	0	XXX	0	0	0	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9999999 Totals		0	280	XXX	0	939	927	0	196	235	111	124	10	115	XXX	0	0	3			

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

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

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts 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 - 44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46+48])	51 Percentage More Than 120 Days Overdue (Col. 41/Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50										
		37 Current	Overdue																								
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38+39 +40+41																				
31-6035649 ..	Buckeye State Mutual Insurance Company .....	386	.....	.....	.....	.....	0	386	.....	.....	0	.....	0.0	.....	0.0	.....	YES.....	0									
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling		386	0	0	0	0	0	386	0	0	386	0	0.0	0.0	0.0	0.0	XXX	0									
0499999. Total Authorized - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0									
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	XXX	0									
0899999. Total Authorized - Affiliates		386	0	0	0	0	0	386	0	0	386	0	0.0	0.0	0.0	0.0	XXX	0									
13-1675535 ..	Swiss Reinsurance America Corporation .....	.....	.....	.....	.....	.....	0	.....	.....	0	.....	0.0	.....	0.0	.....	0.0	.....	YES.....	0								
31-4259550 ..	Motorists Mutual Insurance Company .....	.....	.....	.....	.....	.....	0	.....	.....	0	.....	0.0	.....	0.0	.....	0.0	.....	YES.....	0								
38-1316179 ..	Farm Bureau Mutual Insurance Company of Michigan	.....	.....	.....	.....	.....	0	.....	.....	0	.....	0.0	.....	0.0	.....	0.0	.....	YES.....	0								
39-0712210 ..	Church Mutual Insurance Company .....	.....	.....	.....	.....	.....	0	.....	.....	0	.....	0.0	.....	0.0	.....	0.0	.....	YES.....	0								
52-1952955 ..	Renaissance Reinsurance U.S. Inc. .....	.....	.....	.....	.....	.....	0	.....	.....	0	.....	0.0	.....	0.0	.....	0.0	.....	YES.....	0								
61-0392792 ..	Kentucky Farm Bureau Mutual Insurance Company .....	.....	.....	.....	.....	.....	0	.....	.....	0	.....	0.0	.....	0.0	.....	0.0	.....	YES.....	0								
05-0316605 ..	Factory Mutual Insurance Company .....	.....	.....	.....	.....	.....	0	.....	.....	0	.....	0.0	.....	0.0	.....	0.0	.....	YES.....	0								
13-4924125 ..	Munich Reinsurance America, Inc. .....	.....	.....	.....	.....	.....	0	.....	.....	0	.....	0.0	.....	0.0	.....	0.0	.....	YES.....	0								
42-0245990 ..	Grinnell Mutual Reinsurance Company .....	.....	.....	.....	.....	.....	0	.....	.....	0	.....	0.0	.....	0.0	.....	0.0	.....	YES.....	0								
04-1543470 ..	Liberty Mutual Insurance Company .....	.....	.....	.....	.....	.....	0	.....	.....	0	.....	0.0	.....	0.0	.....	0.0	.....	YES.....	0								
13-5616275 ..	Transatlantic Reinsurance Company .....	.....	.....	.....	.....	.....	0	.....	.....	0	.....	0.0	.....	0.0	.....	0.0	.....	YES.....	0								
22-2005057 ..	Everest Reinsurance Company .....	.....	.....	.....	.....	.....	0	.....	.....	0	.....	0.0	.....	0.0	.....	0.0	.....	YES.....	0								
0999999. Total Authorized - Other U.S. Unaffiliated Insurers		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	0								
AA-1340125 ..	Hannover Rück SE .....	.....	.....	.....	.....	.....	0	.....	.....	0	.....	0.0	.....	0.0	.....	0.0	.....	YES.....	0								
AA-1128791 ..	Lloyd's Underwriter Syndicate No. 2791 .....	.....	.....	.....	.....	.....	0	.....	.....	0	.....	0.0	.....	0.0	.....	0.0	.....	YES.....	0								
1299999. Total Authorized - Other Non-U.S. Insurers		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	0								
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		386	0	0	0	0	0	386	0	0	386	0	0.0	0.0	0.0	0.0	XXX	0									
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	0								
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	0								
2299999. Total Unauthorized - Affiliates		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	0								
AA-1340028 ..	DEVK Rückversicherungs-und Beteiligungs-AG .....	.....	.....	.....	.....	.....	0	.....	.....	0	.....	0.0	.....	0.0	.....	0.0	.....	YES.....	0								
AA-1460080 ..	Helvetia Schweizerische Versicherungsgesellschaft .....	.....	.....	.....	.....	.....	0	.....	.....	0	.....	0.0	.....	0.0	.....	0.0	.....	YES.....	0								
2699999. Total Unauthorized - Other Non-U.S. Insurers		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	0								
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	0								
3299999. Total Certified - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	0								
3599999. Total Certified - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	0								
3699999. Total Certified - Affiliates		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	0								
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	0								

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

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

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses						43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)	44 Total Recoverable on Paid Losses & LAE Amounts in Dispute	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 (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/[Cols. 46+48])	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50									
		37 Current	Overdue																								
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38+39 +40+41																				
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0									
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0									
5099999. Total Reciprocal Jurisdiction - Affiliates		0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0									
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0											
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		386	0	0	0	0	0	386	0	0	386	0	0	0.0	0.0	0.0	XXX	0									
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0									
9999999 Totals		386	0	0	0	0	0	386	0	0	386	0	0	0.0	0.0	0.0	XXX	0									

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

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

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

(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)			
		54	55	56	57	58	59	60	61	62	63	64	65	Complete if Col. 52 = "No"; Otherwise Enter 0	66	67	68			
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67				
31-6035649 ..	Buckeye State Mutual Insurance Company .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	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			
13-1675535 ..	Swiss Reinsurance America Corporation .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
31-4259550 ..	Motorists Mutual Insurance Company .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
38-1316179 ..	Farm Bureau Mutual Insurance Company of Michigan .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
39-0712210 ..	Church Mutual Insurance Company .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
52-1952955 ..	Renaissance Reinsurance U.S. Inc. .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
61-0392792 ..	Kentucky Farm Bureau Mutual Insurance Company .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
05-0316605 ..	Factory Mutual Insurance Company .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
13-4924125 ..	Munich Reinsurance America, Inc. .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
42-0245990 ..	Grinnell Mutual Reinsurance Company .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
04-1543470 ..	Liberty Mutual Insurance Company .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
13-5616275 ..	Transatlantic Reinsurance Company .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
22-2005057 ..	Everest Reinsurance Company .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
0999999. Total Authorized - Other U.S. Unaffiliated Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1340125 ..	Hannover Rück SE .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1128791 ..	Lloyd's Underwriter Syndicate No. 2791 .....	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-1340028 ..	DEVK Rückversicherungs- und Beteiligungs-AG .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
AA-1460080 ..	Helvetia Schweizerische Versicherungsgesellschaft .....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
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	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	0			
3599999. Total Certified - Affiliates - Other (Non-U.S.)		XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	0			
3699999. Total Certified - Affiliates		XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	0			
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	0			
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5099999. Total Reciprocal Jurisdiction - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

**SCHEDULE F - PART 3 (Continued)**Ceded Reinsurance as of December 31, Current Year (\$000 Omitted)  
(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															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 Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements	61 Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements [(Col. 20 + Col. 21 + Col. 22 + Col. 24) / Col. 58]	62 20% of Recoverable on Paid Losses & LAE Over 90 Days	63 Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	64 Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	65 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	66 Total Collateral Provided (Col. 20 + Col. 21 + Col. 22 + Col. 24, not to Exceed Col. 63)	67 Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	68 20% of Amount in Col. 67	
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	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)		XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	0
9999999 Totals		XXX	0	0	0	XXX	XXX	0	0	0	0	0	0	0	0	0	0

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

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

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

(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
				72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	76 Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	77 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	78 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
31-6035649 ..	Buckeye State Mutual Insurance Company .....	0	XXX	XXX	0	0	0	0	XXX	XXX	0
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling		0	XXX	XXX	0	0	0	0	XXX	XXX	0
0499999. Total Authorized - Affiliates - U.S. Non-Pool		0	XXX	XXX	0	0	0	0	XXX	XXX	0
0799999. Total Authorized - Affiliates - Other (Non-U.S.)		0	XXX	XXX	0	0	0	0	XXX	XXX	0
0899999. Total Authorized - Affiliates		0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-1675535 ..	Swiss Reinsurance America Corporation .....	0	XXX	XXX	0	0	0	0	XXX	XXX	0
31-4259550 ..	Motorists Mutual Insurance Company .....	0	XXX	XXX	0	0	0	0	XXX	XXX	0
38-1316179 ..	Farm Bureau Mutual Insurance Company of Michigan .....	0	XXX	XXX	0	0	0	0	XXX	XXX	0
39-0712210 ..	Church Mutual Insurance Company .....	0	XXX	XXX	0	0	0	0	XXX	XXX	0
52-1952955 ..	Renaissance Reinsurance U.S. Inc. .....	0	XXX	XXX	0	0	0	0	XXX	XXX	0
61-0392792 ..	Kentucky Farm Bureau Mutual Insurance Company .....	0	XXX	XXX	0	0	0	0	XXX	XXX	0
05-0316605 ..	Factory Mutual Insurance Company .....	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-4924125 ..	Munich Reinsurance America, Inc. .....	0	XXX	XXX	0	0	0	0	XXX	XXX	0
42-0245990 ..	Grinnell Mutual Reinsurance Company .....	0	XXX	XXX	0	0	0	0	XXX	XXX	0
04-1543470 ..	Liberty Mutual Insurance Company .....	0	XXX	XXX	0	0	0	0	XXX	XXX	0
13-5616275 ..	Transatlantic Reinsurance Company .....	0	XXX	XXX	0	0	0	0	XXX	XXX	0
22-2005057 ..	Everest Reinsurance Company .....	0	XXX	XXX	0	0	0	0	XXX	XXX	0
0999999. Total Authorized - Other U.S. Unaffiliated Insurers		0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1340125 ..	Hannover Rück SE .....	0	XXX	XXX	0	0	0	0	XXX	XXX	0
AA-1128791 ..	Lloyd's Underwriter Syndicate No. 2791 .....	0	XXX	XXX	0	0	0	0	XXX	XXX	0
1299999. Total Authorized - Other Non-U.S. Insurers		0	XXX	XXX	0	0	0	0	XXX	XXX	0
1499999. Total Authorized Excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		0	XXX	XXX	0	0	0	0	XXX	XXX	0
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		0	0	0	XXX	XXX	XXX	0	XXX	XXX	0
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		0	0	0	XXX	XXX	XXX	0	XXX	XXX	0
2299999. Total Unauthorized - Affiliates		0	0	0	XXX	XXX	XXX	0	XXX	XXX	0
AA-1340028 ..	DEVK Rückversicherungs- und Beteiligungs-AG .....	0	0	0	XXX	XXX	XXX	0	XXX	XXX	0
AA-1460080 ..	Helvetia Schweizerische Versicherungsgesellschaft .....	0	0	0	XXX	XXX	XXX	0	XXX	XXX	0
2699999. Total Unauthorized - Other Non-U.S. Insurers		0	0	0	XXX	XXX	XXX	0	XXX	XXX	0
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	0	0	XXX	XXX	XXX	0	XXX	XXX	0
3299999. Total Certified - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX	0
3599999. Total Certified - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX	0
3699999. Total Certified - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX	0
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX	XXX	XXX	XXX	XXX	XXX	0	XXX	XXX	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		0	XXX	XXX	0	0	0	0	XXX	XXX	0
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		0	XXX	XXX	0	0	0	0	XXX	XXX	0

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

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

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

(Total Provision for Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	70  20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71  Provision for 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	
509999. Total Reciprocal Jurisdiction - Affiliates		0	XXX	XXX	0	0	0	0	XXX	XXX	0
569999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 509999, 519999, 529999, 539999 and 549999)		0	XXX	XXX	0	0	0	0	XXX	XXX	0
579999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 149999, 289999, 429999 and 569999)		0	0	0	0	0	0	0	0	0	0
589999. Total Protected Cells (Sum of 139999, 279999, 419999 and 559999)		0	0	0	0	0	0	0	0	0	0
99999999 Totals		0	0	0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

## **SCHEDULE F - PART 4**

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

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

**SCHEDULE F - PART 5**

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

	<u>1</u> Name of Reinsurer	<u>2</u> Commission Rate	<u>3</u> Ceded Premium
1.	Hannover Rück SE .....	25.000 .....	64 .....
2.	Transatlantic Reinsurance Company .....	25.000 .....	57 .....
3.	Liberty Mutual Insurance Company .....	25.000 .....	50 .....
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.	Buckeye State Mutual Insurance Company .....	1,670 .....	1,898 .....	Yes [ X ] No [ ]
7.	Hannover Rück SE .....	46 .....	64 .....	Yes [ ] No [ X ]
8.	Transatlantic Reinsurance Company .....	37 .....	57 .....	Yes [ ] No [ X ]
9.	Grinnell Mutual Reinsurance Corporation .....	33 .....	48 .....	Yes [ ] No [ X ]
10.	Liberty Mutual Insurance Company .....	80 .....	50 .....	Yes [ ] No [ X ]

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

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

**SCHEDULE F - PART 6**

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	6,883,856	(312,587)	6,571,269
2. Premiums and considerations (Line 15) .....	953,370	(484,139)	469,231
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1) .....	386,219	(386,219)	0
4. Funds held by or deposited with reinsured companies (Line 16.2) .....	2,000,000	(2,000,000)	0
5. Other assets .....	270,795	(112,173)	158,622
6. Net amount recoverable from reinsurers .....		3,797,633	3,797,633
7. Protected cell assets (Line 27) .....	0		0
8. <b>Totals (Line 28)</b> .....	<b>10,494,240</b>	<b>502,515</b>	<b>10,996,755</b>
<b>LIABILITIES (Page 3)</b>			
9. Losses and loss adjustment expenses (Lines 1 through 3) .....	635,623	389,900	1,025,523
10. Taxes, expenses, and other obligations (Lines 4 through 8) .....	182,902	89,795	272,697
11. Unearned premiums (Line 9) .....	1,081,726	1,090,398	2,172,124
12. Advance premiums (Line 10) .....	27,835		27,835
13. Dividends declared and unpaid (Line 11.1 and 11.2) .....	0		0
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12) .....	578,159	(578,159)	0
15. Funds held by company under reinsurance treaties (Line 13) .....	312,587	(312,587)	0
16. Amounts withheld or retained by company for account of others (Line 14) .....			0
17. Provision for reinsurance (Line 16) .....	0		0
18. Other liabilities .....	178,350	(176,832)	1,518
19. Total liabilities excluding protected cell business (Line 26) .....	2,997,182	502,515	3,499,697
20. Protected cell liabilities (Line 27) .....			0
21. Surplus as regards policyholders (Line 37)	7,497,058	XXX	7,497,058
22. <b>Totals (Line 38)</b>	<b>10,494,240</b>	<b>502,515</b>	<b>10,996,755</b>

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

Yes [ ] No [ X ]

If yes, give full explanation: .....

Schedule H - Part 1 - Analysis of Underwriting Operations

**N O N E**

Schedule H - Part 2 - Reserves and Liabilities

**N O N E**

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

**N O N E**

Schedule H - Part 4 - Reinsurance

**N O N E**

Schedule H - Part 5 - Health Claims

**N O N E**

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM 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.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	
2. 2015.....	1,421.....	458.....	963.....	786.....	261.....	9.....	3.....	42.....	8.....	7.....	565.....	129.....		
3. 2016.....	1,363.....	344.....	1,019.....	902.....	211.....	14.....	5.....	49.....	2.....	4.....	747.....	150.....		
4. 2017.....	1,247.....	245.....	1,002.....	906.....	259.....	6.....	1.....	38.....	1.....	1.....	689.....	138.....		
5. 2018.....	1,013.....	234.....	779.....	520.....	31.....	3.....	0.....	28.....	0.....	3.....	520.....	91.....		
6. 2019.....	.988.....	.226.....	.762.....	.637.....	.165.....	.5.....	.3.....	.32.....	.2.....	.14.....	.504.....	.108.....		
7. 2020.....	1,003.....	197.....	.806.....	.498.....	.40.....	.2.....	.0.....	.29.....	.1.....	.4.....	.488.....	.67.....		
8. 2021.....	1,012.....	178.....	.834.....	.733.....	.185.....	.3.....	.1.....	.41.....	.0.....	.16.....	.591.....	.76.....		
9. 2022.....	1,047.....	187.....	.860.....	.709.....	.159.....	.5.....	.2.....	.33.....	.0.....	.12.....	.586.....	.68.....		
10. 2023.....	1,137.....	233.....	.904.....	.842.....	.169.....	.3.....	.1.....	.33.....	.3.....	.4.....	.705.....	.76.....		
11. 2024	1,275	304	971	687	123	2	1	22	1	6	586	64		
12. Totals	XXX	XXX	XXX	7,220	1,603	52	17	347	18	71	5,981	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							
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
2. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
3. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
4. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
5. 2018.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
6. 2019.....	3.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....	0.....			
7. 2020.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
8. 2021.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
9. 2022.....	5.....	0.....	7.....	3.....	0.....	0.....	1.....	0.....	0.....	0.....	0.....	10.....	0.....			
10. 2023.....	1.....	0.....	13.....	6.....	0.....	0.....	2.....	1.....	0.....	0.....	1.....	9.....	0.....			
11. 2024	47	6	52	25	0	0	11	4	5	0	4	80	4			
12. Totals	56	6	72	34	0	0	14	5	5	0	5	102	4			

	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.....	0.....	0.....	XXX.....	0.....	0.....
2. 2015.....	.837.....	272.....	.565.....	.58.9.....	.59.4.....	.58.7.....	0.....	0.....	.0.0.....	0.....	0.....
3. 2016.....	.965.....	218.....	.747.....	.70.8.....	.63.4.....	.73.3.....	0.....	0.....	.0.0.....	0.....	0.....
4. 2017.....	.950.....	261.....	.689.....	.76.2.....	.106.5.....	.68.8.....	0.....	0.....	.0.0.....	0.....	0.....
5. 2018.....	.551.....	31.....	.520.....	.54.4.....	.13.2.....	.66.8.....	0.....	0.....	.0.0.....	0.....	0.....
6. 2019.....	.677.....	170.....	.507.....	.68.5.....	.75.2.....	.66.5.....	0.....	0.....	.0.0.....	3.....	0.....
7. 2020.....	.529.....	41.....	.488.....	.52.7.....	.20.8.....	.60.5.....	0.....	0.....	.0.0.....	0.....	0.....
8. 2021.....	.777.....	186.....	.591.....	.76.8.....	.104.5.....	.70.9.....	0.....	0.....	.0.0.....	0.....	0.....
9. 2022.....	.760.....	164.....	.596.....	.72.6.....	.87.7.....	.69.3.....	0.....	0.....	.0.0.....	9.....	1.....
10. 2023.....	.894.....	180.....	.714.....	.78.6.....	.77.3.....	.79.0.....	0.....	0.....	.0.0.....	8.....	1.....
11. 2024	826	160	666	64.8	52.6	68.6	0	0	0.0	68	12
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	88	14

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY**  
**SCHEDULE P - PART 1B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**  
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								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.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....	
2. 2015.....	623.....	177.....	.446.....	.459.....	129.....	17.....	3.....	37.....	3.....	15.....	378.....	133.....	
3. 2016.....	607.....	128.....	.479.....	.402.....	76.....	15.....	3.....	35.....	(1).....	13.....	374.....	130.....	
4. 2017.....	567.....	57.....	.510.....	.398.....	32.....	19.....	5.....	33.....	1.....	10.....	412.....	108.....	
5. 2018.....	461.....	52.....	.409.....	.241.....	14.....	10.....	3.....	25.....	(3).....	13.....	262.....	80.....	
6. 2019.....	444.....	52.....	.392.....	.286.....	53.....	6.....	1.....	25.....	(1).....	8.....	264.....	78.....	
7. 2020.....	430.....	41.....	.389.....	.199.....	27.....	7.....	1.....	29.....	(1).....	6.....	208.....	57.....	
8. 2021.....	409.....	41.....	.368.....	.224.....	20.....	6.....	0.....	27.....	0.....	7.....	237.....	59.....	
9. 2022.....	405.....	39.....	.366.....	.188.....	0.....	2.....	0.....	33.....	0.....	9.....	223.....	63.....	
10. 2023.....	428.....	42.....	.386.....	.174.....	0.....	4.....	0.....	32.....	0.....	3.....	210.....	60.....	
11. 2024.....	445.....	42.....	403.....	130.....	0.....	0.....	0.....	27.....	0.....	5.....	157.....	50.....	
12. Totals	XXX	XXX	XXX	2,702	351	86	16	303	(2)	89	2,726	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							
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
2. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
3. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
4. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
5. 2018.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
6. 2019.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
7. 2020.....	3.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....	0.....			
8. 2021.....	10.....	0.....	0.....	0.....	2.....	0.....	0.....	0.....	0.....	0.....	0.....	12.....	0.....			
9. 2022.....	6.....	0.....	4.....	1.....	2.....	0.....	1.....	0.....	0.....	0.....	1.....	12.....	0.....			
10. 2023.....	.36.....	0.....	7.....	2.....	1.....	0.....	3.....	1.....	2.....	0.....	2.....	46.....	2.....			
11. 2024.....	74.....	11.....	41.....	7.....	1.....	0.....	22.....	6.....	8.....	0.....	8.....	122.....	7.....			
12. Totals	129	11	52	10	6	0	26	7	10	0	11	195	9			

	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.....	0.....	0.....	XXX.....	0.....	0.....
2. 2015.....	513.....	135.....	.378.....	.82.3.....	76.3.....	.84.8.....	0.....	0.....	0.0.....	0.....	0.....
3. 2016.....	452.....	78.....	.374.....	.74.5.....	60.9.....	.78.1.....	0.....	0.....	0.0.....	0.....	0.....
4. 2017.....	450.....	38.....	.412.....	.79.4.....	66.7.....	.80.8.....	0.....	0.....	0.0.....	0.....	0.....
5. 2018.....	.276.....	14.....	.262.....	.59.9.....	26.9.....	.64.1.....	0.....	0.....	0.0.....	0.....	0.....
6. 2019.....	.317.....	53.....	.264.....	.71.4.....	101.9.....	.67.3.....	0.....	0.....	0.0.....	0.....	0.....
7. 2020.....	.238.....	27.....	.211.....	.55.3.....	65.9.....	.54.2.....	0.....	0.....	0.0.....	.3.....	0.....
8. 2021.....	.269.....	20.....	.249.....	.65.8.....	48.8.....	.67.7.....	0.....	0.....	0.0.....	10.....	2.....
9. 2022.....	.236.....	1.....	.235.....	.58.3.....	2.6.....	.64.2.....	0.....	0.....	0.0.....	9.....	3.....
10. 2023.....	.259.....	3.....	.256.....	.60.5.....	7.1.....	.66.3.....	0.....	0.....	0.0.....	.41.....	5.....
11. 2024.....	303.....	24.....	279.....	68.1.....	57.1.....	69.2.....	0.....	0.....	0.0.....	97.....	25.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	160	35

Schedule P - Part 1C - Commercial Auto/Truck Liability/Medical  
**N O N E**

Schedule P - Part 1D - Workers' Compensation (Excluding Excess Workers' Compensation)  
**N O N E**

Schedule P - Part 1E - Commercial Multiple Peril  
**N O N E**

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

Schedule P - Part 1F - Section 2 - Medical Professional Liability - Claims-Made  
**N O N E**

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

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY**  
**SCHEDULE P - PART 1H - SECTION 1 - OTHER LIABILITY - OCCURRENCE**  
 (\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....	
2. 2015.....	60	39	21	7	2	1	1	0	0	0	0	5.....1	
3. 2016.....	61	37	24	3	0	1	0	1	0	0	0	5.....0	
4. 2017.....	56	35	21	50	45	0	0	1	0	0	0	6.....1	
5. 2018.....	42	29	13	15	8	0	0	0	0	0	0	7.....0	
6. 2019.....	28	27	1	73	70	0	0	0	0	0	0	3.....0	
7. 2020.....	30	28	2	75	73	6	5	0	0	0	0	3.....0	
8. 2021.....	32	31	1	100	98	0	0	0	0	0	0	2.....0	
9. 2022.....	33	31	2	0	0	0	0	0	0	0	0	0.....0	
10. 2023.....	35	33	2	0	0	0	0	0	0	0	0	0.....0	
11. 2024	34	33	1	0	0	0	0	0	0	0	0	0.....0	
12. Totals	XXX	XXX	XXX	323	296	8	6	2	0	0	31	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.....	0	0	0	0	0	0	0	0	0	0	0	0	0.....0
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0.....0
3. 2016.....	0	0	0	0	0	0	0	0	0	0	0	0	0.....0
4. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0	0.....0
5. 2018.....	0	0	0	0	0	0	0	0	0	0	0	0	0.....0
6. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0.....0
7. 2020.....	0	0	0	0	0	0	0	0	0	0	0	0	0.....0
8. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0.....0
9. 2022.....	0	0	5	4	0	0	0	0	0	0	0	1	0.....0
10. 2023.....	0	0	10	9	0	0	0	0	0	0	0	1	0.....0
11. 2024	0	0	33	31	0	0	0	0	0	0	0	2	0.....0
12. Totals	0	0	48	44	0	0	0	0	0	0	0	4	0.....0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Losses Unpaid	Loss Expenses Unpaid	
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	XXX.....	0	0.....0
2. 2015.....	8	3	5	13.3	7.7	23.8	0	0	0.0	0	0.....0
3. 2016.....	5	0	5	8.2	0.0	20.8	0	0	0.0	0	0.....0
4. 2017.....	51	45	6	91.1	128.6	28.6	0	0	0.0	0	0.....0
5. 2018.....	15	8	7	35.7	27.6	53.8	0	0	0.0	0	0.....0
6. 2019.....	73	70	3	260.7	259.3	300.0	0	0	0.0	0	0.....0
7. 2020.....	81	78	3	270.0	278.6	150.0	0	0	0.0	0	0.....0
8. 2021.....	100	98	2	312.5	316.1	200.0	0	0	0.0	0	0.....0
9. 2022.....	5	4	1	15.2	12.9	50.0	0	0	0.0	1	0.....0
10. 2023.....	10	9	1	28.6	27.3	50.0	0	0	0.0	1	0.....0
11. 2024	33	31	2	97.1	93.9	200.0	0	0	0.0	2	0.....0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	4	0.....0

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								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	21 Direct and Assumed	22 Ceded			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....													
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. 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 HOME AND FARM 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	0	0	0	0	0	0	0	0	0	
2. 2015	201	65	136	83	24	6	0	5	1	9	69	XXX	
3. 2016	184	46	138	96	18	2	0	4	0	1	84	XXX	
4. 2017	168	35	133	66	5	0	0	3	0	10	64	XXX	
5. 2018	134	33	101	52	0	0	0	2	0	1	54	XXX	
6. 2019	121	29	92	58	5	0	0	2	0	0	55	XXX	
7. 2020	123	26	97	51	1	1	0	3	0	1	54	XXX	
8. 2021	123	23	100	65	5	0	0	2	0	0	62	XXX	
9. 2022	123	24	99	73	8	0	0	3	0	11	68	XXX	
10. 2023	122	19	103	74	13	1	0	3	0	0	65	XXX	
11. 2024	117	16	101	56	10	0	0	2	0	0	48	XXX	
12. Totals	XXX	XXX	XXX	674	89	10	0	29	1	33	623	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	0	0	0	0	0	0	0	0	0	0	0	0	0			
2. 2015	0	0	0	0	0	0	0	0	0	0	0	0	0			
3. 2016	0	0	0	0	0	0	0	0	0	0	0	0	0			
4. 2017	0	0	0	0	0	0	0	0	0	0	0	0	0			
5. 2018	0	0	0	0	0	0	0	0	0	0	0	0	0			
6. 2019	0	0	0	0	0	0	0	0	0	0	0	0	0			
7. 2020	0	0	0	0	0	0	0	0	0	0	0	0	0			
8. 2021	0	0	0	0	0	0	0	0	0	0	0	0	0			
9. 2022	0	0	0	0	0	0	0	0	0	0	0	0	0			
10. 2023	1	0	0	0	0	0	0	0	0	0	1	0	0			
11. 2024	16	1	0	0	0	1	0	1	0	1	17	0	0			
12. Totals	17	1	0	0	0	1	0	1	0	1	18	0	0			

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter- Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0
2. 2015	94	25	69	46.8	38.5	50.7	0	0	0.0	0	0
3. 2016	102	18	84	55.4	39.1	60.9	0	0	0.0	0	0
4. 2017	69	5	64	41.1	14.3	48.1	0	0	0.0	0	0
5. 2018	54	0	54	40.3	0.0	53.5	0	0	0.0	0	0
6. 2019	60	5	55	49.6	17.2	59.8	0	0	0.0	0	0
7. 2020	55	1	54	44.7	3.8	55.7	0	0	0.0	0	0
8. 2021	67	5	62	54.5	21.7	62.0	0	0	0.0	0	0
9. 2022	76	8	68	61.8	33.3	68.7	0	0	0.0	0	0
10. 2023	79	13	66	64.8	68.4	64.1	0	0	0.0	1	0
11. 2024	76	11	65	65.0	68.8	64.4	0	0	0.0	15	2
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	16	2

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

**SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....	
2. 2015.....	599.....	188.....	411.....	353.....	88.....	1.....	0.....	24.....	1.....	45.....	289.....	0.....	
3. 2016.....	567.....	136.....	431.....	392.....	69.....	0.....	0.....	24.....	1.....	41.....	346.....	0.....	
4. 2017.....	515.....	77.....	438.....	339.....	15.....	0.....	0.....	17.....	0.....	34.....	341.....	0.....	
5. 2018.....	387.....	45.....	342.....	231.....	0.....	0.....	0.....	14.....	0.....	25.....	245.....	0.....	
6. 2019.....	365.....	42.....	323.....	250.....	6.....	0.....	0.....	17.....	0.....	24.....	261.....	101.....	
7. 2020.....	366.....	35.....	331.....	209.....	0.....	0.....	0.....	20.....	0.....	23.....	229.....	74.....	
8. 2021.....	368.....	33.....	335.....	247.....	7.....	1.....	0.....	18.....	0.....	43.....	259.....	79.....	
9. 2022.....	389.....	35.....	354.....	303.....	34.....	1.....	0.....	20.....	0.....	34.....	290.....	86.....	
10. 2023.....	461.....	27.....	434.....	334.....	2.....	1.....	0.....	21.....	0.....	31.....	354.....	86.....	
11. 2024	547	34	513	354	7	1	0	22	0	23	370	86	
12. Totals	XXX	XXX	XXX	3,012	228	5	0	197	2	323	2,984	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							
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
2. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
3. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
4. 2017.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
5. 2018.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
6. 2019.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
7. 2020.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....			
8. 2021.....	(1).....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....	(1).....	0.....			
9. 2022.....	(1).....	0.....	2.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....	1.....	0.....			
10. 2023.....	(2).....	0.....	4.....	0.....	0.....	1.....	0.....	0.....	0.....	0.....	2.....	3.....	0.....			
11. 2024	(13).....	0.....	21.....	0.....	0.....	3.....	1.....	4.....	0.....	0.....	24.....	14.....	3.....			
12. Totals	(17).....	0.....	27.....	0.....	0.....	4.....	1.....	4.....	0.....	0.....	28.....	17.....	3.....			

	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.....	0.....	0.....	XXX.....	0.....	0.....
2. 2015.....	378.....	89.....	289.....	63.1.....	47.3.....	70.3.....	0.....	0.....	0.0.....	0.....	0.....
3. 2016.....	416.....	70.....	346.....	73.4.....	51.5.....	80.3.....	0.....	0.....	0.0.....	0.....	0.....
4. 2017.....	356.....	15.....	341.....	69.1.....	19.5.....	77.9.....	0.....	0.....	0.0.....	0.....	0.....
5. 2018.....	245.....	0.....	245.....	63.3.....	0.0.....	71.6.....	0.....	0.....	0.0.....	0.....	0.....
6. 2019.....	267.....	6.....	261.....	73.2.....	14.3.....	80.8.....	0.....	0.....	0.0.....	0.....	0.....
7. 2020.....	229.....	0.....	229.....	62.6.....	0.0.....	69.2.....	0.....	0.....	0.0.....	0.....	0.....
8. 2021.....	265.....	7.....	258.....	72.0.....	21.2.....	77.0.....	0.....	0.....	0.0.....	(1).....	0.....
9. 2022.....	325.....	34.....	291.....	83.5.....	97.1.....	82.2.....	0.....	0.....	0.0.....	1.....	0.....
10. 2023.....	359.....	2.....	357.....	77.9.....	7.4.....	82.3.....	0.....	0.....	0.0.....	2.....	1.....
11. 2024	392	8	384	71.7	23.5	74.9	0	0	0.0	8	6
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	10	7

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**

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

**N O N E**

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 HOME AND FARM 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.....	50	46	60	58	59	46	43	41	41	41	0	0
2. 2015.....	547	524	532	532	532	532	532	532	532	531	(1)	(1)
3. 2016.....	XXX	694	694	710	700	696	700	700	700	700	0	0
4. 2017.....	XXX	XXX	664	662	666	652	652	652	652	652	0	0
5. 2018.....	XXX	XXX	XXX	498	494	496	489	490	492	492	0	2
6. 2019.....	XXX	XXX	XXX	XXX	489	494	483	479	479	477	(2)	(2)
7. 2020.....	XXX	XXX	XXX	XXX	XXX	490	470	467	460	460	0	(7)
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	581	553	556	550	(6)	(3)
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	566	564	563	(1)	(3)
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	688	684	(4)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	640	XXX	XXX
											12. Totals	(14)
												(14)

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

1. Prior.....	142	109	110	115	113	112	106	106	106	107	1	1
2. 2015.....	285	342	353	348	346	344	344	344	344	344	0	0
3. 2016.....	XXX	300	369	354	340	339	339	338	338	338	0	0
4. 2017.....	XXX	XXX	345	409	396	379	380	380	380	380	0	0
5. 2018.....	XXX	XXX	XXX	272	254	243	237	240	234	234	0	(6)
6. 2019.....	XXX	XXX	XXX	XXX	277	260	252	238	238	238	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	214	202	188	183	181	(2)	(7)
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	238	215	217	222	5	7
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	226	200	202	2	(24)
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	221	222	1	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	244	XXX	XXX
											12. Totals	7
												(29)

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

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	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 2D - 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	XX							
8. 2021.....	XXX	XXX	XXX	XXX	XX	XX						
9. 2022.....	XXX	XXX	XXX	XXX	XX	XX	XX					
10. 2023.....	XXX			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 2E - COMMERCIAL MULTIPLE PERIL**

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	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
											12. Totals	

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 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	

**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	

**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	

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

1. Prior.....	7	2	1	1	1	1	1	1	1	1	0	0
2. 2015.....	11	9	6	5	5	5	5	5	5	5	0	0
3. 2016.....	XXX	11	18	14	4	4	4	4	4	4	0	0
4. 2017.....	XXX	XXX	11	9	6	5	5	5	5	5	0	0
5. 2018.....	XXX	XXX	XXX	17	7	7	7	7	7	7	0	0
6. 2019.....	XXX	XXX	XXX	XXX	1	4	3	3	3	3	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	1	1	1	4	3	(1)	2
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	3	2	3	2	(1)	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	1	0	1	1	1	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	1	1	(2)	XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2	XXX	XXX	
											12. Totals	(3) 2

**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 HOME AND FARM INSURANCE COMPANY  
**SCHEDULE P - PART 2I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,  
EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 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.....											0	0
2. 2015.....	70	0	0	0	65	65	65	65	65	65	0	0
3. 2016.....	XXX	70	0	0	80	80	80	80	80	80	0	0
4. 2017.....	XXX	XXX	74	0	62	61	61	61	61	61	0	0
5. 2018.....	XXX	XXX	XXX	56	52	52	52	52	52	52	0	0
6. 2019.....	XXX	XXX	XXX	XXX	53	52	54	53	53	53	0	0
7. 2020.....	XXX	XXX	XXX	XXX	43	51	51	51	51	51	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	61	61	60	60	0	(1)	
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	62	65	65	0	3	
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	61	63	2	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	62	XXX	XXX
											12. Totals	2
												2

**SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE**

1. Prior.....											0	0
2. 2015.....	276	0	0	0	266	266	266	266	266	266	0	0
3. 2016.....	XXX	320	0	0	322	323	323	323	323	323	0	0
4. 2017.....	XXX	XXX	334	0	324	321	324	324	324	324	0	0
5. 2018.....	XXX	XXX	XXX	235	231	231	229	231	231	231	0	0
6. 2019.....	XXX	XXX	XXX	XXX	243	245	246	244	244	244	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	209	213	210	208	209	1	(1)
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	244	248	243	240	(3)	(8)
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	284	273	271	(2)	(13)
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	325	336	11	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	358	XXX	XXX
											12. Totals	7
												(22)

**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											
11. 2024	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											
11. 2024	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											
11. 2024	XXX											
												12. Totals

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 2T - Warranty

**N O N E**

Schedule P - Part 2U - Pet Insurance Plans

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM 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.....	29.....	52.....	59.....	59.....	46.....	43.....	41.....	41.....	41.....	2.....	
2. 2015.....	423.....	506.....	515.....	532.....	532.....	532.....	532.....	532.....	532.....	531.....	73.....	56.....
3. 2016.....	XXX.....	575.....	678.....	685.....	689.....	694.....	700.....	700.....	700.....	700.....	79.....	71.....
4. 2017.....	XXX.....	XXX.....	579.....	641.....	655.....	652.....	652.....	652.....	652.....	652.....	80.....	58.....
5. 2018.....	XXX.....	XXX.....	XXX.....	438.....	481.....	487.....	488.....	489.....	492.....	492.....	53.....	38.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	416.....	468.....	475.....	476.....	476.....	474.....	62.....	46.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	401.....	451.....	460.....	460.....	460.....	53.....	14.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	435.....	546.....	550.....	550.....	60.....	16.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	533.....	548.....	553.....	54.....	14.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	617.....	675.....	62.....	14.....
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	565.....	50.....	10.....

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

1. Prior.....	000.....	67.....	97.....	109.....	111.....	112.....	106.....	106.....	106.....	107.....	2.....	
2. 2015.....	140.....	238.....	322.....	340.....	343.....	344.....	344.....	344.....	344.....	344.....	66.....	67.....
3. 2016.....	XXX.....	162.....	274.....	314.....	334.....	337.....	337.....	338.....	338.....	338.....	60.....	70.....
4. 2017.....	XXX.....	XXX.....	179.....	304.....	365.....	377.....	380.....	380.....	380.....	380.....	53.....	55.....
5. 2018.....	XXX.....	XXX.....	XXX.....	136.....	210.....	222.....	225.....	230.....	234.....	234.....	41.....	39.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	125.....	205.....	237.....	238.....	238.....	238.....	42.....	36.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	83.....	142.....	167.....	173.....	178.....	47.....	10.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	99.....	161.....	192.....	210.....	50.....	9.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	113.....	157.....	190.....	53.....	10.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	120.....	178.....	49.....	9.....
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	130.....	36.....	7.....

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

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.....	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			

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

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.....	XXX.....	XXX.....	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 3E - COMMERCIAL MULTIPLE PERIL**

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.....	XXX.....	XXX.....	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			

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 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.....	X								
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2024	XXX	XXX	XXX	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.....	X								
7. 2020.....	XXX.....	XXX.....	XXX.....	XX								
8. 2021.....	XXX.....	XXX.....	XXX.....	X	XX							
9. 2022.....	XXX.....	XXX.....	XXX.....	X	XX							
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		

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

1. Prior.....	000.....	0	0	0	0	0	0	0	0	0	XXX.....	XXX.....
2. 2015.....											0	XXX.....
3. 2016.....	XXX.....										0	XXX.....
4. 2017.....	XXX.....	XXX.....									0	XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....								0	XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....							0	XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						0	XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					0	XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				0	XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			0	XXX.....
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	XXX

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

1. Prior.....	000.....	1	1	1	1	1	1	1	1	1	0	
2. 2015.....	2	5	5	5	5	5	5	5	5	5	1	0
3. 2016.....	XXX.....	1	1	1	4	4	4	4	4	4	0	0
4. 2017.....	XXX.....	XXX.....	1	2	5	5	5	5	5	5	5	0
5. 2018.....	XXX.....	XXX.....	XXX.....	0	0	7	7	7	7	7	7	0
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	0	3	3	3	3	3	3	0
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	1	1	3	0	0
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2	2	2	2	2	0	0
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	

**SCHEDULE P - PART 3H - SECTION 2 - OTHER 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.....	X								
7. 2020.....	XXX.....	XXX.....	XXX.....	XX								
8. 2021.....	XXX.....	XXX.....	XXX.....	X	XX							
9. 2022.....	XXX.....	XXX.....	XXX.....	X	XX							
10. 2023.....	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 HOME AND FARM INSURANCE COMPANY

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024		
1. Prior.....	000.....										0	XXX.....
2. 2015.....	58	0	0	0	65	65	65	65	65	65	65	XXX.....
3. 2016.....	XXX.....	62	0	0	80	80	80	80	80	80	80	XXX.....
4. 2017.....	XXX.....	XXX.....	58	0	62	61	61	61	61	61	61	XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....	48	52	52	52	52	52	52	52	XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	50	52	53	53	53	53	53	XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	39	48	51	51	51	51	XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	55	61	60	60	60	XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	61	65	65	65	XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	59	62	62	XXX.....
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	46	XXX	XXX

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

1. Prior.....	000.....										0	
2. 2015.....	266	0	0	0	266	266	266	266	266	266	0	0
3. 2016.....	XXX.....	311	0	0	323	323	323	323	323	323	0	0
4. 2017.....	XXX.....	XXX.....	321	0	325	324	324	324	324	324	0	0
5. 2018.....	XXX.....	XXX.....	XXX.....	228	231	231	231	231	231	231	0	0
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	232	244	244	244	244	244	83	18
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	197	210	209	209	209	66	8
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	234	245	242	241	69	10
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	286	271	270	76	10
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	317	333	75	11
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	348	73	10

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

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.....	XX						XXX.....	XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XX	XX					XXX.....	XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XX	XX				XXX.....	XXX.....
10. 2023.....	XXX.....		XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

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

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.....	XX						XXX.....	XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XX	XX					XXX.....	XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XX	XX	XX				XXX.....	XXX.....
10. 2023.....	XXX.....		XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

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

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.....	XX						XXX.....	XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XX	XX					XXX.....	XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XX	XX	XX				XXX.....	XXX.....
10. 2023.....	XXX.....		XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 3T - Warranty

**N O N E**

Schedule P - Part 3U - Pet Insurance Plans

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM 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.....	25	5	0	0	0	0	0	0	0	0
2. 2015.....	57	11	4	0	0	0	0	0	0	0
3. 2016.....	XXX.....	47	11	4	0	0	0	0	0	0
4. 2017.....	XXX.....	XXX.....	47	9	5	0	0	0	0	0
5. 2018.....	XXX.....	XXX.....	XXX.....	35	11	5	0	0	0	0
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	37	10	5	0	0	0
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	41	10	6	0	0
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	47	10	7	0
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	43	12	5
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	50	8
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	34

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

1. Prior.....	47	9	0	0	0	0	0	0	0	0
2. 2015.....	55	35	9	0	0	0	0	0	0	0
3. 2016.....	XXX.....	59	38	12	0	0	0	0	0	0
4. 2017.....	XXX.....	XXX.....	70	43	10	0	0	0	0	0
5. 2018.....	XXX.....	XXX.....	XXX.....	70	21	10	0	0	0	0
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	77	19	8	0	0	0
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	73	17	6	0	0
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	66	12	3	0
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	53	6	4
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	33	7
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50

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

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 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.....										
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								

**NONE**

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 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.....	5.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2015.....	8.....	4.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
3. 2016.....	XXX.....	9.....	5.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....
4. 2017.....	XXX.....	XXX.....	9.....	5.....	1.....	0.....	0.....	0.....	0.....	0.....
5. 2018.....	XXX.....	XXX.....	XXX.....	10.....	0.....	0.....	0.....	0.....	0.....	0.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	1.....	0.....	0.....	0.....	0.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	1.....	1.....	0.....	0.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	0.....	1.....	0.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	0.....	1.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3.....	1.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2.....

**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.....	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.....	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY  
**SCHEDULE P - PART 4I - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE,  
EARTHQUAKE, BURGLARY, AND THEFT)**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior										0
2. 2015										0
3. 2016	XXX									0
4. 2017	XXX	XXX								0
5. 2018	XXX	XXX	XXX	XXX						0
6. 2019	XXX	XXX	XXX	XXX	XXX					0
7. 2020	XXX	XXX	XXX	XXX	XXX					0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX			0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

**SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE**

1. Prior										0
2. 2015										0
3. 2016	XXX									0
4. 2017	XXX	XXX								0
5. 2018	XXX	XXX	XXX							0
6. 2019	XXX	XXX	XXX	XXX						0
7. 2020	XXX	XXX	XXX	XXX	XXX					0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX				0
9. 2022	XXX			2						
10. 2023	XXX	16								
11. 2024	XXX	23								

**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	XX	XXX						
7. 2020	XXX	XXX	XX	XXX	XX					
8. 2021	XXX	XXX	XX	XXX	XX	XX				
9. 2022	XXX	XXX	XX	XXX	XX	XX	XX			
10. 2023	XXX	XXX	XX	XXX	XXX	XXX	XXX	XXX	XXX	
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	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	XX	XXX						
7. 2020	XXX	XXX	XX	XXX	XX					
8. 2021	XXX	XXX	XX	XXX	XX	XX				
9. 2022	XXX	XXX	XX	XXX	XX	XX	XX			
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	XX	XXX						
7. 2020	XXX	XXX	XX	XXX	XX					
8. 2021	XXX	XXX	XX	XXX	XX	XX				
9. 2022	XXX	XXX	XX	XXX	XX	XX	XX			
10. 2023	XXX									
11. 2024	XXX									

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule P - Part 4T - Warranty

**N O N E**

Schedule P - Part 4U - Pet Insurance Plans

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

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

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	25	1	1	0	0	0	0	0	0	0
2. 2015	56	.72	.73	.73	.73	.73	.73	.73	.73	.73
3. 2016	XXX	62	.78	.79	.79	.79	.79	.79	.79	.79
4. 2017	XXX	XXX	.66	.79	.80	.80	.80	.80	.80	.80
5. 2018	XXX	XXX	XXX	46	52	53	53	53	53	53
6. 2019	XXX	XXX	XXX	XXX	49	61	62	62	62	62
7. 2020	XXX	XXX	XXX	XXX	XXX	45	52	53	53	53
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	38	59	60	60
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	44	53	54
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	56	62
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50

**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	2	0	0	0	0	0	0	0	0
2. 2015	18	1	0	0	0	0	0	0	0	0
3. 2016	XXX	19	1	1	0	0	0	0	0	0
4. 2017	XXX	XXX	14	0	0	0	0	0	0	0
5. 2018	XXX	XXX	XXX	6	0	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	8	1	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	6	1	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	14	0	0	0
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	0	0
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	0
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4

**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	14	1	(1)	0	0	0	0	0	0	0
2. 2015	119	129	129	129	129	129	129	129	129	129
3. 2016	XXX	140	150	151	150	150	150	150	150	150
4. 2017	XXX	XXX	130	137	138	138	138	138	138	138
5. 2018	XXX	XXX	XXX	86	90	91	91	91	91	91
6. 2019	XXX	XXX	XXX	XXX	102	108	108	108	108	108
7. 2020	XXX	XXX	XXX	XXX	XXX	64	67	67	67	67
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	64	75	76	76
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	64	67	68
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	74	76
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	64

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY**  
**SCHEDULE P - PART 5B - PRIVATE PASSENGER AUTO LIABILITY/MEDICAL**  
**SECTION 1**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior	13	1	1	0	0	0	0	0	0	0
2. 2015	50	.63	.65	.66	.66	.66	.66	.66	.66	.66
3. 2016	XXX	44	.57	.59	.60	.60	.60	.60	.60	.60
4. 2017	XXX	XXX	.41	.51	.53	.53	.53	.53	.53	.53
5. 2018	XXX	XXX	XXX	.33	.40	.41	.41	.41	.41	.41
6. 2019	XXX	XXX	XXX	XXX	.32	.41	.42	.42	.42	.42
7. 2020	XXX	XXX	XXX	XXX	XXX	.37	.46	.47	.47	.47
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.40	.49	.50	.50
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.42	.52	.53
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.41	.49
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36

**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	6	2	1	0	0	0	0	0	0	0
2. 2015	22	5	1	0	0	0	0	0	0	0
3. 2016	XXX	20	4	1	0	0	0	0	0	0
4. 2017	XXX	XXX	14	3	1	0	0	0	0	0
5. 2018	XXX	XXX	XXX	9	1	0	0	0	0	0
6. 2019	XXX	XXX	XXX	XXX	8	1	0	0	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	6	1	0	0	0
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	7	1	1	1
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	1	1
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	2
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7

**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	10	-(1)	1	-(1)	0	0	0	0	0	0
2. 2015	123	132	133	133	133	133	133	133	133	133
3. 2016	XXX	117	128	129	130	130	130	130	130	130
4. 2017	XXX	XXX	.99	107	109	108	108	108	108	108
5. 2018	XXX	XXX	XXX	75	80	80	80	80	80	80
6. 2019	XXX	XXX	XXX	XXX	.74	78	78	78	78	.78
7. 2020	XXX	XXX	XXX	XXX	XXX	51	.57	.57	.57	.57
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	55	.59	.60	.59
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.58	.63	.63
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.54	.60
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	50

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

**SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE**

**SECTION 1A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2015.....	1	1	1	1	1	1	1	1	1	1
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	1	1	1	1	1	1	1	1
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

**SECTION 2A**

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	98	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

**SECTION 3A**

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024
1. Prior.....	98	(98)	0	0	0	0	0	0	0	0
2. 2015.....	1	1	1	1	1	1	1	1	1	1
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	1	1	1	1	1	1	1	1
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0

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**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

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

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 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						
8. 2021.....	XXX	XXX	X	XXX	X						
9. 2022.....	XXX	XXX	X	XXX	X						
10. 2023.....	XXX	XXX	XXX	XXX	XXX						
11. 2024.....	XXX	XXX	XXX	XXX	XXX						
12. Totals.....	XXX	XXX	XXX	XXX	XXX						
13. Earned Premiums (Sch P-Pt. 1)											

**NONE**

**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	X	XXX							
5. 2018.....	XXX	XXX	X	XXX							
6. 2019.....	XXX	XXX	X	XXX							
7. 2020.....	XXX	XXX	X	XXX	X						
8. 2021.....	XXX	XXX	X	XXX	X						
9. 2022.....	XXX	XXX	X	XXX	X						
10. 2023.....	XXX	XXX	XXX	XXX	XXX						
11. 2024.....	XXX	XXX	XXX	XXX	XXX						
12. Totals.....	XXX	XXX	XXX	XXX	XXX						
13. Earned Premiums (Sch P-Pt. 1)											

**NONE**

**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.....	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	60	60	60	60	60	60	60	60	60	60	60
3. 2016.....	XXX	61	61	61	61	61	61	61	61	61	61
4. 2017.....	XXX	XXX	56	56	56	56	56	56	56	56	56
5. 2018.....	XXX	XXX	XXX	42	42	42	42	42	42	42	42
6. 2019.....	XXX	XXX	XXX	XXX	28	28	28	28	28	28	28
7. 2020.....	XXX	XXX	XXX	XXX	XXX	30	30	30	30	30	30
8. 2021.....	XXX	XXX	XXX	XXX	XXX	32	32	32	32	32	32
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	33	33	33	33	33
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	35	35	35
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	34	34
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Earned Premiums (Sch P-Pt. 1)	60	61	56	42	28	30	32	33	35	34	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.....	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	39	39	39	39	39	39	39	39	39	39	39
3. 2016.....	XXX	37	37	37	37	37	37	37	37	37	37
4. 2017.....	XXX	XXX	35	35	35	35	35	35	35	35	35
5. 2018.....	XXX	XXX	XXX	29	29	29	29	29	29	29	29
6. 2019.....	XXX	XXX	XXX	XXX	27	27	27	27	27	27	27
7. 2020.....	XXX	XXX	XXX	XXX	XXX	28	28	28	28	28	28
8. 2021.....	XXX	XXX	XXX	XXX	XXX	31	31	31	31	31	31
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	31	31	31	31	31
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33	33	33	33
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33	33	33
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
13. Earned Premiums (Sch P-Pt. 1)	39	37	35	29	27	28	31	31	33	33	XXX

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

**N O N E**

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

**N O N E**

Schedule P - Part 6M - International - Section 1

**N O N E**

Schedule P - Part 6M - International - Section 2

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY  
**SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (\$000 OMITTED)**  
**SECTION 1**

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners .....	102		0.0	1,029		0.0
2. Private Passenger Auto Liability/ Medical .....	195		0.0	394		0.0
3. Commercial Auto/Truck Liability/ Medical .....			0.0	0		0.0
4. Workers' Compensation .....			0.0	0		0.0
5. Commercial Multiple Peril .....			0.0	0		0.0
6. Medical Professional Liability - Occurrence .....			0.0	0		0.0
7. Medical Professional Liability - Claims - Made .....			0.0	0		0.0
8. Special Liability .....			0.0	0		0.0
9. Other Liability - Occurrence .....	4		0.0	1		0.0
10. Other Liability - Claims-Made .....			0.0	0		0.0
11. Special Property .....	18		0.0	97		0.0
12. Auto Physical Damage .....	17		0.0	533		0.0
13. Fidelity/Surety .....			0.0	0		0.0
14. Other .....			0.0	0		0.0
15. International .....			0.0	0		0.0
16. Reinsurance - Nonproportional Assumed Property .....	XXX	XXX	XXX	XXX	XXX	XXX
17. Reinsurance - Nonproportional Assumed Liability .....	XXX	XXX	XXX	XXX	XXX	XXX
18. Reinsurance - Nonproportional Assumed Financial Lines .....	XXX	XXX	XXX	XXX	XXX	XXX
19. Products Liability - Occurrence .....			0.0	0		0.0
20. Products Liability - Claims-Made .....			0.0	0		0.0
21. Financial Guaranty/Mortgage Guaranty .....			0.0	0		0.0
22. Warranty .....			0.0	0		0.0
23. Pet Insurance Plans .....			0.0	0		0.0
24. Totals .....	336	0	0.0	2,053	0	0.0

**SECTION 2**

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 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	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	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 HOME AND FARM INSURANCE COMPANY  
**SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (Continued)**  
**SECTION 4**

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
	1 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	

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY**  
**SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (\$000 OMITTED)**  
**SECTION 1**

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners .....	102		0.0	1,029		0.0
2. Private Passenger Auto Liability/Medical .....	195		0.0	394		0.0
3. Commercial Auto/Truck Liability/Medical .....			0.0	0		0.0
4. Workers' Compensation .....			0.0	0		0.0
5. Commercial Multiple Peril .....			0.0	0		0.0
6. Medical Professional Liability - Occurrence .....			0.0	0		0.0
7. Medical Professional Liability - Claims - Made .....			0.0	0		0.0
8. Special Liability .....			0.0	0		0.0
9. Other Liability - Occurrence .....	4		0.0	1		0.0
10. Other Liability - Claims-Made .....			0.0	0		0.0
11. Special Property .....	18		0.0	97		0.0
12. Auto Physical Damage .....	17		0.0	533		0.0
13. Fidelity/Surety .....			0.0	0		0.0
14. Other .....			0.0	0		0.0
15. International .....			0.0	0		0.0
16. Reinsurance - Nonproportional Assumed Property .....			0.0	0		0.0
17. Reinsurance - Nonproportional Assumed Liability .....			0.0	0		0.0
18. Reinsurance - Nonproportional Assumed Financial Lines .....			0.0	0		0.0
19. Products Liability - Occurrence .....			0.0	0		0.0
20. Products Liability - Claims-Made .....			0.0	0		0.0
21. Financial Guaranty/Mortgage Guaranty .....			0.0	0		0.0
22. Warranty .....			0.0	0		0.0
23. Pet Insurance Plans .....			0.0	0		0.0
24. Totals .....	336	0	0.0	2,053	0	0.0

**SECTION 2**

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 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.....	XXX.....					
7. 2020.....	XXX.....	XXX.....	XX.....	XXX.....	XXX.....	XXX.....				
8. 2021.....	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.....	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.....	XXX.....	XXX.....					
7. 2020.....	XXX.....	XXX.....	XX.....	XXX.....	XXX.....	XXX.....				
8. 2021.....	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.....	XXX.....	
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY  
**SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (Continued)**  
**SECTION 4**

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
	1 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.....	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.....	XXX.....						
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 HOME AND FARM 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 .....	0	0

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

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

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

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

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

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

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

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

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

7.2 (An extended statement may be attached.)

## ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

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

Allocated by States and Territories

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

**SCHEDULE Y**

**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

Asterisk	Explanation
*	Indicates a required field.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY

## SCHEDULE Y

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM 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 HOME AND FARM INSURANCE COMPANY

## SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

### REQUIRED FILINGS

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

	Responses
<b>MARCH FILING</b>	
1. Will an actuarial opinion be filed by March 1?	YES
2. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?	YES
<b>APRIL FILING</b>	
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
<b>MAY FILING</b>	
8. Will this company be included in a combined annual statement which is filed with the NAIC by May 1?	YES
<b>JUNE FILING</b>	
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.

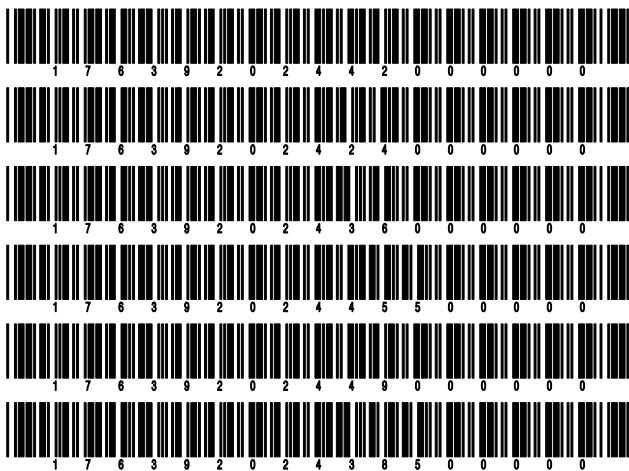
	Responses
<b>MARCH FILING</b>	
11. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
12. Will the Financial Guaranty Insurance Exhibit be filed by March 1?	NO
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state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

### **Explanations:**

- 11.
- 12.
- 13.
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### **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]



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

17. Reinsurance Summary Supplemental Filing [Document Identifier 401]



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



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



22. Bail Bond Supplement [Document Identifier 500]



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



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



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



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



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



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



30. Credit Insurance Experience Exhibit [Document Identifier 230]



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



32. Accident and Health Policy Experience Exhibit [Document Identifier 210]



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



34. Cybersecurity and Identity Theft Insurance Coverage Supplement  
[Document Identifier 550]



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



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



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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE HOME AND FARM INSURANCE COMPANY  
**OVERFLOW PAGE FOR WRITE-INS**

**NONE**



SUPPLEMENT FOR THE YEAR 2024 OF THE HOME AND FARM 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 0046

NAIC Company Code 17639

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