



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT

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

WILSON MUTUAL INSURANCE COMPANY

NAIC Group Code 0291 0291 NAIC Company Code 19950 Employer's ID Number 39-0739760
(Current) (Prior)
Organized under the Laws of Ohio, State of Domicile or Port of Entry OH
Country of Domicile United States of America
Incorporated/Organized 01/01/1872 Commenced Business 05/01/1872
Statutory Home Office 471 EAST BROAD STREET COLUMBUS, OH, US 43215
(Street and Number) (City or Town, State, Country and Zip Code)
Main Administrative Office 471 EAST BROAD STREET
(Street and Number)
COLUMBUS, OH, US 43215 614-225-8211
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)
Mail Address 471 EAST BROAD STREET COLUMBUS, OH, US 43215
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)
Primary Location of Books and Records 471 EAST BROAD STREET
(Street and Number)
COLUMBUS, OH, US 43215 614-225-8211
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)
Internet Website Address ENCOVA.COM
Statutory Statement Contact AMY E KUHLMAN 614-225-8285
(Name) (Area Code) (Telephone Number)
ACCOUNTING@ENCOVA.COM 614-225-8330
(E-mail Address) (FAX Number)

OFFICERS

PRESIDENT & CHIEF EXECUTIVE OFFICER THOMAS JOSEPH OBROKTA JR. TREASURER JAMES CHRISTOPHER HOWAT
SECRETARY WILLIAM JOSEPH MCGEE JR.

OTHER

JEFFREY LEIGH BENINTENDI GRADY BRENDAN CAMPBELL JAMES CHRISTOPHER HOWAT
THOMAS JOSEPH OBROKTA JR. MATTHEW CARL WILCOX

State of OH SS
County of FRANKLIN

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.

THOMAS JOSEPH OBROKTA JR. WILLIAM JOSEPH MCGEE JR. JAMES CHRISTOPHER HOWAT
PRESIDENT & CHIEF EXECUTIVE OFFICER SECRETARY TREASURER

Subscribed and sworn to before me this 3rd day of February 2025
Christine Lynn Yonut

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



Christine Lynn Yonut
Notary Public, State of Ohio
My Comm. Expires 01/16/2030



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291 BUSINESS IN THE STATE OF Georgia DURING THE YEAR 2024 NAIC Company Code 19950

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	0	0	0	0	0	0	0	0	0	0	0	4
2.1	Allied Lines	0	0	0	0	0	0	0	0	0	0	0	2
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	8,247
5.1	Commercial Multiple Peril (Non-Liability Portion)	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
6.	Mortgage Guaranty												
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	0	0	0	0	0	0	0	0	0	0	0	228
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
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	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	139
17.2	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	(3)
19.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	3,580
19.3	Commercial Auto No-Fault (Personal Injury Protection)	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
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	3,762
21.2	Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils)												
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and Theft	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
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	15,959
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291		BUSINESS IN THE STATE OF Illinois				DURING THE YEAR 2024				NAIC Company Code 19950		
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										
Fire	0	0	0	0	0	0	0	0	0	0	0	4
Allied Lines	0	0	0	0	0	0	0	0	0	0	0	1
Multiple Peril Crop												
Federal Flood												
Private Crop												
Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	7,473
Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
Mortgage Guaranty												
Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
Inland Marine	0	0	0	0	0	0	0	0	0	0	0	207
Pet Insurance Plans												
Financial Guaranty												
Medical Professional Liability - Occurrence												
Medical Professional Liability - Claims-Made												
Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
Comprehensive (hospital and medical) ind (b)												
Comprehensive (hospital and medical) group (b)												
Credit A&H (Group and Individual)												
Vision Only (b).....												
Dental Only (b)												
Disability Income (b)												
Medicare Supplement (b)												
Medicaid Title XIX (b)												
Medicare Title XVIII (b).....												
Long-Term Care (b)												
Federal Employees Health Benefits Plan (b)												
Other Health (b)												
Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	126
Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
Excess Workers' Compensation												
Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
Products Liability - Claims-Made												
Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	(2)
Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	3,244
Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	3,409
Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
Aircraft (all perils)												
Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
Surety												
Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0
Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0
Credit												
International												
Warranty												
Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
Total (a)	0	0	0	0	0	0	0	0	0	0	0	14,462
DETAILS OF WRITE-INS												
.....												
.....												
.....												
Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291 BUSINESS IN THE STATE OF Indiana DURING THE YEAR 2024 NAIC Company Code 19950

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	0	0	0	0	0	0	0	0	0	0	0	1
2.1	Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	1,360
5.1	Commercial Multiple Peril (Non-Liability Portion)	36,515	9,204	0	27,311	0	0	0	0	0	0	5,636	773
5.2	Commercial Multiple Peril (Liability Portion)	653	165	0	488	0	0	0	0	0	0	101	409
6.	Mortgage Guaranty												
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	47,358	10,932	0	36,426	0	0	0	0	0	0	8,683	90
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	1,482	374	0	1,108	0	0	0	0	0	0	229	2
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	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	423
17.2	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	18
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	590
19.3	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	1
19.4	Other Commercial Auto Liability	48,726	12,282	0	36,444	0	0	0	0	0	0	7,521	373
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	621
21.2	Commercial Auto Physical Damage	4,366	1,100	0	3,266	0	0	0	0	0	0	674	76
22.	Aircraft (all perils)												
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	9
27.	Boiler and Machinery	2,966	748	0	2,218	0	0	0	0	0	0	458	33
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)	142,066	34,804	0	107,262	0	0	0	0	0	0	23,301	4,778
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291 BUSINESS IN THE STATE OF Iowa DURING THE YEAR 2024 NAIC Company Code 19950

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	0	0	0	0	0	0	0	0	0	0	0	1
2.1	Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	1,459
5.1	Commercial Multiple Peril (Non-Liability Portion)	1,397	337	0	1,060	0	0	0	0	0	0	252	11
5.2	Commercial Multiple Peril (Liability Portion)	230	55	0	175	0	0	0	0	0	0	41	6
6.	Mortgage Guaranty												
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	0	0	0	0	0	0	0	0	0	0	0	41
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
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	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	30
17.2	Other Liability - Claims-Made	282	68	0	214	0	0	0	0	0	0	51	0
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	633
19.3	Commercial Auto No-Fault (Personal Injury Protection)	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	5
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	665
21.2	Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	1
22.	Aircraft (all perils)												
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery	65	16	0	49	0	0	0	0	0	0	12	0
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a)	1,974	476	0	1,498	0	0	0	0	0	0	356	2,853
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291 BUSINESS IN THE STATE OF Kansas DURING THE YEAR 2024 NAIC Company Code 19950

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	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
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	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
5.2	Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty												
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
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	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
17.2	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection)	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
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils)												
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and Theft	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
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	0
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291		BUSINESS IN THE STATE OF Kentucky				DURING THE YEAR 2024				NAIC Company Code 19950		
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										
Fire	0	0	0	0	0	0	0	0	0	0	0	2
Allied Lines	0	0	0	0	0	0	0	0	0	0	0	1
Multiple Peril Crop												
Federal Flood												
Private Crop												
Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	3,313
Commercial Multiple Peril (Non-Liability Portion)	45,618	15,783	0	29,835	0	0	0	0	0	0	4,030	1,150
Commercial Multiple Peril (Liability Portion)	8,480	3,743	0	4,737	0	0	0	0	0	0	1,273	608
Mortgage Guaranty												
Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
Inland Marine	1,353	325	0	1,028	0	0	0	0	0	0	218	169
Pet Insurance Plans												
Financial Guaranty												
Medical Professional Liability - Occurrence												
Medical Professional Liability - Claims-Made												
Earthquake	1,290	364	0	926	0	0	0	0	0	0	207	4
Comprehensive (hospital and medical) ind (b)												
Comprehensive (hospital and medical) group (b)												
Credit A&H (Group and Individual)												
Vision Only (b)												
Dental Only (b)												
Disability Income (b)												
Medicare Supplement (b)												
Medicaid Title XIX (b)												
Medicare Title XVIII (b)												
Long-Term Care (b)												
Federal Employees Health Benefits Plan (b)												
Other Health (b)												
Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
Other Liability - Occurrence	27,441	4,680	0	22,761	0	0	0	0	0	0	4,200	652
Other Liability - Claims-Made	911	361	0	550	0	0	0	0	0	0	143	26
Excess Workers' Compensation												
Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
Products Liability - Claims-Made												
Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	(1)
Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	1,438
Commercial Auto No-Fault (Personal Injury Protection)	1,151	461	0	690	0	0	0	0	0	0	58	2
Other Commercial Auto Liability	49,186	18,337	0	30,849	0	0	0	0	0	0	3,795	554
Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	1,511
Commercial Auto Physical Damage	8,526	2,821	0	5,705	0	0	0	0	0	0	1,171	113
Aircraft (all perils)												
Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
Surety												
Burglary and Theft	54	9	0	45	0	0	0	0	0	0	8	13
Boiler and Machinery	1,032	274	0	758	0	0	0	0	0	0	161	49
Credit												
International												
Warranty												
Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
Total (a)	145,042	47,157	0	97,885	0	0	0	0	0	0	15,265	9,602
DETAILS OF WRITE-INS												
Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 463
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291 BUSINESS IN THE STATE OF Maine DURING THE YEAR 2024 NAIC Company Code 19950

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	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
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	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
5.2	Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
6.	Mortgage Guaranty												
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
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	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
17.2	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
19.3	Commercial Auto No-Fault (Personal Injury Protection)	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
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
21.2	Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils)												
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and Theft	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
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	0
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291 BUSINESS IN THE STATE OF Maryland DURING THE YEAR 2024 NAIC Company Code 19950

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	0	0	0	0	0	0	0	0	0	0	0	1
2.1	Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	1,187
5.1	Commercial Multiple Peril (Non-Liability Portion)	1,135	72	0	1,063	0	0	0	0	0	0	170	9
5.2	Commercial Multiple Peril (Liability Portion)	34	2	0	32	0	0	0	0	0	0	5	5
6.	Mortgage Guaranty												
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	0	0	0	0	0	0	0	0	0	0	0	33
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
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	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	25
17.2	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	515
19.3	Commercial Auto No-Fault (Personal Injury Protection)	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	4
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	542
21.2	Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	1
22.	Aircraft (all perils)												
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0
27.	Boiler and Machinery	108	7	0	101	0	0	0	0	0	0	16	0
28.	Credit												
29.	International												
30.	Warranty												
31.	Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32.	Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33.	Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34.	Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
35.	Total (a)	1,277	81	0	1,196	0	0	0	0	0	0	192	2,323
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291 BUSINESS IN THE STATE OF Massachusetts DURING THE YEAR 2024 NAIC Company Code 19950

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	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
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	480
5.1	Commercial Multiple Peril (Non-Liability Portion)	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
6.	Mortgage Guaranty												
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	0	0	0	0	0	0	0	0	0	0	0	13
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
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	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	8
17.2	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	208
19.3	Commercial Auto No-Fault (Personal Injury Protection)	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
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	219
21.2	Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils)												
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and Theft	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
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	928
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291 BUSINESS IN THE STATE OF Michigan DURING THE YEAR 2024 NAIC Company Code 19950

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	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
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	13
5.1	Commercial Multiple Peril (Non-Liability Portion)	9,756	4,619	0	5,137	0	0	0	0	0	0	1,223	82
5.2	Commercial Multiple Peril (Liability Portion)	2,043	947	0	1,096	0	0	0	0	0	0	313	43
6.	Mortgage Guaranty												
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	0	0	0	0	0	0	0	0	0	0	0	6
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	26	13	0	13	0	0	0	0	0	0	0	0
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	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	43
17.2	Other Liability - Claims-Made	149	69	0	80	0	0	0	0	0	0	25	2
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	6
19.3	Commercial Auto No-Fault (Personal Injury Protection)	890	410	0	480	0	0	0	0	0	0	150	0
19.4	Other Commercial Auto Liability	3,285	1,512	0	1,773	0	0	0	0	0	0	555	40
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	6
21.2	Commercial Auto Physical Damage	1,569	722	0	847	0	0	0	0	0	0	265	8
22.	Aircraft (all perils)												
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	1
27.	Boiler and Machinery	483	222	0	261	0	0	0	0	0	0	82	4
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)	18,201	8,513	0	9,688	0	0	0	0	0	0	2,613	253
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291 BUSINESS IN THE STATE OF Minnesota DURING THE YEAR 2024 NAIC Company Code 19950

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	(13)	15,141	0	0	0	(16,273)	6,056	357	(4,142)	467	48	1
2.1	Allied Lines	(7)	9,843	0	0	93,523	123,130	73,730	226	(868)	5,320	31	0
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	(15,822)	313,798	0	0	497,163	434,003	63,508	8,073	7,024	6,341	1,279	1,224
5.1	Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	(2,373)	0	0	0	0	0	0	0
5.2	Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	5,500	5,500	827	827	0	0	0
6.	Mortgage Guaranty												
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	(78)	9,702	0	0	0	(523)	1,454	235	0	100	34	34
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	0	18	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	0	(1,488)	629	0	(54)	40	0	0
17.1	Other Liability - Occurrence	(83)	8,077	0	0	75,000	36,846	49,444	0	2,321	12,984	57	21
17.2	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	(1,455)	21,208	0	0	12,756	(10,357)	0	4,130	4,130	0	75	0
19.2	Other Private Passenger Auto Liability	(5,806)	81,739	0	0	363,122	(51,351)	302,894	103,905	81,373	13,693	284	531
19.3	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.4	Other Commercial Auto Liability	0	0	0	0	0	130	247	0	30	45	0	0
21.1	Private Passenger Auto Physical Damage	(4,216)	86,873	0	0	75,520	77,620	11,248	2,180	(3,130)	1,912	301	559
21.2	Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils)												
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and Theft	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
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)	(27,480)	546,400	0	0	1,114,710	594,863	514,710	119,933	87,511	40,902	2,108	2,369
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ and number of persons insured under indemnity only products

(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291 BUSINESS IN THE STATE OF Missouri DURING THE YEAR 2024 NAIC Company Code 19950

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	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
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	163
5.1	Commercial Multiple Peril (Non-Liability Portion)	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
6.	Mortgage Guaranty												
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	0	0	0	0	0	0	0	0	0	0	0	5
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
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	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	3
17.2	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	71
19.3	Commercial Auto No-Fault (Personal Injury Protection)	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
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	74
21.2	Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils)												
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and Theft	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
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	316
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291		BUSINESS IN THE STATE OF Nebraska				DURING THE YEAR 2024				NAIC Company Code 19950		
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										
Fire	0	0	0	0	0	0	0	0	0	0	0	1
Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0
Multiple Peril Crop												
Federal Flood												
Private Crop												
Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	1,534
Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
Mortgage Guaranty												
Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
Inland Marine	0	0	0	0	0	0	0	0	0	0	0	42
Pet Insurance Plans												
Financial Guaranty												
Medical Professional Liability - Occurrence												
Medical Professional Liability - Claims-Made												
Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
Comprehensive (hospital and medical) ind (b)												
Comprehensive (hospital and medical) group (b)												
Credit A&H (Group and Individual)												
Vision Only (b)												
Dental Only (b)												
Disability Income (b)												
Medicare Supplement (b)												
Medicaid Title XIX (b)												
Medicare Title XVIII (b)												
Long-Term Care (b)												
Federal Employees Health Benefits Plan (b)												
Other Health (b)												
Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	26
Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
Excess Workers' Compensation												
Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
Products Liability - Claims-Made												
Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	666
Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	700
Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
Aircraft (all perils)												
Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
Surety												
Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0
Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0
Credit												
International												
Warranty												
Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
Total (a)	0	0	0	0	0	0	0	0	0	0	0	2,969
DETAILS OF WRITE-INS												
Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291 BUSINESS IN THE STATE OF New Hampshire DURING THE YEAR 2024 NAIC Company Code 19950

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	0	0	0	0	0	0	0	0	0	0	0	1
2.1	Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	1,426
5.1	Commercial Multiple Peril (Non-Liability Portion)	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
6.	Mortgage Guaranty												
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	0	0	0	0	0	0	0	0	0	0	0	39
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
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	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	24
17.2	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	619
19.3	Commercial Auto No-Fault (Personal Injury Protection)	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
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	651
21.2	Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils)												
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and Theft	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
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	2,760
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291 BUSINESS IN THE STATE OF North Carolina DURING THE YEAR 2024 NAIC Company Code 19950

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	0	0	0	0	0	0	0	0	0	0	0	1
2.1	Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	2,482
5.1	Commercial Multiple Peril (Non-Liability Portion)	53,658	7,497	0	46,161	0	0	0	0	0	0	8,296	477
5.2	Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	252
6.	Mortgage Guaranty												
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	651	91	0	560	0	0	0	0	0	0	120	101
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	0	0	0	0	0	0	0	0	0	0	0	2
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	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	289
17.2	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	11
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	(1)
19.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	1,077
19.3	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	1
19.4	Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	230
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	1,132
21.2	Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	47
22.	Aircraft (all perils)												
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	5
27.	Boiler and Machinery	2,024	283	0	1,741	0	0	0	0	0	0	313	20
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)	56,333	7,871	0	48,462	0	0	0	0	0	0	8,730	6,127
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291 BUSINESS IN THE STATE OF Ohio DURING THE YEAR 2024 NAIC Company Code 19950

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	0	0	0	0	0	0	0	0	0	0	0	4
2.1	Allied Lines	0	0	0	0	0	0	0	0	0	0	0	2
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	7,733
5.1	Commercial Multiple Peril (Non-Liability Portion)	1,116,502	473,819	0	642,683	0	26,000	26,000	25,221	25,221	0	182,060	14,402
5.2	Commercial Multiple Peril (Liability Portion)	665,605	269,150	0	396,455	0	0	0	10,064	10,064	0	110,606	7,612
6.	Mortgage Guaranty												
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	39,976	16,416	0	23,560	0	0	0	0	0	0	6,424	1,182
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	1,725	886	0	839	0	0	0	0	0	0	264	46
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	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence	208,907	87,725	0	121,182	0	0	0	0	0	0	33,784	7,590
17.2	Other Liability - Claims-Made	29,863	9,991	0	19,872	0	0	0	0	0	0	4,538	329
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	(2)
19.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	3,357
19.3	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	21
19.4	Other Commercial Auto Liability	433,782	163,390	0	270,392	15,013	26,513	11,500	5,022	5,022	0	69,133	6,941
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	3,528
21.2	Commercial Auto Physical Damage	113,421	38,234	0	75,187	8,371	27,871	19,500	0	0	0	17,858	1,415
22.	Aircraft (all perils)												
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and Theft	15,085	6,442	0	8,643	0	0	0	0	0	0	2,394	159
27.	Boiler and Machinery	45,510	18,829	0	26,681	0	0	0	0	0	0	7,106	614
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)	2,670,376	1,084,881	0	1,585,495	23,384	80,384	57,000	40,306	40,306	0	434,168	54,931
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 84
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291 BUSINESS IN THE STATE OF Pennsylvania DURING THE YEAR 2024 NAIC Company Code 19950

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	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
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	639
5.1	Commercial Multiple Peril (Non-Liability Portion)	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
6.	Mortgage Guaranty												
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	0	0	0	0	0	0	0	0	0	0	0	18
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
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	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	11
17.2	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	277
19.3	Commercial Auto No-Fault (Personal Injury Protection)	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
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	291
21.2	Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils)												
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and Theft	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
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	1,236
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291		BUSINESS IN THE STATE OF Rhode Island				DURING THE YEAR 2024				NAIC Company Code 19950		
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										
Fire	0	0	0	0	0	0	0	0	0	0	0	1
Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0
Multiple Peril Crop												
Federal Flood												
Private Crop												
Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	1,356
Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
Mortgage Guaranty												
Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
Inland Marine	0	0	0	0	0	0	0	0	0	0	0	38
Pet Insurance Plans												
Financial Guaranty												
Medical Professional Liability - Occurrence												
Medical Professional Liability - Claims-Made												
Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
Comprehensive (hospital and medical) ind (b)												
Comprehensive (hospital and medical) group (b)												
Credit A&H (Group and Individual)												
Vision Only (b)												
Dental Only (b)												
Disability Income (b)												
Medicare Supplement (b)												
Medicaid Title XIX (b)												
Medicare Title XVIII (b)												
Long-Term Care (b)												
Federal Employees Health Benefits Plan (b)												
Other Health (b)												
Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	23
Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
Excess Workers' Compensation												
Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
Products Liability - Claims-Made												
Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	588
Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	618
Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
Aircraft (all perils)												
Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
Surety												
Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0
Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0
Credit												
International												
Warranty												
Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
Total (a)	0	0	0	0	0	0	0	0	0	0	0	2,623
DETAILS OF WRITE-INS												
Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291		BUSINESS IN THE STATE OF South Carolina				DURING THE YEAR 2024				NAIC Company Code 19950		
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										
Fire	0	0	0	0	0	0	0	0	0	0	0	0
Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0
Multiple Peril Crop												
Federal Flood												
Private Crop												
Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	856
Commercial Multiple Peril (Non-Liability Portion)	27,090	13,975	0	13,115	0	0	0	0	0	0	4,182	1,357
Commercial Multiple Peril (Liability Portion)	7,198	3,648	0	3,550	0	0	0	0	0	0	1,084	717
Mortgage Guaranty												
Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
Inland Marine	766	332	0	434	0	0	0	0	0	0	146	115
Pet Insurance Plans												
Financial Guaranty												
Medical Professional Liability - Occurrence												
Medical Professional Liability - Claims-Made												
Earthquake	0	0	0	0	0	0	0	0	0	0	0	4
Comprehensive (hospital and medical) ind (b)												
Comprehensive (hospital and medical) group (b)												
Credit A&H (Group and Individual)												
Vision Only (b)												
Dental Only (b)												
Disability Income (b)												
Medicare Supplement (b)												
Medicaid Title XIX (b)												
Medicare Title XVIII (b)												
Long-Term Care (b)												
Federal Employees Health Benefits Plan (b)												
Other Health (b)												
Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
Other Liability - Occurrence	13,855	6,020	0	7,835	0	0	0	0	0	0	2,221	717
Other Liability - Claims-Made	462	234	0	228	0	0	0	0	0	0	70	31
Excess Workers' Compensation												
Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
Products Liability - Claims-Made												
Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	372
Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	2
Other Commercial Auto Liability	53,787	23,771	0	30,016	0	0	0	0	0	0	8,568	654
Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	390
Commercial Auto Physical Damage	2,834	1,336	0	1,498	0	0	0	0	0	0	440	133
Aircraft (all perils)												
Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
Surety												
Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	15
Boiler and Machinery	1,605	770	0	835	0	0	0	0	0	0	247	58
Credit												
International												
Warranty												
Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
Total (a)	107,597	50,086	0	57,511	0	0	0	0	0	0	16,958	5,422
DETAILS OF WRITE-INS												
Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291 BUSINESS IN THE STATE OF Tennessee DURING THE YEAR 2024 NAIC Company Code 19950

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	0	0	0	0	0	0	0	0	0	0	0	1
2.1	Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	1,003
5.1	Commercial Multiple Peril (Non-Liability Portion)	26,156	14,193	0	11,963	0	0	0	0	0	0	4,828	494
5.2	Commercial Multiple Peril (Liability Portion)	4,108	2,124	0	1,985	0	0	0	0	0	0	679	261
6.	Mortgage Guaranty												
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	852	456	0	396	0	0	0	0	0	0	137	61
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	0	0	0	0	0	0	0	0	0	0	0	2
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	0	0	0	0	0	0	0	0	0	0	0	0
17.1	Other Liability - Occurrence	12,863	7,542	0	5,321	0	0	0	0	0	0	2,239	273
17.2	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	11
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	435
19.3	Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	1
19.4	Other Commercial Auto Liability	3,967	2,163	0	1,804	0	0	0	0	0	0	597	238
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	458
21.2	Commercial Auto Physical Damage	1,313	716	0	597	0	0	0	0	0	0	198	48
22.	Aircraft (all perils)												
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and Theft	237	129	0	108	0	0	0	0	0	0	36	5
27.	Boiler and Machinery	1,417	773	0	644	0	0	0	0	0	0	260	21
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)	50,913	28,096	0	22,817	0	0	0	0	0	0	8,973	3,311
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 15
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291		BUSINESS IN THE STATE OF Vermont				DURING THE YEAR 2024				NAIC Company Code 19950		
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										
Fire	0	0	0	0	0	0	0	0	0	0	0	1
Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0
Multiple Peril Crop												
Federal Flood												
Private Crop												
Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	1,046
Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
Mortgage Guaranty												
Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
Inland Marine	0	0	0	0	0	0	0	0	0	0	0	29
Pet Insurance Plans												
Financial Guaranty												
Medical Professional Liability - Occurrence												
Medical Professional Liability - Claims-Made												
Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
Comprehensive (hospital and medical) ind (b)												
Comprehensive (hospital and medical) group (b)												
Credit A&H (Group and Individual)												
Vision Only (b)												
Dental Only (b)												
Disability Income (b)												
Medicare Supplement (b)												
Medicaid Title XIX (b)												
Medicare Title XVIII (b)												
Long-Term Care (b)												
Federal Employees Health Benefits Plan (b)												
Other Health (b)												
Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	18
Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
Excess Workers' Compensation												
Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
Products Liability - Claims-Made												
Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	454
Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	477
Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
Aircraft (all perils)												
Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
Surety												
Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0
Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0
Credit												
International												
Warranty												
Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
Total (a)	0	0	0	0	0	0	0	0	0	0	0	2,024
DETAILS OF WRITE-INS												
Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291 BUSINESS IN THE STATE OF Virginia DURING THE YEAR 2024 NAIC Company Code 19950

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	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
2.2	Multiple Peril Crop												
2.3	Federal Flood												
2.4	Private Crop												
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
4.	Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	97
5.1	Commercial Multiple Peril (Non-Liability Portion)	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
6.	Mortgage Guaranty												
8.	Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
9.1	Inland Marine	0	0	0	0	0	0	0	0	0	0	0	3
9.2	Pet Insurance Plans												
10.	Financial Guaranty												
11.1	Medical Professional Liability - Occurrence												
11.2	Medical Professional Liability - Claims-Made												
12.	Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
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	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	2
17.2	Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
17.3	Excess Workers' Compensation												
18.1	Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
18.2	Products Liability - Claims-Made												
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
19.2	Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	42
19.3	Commercial Auto No-Fault (Personal Injury Protection)	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
21.1	Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	44
21.2	Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
22.	Aircraft (all perils)												
23.	Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
24.	Surety												
26.	Burglary and Theft	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
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	187
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291		BUSINESS IN THE STATE OF West Virginia				DURING THE YEAR 2024				NAIC Company Code 19950		
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										
Fire	0	0	0	0	0	0	0	0	0	0	0	1
Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0
Multiple Peril Crop												
Federal Flood												
Private Crop												
Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	1,845
Commercial Multiple Peril (Non-Liability Portion)	92,071	42,951	0	49,120	0	0	0	0	0	0	14,715	10,572
Commercial Multiple Peril (Liability Portion)	56,826	29,199	0	27,627	0	0	0	0	0	0	4,675	5,587
Mortgage Guaranty												
Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
Inland Marine	3,845	1,748	0	2,097	0	0	0	0	0	0	639	762
Pet Insurance Plans												
Financial Guaranty												
Medical Professional Liability - Occurrence												
Medical Professional Liability - Claims-Made												
Earthquake	0	0	0	0	0	0	0	0	0	0	0	34
Comprehensive (hospital and medical) ind (b)												
Comprehensive (hospital and medical) group (b)												
Credit A&H (Group and Individual)												
Vision Only (b)												
Dental Only (b)												
Disability Income (b)												
Medicare Supplement (b)												
Medicaid Title XIX (b)												
Medicare Title XVIII (b)												
Long-Term Care (b)												
Federal Employees Health Benefits Plan (b)												
Other Health (b)												
Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
Other Liability - Occurrence	467,203	180,386	0	286,817	0	0	0	10,089	10,089	0	81,107	5,507
Other Liability - Claims-Made	493	207	0	286	0	0	0	0	0	0	76	241
Excess Workers' Compensation												
Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
Products Liability - Claims-Made												
Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	(1)
Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	801
Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	146	15
Other Commercial Auto Liability	86,744	33,598	0	53,146	0	0	0	0	0	0	19,998	5,095
Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	842
Commercial Auto Physical Damage	6,464	2,729	0	3,736	0	0	0	0	0	0	1,187	1,038
Aircraft (all perils)												
Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
Surety												
Burglary and Theft	154	65	0	89	0	0	0	0	0	0	25	116
Boiler and Machinery	4,910	2,025	0	2,885	0	0	0	0	0	0	844	451
Credit												
International												
Warranty												
Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
Total (a)	718,710	292,907	0	425,803	0	0	0	10,089	10,089	0	123,411	32,906
DETAILS OF WRITE-INS												
Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 805
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291			BUSINESS IN THE STATE OF Wisconsin			DURING THE YEAR 2024			NAIC Company Code 19950			
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										
Fire	2,284	27,417	0	0	5,469	(23,968)	5,523	668	(2,950)	388	111	47
Allied Lines	908	21,165	0	0	58,428	49,158	9,231	2,901	(672)	533	87	19
Multiple Peril Crop												
Federal Flood												
Private Crop												
Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
Farmowners Multiple Peril	0	0	0	0	5,781	(41,685)	5,997	0	(3,938)	558	0	0
Homeowners Multiple Peril	4,551,210	5,026,193	0	2,331,542	1,477,088	1,852,608	1,323,017	132,272	206,763	112,411	760,455	93,076
Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	(640,139)	(640,039)	100	18,213	18,217	4	0	(20)
Commercial Multiple Peril (Liability Portion)	0	0	0	0	(1,038)	(11,038)	0	5,419	(24,678)	0	0	(10)
Mortgage Guaranty												
Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
Inland Marine	125,570	226,507	0	62,586	31,536	23,173	29,917	5,674	1,981	2,072	24,402	2,574
Pet Insurance Plans												
Financial Guaranty												
Medical Professional Liability - Occurrence												
Medical Professional Liability - Claims-Made												
Earthquake	3	103	0	1	0	0	0	0	0	0	1	0
Comprehensive (hospital and medical) ind (b)												
Comprehensive (hospital and medical) group (b)												
Credit A&H (Group and Individual)												
Vision Only (b)												
Dental Only (b)												
Disability Income (b)												
Medicare Supplement (b)												
Medicaid Title XIX (b)												
Medicare Title XVIII (b)												
Long-Term Care (b)												
Federal Employees Health Benefits Plan (b)												
Other Health (b)												
Workers' Compensation	0	0	0	0	322,433	(1,012,227)	2,539,137	14,908	(42,977)	110,829	0	0
Other Liability - Occurrence	76,652	157,515	0	39,905	141,740	(521,835)	636,443	63,051	18,969	267,062	14,561	1,561
Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
Excess Workers' Compensation												
Products Liability - Occurrence	0	0	0	0	0	(2,396)	4,444	0	(241)	194	0	0
Products Liability - Claims-Made												
Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	(1)	(30)
Other Private Passenger Auto Liability	1,974,458	2,140,235	0	973,506	1,161,909	1,793,537	3,147,128	112,844	230,503	258,975	311,627	40,401
Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
Other Commercial Auto Liability	0	0	0	0	100,000	(106,660)	48,737	34,807	39,226	7,672	0	(9)
Private Passenger Auto Physical Damage	2,073,277	2,284,860	0	1,031,145	1,087,036	1,151,736	152,302	57,787	29,456	37,122	325,330	42,462
Commercial Auto Physical Damage	0	0	0	0	(2,115)	(2,115)	0	0	0	0	0	(2)
Aircraft (all perils)												
Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
Surety												
Burglary and Theft	0	0	0	0	(6,252)	(6,252)	0	0	0	0	0	0
Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	(1)
Credit												
International												
Warranty												
Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
Total (a)	8,804,362	9,883,996	0	4,438,684	3,741,874	2,501,995	7,901,975	448,543	469,657	797,820	1,436,573	180,066
DETAILS OF WRITE-INS												
Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 63,641
(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 WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291		BUSINESS IN THE STATE OF Wyoming				DURING THE YEAR 2024				NAIC Company Code 19950		
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										
Fire	0	0	0	0	0	0	0	0	0	0	0	0
Allied Lines	0	0	0	0	0	0	0	0	0	0	0	0
Multiple Peril Crop												
Federal Flood												
Private Crop												
Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
Farmowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	0
Homeowners Multiple Peril	0	0	0	0	0	0	0	0	0	0	0	61
Commercial Multiple Peril (Non-Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
Commercial Multiple Peril (Liability Portion)	0	0	0	0	0	0	0	0	0	0	0	0
Mortgage Guaranty												
Ocean Marine	0	0	0	0	0	0	0	0	0	0	0	0
Inland Marine	0	0	0	0	0	0	0	0	0	0	0	2
Pet Insurance Plans												
Financial Guaranty												
Medical Professional Liability - Occurrence												
Medical Professional Liability - Claims-Made												
Earthquake	0	0	0	0	0	0	0	0	0	0	0	0
Comprehensive (hospital and medical) ind (b)												
Comprehensive (hospital and medical) group (b)												
Credit A&H (Group and Individual)												
Vision Only (b).....												
Dental Only (b)												
Disability Income (b)												
Medicare Supplement (b)												
Medicaid Title XIX (b)												
Medicare Title XVIII (b).....												
Long-Term Care (b)												
Federal Employees Health Benefits Plan (b)												
Other Health (b)												
Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
Other Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	1
Other Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
Excess Workers' Compensation												
Products Liability - Occurrence	0	0	0	0	0	0	0	0	0	0	0	0
Products Liability - Claims-Made												
Private Passenger Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
Other Private Passenger Auto Liability	0	0	0	0	0	0	0	0	0	0	0	27
Commercial Auto No-Fault (Personal Injury Protection)	0	0	0	0	0	0	0	0	0	0	0	0
Other Commercial Auto Liability	0	0	0	0	0	0	0	0	0	0	0	0
Private Passenger Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	28
Commercial Auto Physical Damage	0	0	0	0	0	0	0	0	0	0	0	0
Aircraft (all perils)												
Fidelity	0	0	0	0	0	0	0	0	0	0	0	0
Surety												
Burglary and Theft	0	0	0	0	0	0	0	0	0	0	0	0
Boiler and Machinery	0	0	0	0	0	0	0	0	0	0	0	0
Credit												
International												
Warranty												
Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
Aggregate Write-Ins for Other Lines of Business	0	0	0	0	0	0	0	0	0	0	0	0
Total (a)	0	0	0	0	0	0	0	0	0	0	0	119
DETAILS OF WRITE-INS												
</												

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



ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0291 BUSINESS IN THE STATE OF Grand Total DURING THE YEAR 2024 NAIC Company Code 19950

Line of Business		Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3	4	5	6	7	8	9	10	11	12
		1	2										
		Direct Premiums Written	Direct Premiums Earned	Dividends Paid or Credited to Policyholders on Direct Business	Direct Unearned Premium Reserves	Direct Losses Paid (deducting salvage)	Direct Losses Incurred	Direct Losses Unpaid	Direct Defense and Cost Containment Expense Paid	Direct Defense and Cost Containment Expense Incurred	Direct Defense and Cost Containment Expense Unpaid	Commissions and Brokerage Expenses	Taxes, Licenses and Fees
1.	Fire	2,271	42,559	0	0	5,469	(40,241)	11,579	1,024	(7,093)	855	159	69
2.1	Allied Lines	901	31,008	0	0	151,950	172,288	82,961	3,127	(1,540)	5,853	119	27
2.2	Multiple Peril Crop	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
2.4	Private Crop	0	0	0	0	0	0	0	0	0	0	0	0
2.5	Private Flood	0	0	0	0	0	0	0	0	0	0	0	0
3.	Farmowners Multiple Peril	0	0	0	0	5,781	(41,685)	5,997	0	(3,938)	558	0	0
4.	Homeowners Multiple Peril	4,535,388	5,339,991	0	2,331,542	1,974,251	2,286,610	1,386,525	140,345	213,787	118,752	761,734	138,072
5.1	Commercial Multiple Peril (Non-Liability Portion)	1,409,898	582,447	0	827,451	(642,512)	(616,412)	26,100	43,434	43,434	4	225,393	29,307
5.2	Commercial Multiple Peril (Liability Portion)	745,177	309,032	0	436,145	(1,038)	(5,538)	5,500	16,310	(13,788)	0	118,777	15,490
6.	Mortgage Guaranty	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
9.1	Inland Marine	220,293	266,509	0	127,087	31,536	22,650	31,371	5,909	1,981	2,172	40,802	5,791
9.2	Pet Insurance Plans	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
11.1	Medical Professional Liability - Occurrence	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
12.	Earthquake	4,526	1,757	0	2,887	0	0	0	0	0	0	701	94
13.1	Comprehensive (hospital and medical) ind (b)	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
14.	Credit A&H (Group and Individual)	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
15.2	Dental Only (b)	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
15.4	Medicare Supplement (b)	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
15.6	Medicare Title XVIII (b).....	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
15.8	Federal Employees Health Benefits Plan (b)	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
16.	Workers' Compensation	0	0	0	0	322,433	(1,013,715)	2,539,766	14,908	(43,031)	110,869	0	0
17.1	Other Liability - Occurrence	806,838	451,945	0	483,822	216,740	(484,989)	685,887	73,139	31,378	280,046	138,169	17,511
17.2	Other Liability - Claims-Made	32,160	10,930	0	21,230	0	0	0	0	0	0	4,902	668
17.3	Excess Workers' Compensation	0	0	0	0	0	0	0	0	0	0	0	0
18.1	Products Liability - Occurrence	0	0	0	0	0	(2,396)	4,444	0	(241)	194	0	0
18.2	Products Liability - Claims-Made	0	0	0	0	0	0	0	0	0	0	0	0
19.1	Private Passenger Auto No-Fault (Personal Injury Protection)	(1,455)	21,208	0	0	12,756	(10,357)	0	4,130	4,130	0	74	(44)
19.2	Other Private Passenger Auto Liability	1,968,652	2,221,975	0	973,506	1,525,031	1,742,185	3,450,022	216,749	311,876	272,668	311,911	59,932
19.3	Commercial Auto No-Fault (Personal Injury Protection)	2,041	871	0	1,170	0	0	0	0	0	0	355	42
19.4	Other Commercial Auto Liability	679,477	255,053	0	424,424	115,013	(80,017)	60,484	39,829	44,278	7,717	110,167	14,124
21.1	Private Passenger Auto Physical Damage	2,069,061	2,371,733	0	1,031,145	1,162,555	1,229,355	163,550	59,967	26,326	39,034	325,631	62,989
21.2	Commercial Auto Physical Damage	138,493	47,657	0	90,836	6,256	25,756	19,500	0	0	0	21,793	2,879
22.	Aircraft (all perils)	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
24.	Surety	0	0	0	0	0	0	0	0	0	0	0	0
26.	Burglary and Theft	15,530	6,646	0	8,884	(6,252)	(6,252)	0	0	0	0	2,463	323
27.	Boiler and Machinery	60,120	23,946	0	36,174	0	0	0	0	0	0	9,498	1,250
28.	Credit	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
30.	Warranty	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
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)	12,689,371	11,985,267	0	6,796,302	4,879,969	3,177,243	8,473,685	618,871	607,563	838,722	2,072,647	348,524
DETAILS OF WRITE-INS													
3401.	.....											
3402.	.....											
3403.	.....											
3498.	Summary of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3499.	Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)	0	0	0	0	0	0	0	0	0	0	0	0

(a) Finance and service charges not included in Lines 1 to 35 \$ 65,008
(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 WILSON MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 1

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

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year	2019	2018	2017
	\$1,600	\$1,600	\$1,600

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3

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

1	2	3	4	5	6	Reinsurance Recoverable On									16	Reinsurance Payable		19	20
						7	8	9	10	11	12	13	14	15		17	18			Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	Funds Held by Company Under Reinsurance Treaties
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Special Code	Reinsurance Premiums Ceded	Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commis-sions	Columns 7 through 14 Totals	Amount in Dispute included in Column 15	Ceded Balances Payable	Other Amounts Due to Reinsurers		
31-4259550	14621	Motorists Mutual Insurance Company	OH		12,393	1,548	0	6,108	82	1,862	1,594	6,738	98	18,032		669		17,362	3,679
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling					12,393	1,548	0	6,108	82	1,862	1,594	6,738	98	18,032	0	669	0	17,362	3,679
0499999. Total Authorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0799999. Total Authorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
0899999. Total Authorized - Affiliates					12,393	1,548	0	6,108	82	1,862	1,594	6,738	98	18,032	0	669	0	17,362	3,679
38-3207001	10166	Accident Fund Insurance Company Of America	MI		2	0	0	0	0	0	0	0		0		0		0	
06-1182357	22730	Allied World Insurance Company	NH		6	0	0	0	0	0	0	0		0		0		0	
36-2661954	10103	American Agricultural Insurance Company	IN		5	0	0	0	0	0	0	0		0		0		0	
06-1430254	10348	Arch Reinsurance Company	DE		20	0	0	0	0	0	0	0		0		0		0	
51-0434766	20370	Axis Reinsurance Company	NY		0	0	0	25	0	0	0	0		0		25		25	
47-0574325	32603	Berkley Insurance Company	DE		4	0	0	0	0	0	0	2		2		0		2	
42-0234980	21415	Employers Mutual Casualty Company	IA		0	0	0	0	0	0	0	0		0		0		0	
22-2005057	26921	Everest Reinsurance Company	DE		0	0	0	0	0	0	0	0		0		0		0	
06-0384680	11452	Hartford Steam Boiler Inspection & Insurance Co	CT		72	0	0	0	0	0	0	54		54		19		35	
13-4924125	10227	Munich Reinsurance America, Inc	DE		0	0	0	176	1	0	0	0		177		0		177	
31-4177100	23787	Nationwide Mutual Insurance Company	OH		2	0	0	0	0	0	0	0		0		0		0	
13-3031176	38636	Partner Reinsurance Company Of The US	NY		0	0	0	50	0	0	0	0		51		0		51	
23-1641984	10219	QBE Reinsurance Corporation	PA		0	0	0	50	0	0	0	0		51		0		51	
52-1952955	10357	Renaissance Reinsurance US, Inc	MD		6	0	0	151	1	0	0	0		152		0		152	
43-0613000	23388	Shelter Mutual Insurance Company	MO		3	0	0	0	0	0	0	0		0		0		0	
13-1675535	25364	Swiss Reinsurance America Corporation	NY		23	0	0	0	0	0	0	0		0		0		0	
06-0566050	25658	Travelers Indemnity Company	CT		1	0	0	0	0	0	0	0		0		0		0	
13-3088732	40517	WCF National Insurance Company	UT		2	0	0	0	0	0	0	0		0		0		0	
0999999. Total Authorized - Other U.S. Unaffiliated Insurers					146	0	0	454	2	0	0	56	0	511	0	19	0	492	0
AA-9991502	00000	Kentucky Mine Subsidence Insurance Fund	KY		1	0	0	0	0	0	0	0		0		0		0	
AA-9991159	00000	Michigan Catastrophic Claims Association	MI		0	0	0	0	0	0	0	0		0		0		0	
AA-9991503	00000	Ohio Mine Subsidence Insurance Fund	OH		0	0	0	0	0	0	0	0		0		0		0	
AA-9991506	00000	West Virginia Mine Subsidence Fund	WV		3	0	0	0	0	0	0	2		2		0		2	
1099999. Total Authorized - Pools - Mandatory Pools					4	0	0	0	0	0	0	2	0	2	0	0	0	2	0
AA-9995035	00000	Mutual Reinsurance Bureau	IL		14									0				0	
1199999. Total Authorized - Pools - Voluntary Pools					14	0	0	0	0	0	0	0	0	0	0	0	0	0	0
AA-1340125	00000	Hannover Ruckversicherungs AG	DEU		0									0				0	
AA-1126033	00000	Lloyd's Syndicate Number 0033	GBR		2									0				0	
AA-1126609	00000	Lloyd's Syndicate Number 0609	GBR		1									0				0	
AA-1126623	00000	Lloyd's Syndicate Number 0623	GBR		4									0				0	
AA-1127414	00000	Lloyd's Syndicate Number 1414	GBR		1									0				0	
AA-1120157	00000	Lloyd's Syndicate Number 1729	GBR		1									0				0	
AA-1120171	00000	Lloyd's Syndicate Number 1856	GBR		1									0				0	
AA-1128010	00000	Lloyd's Syndicate Number 2010	GBR		1									0				0	
AA-1128623	00000	Lloyd's Syndicate Number 2623	GBR		10									0				0	
AA-1128987	00000	Lloyd's Syndicate Number 2987	GBR		1									0				0	
AA-1129000	00000	Lloyd's Syndicate Number 3000	GBR		0									0				0	
AA-1120181	00000	Lloyd's Syndicate Number 5886	GBR		0									0				0	
AA-3190829	00000	Markel Bermuda Ltd	BMU		0									0				0	
1299999. Total Authorized - Other Non-U.S. Insurers					22	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1499999. Total Authorized Excluding Protected Cells (Sum of 08999999, 09999999, 10999999, 11999999 and 12999999)					12,579	1,548	0	6,561	84	1,862	1,594	6,796	98	18,545	0	689	0	17,856	3,679

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3

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

1	2	3	4	5	6	Reinsurance Recoverable On									16	Reinsurance Payable		19	20	
						7	8	9	10	11	12	13	14	15		17	18			
ID Number	NAIC Company Code	Name of Reinsurer	Domiciliary Jurisdiction	Special Code	Reinsurance Premiums Ceded	Paid Losses	Paid LAE	Known Case Loss Reserves	Known Case LAE Reserves	IBNR Loss Reserves	IBNR LAE Reserves	Unearned Premiums	Contingent Commis-sions	Columns 7 through 14 Totals	Amount in Dispute included in Column 15	Ceded Balances Payable	Other Amounts Due to Reinsurers	Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	Funds Held by Company Under Reinsurance Treaties	
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2299999. Total Unauthorized - Affiliates					0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
AA-3191298 ...	.00000	Antares Reinsurance Company Ltd	BMU		7									0				0	
AA-3190932 ...	.00000	Argo Re Ltd	BMU		0									0				0	
Devk Ruckversicherungs und Beteiligungs AG																				
AA-1340028 ...	.00000		DEU		9									0				0	
AA-1340004 ...	.00000	R+V Versicherung AG	DEU		23									0				0	
AA-3190757 ...	.00000	XL Re Ltd	BMU		0									0				0	
2699999. Total Unauthorized - Other Non-U.S. Insurers					39	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					39	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
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	0
CR-3194130 ...	.00000	Endurance Specialty Insurance Ltd	BMU		7	0	0	0	0					0				0	
CR-1340125 ...	.00000	Hannover Ruckversicherrungs AG	DEU		34	0	0	50	0					51				51	
4099999. Total Certified - Other Non-U.S. Insurers					41	0	0	50	0	0	0	0	0	51	0	0	0	51	0	
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)					41	0	0	50	0	0	0	0	0	51	0	0	0	51	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	
RJ-3194126 ...	.00000	Arch Reinsurance Ltd	BMU		3									0				0	
RJ-3191352 ...	.00000	Ascot Reinsurance Company Ltd	BMU		1									0				0	
RJ-3191454 ...	.00000	AXA XL Reinsurance Ltd	BMU		5									0				0	
RJ-3190770 ...	.00000	Chubb Tempest Reinsurance Ltd	BMU		5									0				0	
RJ-1120191 ...	.00000	Convex Insurance UK Ltd	GBR		8									0				0	
RJ-3194122 ...	.00000	DaVinci Reinsurance Ltd	BMU		1									0				0	
RJ-3191190 ...	.00000	Hamilton Re Ltd	BMU		0									0				0	
RJ-3190875 ...	.00000	Hiscox Insurance Company (Bermuda) Ltd	BMU		2									0				0	
RJ-1460019 ...	.00000	MS Amlin AG	CHE		3									0				0	
RJ-3190339 ...	.00000	Renaissance Reinsurance Ltd	BMU		1									0				0	
RJ-3191388 ...	.00000	Vermeer Reinsurance Ltd	BMU		2									0				0	
5499999. Total Reciprocal Jurisdiction - Other Non-U.S. Insurers					31	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)					31	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)					12,689	1,548	0	6,612	84	1,862	1,594	6,796	98	18,595	0	689	0	17,907	3,679	
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					12,689	1,548	0	6,612	84	1,862	1,594	6,796	98	18,595	0	689	0	17,907	3,679	

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

23

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

23.1

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Collateral				25	26	27	Ceded Reinsurance Credit Risk								
		21	22	23	24				28	29	30	31	32	33	34	35	36
		Multiple Beneficiary Trusts	Letters of Credit	Issuing or Confirming Bank Reference Number	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)	Stressed Recoverable (Col. 28 * 120%)	Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	Stressed Net Recoverable (Cols. 29-30)	Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	Reinsurer Designation Equivalent	Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	Credit Risk on Un- collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
5699999. Total Reciprocal Jurisdiction Excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		0	0	XXX	0	0	0	0	0	0	0	0	0	0	XXX	0	0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		51	0	XXX	0	4,418	14,178	0	562	674	19	655	51	604	XXX	1	13
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
9999999 Totals		51	0	XXX	0	4,418	14,178	0	562	674	19	655	51	604	XXX	1	13

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Aging of Ceded Reinsurance)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50
		37 Current	38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38+39 +40+41	43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)										
31-4259550 ..	Motorists Mutual Insurance Company	1,548					0	1,548		1,548	0	0	0	0.0	0.0	0.0	YES	0
0199999.	Total Authorized - Affiliates - U.S. Intercompany Pooling	1,548	0	0	0	0	0	1,548	0	0	1,548	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	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	XXX	0
0899999.	Total Authorized - Affiliates	1,548	0	0	0	0	0	1,548	0	0	1,548	0	0	0.0	0.0	0.0	XXX	0
38-3207001 ..	Accident Fund Insurance Company Of America						0	0		0	0	0		0.0	0.0	0.0	YES	0
06-1182357 ..	Allied World Insurance Company						0	0		0	0	0		0.0	0.0	0.0	YES	0
36-2661954 ..	American Agricultural Insurance Company						0	0		0	0	0		0.0	0.0	0.0	YES	0
06-1430254 ..	Arch Reinsurance Company						0	0		0	0	0		0.0	0.0	0.0	YES	0
51-0434766 ..	Axis Reinsurance Company						0	0		0	0	0		0.0	0.0	0.0	YES	0
47-0574325 ..	Berkley Insurance Company						0	0		0	0	0		0.0	0.0	0.0	YES	0
42-0234980 ..	Employers Mutual Casualty Company						0	0		0	0	0		0.0	0.0	0.0	YES	0
22-2005057 ..	Everest Reinsurance Company						0	0		0	0	0		0.0	0.0	0.0	YES	0
06-0384680 ..	Hartford Steam Boiler Inspection & Insurance Co ..						0	0		0	0	0		0.0	0.0	0.0	YES	0
13-4924125 ..	Munich Reinsurance America, Inc						0	0		0	0	0		0.0	0.0	0.0	YES	0
31-4177100 ..	Nationwide Mutual Insurance Company						0	0		0	0	0		0.0	0.0	0.0	YES	0
13-3031176 ..	Partner Reinsurance Company Of The US						0	0		0	0	0		0.0	0.0	0.0	YES	0
23-1641984 ..	QBE Reinsurance Corporation						0	0		0	0	0		0.0	0.0	0.0	YES	0
52-1952955 ..	Renaissance Reinsurance US, Inc						0	0		0	0	0		0.0	0.0	0.0	YES	0
43-0613000 ..	Shelter Mutual Insurance Company						0	0		0	0	0		0.0	0.0	0.0	YES	0
13-1675535 ..	Swiss Reinsurance America Corporation						0	0		0	0	0		0.0	0.0	0.0	YES	0
06-0566050 ..	Travelers Indemnity Company						0	0		0	0	0		0.0	0.0	0.0	YES	0
13-3088732 ..	WCF National Insurance Company						0	0		0	0	0		0.0	0.0	0.0	YES	0
0999999.	Total Authorized - Other U.S. Unaffiliated Insurers	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
AA-9991502 ..	Kentucky Mine Subsidence Insurance Fund						0	0		0	0	0		0.0	0.0	0.0	YES	0
AA-9991159 ..	Michigan Catastrophic Claims Association						0	0		0	0	0		0.0	0.0	0.0	YES	0
AA-9991503 ..	Ohio Mine Subsidence Insurance Fund						0	0		0	0	0		0.0	0.0	0.0	YES	0
AA-9991506 ..	West Virginia Mine Subsidence Fund						0	0		0	0	0		0.0	0.0	0.0	YES	0
1099999.	Total Authorized - Pools - Mandatory Pools	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
AA-9995035 ..	Mutual Reinsurance Bureau						0	0		0	0	0		0.0	0.0	0.0	YES	0
1199999.	Total Authorized - Pools - Voluntary Pools	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX	0
AA-1340125 ..	Hannover Ruckversicherungs AG						0	0		0	0	0		0.0	0.0	0.0	YES	0
AA-1126033 ..	Lloyd's Syndicate Number 0033						0	0		0	0	0		0.0	0.0	0.0	YES	0
AA-1126609 ..	Lloyd's Syndicate Number 0609						0	0		0	0	0		0.0	0.0	0.0	YES	0
AA-1126623 ..	Lloyd's Syndicate Number 0623						0	0		0	0	0		0.0	0.0	0.0	YES	0
AA-1127414 ..	Lloyd's Syndicate Number 1414						0	0		0	0	0		0.0	0.0	0.0	YES	0
AA-1120157 ..	Lloyd's Syndicate Number 1729						0	0		0	0	0		0.0	0.0	0.0	YES	0
AA-1120171 ..	Lloyd's Syndicate Number 1856						0	0		0	0	0		0.0	0.0	0.0	YES	0
AA-1128010 ..	Lloyd's Syndicate Number 2010						0	0		0	0	0		0.0	0.0	0.0	YES	0
AA-1128623 ..	Lloyd's Syndicate Number 2623						0	0		0	0	0		0.0	0.0	0.0	YES	0
AA-1128987 ..	Lloyd's Syndicate Number 2987						0	0		0	0	0		0.0	0.0	0.0	YES	0
AA-1129000 ..	Lloyd's Syndicate Number 3000						0	0		0	0	0		0.0	0.0	0.0	YES	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Reinsurance Recoverable on Paid Losses and Paid Loss Adjustment Expenses							44 Total Recoverable on Paid Losses & LAE Amounts in Dispute Included in Col. 43	45 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Included in Cols. 40 & 41	46 Total Recoverable on Paid Losses & LAE Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50	
		37 Current	Overdue					43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)											
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38+39 +40+41												
AA-1120181 ..	Lloyd's Syndicate Number 5886 .....	.....	.....	.....	.....	.....0	.....0	.....	.....	.....0	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0
AA-3190829 ..	Markel Bermuda Ltd .....	.....	.....	.....	.....	.....0	.....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	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)		1,548	0	0	0	0	0	1,548	0	0	1,548	0	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	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	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	XXX	0
AA-3191298 ..	Antares Reinsurance Company Ltd .....	.....	.....	.....	.....	.....0	.....0	.....	.....	.....0	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0
AA-3190932 ..	Argo Re Ltd .....	.....	.....	.....	.....	.....0	.....0	.....	.....	.....0	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0
AA-1340028 ..	Devk Ruckversicherungs und Beteiligungs AG .....	.....	.....	.....	.....	.....0	.....0	.....	.....	.....0	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0
AA-1340004 ..	R+V Versicherung AG .....	.....	.....	.....	.....	.....0	.....0	.....	.....	.....0	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0
AA-3190757 ..	XL Re Ltd .....	.....	.....	.....	.....	.....0	.....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	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	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	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	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	XXX	0
CR-3194130 ..	Endurance Specialty Insurance Ltd .....	.....	.....	.....	.....	.....0	.....0	.....	.....	.....0	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0
CR-1340125 ..	Hannover Ruckversicherrungs AG .....	.....	.....	.....	.....	.....0	.....0	.....	.....	.....0	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0
4099999. Total Certified - 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	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	XXX	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	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	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	0.0	XXX	0
RJ-3194126 ..	Arch Reinsurance Ltd .....	.....	.....	.....	.....	.....0	.....0	.....	.....	.....0	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0
RJ-3191352 ..	Ascot Reinsurance Company Ltd .....	.....	.....	.....	.....	.....0	.....0	.....	.....	.....0	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0
RJ-3191454 ..	AXA XL Reinsurance Ltd .....	.....	.....	.....	.....	.....0	.....0	.....	.....	.....0	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0
RJ-3190770 ..	Chubb Tempest Reinsurance Ltd .....	.....	.....	.....	.....	.....0	.....0	.....	.....	.....0	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0
RJ-1120191 ..	Convex Insurance UK Ltd .....	.....	.....	.....	.....	.....0	.....0	.....	.....	.....0	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0
RJ-3194122 ..	DaVinci Reinsurance Ltd .....	.....	.....	.....	.....	.....0	.....0	.....	.....	.....0	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0
RJ-3191190 ..	Hamilton Re Ltd .....	.....	.....	.....	.....	.....0	.....0	.....	.....	.....0	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0
RJ-3190875 ..	Hiscox Insurance Company (Bermuda) Ltd .....	.....	.....	.....	.....	.....0	.....0	.....	.....	.....0	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0
RJ-1460019 ..	MS Amlin AG .....	.....	.....	.....	.....	.....0	.....0	.....	.....	.....0	.....0	.....	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0.0	.....0
RJ-3190339 ..	Renaissance Reinsurance Ltd00000.00.00.00.00.00.00

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	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 Amounts Not in Dispute (Cols 43-44)	47 Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Cols. 40 + 41 - 45)	48 Amounts Received Prior 90 Days	49 Percentage Overdue Col. 42/Col. 43	50 Percentage of Amounts More Than 90 Days Overdue Not in Dispute (Col. 47/(Cols. 46+48))	51 Percentage More Than 120 Days Overdue (Col. 41/ Col. 43)	52 Is the Amount in Col. 50 Less Than 20%? (Yes or No)	53 Amounts in Col. 47 for Reinsurers with Values Less Than 20% in Col. 50		
		37 Current	Overdue					43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)												
			38 1 - 29 Days	39 30 - 90 Days	40 91 - 120 Days	41 Over 120 Days	42 Total Overdue Cols. 38+39 +40+41													
RJ-3191388 ...	Vermeer Reinsurance Ltd						0	0			0	0			0.0	0.0	0.0	0.0	YES.....	0
5499999. Total Reciprocal Jurisdiction - Other Non-U.S. Insurers		0	0	0	0	0	0	0	0	0	0	0	0	0	0.0	0.0	0.0	XXX		0
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	0.0	XXX		0
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		1,548	0	0	0	0	0	1,548	0	0	1,548	0	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	0.0	XXX		0
9999999 Totals		1,548	0	0	0	0	0	1,548	0	0	1,548	0	0	0	0.0	0.0	0.0	XXX		0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

(Provision for Reinsurance for Certified Reinsurers)

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance													Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
		54	55	56	57	58	59	60 Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ((Col. 20 + Col. 21 + Col. 22 + Col. 24) / Col. 58)	61 Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	62 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	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		
		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)											
31-4259550	Motorists Mutual Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0199999. Total Authorized - Affiliates - U.S. Intercompany Pooling				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0499999. Total Authorized - Affiliates - U.S. Non-Pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0799999. Total Authorized - Affiliates - Other (Non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0899999. Total Authorized - Affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
38-3207001	Accident Fund Insurance Company Of America	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-1182357	Allied World Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
36-2661954	American Agricultural Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-1430254	Arch Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
51-0434766	Axis Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47-0574325	Berkley Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0234980	Employers Mutual Casualty Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
22-2005057	Everest Reinsurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-0384680	Hartford Steam Boiler Inspection & Insurance Co	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	
31-4177100	Nationwide Mutual Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-3031176	Partner Reinsurance Company Of The US	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23-1641984	QBE Reinsurance Corporation	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
52-1952955	Renaissance Reinsurance US, Inc	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
43-0613000	Shelter Mutual Insurance Company	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	
06-0566050	Travelers Indemnity Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-3088732	WCF National Insurance Company	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0999999. Total Authorized - Other U.S. Unaffiliated Insurers				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991502	Kentucky Mine Subsidence Insurance Fund	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991159	Michigan Catastrophic Claims Association	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991503	Ohio Mine Subsidence Insurance Fund	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991506	West Virginia Mine Subsidence Fund	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1099999. Total Authorized - Pools - Mandatory Pools				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9995035	Mutual Reinsurance Bureau	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1199999. Total Authorized - Pools - Voluntary Pools				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340125	Hannover Ruckversicherungs AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126033	Lloyd's Syndicate Number 0033	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126609	Lloyd's Syndicate Number 0609	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126623	Lloyd's Syndicate Number 0623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1127414	Lloyd's Syndicate Number 1414	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120157	Lloyd's Syndicate Number 1729	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120171	Lloyd's Syndicate Number 1856	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128010	Lloyd's Syndicate Number 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128623	Lloyd's Syndicate Number 2623	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1128987	Lloyd's Syndicate Number 2987	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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

25.1

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	Provision for Certified Reinsurance															
		54 Certified Reinsurer Rating (1 through 6)	55 Effective Date of Certified Reinsurer Rating	56 Percent Collateral Required for Full Credit (0% through 100%)	57 Catastrophe Recoverables Qualifying for Collateral Deferral	58 Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	59 Dollar Amount of Collateral Required (Col. 56 * Col. 58)	60 Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	61 Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	62 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	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%)	Complete if Col. 52 = "No"; Otherwise Enter 0			69 Provision for Overdue Reinsurance Ceded to Certified Reinsurers (Greater of [Col. 62 + Col. 65] or Col.68; not to Exceed Col. 63)
														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	
5799999. Total Authorized, Unauthorized, Reciprocal Jurisdiction and Certified Excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)				XXX	0	51	5	XXX	XXX	0	51	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	
9999999 Totals				XXX	0	51	5	XXX	XXX	0	51	0	0	0	0	0	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71	72	73	74	75	76	77	78
			Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	Complete if Col. 52 = "Yes"; Otherwise Enter 0 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	Complete if Col. 52 = "No"; Otherwise Enter 0 Greater of 20% of Net Recoverable Net of Funds Held & Collateral, or 20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due (Greater of Col. 26 * 20% or Cols. [40 + 41] * 20%)	Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
31-4259550	Motorists Mutual Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
0199999	Total Authorized - Affiliates - U.S. Intercompany Pooling	0	XXX	XXX	0	0	0	XXX	XXX	0
0499999	Total Authorized - Affiliates - U.S. Non-Pool	0	XXX	XXX	0	0	0	XXX	XXX	0
0799999	Total Authorized - Affiliates - Other (Non-U.S.)	0	XXX	XXX	0	0	0	XXX	XXX	0
0899999	Total Authorized - Affiliates	0	XXX	XXX	0	0	0	XXX	XXX	0
38-3207001	Accident Fund Insurance Company Of America	0	XXX	XXX	0	0	0	XXX	XXX	0
06-1182357	Allied World Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
36-2661954	American Agricultural Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
06-1430254	Arch Reinsurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
51-0434766	Axis Reinsurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
47-0574325	Berkley Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
42-0234980	Employers Mutual Casualty Company	0	XXX	XXX	0	0	0	XXX	XXX	0
22-2005057	Everest Reinsurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
06-0384680	Hartford Steam Boiler Inspection & Insurance Co	0	XXX	XXX	0	0	0	XXX	XXX	0
13-4924125	Munich Reinsurance America, Inc	0	XXX	XXX	0	0	0	XXX	XXX	0
31-4177100	Nationwide Mutual Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
13-3031176	Partner Reinsurance Company Of The US	0	XXX	XXX	0	0	0	XXX	XXX	0
23-1641984	QBE Reinsurance Corporation	0	XXX	XXX	0	0	0	XXX	XXX	0
52-1952955	Renaissance Reinsurance US, Inc	0	XXX	XXX	0	0	0	XXX	XXX	0
43-0613000	Shelter Mutual Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
13-1675535	Swiss Reinsurance America Corporation	0	XXX	XXX	0	0	0	XXX	XXX	0
06-0566050	Travelers Indemnity Company	0	XXX	XXX	0	0	0	XXX	XXX	0
13-3088732	WCF National Insurance Company	0	XXX	XXX	0	0	0	XXX	XXX	0
0999999	Total Authorized - Other U.S. Unaffiliated Insurers	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-9991502	Kentucky Mine Subsidence Insurance Fund	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-9991159	Michigan Catastrophic Claims Association	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-9991503	Ohio Mine Subsidence Insurance Fund	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-9991506	West Virginia Mine Subsidence Fund	0	XXX	XXX	0	0	0	XXX	XXX	0
1099999	Total Authorized - Pools - Mandatory Pools	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-9995035	Mutual Reinsurance Bureau	0	XXX	XXX	0	0	0	XXX	XXX	0
1199999	Total Authorized - Pools - Voluntary Pools	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1340125	Hannover Ruckversicherungs AG	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126033	Lloyd's Syndicate Number 0033	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126609	Lloyd's Syndicate Number 0609	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1126623	Lloyd's Syndicate Number 0623	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1127414	Lloyd's Syndicate Number 1414	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120157	Lloyd's Syndicate Number 1729	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120171	Lloyd's Syndicate Number 1856	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128010	Lloyd's Syndicate Number 2010	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1128623	Lloyd's Syndicate Number 2623	0	XXX	XXX	0	0	0	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for Reinsurance			
			71	72	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0	74 Complete if Col. 52 = "No"; Otherwise Enter 0	75	76	77	78
			Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute + 20% of Amounts in Dispute ([Col. 47 * 20%] + [Col. 45 * 20%])	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%)	Provision for Amounts Ceded to Authorized and Reciprocal Jurisdiction Reinsurers (Cols. 73 + 74)	Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	Total Provision for Reinsurance (Cols. 75 + 76 + 77)
AA-1128987 ..	Lloyd's Syndicate Number 2987	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1129000 ..	Lloyd's Syndicate Number 3000	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-1120181 ..	Lloyd's Syndicate Number 5886	0	XXX	XXX	0	0	0	XXX	XXX	0
AA-3190829 ..	Markel Bermuda Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
1299999. Total Authorized - Other Non-U.S. Insurers		0	XXX	XXX	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	XXX	XXX	0
1899999. Total Unauthorized - Affiliates - U.S. Non-Pool		0	0	0	XXX	XXX	XXX	0	XXX	0
2199999. Total Unauthorized - Affiliates - Other (Non-U.S.)		0	0	0	XXX	XXX	XXX	0	XXX	0
2299999. Total Unauthorized - Affiliates		0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3191298 ..	Antares Reinsurance Company Ltd	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190932 ..	Argo Re Ltd	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1340028 ..	Devk Ruckversicherungs und Beteiligungs AG	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-1340004 ..	R+V Versicherung AG	0	0	0	XXX	XXX	XXX	0	XXX	0
AA-3190757 ..	XL Re Ltd	0	0	0	XXX	XXX	XXX	0	XXX	0
2699999. Total Unauthorized - Other Non-U.S. Insurers		0	0	0	XXX	XXX	XXX	0	XXX	0
2899999. Total Unauthorized Excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		0	0	0	XXX	XXX	XXX	0	XXX	0
3299999. Total Certified - Affiliates - U.S. Non-Pool		XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3599999. Total Certified - Affiliates - Other (Non-U.S.)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
3699999. Total Certified - Affiliates		XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
CR-3194130 ..	Endurance Specialty Insurance Ltd	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
CR-1340125 ..	Hannover Ruckversicherungs AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
4099999. Total Certified - Other Non-U.S. Insurers		XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
4299999. Total Certified Excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
4699999. Total Reciprocal Jurisdiction - Affiliates - U.S. Non-Pool		0	XXX	XXX	0	0	0	XXX	XXX	0
4999999. Total Reciprocal Jurisdiction - Affiliates - Other (Non-U.S.)		0	XXX	XXX	0	0	0	XXX	XXX	0
5099999. Total Reciprocal Jurisdiction - Affiliates		0	XXX	XXX	0	0	0	XXX	XXX	0
RJ-3194126 ..	Arch Reinsurance Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
RJ-3191352 ..	Ascot Reinsurance Company Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
RJ-3191454 ..	AXA XL Reinsurance Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
RJ-3190770 ..	Chubb Tempest Reinsurance Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
RJ-1120191 ..	Convex Insurance UK Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
RJ-3194122 ..	DaVinci Reinsurance Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
RJ-3191190 ..	Hamilton Re Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
RJ-3190875 ..	Hiscox Insurance Company (Bermuda) Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
RJ-1460019 ..	MS Amlin AG	0	XXX	XXX	0	0	0	XXX	XXX	0
RJ-3190339 ..	Renaissance Reinsurance Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0
RJ-3191388 ..	Vermeer Reinsurance Ltd	0	XXX	XXX	0	0	0	XXX	XXX	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 3 (Continued)

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 4

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE F - PART 5

Interrogatories for Schedule F, Part 3 (000 Omitted)

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

	1	2	3
	Name of Reinsurer	Commission Rate	Ceded Premium
1.			
2.			
3.			
4.			
5.			

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

	1	2	3	4
	Name of Reinsurer	Total Recoverables	Ceded Premiums	Affiliated
6.	Motorists Mutual Insurance Company	18,032	12,393	Yes [X] No []
7.	Munich Reinsurance America, Inc	177	0	Yes [] No [X]
8.	Renaissance Reinsurance US, Inc	152	6	Yes [] No [X]
9.	Hartford Steam Boiler Inspection & Insurance Co	54	72	Yes [] No [X]
10.	Hannover Ruckversicherrungs AG	51	34	Yes [] No [X]

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

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	57,088,909		57,088,909
2. Premiums and considerations (Line 15)	5,169,098		5,169,098
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	1,548,470	(1,548,470)	0
4. Funds held by or deposited with reinsured companies (Line 16.2)	6,838,977		6,838,977
5. Other assets	4,412,672	4,268,634	8,681,306
6. Net amount recoverable from reinsurers		13,037,035	13,037,035
7. Protected cell assets (Line 27)	0		0
8. Totals (Line 28)	75,058,126	15,757,199	90,815,325
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	30,112,646	10,152,336	40,264,982
10. Taxes, expenses, and other obligations (Lines 4 through 8)	2,449,198	1,135,192	3,584,390
11. Unearned premiums (Line 9)	8,311,243	6,794,284	15,105,527
12. Advance premiums (Line 10)	104,622		104,622
13. Dividends declared and unpaid (Line 11.1 and 11.2)	0		0
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	688,720	(688,299)	421
15. Funds held by company under reinsurance treaties (Line 13)	3,678,830	(3,678,830)	0
16. Amounts withheld or retained by company for account of others (Line 14)	0		0
17. Provision for reinsurance (Line 16)	0		0
18. Other liabilities	1,720,930	2,042,515	3,763,445
19. Total liabilities excluding protected cell business (Line 26)	47,066,187	15,757,199	62,823,386
20. Protected cell liabilities (Line 27)			0
21. Surplus as regards policyholders (Line 37)	27,991,938	XXX	27,991,938
22. Totals (Line 38)	75,058,125	15,757,199	90,815,324

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

If yes, give full explanation: The company cedes to its affiliate, Motorists Mutual Insurance Company, through a 100% intercompany pooling arrangement. Refer to Note 26 in the Notes to Financial Statements for more information.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS

	Total		Comprehensive (Hospital and Medical) Individual		Comprehensive (Hospital and Medical) Group		Medicare Supplement		Vision Only		Dental Only		Federal Employees Health Benefits Plan	
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %
1. Premiums written	0	XXX	0	XXX	0	XXX	0	XXX	0	XXX	0	XXX	0	XXX
2. Premiums earned	0	XXX		XXX		XXX		XXX		XXX		XXX		XXX
3. Incurred claims	(247)	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
4. Cost containment expenses	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0
5. Incurred claims and cost containment expenses (Lines 3 and 4)	(247)	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
6. Increase in contract reserves	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
7. Commissions (a)	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0
8. Other general insurance expenses	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0
9. Taxes, licenses and fees	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0
10. Total other expenses incurred	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
11. Aggregate write-ins for deductions	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
12. Gain from underwriting before dividends or refunds .	247	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
13. Dividends or refunds	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0
14. Gain from underwriting after dividends or refunds	247	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
DETAILS OF WRITE-INS														
1101.														
1102.														
1103.														
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

	Medicare Title XVIII		Medicaid Title XIX		Credit A&H		Disability Income		Long-Term Care		Other Health	
	15 Amount	16 %	17 Amount	18 %	19 Amount	20 %	21 Amount	22 %	23 Amount	24 %	25 Amount	26 %
1. Premiums written	0	XXX	0	XXX	0	XXX	0	XXX	0	XXX	0	XXX
2. Premiums earned		XXX		XXX		XXX		XXX		XXX		XXX
3. Incurred claims	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	(247)	0.0
4. Cost containment expenses		0.0		0.0		0.0		0.0		0.0		0.0
5. Incurred claims and cost containment expenses (Lines 3 and 4)	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	(247)	0.0
6. Increase in contract reserves	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
7. Commissions (a)		0.0		0.0		0.0		0.0		0.0		0.0
8. Other general insurance expenses		0.0		0.0		0.0		0.0		0.0		0.0
9. Taxes, licenses and fees		0.0		0.0		0.0		0.0		0.0		0.0
10. Total other expenses incurred	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
11. Aggregate write-ins for deductions	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
12. Gain from underwriting before dividends or refunds .	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	247	0.0
13. Dividends or refunds		0.0		0.0		0.0		0.0		0.0		0.0
14. Gain from underwriting after dividends or refunds	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	247	0.0
DETAILS OF WRITE-INS												
1101.												
1102.												
1103.												
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

PART 2. - RESERVES AND LIABILITIES

	1	2	3	4	5	6	7	8	9	10	11	12	13
	Total	Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	Other Health
A. Premium Reserves:													
1. Unearned premiums	0	0	0	0	0	0	0	0	0	0	0	0	0
2. Advance premiums	0												
3. Reserve for rate credits	0												
4. Total premium reserves, current year	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Total premium reserves, prior year	0												
6. Increase in total premium reserves	0	0	0	0	0	0	0	0	0	0	0	0	0
B. Contract Reserves:													
1. Additional reserves (a)	0												
2. Reserve for future contingent benefits	0												
3. Total contract reserves, current year	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Total contract reserves, prior year	0												
5. Increase in contract reserves	0	0	0	0	0	0	0	0	0	0	0	0	0
C. Claim Reserves and Liabilities:													
1. Total current year	0	0	0	0	0	0	0	0	0	0	0	0	0
2. Total prior year	0												
3. Increase	0	0	0	0	0	0	0	0	0	0	0	0	0

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

	1	2	3	4	5	6	7	8	9	10	11	12	13
	Total	Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	Other Health
1. Claims paid during the year:													
1.1 On claims incurred prior to current year	(247)												(247)
1.2 On claims incurred during current year	0												
2. Claim reserves and liabilities, December 31, current year:													
2.1 On claims incurred prior to current year	0												
2.2 On claims incurred during current year	0												
3. Test:													
3.1 Lines 1.1 and 2.1	(247)	0	0	0	0	0	0	0	0	0	0	0	(247)
3.2 Claim reserves and liabilities, December 31, prior year	0												
3.3 Line 3.1 minus Line 3.2	(247)	0	0	0	0	0	0	0	0	0	0	0	(247)

PART 4. - REINSURANCE

	1	2	3	4	5	6	7	8	9	10	11	12	13
	Total	Comprehensive (Hospital and Medical) Individual	Comprehensive (Hospital and Medical) Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Medicare Title XVIII	Medicaid Title XIX	Credit A&H	Disability Income	Long-Term Care	Other Health
A. Reinsurance Assumed:													
1. Premiums written	0	0	0	0	0	0	0	0	0	0	0	0	0
2. Premiums earned	0												
3. Incurred claims	(247)												(247)
4. Commissions	0												
B. Reinsurance Ceded:													
1. Premiums written	0	0	0	0	0	0	0	0	0	0	0	0	0
2. Premiums earned	0												
3. Incurred claims	0												
4. Commissions	0												

(a) Includes \$ premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Comprehensive (Hospital and Medical) Individual	2 Comprehensive (Hospital and Medical) Group	3 Medicare Supplement	4 Vision Only	5 Dental Only	6 Federal Employees Health Benefits Plan	7 Medicare Title XVIII	8 Medicaid Title XIX	9 Credit A&H	10 Disability Income	11 Long-Term Care	12 Other Health	13 Total
A. Direct:													
1. Incurred claims	0	0	0	0	0	0	0	0	0	0	0	0	0
2. Beginning claim reserves and liabilities													0
3. Ending claim reserves and liabilities													0
4. Claims paid	0	0	0	0	0	0	0	0	0	0	0	0	0
B. Assumed Reinsurance:													
1. Incurred claims												(247)	(247)
2. Beginning claim reserves and liabilities													0
3. Ending claim reserves and liabilities													0
4. Claims paid											0	(247)	(247)
C. Ceded Reinsurance:													
1. Incurred claims													0
2. Beginning claim reserves and liabilities													0
3. Ending claim reserves and liabilities													0
4. Claims paid												0	0
D. Net:													
1. Incurred claims	0	0	0	0	0	0	0	0	0	0	0	(247)	(247)
2. Beginning claim reserves and liabilities	0	0	0	0	0	0	0	0	0	0	0	0	0
3. Ending claim reserves and liabilities	0	0	0	0	0	0	0	0	0	0	0	0	0
4. Claims paid	0	0	0	0	0	0	0	0	0	0	0	(247)	(247)
E. Net Incurred Claims and Cost Containment Expenses:													
1. Incurred claims and cost containment expenses	0	0	0	0	0	0	0	0	0	0	0	(247)	(247)
2. Beginning reserves and liabilities													0
3. Ending reserves and liabilities													0
4. Paid claims and cost containment expenses	0	0	0	0	0	0	0	0	0	0	0	(247)	(247)

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 1A - HOMEOWNERS/FARMOWNERS

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0.....	11.....	0.....	0.....	0.....	0.....	0.....	(11).....	XXX.....
2. 2015.....	1,853.....	114.....	1,740.....	872.....	2.....	21.....	0.....	128.....	0.....	17.....	1,019.....	110.....
3. 2016.....	1,687.....	84.....	1,603.....	774.....	0.....	14.....	0.....	108.....	0.....	10.....	896.....	95.....
4. 2017.....	1,520.....	47.....	1,473.....	1,102.....	67.....	18.....	0.....	159.....	0.....	9.....	1,212.....	113.....
5. 2018.....	1,410.....	52.....	1,358.....	689.....	0.....	14.....	0.....	119.....	0.....	12.....	822.....	119.....
6. 2019.....	1,290.....	47.....	1,243.....	759.....	14.....	28.....	0.....	120.....	0.....	10.....	893.....	132.....
7. 2020.....	1,154.....	52.....	1,102.....	827.....	44.....	3.....	0.....	151.....	0.....	12.....	937.....	81.....
8. 2021.....	1,057.....	50.....	1,006.....	493.....	0.....	4.....	0.....	145.....	0.....	13.....	643.....	46.....
9. 2022.....	981.....	44.....	936.....	584.....	1.....	32.....	0.....	143.....	0.....	2.....	759.....	55.....
10. 2023.....	962.....	48.....	914.....	634.....	1.....	30.....	0.....	78.....	0.....	2.....	741.....	77.....
11. 2024.....	1,292.....	39.....	1,253.....	460.....	3.....	17.....	0.....	52.....	0.....	0.....	526.....	41.....
12. Totals.....	XXX.....	XXX.....	XXX.....	7,193.....	143.....	182.....	0.....	1,204.....	0.....	87.....	8,436.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	2.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	2.....	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.....	2.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....	0.....
6. 2019.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
7. 2020.....	3.....	0.....	1.....	0.....	0.....	0.....	0.....	0.....	1.....	0.....	0.....	5.....	0.....
8. 2021.....	5.....	0.....	1.....	0.....	0.....	0.....	1.....	0.....	1.....	0.....	0.....	7.....	0.....
9. 2022.....	10.....	0.....	2.....	0.....	0.....	0.....	1.....	0.....	2.....	0.....	0.....	15.....	1.....
10. 2023.....	35.....	0.....	3.....	0.....	0.....	0.....	3.....	0.....	6.....	0.....	0.....	47.....	4.....
11. 2024.....	140.....	0.....	93.....	0.....	0.....	0.....	18.....	0.....	40.....	0.....	0.....	291.....	8.....
12. Totals.....	198.....	0.....	100.....	0.....	0.....	0.....	22.....	0.....	50.....	0.....	0.....	370.....	12.....

	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	27	28	29	30	31	32	33		35	36
	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.....	2.....	0.....
2. 2015.....	1,021.....	2.....	1,019.....	55.1.....	2.0.....	58.6.....	0.....	0.....	1.3.....	0.....	0.....
3. 2016.....	896.....	0.....	896.....	53.1.....	0.0.....	55.9.....	0.....	0.....	1.3.....	0.....	0.....
4. 2017.....	1,279.....	67.....	1,212.....	84.1.....	141.3.....	82.3.....	0.....	0.....	1.3.....	0.....	0.....
5. 2018.....	825.....	0.....	825.....	58.5.....	0.0.....	60.7.....	0.....	0.....	1.3.....	3.....	0.....
6. 2019.....	907.....	14.....	893.....	70.3.....	30.0.....	71.9.....	0.....	0.....	1.3.....	0.....	0.....
7. 2020.....	985.....	44.....	941.....	85.4.....	85.3.....	85.4.....	0.....	0.....	1.3.....	4.....	1.....
8. 2021.....	650.....	0.....	650.....	61.5.....	0.1.....	64.6.....	0.....	0.....	1.3.....	6.....	2.....
9. 2022.....	774.....	1.....	773.....	78.9.....	1.9.....	82.6.....	0.....	0.....	1.3.....	12.....	3.....
10. 2023.....	789.....	1.....	788.....	82.0.....	2.9.....	86.2.....	0.....	0.....	1.3.....	38.....	8.....
11. 2024.....	820.....	3.....	818.....	63.5.....	6.6.....	65.3.....	0.....	0.....	1.3.....	233.....	58.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	298.....	72.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	30	52	0	0	0	0	0	(22)	XXX.....
2. 2015.....	1,577	25	1,552	941	0	52	0	181	0	33	1,175	213
3. 2016.....	1,361	17	1,344	794	0	46	0	161	0	29	1,001	173
4. 2017.....	1,176	0	1,177	662	0	32	0	96	0	22	790	142
5. 2018.....	1,007	0	1,007	578	0	30	0	89	0	20	697	229
6. 2019.....	886	0	886	499	1	39	0	100	0	16	638	185
7. 2020.....	747	0	747	330	(1)	12	0	94	0	12	437	52
8. 2021.....	640	0	640	351	0	14	0	81	0	9	446	29
9. 2022.....	611	1	610	302	0	29	0	90	0	8	421	34
10. 2023.....	669	1	668	299	0	22	0	53	0	10	373	42
11. 2024.....	906	1	905	231	0	13	0	26	0	6	270	48
12. Totals	XXX	XXX	XXX	5,016	52	290	0	972	0	165	6,226	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	372	302	0	0	0	0	0	0	0	0	0	71	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	0	0
3. 2016.....	3	0	0	0	0	0	0	0	0	0	0	4	0
4. 2017.....	1	0	0	0	0	0	0	0	0	0	0	1	0
5. 2018.....	2	0	0	0	0	0	0	0	0	0	0	3	0
6. 2019.....	3	0	0	0	0	0	0	0	0	0	0	4	0
7. 2020.....	10	0	1	0	0	0	0	0	0	0	0	12	0
8. 2021.....	16	0	2	0	0	0	1	0	1	0	0	20	1
9. 2022.....	47	0	6	0	0	0	2	0	4	0	0	59	2
10. 2023.....	119	0	18	0	0	0	6	0	11	0	0	154	5
11. 2024.....	316	0	97	0	0	0	47	0	42	0	0	501	17
12. Totals	890	302	127	0	0	0	56	0	58	0	0	829	27

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	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.....	.....71	.....0
2. 2015.....	.....1,176	.....0	.....1,176	.....74.6	.....0.0	.....75.8	.....0	.....0	.....1.3	.....0	.....0
3. 2016.....	.....1,005	.....0	.....1,005	.....73.8	.....0.0	.....74.8	.....0	.....0	.....1.3	.....4	.....0
4. 2017.....	.....792	.....0	.....792	.....67.3	.....0.0	.....67.3	.....0	.....0	.....1.3	.....1	.....0
5. 2018.....	.....700	.....0	.....700	.....69.5	.....0.0	.....69.5	.....0	.....0	.....1.3	.....3	.....0
6. 2019.....	.....643	.....1	.....642	.....72.6	.....0.0	.....72.5	.....0	.....0	.....1.3	.....4	.....0
7. 2020.....	.....448	.....(1)	.....449	.....60.0	.....0.0	.....60.1	.....0	.....0	.....1.3	.....11	.....1
8. 2021.....	.....466	.....0	.....466	.....72.8	.....0.0	.....72.8	.....0	.....0	.....1.3	.....18	.....2
9. 2022.....	.....479	.....0	.....479	.....78.5	.....0.0	.....78.6	.....0	.....0	.....1.3	.....53	.....6
10. 2023.....	.....528	.....0	.....528	.....78.9	.....0.0	.....79.0	.....0	.....0	.....1.3	.....137	.....17
11. 2024.....	.....772	.....0	.....772	.....85.2	.....0.0	.....85.3	.....0	.....0	.....1.3	.....413	.....88
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	715	114

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	1	36	1	0	3	0	0	(30)	XXX.....
2. 2015.....	1,089.....	21.....	1,068.....	776	6	76	0	98	0	8	945	95
3. 2016.....	1,210.....	19.....	1,191.....	852	23	72	2	118	0	10	1,017	105
4. 2017.....	1,327.....	1.....	1,326.....	889	26	100	11	117	0	9	1,068	110
5. 2018.....	1,409.....	0.....	1,409.....	1,031	27	105	5	123	0	16	1,227	606
6. 2019.....	1,466.....	0.....	1,466.....	957	22	118	1	134	0	16	1,187	584
7. 2020.....	1,581.....	3.....	1,578.....	785	11	72	1	163	0	14	1,008	37
8. 2021.....	1,698.....	54.....	1,643.....	691	44	64	6	176	0	16	881	83
9. 2022.....	1,676.....	130.....	1,546.....	598	27	74	1	196	0	14	840	77
10. 2023.....	1,686.....	105.....	1,581.....	380	7	49	0	90	0	12	512	69
11. 2024.....	1,689.....	55.....	1,635.....	170	0	25	0	55	0	7	249	39
12. Totals	XXX	XXX	XXX	7,129	228	756	26	1,273	1	122	8,903	xxx

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	6	2	0	0	0	0	0	0	0	0	0	4	0
2. 2015.....	6	0	1	0	1	0	0	0	0	0	0	10	0
3. 2016.....	32	28	0	0	0	0	0	0	0	0	0	5	0
4. 2017.....	8	0	0	0	1	0	0	0	1	0	0	10	0
5. 2018.....	16	0	2	0	2	0	1	0	1	0	0	22	0
6. 2019.....	90	0	9	0	3	0	6	0	2	0	0	110	0
7. 2020.....	250	173	8	0	1	0	5	0	1	0	0	91	1
8. 2021.....	168	8	31	0	0	0	19	0	17	0	0	227	2
9. 2022.....	303	17	58	0	0	0	41	0	27	0	0	411	2
10. 2023.....	496	3	150	0	0	0	99	0	55	0	0	798	5
11. 2024.....	549	0	487	0	0	0	142	0	88	0	0	1,265	12
12. Totals	1,923	231	747	0	8	0	313	0	192	0	0	2,952	23

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	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.....	.....4	.....0
2. 2015.....	959.....	.....5	.....954	.....88.1	.....24.9	.....89.4	.....0	.....0	.....1.3	.....8	.....2
3. 2016.....	1,074.....	52.....	.....1,022	.....88.8	.....272.0	.....85.8	.....0	.....0	.....1.3	.....4	.....1
4. 2017.....	1,116.....	.....38	.....1,078	.....84.1	.....5,690.3	.....81.3	.....0	.....0	.....1.3	.....8	.....2
5. 2018.....	1,281.....	.....32	.....1,249	.....90.9	.....12,867.1	.....88.7	.....0	.....0	.....1.3	.....18	.....4
6. 2019.....	1,319.....	.....23	.....1,296	.....90.0	.....4,784.3	.....88.4	.....0	.....0	.....1.3	.....99	.....11
7. 2020.....	1,284.....	.....185	.....1,099	.....81.2	.....5,895.9	.....69.6	.....0	.....0	.....1.3	.....85	.....6
8. 2021.....	1,165.....	.....58	.....1,107	.....68.6	.....105.6	.....67.4	.....0	.....0	.....1.3	.....191	.....36
9. 2022.....	1,296.....	.....45	.....1,251	.....77.3	.....34.8	.....80.9	.....0	.....0	.....1.3	.....343	.....68
10. 2023.....	1,320.....	.....10	.....1,310	.....78.3	.....9.1	.....82.9	.....0	.....0	.....1.3	.....644	.....154
11. 2024.....	1,514.....	0.....	.....1,514	.....89.6	.....0.0	.....92.6	0.....	0.....	.....1.3	.....1,036	.....229
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	2,439	513

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 1D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	Number of Claims Reported Direct and Assumed
				4	5	6	7	8	9	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	245.....	5.....	25.....	0.....	7.....	0.....	5.....	272.....	XXX.....
2. 2015.....	5,743.....	1,523.....	4,220.....	2,557.....	699.....	456.....	151.....	404.....	64.....	30.....	2,503.....	215.....
3. 2016.....	6,097.....	1,196.....	4,900.....	2,402.....	468.....	421.....	82.....	464.....	69.....	36.....	2,668.....	248.....
4. 2017.....	6,496.....	700.....	5,797.....	2,348.....	118.....	387.....	21.....	542.....	60.....	32.....	3,078.....	249.....
5. 2018.....	5,739.....	62.....	5,677.....	2,357.....	0.....	329.....	0.....	427.....	0.....	43.....	3,114.....	1,097.....
6. 2019.....	5,859.....	53.....	5,807.....	2,299.....	0.....	370.....	0.....	545.....	0.....	34.....	3,214.....	1,895.....
7. 2020.....	6,092.....	56.....	6,036.....	2,381.....	(1).....	269.....	0.....	781.....	0.....	35.....	3,432.....	194.....
8. 2021.....	6,281.....	90.....	6,191.....	2,639.....	0.....	301.....	0.....	806.....	0.....	43.....	3,745.....	221.....
9. 2022.....	6,954.....	51.....	6,903.....	2,258.....	0.....	475.....	0.....	783.....	0.....	35.....	3,516.....	236.....
10. 2023.....	7,630.....	69.....	7,561.....	2,066.....	0.....	278.....	0.....	254.....	(1).....	8.....	2,599.....	286.....
11. 2024.....	8,030.....	100.....	7,930.....	1,029.....	0.....	101.....	0.....	119.....	0.....	1.....	1,250.....	278.....
12. Totals.....	XXX.....	XXX.....	XXX.....	22,580.....	1,289.....	3,412.....	253.....	5,133.....	193.....	302.....	29,391.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	3,116.....	168.....	1,921.....	799.....	89.....	3.....	196.....	114.....	132.....	0.....	0.....	4,370.....	17.....
2. 2015.....	415.....	4.....	450.....	55.....	18.....	0.....	48.....	8.....	23.....	0.....	0.....	887.....	15.....
3. 2016.....	254.....	1.....	439.....	0.....	8.....	0.....	50.....	0.....	28.....	0.....	0.....	777.....	14.....
4. 2017.....	287.....	0.....	420.....	0.....	10.....	0.....	44.....	0.....	26.....	0.....	0.....	787.....	16.....
5. 2018.....	266.....	28.....	443.....	0.....	15.....	0.....	45.....	0.....	27.....	0.....	0.....	767.....	20.....
6. 2019.....	270.....	8.....	422.....	0.....	10.....	0.....	50.....	0.....	29.....	0.....	0.....	773.....	19.....
7. 2020.....	347.....	0.....	438.....	0.....	16.....	0.....	55.....	0.....	44.....	0.....	0.....	901.....	20.....
8. 2021.....	519.....	0.....	431.....	0.....	24.....	0.....	60.....	0.....	59.....	0.....	0.....	1,093.....	24.....
9. 2022.....	541.....	0.....	540.....	0.....	39.....	0.....	73.....	0.....	65.....	0.....	0.....	1,258.....	24.....
10. 2023.....	1,168.....	0.....	886.....	0.....	91.....	0.....	130.....	0.....	128.....	0.....	0.....	2,402.....	32.....
11. 2024.....	1,875.....	26.....	1,819.....	0.....	165.....	0.....	341.....	0.....	222.....	0.....	0.....	4,395.....	73.....
12. Totals.....	9,057.....	234.....	8,208.....	853.....	484.....	4.....	1,091.....	122.....	783.....	0.....	0.....	18,410.....	275.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	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.....	4,070.....	300.....
2. 2015.....	4,371.....	981.....	3,390.....	76.1.....	64.4.....	80.3.....	0.....	0.....	1.3.....	807.....	80.....
3. 2016.....	4,065.....	619.....	3,445.....	66.7.....	51.8.....	70.3.....	0.....	0.....	1.3.....	692.....	85.....
4. 2017.....	4,063.....	198.....	3,865.....	62.5.....	28.4.....	66.7.....	0.....	0.....	1.3.....	707.....	80.....
5. 2018.....	3,908.....	28.....	3,881.....	68.1.....	44.4.....	68.4.....	0.....	0.....	1.3.....	681.....	86.....
6. 2019.....	3,995.....	8.....	3,988.....	68.2.....	14.9.....	68.7.....	0.....	0.....	1.3.....	684.....	89.....
7. 2020.....	4,332.....	(1).....	4,333.....	71.1.....	(1.4).....	71.8.....	0.....	0.....	1.3.....	785.....	115.....
8. 2021.....	4,838.....	0.....	4,838.....	77.0.....	0.0.....	78.1.....	0.....	0.....	1.3.....	950.....	143.....
9. 2022.....	4,774.....	0.....	4,774.....	68.7.....	0.0.....	69.2.....	0.....	0.....	1.3.....	1,081.....	177.....
10. 2023.....	5,000.....	(1).....	5,001.....	65.5.....	(0.9).....	66.1.....	0.....	0.....	1.3.....	2,053.....	349.....
11. 2024.....	5,671.....	26.....	5,645.....	70.6.....	26.2.....	71.2.....	0.....	0.....	1.3.....	3,668.....	727.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	16,178.....	2,232.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	9.....	0.....	7.....	0.....	8.....	0.....	0.....	24.....	XXX.....
2. 2015.....	1,109.....	122.....	987.....	708.....	169.....	13.....	0.....	47.....	1.....	24.....	598.....	41.....
3. 2016.....	1,156.....	74.....	1,082.....	496.....	12.....	19.....	0.....	55.....	0.....	30.....	557.....	39.....
4. 2017.....	1,169.....	53.....	1,115.....	602.....	43.....	15.....	0.....	112.....	0.....	30.....	686.....	45.....
5. 2018.....	1,186.....	46.....	1,140.....	613.....	53.....	21.....	0.....	89.....	0.....	27.....	670.....	75.....
6. 2019.....	1,403.....	68.....	1,335.....	966.....	91.....	67.....	0.....	62.....	0.....	24.....	1,004.....	88.....
7. 2020.....	1,984.....	99.....	1,885.....	1,067.....	52.....	96.....	1.....	212.....	0.....	28.....	1,322.....	27.....
8. 2021.....	2,377.....	145.....	2,233.....	937.....	53.....	116.....	0.....	250.....	0.....	40.....	1,250.....	50.....
9. 2022.....	2,449.....	185.....	2,264.....	1,164.....	2.....	168.....	0.....	315.....	0.....	36.....	1,645.....	54.....
10. 2023.....	2,765.....	187.....	2,578.....	910.....	33.....	94.....	0.....	193.....	0.....	27.....	1,164.....	46.....
11. 2024.....	3,299.....	154.....	3,144.....	770.....	23.....	61.....	0.....	146.....	0.....	8.....	954.....	34.....
12. Totals.....	XXX.....	XXX.....	XXX.....	8,243.....	530.....	678.....	2.....	1,488.....	3.....	274.....	9,873.....	xxx.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	4.....	0.....	10.....	0.....	0.....	0.....	2.....	0.....	6.....	0.....	0.....	23.....	0.....
2. 2015.....	7.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	7.....	0.....
3. 2016.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....	0.....
4. 2017.....	5.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	5.....	0.....
5. 2018.....	7.....	(6).....	0.....	0.....	0.....	0.....	1.....	0.....	1.....	0.....	0.....	16.....	0.....
6. 2019.....	57.....	12.....	0.....	0.....	1.....	0.....	2.....	0.....	4.....	0.....	0.....	51.....	1.....
7. 2020.....	132.....	(2).....	0.....	0.....	0.....	0.....	6.....	0.....	13.....	0.....	0.....	152.....	1.....
8. 2021.....	243.....	4.....	18.....	0.....	0.....	0.....	17.....	0.....	24.....	0.....	0.....	297.....	3.....
9. 2022.....	462.....	8.....	38.....	0.....	0.....	0.....	24.....	0.....	37.....	0.....	0.....	553.....	6.....
10. 2023.....	530.....	7.....	276.....	0.....	0.....	0.....	133.....	0.....	117.....	0.....	0.....	1,049.....	5.....
11. 2024.....	840.....	35.....	469.....	0.....	0.....	0.....	227.....	0.....	178.....	0.....	0.....	1,680.....	12.....
12. Totals.....	2,287.....	57.....	811.....	0.....	1.....	0.....	410.....	0.....	380.....	0.....	0.....	3,834.....	28.....

	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	27	28	29	30	31	32	33		35	36
	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.....	14.....	8.....
2. 2015.....	775.....	170.....	604.....	69.8.....	139.5.....	61.2.....	0.....	0.....	1.3.....	7.....	0.....
3. 2016.....	570.....	12.....	558.....	49.3.....	16.7.....	51.6.....	0.....	0.....	1.3.....	1.....	0.....
4. 2017.....	734.....	43.....	691.....	62.8.....	80.7.....	61.9.....	0.....	0.....	1.3.....	5.....	0.....
5. 2018.....	733.....	47.....	686.....	61.8.....	100.9.....	60.2.....	0.....	0.....	1.3.....	14.....	2.....
6. 2019.....	1,159.....	103.....	1,056.....	82.6.....	151.8.....	79.1.....	0.....	0.....	1.3.....	45.....	6.....
7. 2020.....	1,526.....	52.....	1,474.....	76.9.....	52.1.....	78.2.....	0.....	0.....	1.3.....	134.....	18.....
8. 2021.....	1,604.....	57.....	1,548.....	67.5.....	39.2.....	69.3.....	0.....	0.....	1.3.....	257.....	41.....
9. 2022.....	2,207.....	10.....	2,198.....	90.1.....	5.3.....	97.1.....	0.....	0.....	1.3.....	492.....	61.....
10. 2023.....	2,253.....	40.....	2,213.....	81.5.....	21.5.....	85.8.....	0.....	0.....	1.3.....	799.....	250.....
11. 2024.....	2,692.....	58.....	2,633.....	81.6.....	37.7.....	83.8.....	0.....	0.....	1.3.....	1,275.....	405.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	3,042.....	792.....

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 1G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS),
BOILER AND MACHINERY)

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	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)	Number of Claims Reported Direct and Assumed
				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.....	59	42	17	17	14	0	0	1	0	0	4	XXX.....
3. 2016.....	64	47	18	21	18	0	0	1	0	0	4	XXX.....
4. 2017.....	68	50	18	23	20	1	0	6	0	0	9	XXX.....
5. 2018.....	70	53	17	18	16	0	0	5	0	0	7	XXX.....
6. 2019.....	69	54	14	16	14	0	0	2	0	1	4	XXX.....
7. 2020.....	73	60	13	17	15	0	0	6	0	0	8	XXX.....
8. 2021.....	73	66	7	23	21	0	0	6	0	0	9	XXX.....
9. 2022.....	72	69	3	24	27	1	0	7	0	0	6	XXX.....
10. 2023.....	78	78	1	65	62	2	0	5	0	0	10	XXX.....
11. 2024.....	86	89	(3)	14	11	2	0	5	0	0	10	XXX.....
12. Totals	XXX	XXX	XXX	237	220	8	0	44	0	1	70	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
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.....	16	16	0	0	0	0	0	0	0	0	0	0	0
11. 2024.....	4	0	0	0	0	0	0	0	0	0	0	5	0
12. Totals.....	20	16	0	0	0	0	0	0	0	0	0	5	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	27	28	29	30	31	32	33		35	36
	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.....	18.....	14.....	4.....	31.0.....	34.2.....	23.3.....	0.....	0.....	1.3.....	0.....	0.....
3. 2016.....	22.....	18.....	4.....	34.4.....	38.8.....	22.8.....	0.....	0.....	1.3.....	0.....	0.....
4. 2017.....	29.....	20.....	9.....	42.4.....	40.6.....	47.5.....	0.....	0.....	1.3.....	0.....	0.....
5. 2018.....	23.....	16.....	7.....	32.6.....	31.0.....	37.7.....	0.....	0.....	1.3.....	0.....	0.....
6. 2019.....	18.....	15.....	4.....	26.5.....	26.8.....	25.4.....	0.....	0.....	1.3.....	0.....	0.....
7. 2020.....	23.....	15.....	8.....	32.3.....	25.5.....	64.4.....	0.....	0.....	1.3.....	0.....	0.....
8. 2021.....	30.....	21.....	9.....	40.4.....	31.1.....	126.6.....	0.....	0.....	1.3.....	0.....	0.....
9. 2022.....	33.....	27.....	6.....	45.2.....	38.9.....	191.3.....	0.....	0.....	1.3.....	0.....	0.....
10. 2023.....	88.....	78.....	10.....	112.9.....	100.6.....	1,716.8.....	0.....	0.....	1.3.....	0.....	0.....
11. 2024.....	26.....	11.....	14.....	29.8.....	12.7.....	(494.0).....	0.....	0.....	1.3.....	4.....	0.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	4.....	0.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	21.....	0.....	6.....	(1).....	3.....	0.....	0.....	32.....	XXX.....
2. 2015.....	1,075.....	57.....	1,018.....	515.....	70.....	146.....	3.....	67.....	0.....	3.....	654.....	38.....
3. 2016.....	1,230.....	115.....	1,115.....	542.....	39.....	175.....	8.....	85.....	0.....	3.....	755.....	41.....
4. 2017.....	1,337.....	117.....	1,219.....	754.....	190.....	168.....	3.....	89.....	0.....	4.....	818.....	44.....
5. 2018.....	1,332.....	103.....	1,229.....	796.....	175.....	123.....	3.....	76.....	0.....	3.....	818.....	372.....
6. 2019.....	1,179.....	108.....	1,071.....	750.....	279.....	101.....	5.....	49.....	0.....	5.....	615.....	339.....
7. 2020.....	752.....	73.....	679.....	139.....	26.....	19.....	1.....	74.....	0.....	0.....	206.....	7.....
8. 2021.....	641.....	44.....	597.....	333.....	86.....	6.....	1.....	62.....	0.....	0.....	315.....	2.....
9. 2022.....	671.....	17.....	654.....	161.....	35.....	22.....	0.....	83.....	0.....	0.....	232.....	1.....
10. 2023.....	758.....	20.....	738.....	46.....	0.....	17.....	0.....	40.....	0.....	0.....	103.....	1.....
11. 2024.....	832.....	15.....	817.....	3.....	0.....	6.....	0.....	15.....	0.....	0.....	25.....	1.....
12. Totals	XXX	XXX	XXX	4,060	899	791	22	642	0	18	4,572	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	55.....	11.....	73.....	0.....	7.....	0.....	3.....	0.....	14.....	0.....	0.....	143.....	0.....
2. 2015.....	11.....	0.....	2.....	0.....	1.....	0.....	0.....	0.....	1.....	0.....	0.....	16.....	0.....
3. 2016.....	55.....	1.....	4.....	0.....	2.....	0.....	1.....	0.....	4.....	0.....	0.....	66.....	0.....
4. 2017.....	74.....	0.....	7.....	0.....	6.....	0.....	2.....	0.....	8.....	0.....	0.....	98.....	0.....
5. 2018.....	81.....	0.....	21.....	0.....	8.....	0.....	5.....	0.....	9.....	0.....	0.....	124.....	0.....
6. 2019.....	44.....	0.....	20.....	0.....	8.....	0.....	4.....	0.....	4.....	0.....	0.....	79.....	0.....
7. 2020.....	5.....	0.....	8.....	0.....	1.....	0.....	3.....	0.....	1.....	0.....	0.....	18.....	0.....
8. 2021.....	109.....	29.....	22.....	0.....	0.....	0.....	8.....	0.....	4.....	0.....	0.....	114.....	0.....
9. 2022.....	235.....	81.....	30.....	0.....	1.....	0.....	12.....	0.....	7.....	0.....	0.....	204.....	0.....
10. 2023.....	234.....	0.....	111.....	0.....	0.....	0.....	35.....	0.....	20.....	0.....	0.....	401.....	0.....
11. 2024.....	190.....	0.....	251.....	0.....	0.....	0.....	43.....	0.....	26.....	0.....	0.....	510.....	0.....
12. Totals	1,094	121	548	0	36	0	116	0	99	0	0	1,773	1

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	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.....	118.....	25.....
2. 2015.....	744.....	73.....	670.....	69.2.....	129.8.....	65.8.....	0.....	0.....	1.3.....	13.....	3.....
3. 2016.....	869.....	48.....	821.....	70.7.....	41.8.....	73.6.....	0.....	0.....	1.3.....	58.....	8.....
4. 2017.....	1,109.....	193.....	916.....	83.0.....	164.3.....	75.1.....	0.....	0.....	1.3.....	82.....	17.....
5. 2018.....	1,119.....	178.....	941.....	84.0.....	172.6.....	76.6.....	0.....	0.....	1.3.....	102.....	22.....
6. 2019.....	978.....	284.....	694.....	83.0.....	264.4.....	64.8.....	0.....	0.....	1.3.....	64.....	15.....
7. 2020.....	250.....	27.....	223.....	33.3.....	36.9.....	32.9.....	0.....	0.....	1.3.....	13.....	5.....
8. 2021.....	544.....	115.....	430.....	84.9.....	258.2.....	72.0.....	0.....	0.....	1.3.....	102.....	13.....
9. 2022.....	552.....	115.....	436.....	82.3.....	694.5.....	66.7.....	0.....	0.....	1.3.....	184.....	20.....
10. 2023.....	504.....	0.....	504.....	66.5.....	0.5.....	68.3.....	0.....	0.....	1.3.....	346.....	55.....
11. 2024.....	535.....	0.....	535.....	64.3.....	0.0.....	65.5.....	0.....	0.....	1.3.....	441.....	69.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	1,521	252

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	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)	Number of Claims Reported Direct and Assumed
				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	1	0	0	1	XXX.....
2. 2015.....	6	0	6	1	0	0	0	0	0	0	2	0
3. 2016.....	3	0	3	1	0	0	0	0	0	0	1	0
4. 2017.....	0	0	0	0	0	0	0	0	0	0	0	0
5. 2018.....	2	0	2	2	0	0	0	0	0	0	2	1
6. 2019.....	14	2	12	2	0	0	0	0	0	0	2	5
7. 2020.....	49	22	27	9	0	2	0	4	0	0	15	0
8. 2021.....	64	40	24	6	0	2	0	7	0	0	15	0
9. 2022.....	62	9	53	10	0	3	0	8	0	0	21	0
10. 2023.....	57	9	48	8	0	2	0	2	0	0	12	0
11. 2024	55	4	50	1	0	1	0	1	0	0	2	0
12. Totals	XXX	XXX	XXX	39	0	10	0	23	0	0	72	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
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.....	4	0	1	0	0	0	0	0	0	0	0	5	0
8. 2021.....	3	0	1	0	0	0	0	0	0	0	0	4	0
9. 2022.....	1	0	1	0	0	0	0	0	0	0	0	3	0
10. 2023.....	8	0	8	0	0	0	2	0	1	0	0	19	0
11. 2024	8	0	16	0	0	0	2	0	1	0	0	27	0
12. Totals	24	0	26	0	0	0	4	0	3	0	0	57	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	27	28	29	30	31	32	33		35	36
	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.....	2	0	2	25.4	0.0	25.4	0	0	1.3	0	0
3. 2016.....	1	0	1	25.9	0.0	25.9	0	0	1.3	0	0
4. 2017.....	0	0	0	35.3	0.0	35.3	0	0	1.3	0	0
5. 2018.....	2	0	2	80.1	0.0	80.1	0	0	1.3	0	0
6. 2019.....	2	0	2	13.2	1.5	14.9	0	0	1.3	0	0
7. 2020.....	20	0	20	41.6	0.0	76.1	0	0	1.3	5	0
8. 2021.....	19	0	19	29.3	0.0	78.0	0	0	1.3	3	0
9. 2022.....	23	0	23	37.6	0.0	43.8	0	0	1.3	2	0
10. 2023.....	31	0	31	54.6	0.0	64.7	0	0	1.3	16	3
11. 2024	29	0	29	53.9	0.0	58.6	0	0	1.3	24	3
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	50	7

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 11 - SPECIAL PROPERTY (FIRE, ALLIED LINES, INLAND MARINE, EARTHQUAKE, BURGLARY AND THEFT)

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0	13	1	0	3	0	0	(10)	XXX.....
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
3. 2016.....	5	0	4	2	(3)	0	0	0	0	0	5	XXX.....
4. 2017.....	5	0	4	5	4	1	0	1	0	0	2	XXX.....
5. 2018.....	5	0	4	(1)	(1)	0	0	1	0	3	1	XXX.....
6. 2019.....	484	13	471	210	31	5	0	24	0	12	207	XXX.....
7. 2020.....	427	12	415	182	2	1	0	40	0	4	221	XXX.....
8. 2021.....	384	11	373	152	0	1	0	38	0	16	191	XXX.....
9. 2022.....	393	16	376	230	40	8	0	38	0	3	237	XXX.....
10. 2023.....	403	21	382	124	0	9	0	23	0	11	157	XXX.....
11. 2024.....	431	16	415	85	0	7	0	18	0	1	110	XXX.....
12. Totals	XXX	XXX	XXX	988	88	35	0	186	0	51	1,121	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
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.....	1	0	0	0	0	0	0	0	0	0	0	1	0
6. 2019.....	0	0	0	0	0	0	0	0	0	0	0	0	0
7. 2020.....	2	0	1	0	0	0	0	0	0	0	0	4	0
8. 2021.....	0	1	1	0	0	0	0	0	0	0	0	0	0
9. 2022.....	1	3	1	0	0	0	0	0	0	0	0	(1)	0
10. 2023.....	1	0	1	0	0	0	0	0	0	0	0	2	0
11. 2024.....	19	0	35	0	0	0	3	0	8	0	0	64	1
12. Totals	24	3	38	0	0	0	3	0	9	0	0	70	2

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	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.....	0	0	0	0.0	0.0	0.0	0	0	1.3	0	0
3. 2016.....	2	(3)	5	42.5	(1,035.0)	107.0	0	0	1.3	0	0
4. 2017.....	6	4	2	132.8	3,070.0	47.0	0	0	1.3	0	0
5. 2018.....	1	(1)	2	14.2	(981.8)	46.8	0	0	1.3	1	0
6. 2019.....	239	32	207	49.4	246.5	44.0	0	0	1.3	0	0
7. 2020.....	227	2	224	53.1	19.2	54.1	0	0	1.3	3	1
8. 2021.....	192	1	191	49.9	9.7	51.1	0	0	1.3	0	0
9. 2022.....	279	43	236	71.0	264.0	62.6	0	0	1.3	(1)	0
10. 2023.....	159	0	159	39.5	0.6	41.6	0	0	1.3	2	0
11. 2024.....	175	0	174	40.5	1.4	42.0	0	0	1.3	54	11
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	58	12

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	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)	Number of Claims Reported Direct and Assumed
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	(2).....	72.....	3.....	0.....	(2).....	0.....	1.....	(73).....	XXX.....
2. 2015.....	0.....	0.....	0.....	(2).....	0.....	0.....	0.....	0.....	0.....	2.....	(2).....	0.....
3. 2016.....	0.....	0.....	0.....	(2).....	0.....	0.....	0.....	0.....	0.....	1.....	(1).....	0.....
4. 2017.....	0.....	0.....	0.....	(2).....	0.....	1.....	0.....	1.....	0.....	2.....	0.....	1.....
5. 2018.....	0.....	0.....	0.....	0.....	0.....	2.....	0.....	1.....	0.....	4.....	3.....	1.....
6. 2019.....	1,473.....	32.....	1,441.....	912.....	40.....	31.....	0.....	140.....	0.....	145.....	1,042.....	3.....
7. 2020.....	1,294.....	55.....	1,239.....	683.....	29.....	4.....	0.....	146.....	0.....	125.....	804.....	269.....
8. 2021.....	1,159.....	34.....	1,125.....	658.....	1.....	5.....	0.....	125.....	0.....	157.....	786.....	208.....
9. 2022.....	1,118.....	20.....	1,098.....	768.....	0.....	29.....	0.....	133.....	0.....	153.....	930.....	213.....
10. 2023.....	1,192.....	18.....	1,174.....	756.....	0.....	39.....	0.....	98.....	0.....	132.....	893.....	236.....
11. 2024.....	1,543.....	10.....	1,533.....	804.....	2.....	36.....	0.....	87.....	0.....	91.....	925.....	190.....
12. Totals.....	XXX.....	XXX.....	XXX.....	4,574.....	145.....	149.....	0.....	729.....	0.....	813.....	5,307.....	xxx.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
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.....	1	0	0	0	0	0	0	0	0	0	0	1	0
8. 2021.....	3	0	0	0	0	0	0	0	0	0	0	3	1
9. 2022.....	2	0	1	0	0	0	1	0	2	0	0	6	2
10. 2023.....	4	0	1	0	0	0	1	0	2	0	0	8	6
11. 2024.....	54	0	44	0	0	0	15	0	34	0	0	147	37
12. Totals.....	64	0	47	0	0	0	17	0	38	0	0	164	48

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	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.....	(2).....	0.....	(2).....	0.0.....	0.0.....	0.0.....	0.....	0.....	1.3.....	0.....	0.....
3. 2016.....	(1).....	0.....	(1).....	0.0.....	0.0.....	0.0.....	0.....	0.....	1.3.....	0.....	0.....
4. 2017.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	1.3.....	0.....	0.....
5. 2018.....	3.....	0.....	3.....	0.0.....	0.0.....	0.0.....	0.....	0.....	1.3.....	0.....	0.....
6. 2019.....	1,082.....	41.....	1,042.....	73.4.....	126.4.....	72.3.....	0.....	0.....	1.3.....	0.....	0.....
7. 2020.....	834.....	29.....	805.....	64.4.....	52.3.....	64.9.....	0.....	0.....	1.3.....	1.....	0.....
8. 2021.....	791.....	2.....	789.....	68.3.....	4.8.....	70.2.....	0.....	0.....	1.3.....	3.....	0.....
9. 2022.....	936.....	0.....	935.....	83.8.....	2.5.....	85.2.....	0.....	0.....	1.3.....	3.....	2.....
10. 2023.....	901.....	0.....	901.....	75.5.....	0.0.....	76.7.....	0.....	0.....	1.3.....	5.....	3.....
11. 2024.....	1,074.....	2.....	1,072.....	69.6.....	18.3.....	69.9.....	0.....	0.....	1.3.....	98.....	49.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	110.....	54.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 1K - FIDELITY/SURETY

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	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)	Number of Claims Reported Direct and Assumed
				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.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
3. 2016.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
4. 2017.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
5. 2018.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
6. 2019.....	11	0	11	4	0	0	0	0	0	0	4	XXX.....
7. 2020.....	3	0	3	4	0	0	0	0	0	0	4	XXX.....
8. 2021.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
9. 2022.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
10. 2023.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
11. 2024.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
12. Totals	XXX	XXX	XXX	8	0	0	0	0	0	0	8	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
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.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
11. 2024.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
12. Totals.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	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	27	28	29	30	31	32	33		35	36
	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.....	0.....	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.....	0.....
4. 2017.....	0.....	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.....	0.....
6. 2019.....	4.....	0.....	4.....	35.5.....	0.0.....	35.5.....	0.....	0.....	0.0.....	0.....	0.....
7. 2020.....	4.....	0.....	4.....	130.0.....	0.0.....	130.0.....	0.....	0.....	0.0.....	0.....	0.....
8. 2021.....	0.....	0.....	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.....	0.....	0.....
10. 2023.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
11. 2024.....	0.....	0.....	0.....	0.0.....	0.0.....	0.0.....	0.....	0.....	0.0.....	0.....	0.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 1L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	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)	Number of Claims Reported Direct and Assumed
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	0	0	0	0	0	0	0	0	XXX.....
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
3. 2016.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
4. 2017.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
5. 2018.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
6. 2019.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
7. 2020.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
8. 2021.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
9. 2022.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
10. 2023.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
11. 2024.....	0	0	0	0	0	0	0	0	0	0	0	XXX.....
12. Totals	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
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.....	0	0	0	0	0	0	0	0	0	0	0	0	0
11. 2024.....	0	0	0	0	0	0	0	0	0	0	0	0	0
12. Totals	0	0	0	0	0	0	0	0	0	0	0	0	0

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	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.....	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....1.3	.....0	.....0
3. 2016.....	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....1.3	.....0	.....0
4. 2017.....	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....1.3	.....0	.....0
5. 2018.....	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....1.3	.....0	.....0
6. 2019.....	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....1.3	.....0	.....0
7. 2020.....	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....1.3	.....0	.....0
8. 2021.....	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....1.3	.....0	.....0
9. 2022.....	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....1.3	.....0	.....0
10. 2023.....	.....0	.....0	.....0	.....0.0	.....0.0	.....0.0	.....0	.....0	.....1.3	.....0	.....0
11. 2024.....	0	0	0	0.0	0.0	0.0	0	0	1.3	0	0
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 1M - INTERNATIONAL

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	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)	Number of Claims Reported Direct and Assumed
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2015.....												XXX
3. 2016.....												XXX
4. 2017.....												XXX
5. 2018.....												XXX
6. 2019.....												XXX
7. 2020.....												XXX
8. 2021.....												XXX
9. 2022.....												XXX
10. 2023.....												XXX
11. 2024.....												XXX
12. Totals	XXX	XXX	XXX									XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13	14	15	16	17	18	19	20	21	22			
	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	27	28	29	30	31	32	33		35	36
	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 WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 1N - REINSURANCE - NONPROPORTIONAL ASSUMED PROPERTY

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	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)	Number of Claims Reported Direct and Assumed
				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	XXX.....
2. 2015.....	76.....	0.....	76.....	31	0	2	0	0	0	0	33	XXX.....
3. 2016.....	74.....	0.....	74.....	51	0	3	0	0	0	0	53	XXX.....
4. 2017.....	61.....	0.....	61.....	41	0	2	0	1	0	0	44	XXX.....
5. 2018.....	59.....	0.....	59.....	80	0	2	0	1	0	0	83	XXX.....
6. 2019.....	78.....	0.....	78.....	67	0	0	0	1	0	0	68	XXX.....
7. 2020.....	88.....	0.....	88.....	99	0	0	0	2	0	0	101	XXX.....
8. 2021.....	104.....	0.....	104.....	70	0	0	0	2	0	0	72	XXX.....
9. 2022.....	114.....	0.....	114.....	126	0	0	0	3	0	0	128	XXX.....
10. 2023.....	118.....	0.....	118.....	49	0	0	0	1	0	0	51	XXX.....
11. 2024.....	114.....	0.....	114.....	16	0	0	0	0	0	0	17	XXX.....
12. Totals	XXX	XXX	XXX	630	0	9	0	11	0	0	651	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	2.....	1.....	18.....	11.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	8.....	XXX.....
2. 2015.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
3. 2016.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	XXX.....
4. 2017.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....	XXX.....
5. 2018.....	6.....	0.....	0.....	0.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....	6.....	XXX.....
6. 2019.....	2.....	0.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	2.....	XXX.....
7. 2020.....	2.....	0.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	3.....	XXX.....
8. 2021.....	4.....	0.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	6.....	XXX.....
9. 2022.....	5.....	0.....	2.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	7.....	XXX.....
10. 2023.....	11.....	0.....	3.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	15.....	XXX.....
11. 2024.....	32.....	0.....	26.....	0.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....	58.....	XXX.....
12. Totals.....	64.....	1.....	51.....	11.....	3.....	0.....	0.....	0.....	0.....	0.....	0.....	106.....	XXX.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33	Inter- Company Pooling Participation Percentage	35	36
	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.....	.....8	.....0
2. 2015.....	33.....	.....0	33.....	43.3.....	.....0.0	43.3.....	.....0	.....0	1.3.....	.....0	.....0
3. 2016.....	53.....	.....0	53.....	71.8.....	.....0.0	71.8.....	.....0	.....0	1.3.....	.....0	.....0
4. 2017.....	45.....	.....0	45.....	72.9.....	.....0.0	72.9.....	.....0	.....0	1.3.....	.....1	.....0
5. 2018.....	89.....	.....0	89.....	152.3.....	.....0.0	152.3.....	.....0	.....0	1.3.....	.....6	.....1
6. 2019.....	70.....	.....0	70.....	90.2.....	.....0.0	90.2.....	.....0	.....0	1.3.....	.....2	.....0
7. 2020.....	104.....	.....0	104.....	118.1.....	.....0.0	118.1.....	.....0	.....0	1.3.....	.....3	.....0
8. 2021.....	78.....	.....0	78.....	75.1.....	.....0.0	75.1.....	.....0	.....0	1.3.....	.....6	.....0
9. 2022.....	135.....	.....0	135.....	118.3.....	.....0.0	118.3.....	.....0	.....0	1.3.....	.....7	.....0
10. 2023.....	66.....	.....0	66.....	55.5.....	.....0.0	55.5.....	.....0	.....0	1.3.....	.....14	.....0
11. 2024.....	75.....	0.....	75.....	65.5.....	0.0.....	65.5.....	0.....	0.....	1.3.....	57.....	1.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	103	3

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 10 - REINSURANCE - NONPROPORTIONAL ASSUMED LIABILITY

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	1	2	3	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10	11	Number of Claims Reported Direct and Assumed
				4	5	6	7	8	9			
	Direct and Assumed	Ceded	Net (1 - 2)	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Salvage and Subrogation Received	Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	
1. Prior.....	XXX.....	XXX.....	XXX.....	3	0	0	0	0	0	0	3	XXX.....
2. 2015.....	19	0	19	7	0	1	0	1	0	0	9	XXX.....
3. 2016.....	25	0	25	28	0	2	0	1	0	0	31	XXX.....
4. 2017.....	34	0	34	24	0	2	0	6	0	0	32	XXX.....
5. 2018.....	48	0	48	31	0	0	0	4	0	0	36	XXX.....
6. 2019.....	93	0	93	60	0	0	0	12	0	0	72	XXX.....
7. 2020.....	120	0	120	59	0	0	0	8	0	0	67	XXX.....
8. 2021.....	152	0	152	73	0	0	0	7	0	0	80	XXX.....
9. 2022.....	169	0	169	50	0	0	0	3	0	0	54	XXX.....
10. 2023.....	165	0	165	17	0	0	0	1	0	0	19	XXX.....
11. 2024.....	122	0	122	1	0	0	0	0	0	0	1	XXX.....
12. Totals	XXX	XXX	XXX	353	0	5	0	45	0	0	403	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
1. Prior.....	24.....	0.....	21.....	0.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....	46.....	XXX.....
2. 2015.....	0.....	0.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	1.....	XXX.....
3. 2016.....	5.....	0.....	2.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	7.....	XXX.....
4. 2017.....	7.....	0.....	7.....	0.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....	14.....	XXX.....
5. 2018.....	13.....	0.....	8.....	0.....	2.....	0.....	0.....	0.....	0.....	0.....	0.....	22.....	XXX.....
6. 2019.....	14.....	0.....	15.....	0.....	2.....	0.....	0.....	0.....	0.....	0.....	0.....	31.....	XXX.....
7. 2020.....	17.....	0.....	28.....	0.....	2.....	0.....	0.....	0.....	0.....	0.....	0.....	47.....	XXX.....
8. 2021.....	32.....	0.....	53.....	0.....	4.....	0.....	0.....	0.....	0.....	0.....	0.....	89.....	XXX.....
9. 2022.....	69.....	0.....	75.....	0.....	4.....	0.....	0.....	0.....	0.....	0.....	0.....	147.....	XXX.....
10. 2023.....	38.....	0.....	77.....	0.....	2.....	0.....	0.....	0.....	0.....	0.....	0.....	117.....	XXX.....
11. 2024.....	23.....	0.....	80.....	0.....	1.....	0.....	0.....	0.....	0.....	0.....	0.....	103.....	XXX.....
12. Totals.....	241.....	0.....	365.....	0.....	18.....	0.....	0.....	0.....	0.....	0.....	0.....	625.....	XXX.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	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.....	45.....	1.....
2. 2015.....	10.....	0.....	10.....	51.3.....	0.0.....	51.3.....	0.....	0.....	1.3.....	1.....	0.....
3. 2016.....	37.....	0.....	37.....	151.7.....	0.0.....	151.7.....	0.....	0.....	1.3.....	7.....	0.....
4. 2017.....	46.....	0.....	46.....	134.2.....	0.0.....	134.2.....	0.....	0.....	1.3.....	14.....	1.....
5. 2018.....	58.....	0.....	58.....	121.7.....	0.0.....	121.7.....	0.....	0.....	1.3.....	20.....	2.....
6. 2019.....	103.....	0.....	103.....	111.6.....	0.0.....	111.6.....	0.....	0.....	1.3.....	29.....	2.....
7. 2020.....	114.....	0.....	114.....	94.5.....	0.0.....	94.5.....	0.....	0.....	1.3.....	44.....	2.....
8. 2021.....	169.....	0.....	169.....	111.3.....	0.0.....	111.3.....	0.....	0.....	1.3.....	85.....	4.....
9. 2022.....	201.....	0.....	201.....	118.6.....	0.0.....	118.6.....	0.....	0.....	1.3.....	144.....	4.....
10. 2023.....	135.....	0.....	135.....	82.2.....	0.0.....	82.2.....	0.....	0.....	1.3.....	115.....	2.....
11. 2024.....	105.....	0.....	105.....	85.7.....	0.0.....	85.7.....	0.....	0.....	1.3.....	103.....	1.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	0.....	XXX.....	607.....	18.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 1P - REINSURANCE - NONPROPORTIONAL ASSUMED FINANCIAL LINES

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	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)	Number of Claims Reported Direct and Assumed
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2015.....												XXX
3. 2016.....												XXX
4. 2017.....												XXX
5. 2018.....												XXX
6. 2019.....												XXX
7. 2020.....												XXX
8. 2021.....												XXX
9. 2022.....												XXX
10. 2023.....												XXX
11. 2024.....												XXX
12. Totals	XXX	XXX	XXX									XXX

NONE

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

NONE

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26	27	28	29	30	31	32	33		35	36
	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		

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

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

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12
	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)	Number of Claims Reported Direct and Assumed
				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.....	82	2	81	31	0	15	0	6	0	0	53	2
3. 2016.....	90	2	89	9	0	15	0	5	0	0	29	2
4. 2017.....	96	0	96	23	0	12	0	7	0	0	43	2
5. 2018.....	94	0	94	34	0	16	0	8	0	0	58	36
6. 2019.....	65	1	64	10	0	27	0	6	0	0	43	32
7. 2020.....	23	0	23	2	0	2	0	1	0	0	5	1
8. 2021.....	6	0	6	2	0	0	0	3	0	0	6	0
9. 2022.....	8	0	8	2	0	2	0	0	0	0	4	0
10. 2023.....	8	0	8	13	0	1	0	0	0	0	14	0
11. 2024.....	11	0	11	0	0	0	0	0	0	0	1	0
12. Totals	XXX	XXX	XXX	126	0	89	0	37	0	1	253	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23	24	25
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	14	15	16	17	18	19	20	21	22			
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded				Salvage and Subrogation Anticipated	Total Net Losses and Expenses Unpaid	Number of Claims Outstanding Direct and Assumed
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	1	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	1	0	0	0	0	0	0	0	0	1	0
6. 2019.....	2	0	0	0	0	0	0	0	0	0	0	2	0
7. 2020.....	2	0	0	0	0	0	0	0	0	0	0	2	0
8. 2021.....	0	0	0	0	0	0	0	0	0	0	0	0	0
9. 2022.....	6	0	1	0	0	0	0	0	0	0	0	8	0
10. 2023.....	0	0	1	0	0	0	0	0	0	0	0	2	0
11. 2024.....	1	0	3	0	0	0	0	0	0	0	0	4	0
12. Totals	11	0	7	0	0	0	1	0	1	0	0	21	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	27	28	29	30	31	32	33		35	36
	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.....	54	0	54	65.0	0.0	66.3	0	0	1.3	0	0
3. 2016.....	29	0	29	31.7	0.0	32.2	0	0	1.3	0	0
4. 2017.....	43	0	43	44.7	0.0	44.7	0	0	1.3	0	0
5. 2018.....	59	0	59	62.3	0.0	62.3	0	0	1.3	1	0
6. 2019.....	45	0	45	68.8	0.0	69.9	0	0	1.3	2	0
7. 2020.....	7	0	7	32.2	0.0	32.5	0	0	1.3	2	0
8. 2021.....	6	0	6	106.0	0.0	106.5	0	0	1.3	0	0
9. 2022.....	12	0	12	150.9	0.0	152.4	0	0	1.3	7	0
10. 2023.....	16	0	16	183.6	0.0	185.6	0	0	1.3	2	0
11. 2024.....	5	0	5	46.8	0.0	47.1	0	0	1.3	4	1
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	19	2

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 WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 2A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior.....	33	67	72	60	64	100	99	103	102	92	(11)	(11)
2. 2015.....	871	881	898	892	890	891	892	892	893	890	(2)	(2)
3. 2016.....	XXX	784	811	793	791	792	788	789	789	788	(1)	0
4. 2017.....	XXX	XXX	1,098	1,064	1,055	1,045	1,047	1,047	1,054	1,053	(1)	6
5. 2018.....	XXX	XXX	XXX	703	700	701	697	701	705	706	0	5
6. 2019.....	XXX	XXX	XXX	XXX	813	783	774	776	774	773	(1)	(2)
7. 2020.....	XXX	XXX	XXX	XXX	XXX	768	792	790	789	790	1	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	490	510	504	503	0	(7)
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	587	632	628	(4)	41
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	691	704	13	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	726	XXX	XXX
12. Totals											(5)	30

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

1. Prior.....	550	578	574	545	532	563	575	573	572	611	39	38
2. 2015.....	1,052	1,009	1,010	991	993	989	992	992	997	994	(2)	2
3. 2016.....	XXX	957	910	874	857	847	847	845	843	843	0	(1)
4. 2017.....	XXX	XXX	783	743	729	704	699	706	699	695	(4)	(11)
5. 2018.....	XXX	XXX	XXX	626	618	619	613	611	612	611	(1)	0
6. 2019.....	XXX	XXX	XXX	XXX	552	551	547	544	546	541	(5)	(3)
7. 2020.....	XXX	XXX	XXX	XXX	XXX	391	377	356	354	354	0	(3)
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	381	373	392	384	(7)	11
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	383	399	385	(13)	3
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	468	464	(4)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	704	XXX	XXX
12. Totals											2	36

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

1. Prior.....	649	699	777	757	780	804	802	804	807	766	(41)	(38)
2. 2015.....	741	749	859	860	843	843	857	857	854	856	2	(1)
3. 2016.....	XXX	762	946	961	953	946	923	908	904	904	(1)	(5)
4. 2017.....	XXX	XXX	1,085	1,049	1,003	978	943	950	980	961	(19)	11
5. 2018.....	XXX	XXX	XXX	1,182	1,216	1,203	1,118	1,144	1,124	1,125	1	(19)
6. 2019.....	XXX	XXX	XXX	XXX	1,279	1,208	1,109	1,110	1,127	1,160	33	49
7. 2020.....	XXX	XXX	XXX	XXX	XXX	1,036	946	904	931	936	5	32
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	1,120	974	1,010	915	(95)	(59)
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,028	1,073	1,028	(45)	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,084	1,165	81	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,372	XXX	XXX
12. Totals											(80)	(31)

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

1. Prior.....	11,610	10,602	9,032	9,035	8,482	8,529	8,077	8,069	8,232	8,262	30	194
2. 2015.....	3,551	3,554	3,286	3,096	2,947	2,911	2,947	2,840	2,935	3,027	91	187
3. 2016.....	XXX	3,967	3,958	3,488	3,200	2,935	2,913	2,954	2,950	3,023	74	69
4. 2017.....	XXX	XXX	5,241	4,394	4,180	3,606	3,297	3,355	3,274	3,357	83	2
5. 2018.....	XXX	XXX	XXX	4,369	4,725	4,107	3,545	3,470	3,372	3,426	55	(44)
6. 2019.....	XXX	XXX	XXX	XXX	4,509	4,595	3,655	3,488	3,423	3,414	(10)	(74)
7. 2020.....	XXX	XXX	XXX	XXX	XXX	4,283	4,268	3,911	3,647	3,507	(140)	(404)
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	5,191	4,480	4,178	3,973	(205)	(507)
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,691	4,326	3,926	(400)	(765)
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,115	4,618	(497)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,304	XXX	XXX
12. Totals											(919)	(1,342)

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	221	208	213	196	205	202	151	138	118	125	6	(14)
2. 2015.....	582	535	556	555	552	551	551	552	551	559	7	7
3. 2016.....	XXX	504	516	507	498	494	494	494	494	503	10	10
4. 2017.....	XXX	XXX	592	580	575	572	573	573	577	579	3	6
5. 2018.....	XXX	XXX	XXX	582	575	575	581	607	601	596	(5)	(11)
6. 2019.....	XXX	XXX	XXX	XXX	864	870	891	933	998	990	(8)	57
7. 2020.....	XXX	XXX	XXX	XXX	XXX	1,164	1,164	1,190	1,230	1,250	19	59
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	1,259	1,279	1,280	1,274	(7)	(5)
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,450	1,677	1,846	169	396
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,871	1,903	32	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,309	XXX	XXX
12. Totals											227	505

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

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

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

SCHEDULE P - PART 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	XXX	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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

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

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

1. Prior.....	885	937	1,015	1,094	1,093	1,119	1,214	1,210	1,244	1,278	34	67
2. 2015.....	519	536	550	566	592	591	579	603	612	603	(9)	0
3. 2016.....	XXX	539	611	652	669	678	662	706	717	731	14	26
4. 2017.....	XXX	XXX	661	701	697	721	701	743	770	819	50	76
5. 2018.....	XXX	XXX	XXX	727	750	806	800	839	864	856	(8)	17
6. 2019.....	XXX	XXX	XXX	XXX	628	656	625	627	645	642	(3)	15
7. 2020.....	XXX	XXX	XXX	XXX	XXX	433	344	199	197	148	(49)	(50)
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	417	435	424	363	(61)	(72)
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	411	345	346	1	(65)
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	347	444	97	XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	493	XXX	XXX
12. Totals											67	13

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

1. Prior.....	0	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	2	2	2	2	2	2	2	2	2	0	0
3. 2016.....	XXX	1	1	1	1	1	1	1	1	1	0	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	3	4	5	3	2	2	2	0	0
6. 2019.....	XXX	XXX	XXX	XXX	8	8	3	3	2	2	0	(1)
7. 2020.....	XXX	XXX	XXX	XXX	XXX	30	27	23	20	16	(4)	(7)
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	41	14	15	12	(3)	(2)
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18	25	15	(9)	(3)
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	29	28	(1)	XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27	XXX	XXX
12. Totals											(18)	(13)

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior.....	(3)	(218)	(218)	(218)	(218)	(218)	(218)	(219)	(219)	(232)	(13)	(13)
2. 2015.....	0	0	0	0	0	(3)	0	0	0	0	0	0
3. 2016.....	XXX	0	0	0	0	208	4	4	4	4	0	0
4. 2017.....	XXX	XXX	0	0	0	306	1	2	2	2	0	(1)
5. 2018.....	XXX	XXX	XXX	0	0	210	2	0	1	1	0	1
6. 2019.....	XXX	XXX	XXX	XXX	191	190	185	185	185	183	(1)	(1)
7. 2020.....	XXX	XXX	XXX	XXX	XXX	177	180	181	182	184	2	3
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	166	159	152	153	0	(7)
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	192	195	198	2	6
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	151	136	(15)	XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	148	XXX	XXX
12. Totals											(25)	(13)

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....	(26)	(1,075)	(1,075)	(1,075)	(1,075)	(1,075)	(1,077)	(1,080)	(1,082)	(1,153)	(71)	(73)
2. 2015.....	0	0	0	0	0	(2)	(1)	(1)	(1)	(2)	0	(1)
3. 2016.....	XXX	0	0	0	0	885	(1)	(1)	(1)	(2)	0	(1)
4. 2017.....	XXX	XXX	0	0	0	887	0	(1)	(1)	(1)	0	0
5. 2018.....	XXX	XXX	XXX	0	0	850	0	1	2	2	0	2
6. 2019.....	XXX	XXX	XXX	XXX	951	909	905	903	902	902	0	(1)
7. 2020.....	XXX	XXX	XXX	XXX	XXX	681	663	659	658	659	1	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	681	672	662	664	2	(8)
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	805	813	801	(12)	(4)
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	827	801	(26)	XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	950	XXX	XXX
12. Totals											(107)	(86)

SCHEDULE P - PART 2K - FIDELITY/SURETY

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

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

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

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	XXX							
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior.....	60	46	42	34	37	35	20	35	33	33	0	(2)
2. 2015.....	37	39	36	37	37	34	34	33	33	33	0	(1)
3. 2016.....	XXX	58	59	55	54	53	53	53	53	53	0	0
4. 2017.....	XXX	XXX	43	54	52	51	49	48	43	44	1	(4)
5. 2018.....	XXX	XXX	XXX	70	87	85	84	83	87	89	2	6
6. 2019.....	XXX	XXX	XXX	XXX	58	72	69	70	70	69	(1)	(1)
7. 2020.....	XXX	XXX	XXX	XXX	XXX	94	101	99	99	102	3	3
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	82	84	83	76	(7)	(8)
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	132	134	133	(2)	1
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	77	64	(13)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	74	XXX	XXX
12. Totals											(16)	(6)

SCHEDULE P - PART 2O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY

1. Prior.....	267	237	230	214	201	200	200	180	166	138	(28)	(42)
2. 2015.....	17	17	16	14	15	14	14	12	12	9	(3)	(3)
3. 2016.....	XXX	26	28	31	38	38	37	37	36	36	0	(1)
4. 2017.....	XXX	XXX	35	37	41	42	41	41	40	40	0	(1)
5. 2018.....	XXX	XXX	XXX	47	49	50	46	44	49	54	6	10
6. 2019.....	XXX	XXX	XXX	XXX	62	61	62	65	78	91	13	26
7. 2020.....	XXX	XXX	XXX	XXX	XXX	81	81	79	85	105	20	26
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	123	134	138	162	24	28
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	141	152	198	45	57
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	129	134	5	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	105	XXX	XXX
12. Totals											82	100

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior.....	214	244	300	183	207	208	171	196	129	127	(2)	(69)
2. 2015.....	34	39	68	49	46	51	52	51	48	47	(1)	(3)
3. 2016.....	XXX	37	84	43	36	27	25	26	23	23	0	(2)
4. 2017.....	XXX	XXX	109	54	54	38	48	43	37	36	(1)	(7)
5. 2018.....	XXX	XXX	XXX	59	59	52	56	64	51	50	(1)	(14)
6. 2019.....	XXX	XXX	XXX	XXX	47	36	43	53	40	39	(2)	(15)
7. 2020.....	XXX	XXX	XXX	XXX	XXX	13	11	10	8	6	(2)	(4)
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	6	3	3	3	(1)	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	7	11	4	8
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	15	(2)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	XXX	XXX
12. Totals											(7)	(107)

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

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

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

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

SCHEDULE P - PART 2T - WARRANTY

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

SCHEDULE P - PART 2U - PET INSURANCE PLANS

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 3A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior.....	000.....	52.....	67.....	82.....	95.....	96.....	98.....	98.....	101.....	90.....	3.....	0.....
2. 2015.....	660.....	844.....	875.....	881.....	884.....	886.....	888.....	889.....	890.....	890.....	81.....	29.....
3. 2016.....	XXX.....	608.....	761.....	781.....	785.....	786.....	786.....	787.....	788.....	788.....	70.....	25.....
4. 2017.....	XXX.....	XXX.....	890.....	1,027.....	1,033.....	1,038.....	1,042.....	1,043.....	1,051.....	1,053.....	86.....	27.....
5. 2018.....	XXX.....	XXX.....	XXX.....	537.....	665.....	681.....	688.....	691.....	695.....	703.....	59.....	60.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	650.....	755.....	764.....	774.....	773.....	773.....	60.....	72.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	639.....	755.....	783.....	783.....	786.....	62.....	18.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	359.....	490.....	494.....	497.....	34.....	12.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	443.....	599.....	615.....	42.....	13.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	548.....	663.....	54.....	19.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	475.....	21.....	13.....

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

1. Prior.....	000.....	296.....	454.....	513.....	535.....	548.....	557.....	561.....	562.....	540.....	21.....	0.....
2. 2015.....	450.....	736.....	877.....	925.....	950.....	972.....	985.....	990.....	992.....	994.....	161.....	52.....
3. 2016.....	XXX.....	382.....	638.....	753.....	797.....	820.....	829.....	838.....	839.....	840.....	130.....	44.....
4. 2017.....	XXX.....	XXX.....	312.....	523.....	615.....	658.....	677.....	686.....	692.....	694.....	107.....	34.....
5. 2018.....	XXX.....	XXX.....	XXX.....	265.....	441.....	534.....	567.....	586.....	601.....	608.....	95.....	133.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	253.....	406.....	465.....	497.....	536.....	537.....	75.....	109.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	147.....	236.....	301.....	335.....	343.....	42.....	10.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	153.....	258.....	327.....	366.....	19.....	9.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	164.....	278.....	330.....	23.....	8.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	182.....	321.....	28.....	9.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	244.....	25.....	5.....

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

1. Prior.....	000.....	347.....	562.....	672.....	737.....	779.....	784.....	794.....	796.....	762.....	13.....	0.....
2. 2015.....	202.....	393.....	611.....	734.....	778.....	788.....	818.....	830.....	837.....	847.....	70.....	25.....
3. 2016.....	XXX.....	207.....	411.....	630.....	753.....	830.....	881.....	888.....	898.....	899.....	76.....	29.....
4. 2017.....	XXX.....	XXX.....	212.....	431.....	628.....	718.....	821.....	858.....	929.....	951.....	81.....	29.....
5. 2018.....	XXX.....	XXX.....	XXX.....	277.....	529.....	750.....	870.....	998.....	1,069.....	1,104.....	144.....	462.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	302.....	528.....	698.....	864.....	986.....	1,052.....	62.....	522.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	176.....	396.....	594.....	746.....	845.....	21.....	15.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	214.....	384.....	623.....	705.....	48.....	34.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	217.....	474.....	644.....	54.....	20.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	200.....	422.....	44.....	20.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	194.....	16.....	11.....

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

1. Prior.....	000.....	1,079.....	1,786.....	2,227.....	2,646.....	2,951.....	3,238.....	3,496.....	3,759.....	4,024.....	375.....	0.....
2. 2015.....	661.....	1,320.....	1,632.....	1,797.....	1,907.....	1,989.....	2,043.....	2,085.....	2,124.....	2,163.....	164.....	35.....
3. 2016.....	XXX.....	693.....	1,534.....	1,920.....	2,064.....	2,139.....	2,184.....	2,210.....	2,247.....	2,273.....	202.....	32.....
4. 2017.....	XXX.....	XXX.....	846.....	1,826.....	2,211.....	2,354.....	2,458.....	2,509.....	2,557.....	2,596.....	189.....	44.....
5. 2018.....	XXX.....	XXX.....	XXX.....	898.....	1,903.....	2,268.....	2,457.....	2,541.....	2,638.....	2,686.....	26.....	1,051.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	869.....	1,778.....	2,200.....	2,420.....	2,588.....	2,669.....	20.....	1,856.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	774.....	1,841.....	2,280.....	2,512.....	2,651.....	147.....	27.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	932.....	2,135.....	2,673.....	2,939.....	163.....	34.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,035.....	2,188.....	2,733.....	180.....	32.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,019.....	2,344.....	212.....	43.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,130.....	154.....	50.....

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	000.....	45.....	72.....	88.....	89.....	90.....	91.....	94.....	92.....	108.....	3.....	0.....
2. 2015.....	401.....	507.....	533.....	545.....	548.....	549.....	551.....	551.....	551.....	552.....	27.....	14.....
3. 2016.....	XXX.....	356.....	479.....	489.....	491.....	490.....	494.....	494.....	494.....	502.....	26.....	13.....
4. 2017.....	XXX.....	XXX.....	416.....	538.....	554.....	561.....	562.....	568.....	576.....	574.....	31.....	14.....
5. 2018.....	XXX.....	XXX.....	XXX.....	405.....	512.....	545.....	562.....	567.....	586.....	582.....	25.....	50.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	578.....	740.....	795.....	836.....	904.....	942.....	22.....	65.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	585.....	786.....	899.....	1,021.....	1,110.....	13.....	13.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	471.....	715.....	867.....	1,000.....	25.....	22.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	681.....	1,122.....	1,330.....	29.....	20.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	651.....	971.....	24.....	17.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	808.....	11.....	11.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

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

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

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

1. Prior.....	000.....											
2. 2015.....												
3. 2016.....	XXX.....											
4. 2017.....	XXX.....	XXX.....										
5. 2018.....	XXX.....	XXX.....	XXX.....									
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	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.....			

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

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

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

1. Prior.....	000.....	333.....	576.....	768.....	857.....	1,037.....	1,072.....	1,102.....	1,121.....	1,149.....	9.....	0.....
2. 2015.....	58.....	183.....	291.....	395.....	492.....	512.....	536.....	558.....	577.....	588.....	21.....	17.....
3. 2016.....	XXX.....	74.....	172.....	336.....	453.....	504.....	560.....	590.....	642.....	670.....	22.....	18.....
4. 2017.....	XXX.....	XXX.....	84.....	255.....	345.....	439.....	533.....	630.....	687.....	729.....	25.....	19.....
5. 2018.....	XXX.....	XXX.....	XXX.....	81.....	209.....	418.....	525.....	694.....	719.....	742.....	21.....	351.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	69.....	173.....	287.....	388.....	513.....	566.....	15.....	324.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	(55).....	(18).....	59.....	114.....	132.....	3.....	3.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	4.....	121.....	232.....	253.....	1.....	0.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	13.....	143.....	149.....	0.....	1.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	10.....	63.....	0.....	0.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	9.....	0.....	0.....

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

1. Prior.....	000.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
2. 2015.....	0.....	2.....	2.....	2.....	2.....	2.....	2.....	2.....	2.....	2.....	0.....	0.....
3. 2016.....	XXX.....	1.....	1.....	1.....	1.....	1.....	1.....	1.....	1.....	1.....	0.....	0.....
4. 2017.....	XXX.....	XXX.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....	0.....
5. 2018.....	XXX.....	XXX.....	XXX.....	2.....	2.....	2.....	2.....	2.....	2.....	2.....	0.....	1.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	1.....	1.....	1.....	2.....	2.....	0.....	5.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	6.....	10.....	10.....	11.....	0.....	0.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2.....	6.....	8.....	8.....	0.....	0.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3.....	11.....	13.....	0.....	0.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	10.....	0.....	0.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	0.....	0.....

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior.....	000.....	(218).....	(218).....	(218).....	(218).....	(218).....	(219).....	(219).....	(219).....	(232).....	XXX.....	XXX.....
2. 2015.....	0.....	0.....	0.....	0.....	0.....	(3).....	0.....	0.....	0.....	0.....	XXX.....	XXX.....
3. 2016.....	XXX.....	174.....	0.....	0.....	0.....	208.....	4.....	4.....	4.....	4.....	XXX.....	XXX.....
4. 2017.....	XXX.....	XXX.....	257.....	0.....	0.....	306.....	(1).....	1.....	2.....	2.....	XXX.....	XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....	174.....	0.....	209.....	2.....	0.....	0.....	0.....	XXX.....	XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	162.....	188.....	184.....	184.....	184.....	183.....	XXX.....	XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	140.....	173.....	178.....	180.....	181.....	XXX.....	XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	123.....	158.....	152.....	153.....	XXX.....	XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	159.....	197.....	199.....	XXX.....	XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	110.....	134.....	XXX.....	XXX.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	92.....	XXX.....	XXX.....

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior.....	000.....	(1,075).....	(1,075).....	(1,075).....	(1,075).....	(1,075).....	(1,077).....	(1,080).....	(1,082).....	(1,153).....	0.....	0.....
2. 2015.....	0.....	0.....	0.....	0.....	0.....	(2).....	(1).....	(1).....	(1).....	(2).....	0.....	0.....
3. 2016.....	XXX.....	836.....	0.....	0.....	0.....	885.....	(1).....	(1).....	(1).....	(2).....	0.....	0.....
4. 2017.....	XXX.....	XXX.....	839.....	0.....	0.....	887.....	0.....	(1).....	(1).....	(1).....	0.....	0.....
5. 2018.....	XXX.....	XXX.....	XXX.....	804.....	0.....	848.....	0.....	1.....	1.....	2.....	0.....	0.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	875.....	906.....	904.....	902.....	902.....	902.....	1.....	1.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	623.....	661.....	657.....	658.....	658.....	215.....	53.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	623.....	671.....	661.....	661.....	141.....	66.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	741.....	808.....	797.....	172.....	40.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	749.....	795.....	185.....	45.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	838.....	119.....	34.....

SCHEDULE P - PART 3K - FIDELITY/SURETY

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

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

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

NONE

SCHEDULE P - PART 3N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior.....	000.....	16.....	22.....	23.....	26.....	25.....	26.....	26.....	25.....	25.....	XXX.....	XXX.....
2. 2015.....	8.....	24.....	30.....	31.....	32.....	33.....	33.....	33.....	33.....	33.....	XXX.....	XXX.....
3. 2016.....	XXX.....	26.....	44.....	49.....	52.....	52.....	53.....	53.....	53.....	53.....	XXX.....	XXX.....
4. 2017.....	XXX.....	XXX.....	12.....	39.....	45.....	46.....	46.....	47.....	42.....	43.....	XXX.....	XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....	9.....	63.....	77.....	79.....	80.....	82.....	82.....	XXX.....	XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	10.....	48.....	58.....	62.....	67.....	67.....	XXX.....	XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	47.....	83.....	94.....	97.....	99.....	XXX.....	XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	22.....	58.....	69.....	70.....	XXX.....	XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	73.....	114.....	126.....	XXX.....	XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	27.....	49.....	XXX.....	XXX.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	16.....	XXX.....	XXX.....

SCHEDULE P - PART 3O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY

1. Prior.....	000.....	24.....	45.....	56.....	65.....	75.....	82.....	86.....	89.....	92.....	XXX.....	XXX.....
2. 2015.....	0.....	4.....	5.....	6.....	7.....	7.....	7.....	8.....	8.....	8.....	XXX.....	XXX.....
3. 2016.....	XXX.....	2.....	10.....	15.....	20.....	21.....	22.....	27.....	27.....	30.....	XXX.....	XXX.....
4. 2017.....	XXX.....	XXX.....	2.....	9.....	16.....	18.....	21.....	22.....	24.....	25.....	XXX.....	XXX.....
5. 2018.....	XXX.....	XXX.....	XXX.....	5.....	16.....	21.....	25.....	26.....	29.....	32.....	XXX.....	XXX.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	5.....	17.....	31.....	40.....	60.....	XXX.....	XXX.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	14.....	26.....	39.....	59.....	XXX.....	XXX.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3.....	24.....	47.....	73.....	XXX.....	XXX.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2.....	24.....	50.....	XXX.....	XXX.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	17.....	XXX.....	XXX.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	XXX.....	XXX.....

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

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 3R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1	2	3	4	5	6	7	8	9	10		
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024		
1. Prior.....	000.....	52.....	117.....	89.....	119.....	150.....	115.....	125.....	127.....	127.....	1.....	0.....
2. 2015.....	1.....	7.....	13.....	15.....	34.....	38.....	44.....	46.....	47.....	47.....	1.....	1.....
3. 2016.....	XXX.....	3.....	11.....	11.....	18.....	19.....	21.....	23.....	23.....	23.....	1.....	1.....
4. 2017.....	XXX.....	XXX.....	4.....	3.....	8.....	13.....	31.....	35.....	36.....	36.....	1.....	2.....
5. 2018.....	XXX.....	XXX.....	XXX.....	2.....	10.....	18.....	23.....	46.....	49.....	49.....	1.....	35.....
6. 2019.....	XXX.....	XXX.....	XXX.....	XXX.....	4.....	10.....	19.....	29.....	35.....	37.....	1.....	31.....
7. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	1.....	2.....	3.....	4.....	0.....	0.....
8. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	1.....	1.....	2.....	0.....	0.....
9. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	1.....	4.....	0.....	0.....
10. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	0.....	14.....	0.....	0.....
11. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	0.....	0.....

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

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

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

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

SCHEDULE P - PART 3T - WARRANTY

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

SCHEDULE P - PART 3U - PET INSURANCE PLANS

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 4A - HOMEOWNERS/FARMOWNERS

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	4	(3)	(6)	(9)	(9)	1	0	0	0	0
2. 2015.....	65	12	7	3	1	1	0	0	1	0
3. 2016.....	XXX	58	16	5	3	2	1	1	1	0
4. 2017.....	XXX	XXX	69	16	3	3	0	1	1	0
5. 2018.....	XXX	XXX	XXX	64	9	7	1	2	1	0
6. 2019.....	XXX	XXX	XXX	XXX	77	13	3	2	1	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	28	5	1	3	1
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	35	3	3	2
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	49	7	3
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33	6
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	111

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

1. Prior.....	161	73	32	(4)	(14)	2	1	2	1	0
2. 2015.....	256	118	55	21	11	4	2	0	1	0
3. 2016.....	XXX	249	111	44	22	8	3	2	2	1
4. 2017.....	XXX	XXX	179	82	44	13	4	9	2	0
5. 2018.....	XXX	XXX	XXX	148	78	22	5	4	2	1
6. 2019.....	XXX	XXX	XXX	XXX	119	38	18	10	3	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	78	34	13	4	1
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	68	28	6	3
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	82	16	8
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	52	24
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	144

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

1. Prior.....	260	112	67	15	2	5	2	0	0	0
2. 2015.....	277	166	113	58	26	11	6	2	1	1
3. 2016.....	XXX	285	245	139	57	33	8	2	0	1
4. 2017.....	XXX	XXX	466	289	167	73	22	10	4	1
5. 2018.....	XXX	XXX	XXX	525	343	174	60	33	6	3
6. 2019.....	XXX	XXX	XXX	XXX	626	357	147	63	14	15
7. 2020.....	XXX	XXX	XXX	XXX	XXX	546	310	127	24	12
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	665	301	142	50
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	488	214	99
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	429	249
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	628

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

1. Prior.....	6,741	5,096	3,233	2,940	2,148	1,984	1,419	1,384	1,346	1,204
2. 2015.....	1,835	1,472	985	749	498	432	397	351	420	435
3. 2016.....	XXX	2,041	1,468	1,088	766	486	447	469	437	489
4. 2017.....	XXX	XXX	2,869	1,690	1,406	786	452	491	397	464
5. 2018.....	XXX	XXX	XXX	2,138	1,973	1,197	631	561	454	487
6. 2019.....	XXX	XXX	XXX	XXX	2,391	1,925	791	646	516	472
7. 2020.....	XXX	XXX	XXX	XXX	XXX	1,871	1,252	789	590	494
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	2,298	1,006	687	491
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,057	1,096	612
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,131	1,015
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,160

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	147	123	117	87	99	93	37	22	19	13
2. 2015.....	65	13	11	5	2	1	0	0	0	0
3. 2016.....	XXX	34	19	8	3	1	0	0	0	0
4. 2017.....	XXX	XXX	64	18	10	3	2	2	0	0
5. 2018.....	XXX	XXX	XXX	59	15	13	4	12	1	1
6. 2019.....	XXX	XXX	XXX	XXX	72	57	28	30	13	2
7. 2020.....	XXX	XXX	XXX	XXX	XXX	276	196	139	26	6
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	442	347	129	34
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	281	119	62
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	604	409
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	696

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

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

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

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	XX						
7. 2020.....	XXX	XXX	XX	XX	XX					
8. 2021.....	XXX	XXX	XX	XX	XX	XX				
9. 2022.....	XXX	XXX	XX	XXX	XXX	XX	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 4G - SPECIAL LIABILITY (OCEAN MARINE, AIRCRAFT (ALL PERILS), BOILER AND MACHINERY)

1. Prior.....	0	0	0	1	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	1

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

1. Prior.....	524	348	247	213	156	124	79	73	85	76
2. 2015.....	318	238	145	115	58	41	19	20	7	2
3. 2016.....	XXX	335	225	176	123	78	37	51	17	5
4. 2017.....	XXX	XXX	405	331	216	149	74	49	11	10
5. 2018.....	XXX	XXX	XXX	466	370	216	105	67	40	25
6. 2019.....	XXX	XXX	XXX	XXX	424	332	199	120	44	24
7. 2020.....	XXX	XXX	XXX	XXX	XXX	341	258	100	54	11
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	322	153	91	30
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	253	127	42
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	236	146
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	293

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

1. Prior.....	0	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	1	1	3	1	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	6	5	2	1	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	27	17	12	6	1
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	34	6	3	1
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10	11	1
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	10
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

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

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	0	0	0	0	0	0	0	0	0	0
2. 2015.....	9	0	0	0	0	0	0	0	0	0
3. 2016.....	XXX	11	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	18	2	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	13	2	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	16	1	0	0	1	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	9	1	0	1	1
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	9	0	1	1
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10	1	1
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25	1
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	38

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior.....	(4)	0	0	0	0	0	0	0	0	0
2. 2015.....	14	0	0	0	0	0	0	0	0	0
3. 2016.....	XXX	14	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	3	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	1	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	2	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	4	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	5	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5	2	2
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	30	2
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	59

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior.....	0	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	1	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	1	1	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	1	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	1	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 4L - OTHER (INCLUDING CREDIT, ACCIDENT AND HEALTH)

1. Prior.....	0	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

SCHEDULE P - PART 4M - INTERNATIONAL

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

NONE

SCHEDULE P - PART 4N - REINSURANCE
NONPROPORTIONAL ASSUMED PROPERTY

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	36	16	13	7	8	7	(7)	7	7	7
2. 2015.....	9	1	1	0	0	0	0	0	0	0
3. 2016.....	XXX	10	4	1	0	0	0	0	0	0
4. 2017.....	XXX	XXX	6	1	1	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	9	1	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	11	2	0	0	1	1
7. 2020.....	XXX	XXX	XXX	XXX	XXX	6	1	1	0	1
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	21	3	3	1
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18	2	2
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22	3
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26

SCHEDULE P - PART 4O - REINSURANCE
NONPROPORTIONAL ASSUMED LIABILITY

1. Prior.....	194	154	129	108	95	89	85	65	48	21
2. 2015.....	13	10	9	6	5	5	4	4	4	1
3. 2016.....	XXX	13	9	9	9	7	6	5	5	2
4. 2017.....	XXX	XXX	19	10	11	8	8	7	5	7
5. 2018.....	XXX	XXX	XXX	24	19	14	12	9	5	8
6. 2019.....	XXX	XXX	XXX	XXX	48	28	17	16	13	15
7. 2020.....	XXX	XXX	XXX	XXX	XXX	58	35	24	17	28
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	79	59	43	53
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	89	61	75
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	100	77
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	80

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

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 4R - SECTION 1 - PRODUCTS LIABILITY - OCCURRENCE

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	163	136	116	66	69	35	24	35	2	0
2. 2015.....	25	20	36	16	7	5	3	4	1	1
3. 2016.....	XXX	28	57	20	10	4	2	1	0	0
4. 2017.....	XXX	XXX	99	44	38	12	6	3	1	0
5. 2018.....	XXX	XXX	XXX	51	35	14	7	6	2	1
6. 2019.....	XXX	XXX	XXX	XXX	39	18	13	9	2	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	11	9	3	2	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	5	2	1	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	2	1
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	2
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3

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

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	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 4S - FINANCIAL GUARANTY/MORTGAGE GUARANTY

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	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 4T - WARRANTY

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	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 4U - PET INSURANCE PLANS

1. Prior.....										
2. 2015.....										
3. 2016.....	XXX									
4. 2017.....	XXX	XXX								
5. 2018.....	XXX	XXX	XXX							
6. 2019.....	XXX	XXX	XXX	XXX						
7. 2020.....	XXX	XXX	XXX	XXX	XXX					
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2022.....	XXX	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 WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 5A - HOMEOWNERS/FARMOWNERS

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	14	2	1	0	0	0	0	0	0	0
2. 2015.....	67	79	80	81	81	81	81	81	81	81
3. 2016.....	XXX	59	69	70	70	70	70	70	70	70
4. 2017.....	XXX	XXX	66	84	85	86	86	86	86	86
5. 2018.....	XXX	XXX	XXX	49	58	59	59	59	59	59
6. 2019.....	XXX	XXX	XXX	XXX	49	59	60	60	60	60
7. 2020.....	XXX	XXX	XXX	XXX	XXX	51	61	62	62	62
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	24	33	33	34
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27	35	42
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	30	54
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	3	1	1	1	0	0	0	0	0	0
2. 2015.....	11	1	0	0	0	0	0	0	0	0
3. 2016.....	XXX	9	1	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	18	1	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	7	0	1	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	2	5	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	5	1	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	7	1	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	1	1
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7	4
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	8	1	0	0	0	0	0	0	0	0
2. 2015.....	103	110	110	110	110	110	110	110	110	110
3. 2016.....	XXX	89	94	94	94	95	95	95	95	95
4. 2017.....	XXX	XXX	107	112	113	113	113	113	113	113
5. 2018.....	XXX	XXX	XXX	114	118	120	119	119	119	119
6. 2019.....	XXX	XXX	XXX	XXX	119	136	132	132	132	132
7. 2020.....	XXX	XXX	XXX	XXX	XXX	71	80	80	80	81
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	41	45	46	46
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43	47	55
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	48	77
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	41

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

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

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	48	12	4	4	0	0	0	0	0	0
2. 2015.....	116	153	159	160	161	161	161	161	161	161
3. 2016.....	XXX	92	123	128	129	129	129	129	130	130
4. 2017.....	XXX	XXX	79	102	105	106	106	107	107	107
5. 2018.....	XXX	XXX	XXX	71	90	94	94	95	95	95
6. 2019.....	XXX	XXX	XXX	XXX	55	72	74	74	75	75
7. 2020.....	XXX	XXX	XXX	XXX	XXX	34	40	41	42	42
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	11	16	18	19
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12	19	23
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16	28
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	25

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	20	7	4	2	0	1	1	0	0	0
2. 2015.....	43	6	3	1	0	0	0	0	0	0
3. 2016.....	XXX	42	7	2	0	1	0	0	0	0
4. 2017.....	XXX	XXX	31	5	0	1	1	0	0	0
5. 2018.....	XXX	XXX	XXX	23	1	2	1	1	0	0
6. 2019.....	XXX	XXX	XXX	XXX	3	3	2	1	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	10	2	1	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	8	2	1	1
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	2	2
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12	5
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	11	2	2	0	0	1	0	0	0	0
2. 2015.....	197	208	213	213	212	213	213	213	213	213
3. 2016.....	XXX	164	172	173	172	174	173	173	173	173
4. 2017.....	XXX	XXX	134	140	139	142	141	141	141	142
5. 2018.....	XXX	XXX	XXX	220	222	228	228	228	228	229
6. 2019.....	XXX	XXX	XXX	XXX	160	184	184	184	184	185
7. 2020.....	XXX	XXX	XXX	XXX	XXX	52	51	52	52	52
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	25	27	27	29
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26	28	34
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33	42
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	48

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

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

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	18	6	2	4	1	0	0	0	0	0
2. 2015.....	47	62	65	68	69	69	69	69	70	70
3. 2016.....	XXX	48	66	73	75	75	75	75	76	76
4. 2017.....	XXX	XXX	48	74	77	78	79	80	80	81
5. 2018.....	XXX	XXX	XXX	121	138	141	142	143	144	144
6. 2019.....	XXX	XXX	XXX	XXX	46	56	58	60	61	62
7. 2020.....	XXX	XXX	XXX	XXX	XXX	10	17	19	20	21
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	30	43	46	48
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36	49	54
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	27	44
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	10	3	3	13	2	0	0	0	1	0
2. 2015.....	18	4	3	4	1	0	0	0	0	0
3. 2016.....	XXX	23	6	6	1	1	0	0	0	0
4. 2017.....	XXX	XXX	22	13	2	2	2	1	1	0
5. 2018.....	XXX	XXX	XXX	65	3	4	2	1	1	0
6. 2019.....	XXX	XXX	XXX	XXX	12	6	4	2	1	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	13	5	3	2	1
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	18	5	3	2
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16	5	2
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14	5
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	7	1	2	19	(7)	(1)	0	0	1	0
2. 2015.....	81	88	91	97	94	94	94	94	95	95
3. 2016.....	XXX	90	98	108	104	105	105	105	105	105
4. 2017.....	XXX	XXX	89	114	107	109	109	109	109	110
5. 2018.....	XXX	XXX	XXX	640	600	605	605	605	606	606
6. 2019.....	XXX	XXX	XXX	XXX	576	582	583	583	584	584
7. 2020.....	XXX	XXX	XXX	XXX	XXX	27	36	37	37	37
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	76	82	82	83
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	67	72	77
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	54	69
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	39

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

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

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	166	(13)	17	(541)	1	3	1	2	903	3
2. 2015.....	183	265	284	161	162	163	163	164	214	164
3. 2016.....	XXX	186	304	198	199	200	201	201	238	202
4. 2017.....	XXX	XXX	231	182	185	187	188	189	198	189
5. 2018.....	XXX	XXX	XXX	8	17	25	28	29	30	26
6. 2019.....	XXX	XXX	XXX	XXX	5	65	73	76	78	20
7. 2020.....	XXX	XXX	XXX	XXX	XXX	140	182	192	195	147
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	144	202	210	163
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	157	213	180
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	151	212
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	154

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	397	397	397	5	23	21	22	18	18	17
2. 2015.....	37	40	40	1	16	15	16	16	15	15
3. 2016.....	XXX	36	39	2	16	13	15	14	14	14
4. 2017.....	XXX	XXX	41	4	19	17	17	17	16	16
5. 2018.....	XXX	XXX	XXX	11	29	22	23	21	20	20
6. 2019.....	XXX	XXX	XXX	XXX	67	28	24	21	20	19
7. 2020.....	XXX	XXX	XXX	XXX	XXX	49	33	23	21	20
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	67	34	27	24
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	65	31	24
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	70	32
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	73

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	13	30	28	(647)	(1)	25	5	0	1, 132	5
2. 2015.....	306	326	344	195	194	210	213	213	269	215
3. 2016.....	XXX	331	369	230	229	245	247	247	289	248
4. 2017.....	XXX	XXX	382	228	227	246	248	249	259	249
5. 2018.....	XXX	XXX	XXX	1, 068	1, 068	1, 098	1, 101	1, 101	1, 101	1, 097
6. 2019.....	XXX	XXX	XXX	XXX	1, 869	1, 955	1, 959	1, 960	1, 960	1, 895
7. 2020.....	XXX	XXX	XXX	XXX	XXX	223	247	249	249	194
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	253	276	278	221
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	268	287	236
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	265	286
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	278

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 5E - COMMERCIAL MULTIPLE PERIL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	8	2	1	0	0	0	0	0	0	0
2. 2015.....	20	26	26	27	27	27	27	27	27	27
3. 2016.....	XXX	20	26	26	26	26	26	26	26	26
4. 2017.....	XXX	XXX	23	30	30	31	31	31	31	31
5. 2018.....	XXX	XXX	XXX	18	22	24	24	25	25	25
6. 2019.....	XXX	XXX	XXX	XXX	15	20	21	21	22	22
7. 2020.....	XXX	XXX	XXX	XXX	XXX	3	8	10	11	13
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	13	21	23	25
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16	26	29
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16	24
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	4	2	1	1	0	1	1	1	1	0
2. 2015.....	6	1	0	0	0	0	0	0	0	0
3. 2016.....	XXX	6	1	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	7	1	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	4	0	2	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	1	7	2	1	1	1
7. 2020.....	XXX	XXX	XXX	XXX	XXX	5	5	4	3	1
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	11	5	4	3
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14	7	6
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11	5
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	4	0	0	0	0	1	0	0	0	0
2. 2015.....	37	40	40	41	41	41	41	41	41	41
3. 2016.....	XXX	36	39	39	39	39	39	39	39	39
4. 2017.....	XXX	XXX	41	44	44	45	45	45	45	45
5. 2018.....	XXX	XXX	XXX	70	71	75	74	74	75	75
6. 2019.....	XXX	XXX	XXX	XXX	75	90	86	87	87	88
7. 2020.....	XXX	XXX	XXX	XXX	XXX	11	24	25	26	27
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	41	47	49	50
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	43	51	54
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	40	46
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	34

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 WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 5H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	7	4	2	1	1	0	0	0	0	0
2. 2015.....	11	16	18	19	20	20	20	21	21	21
3. 2016.....	XXX	13	18	20	21	22	22	22	22	22
4. 2017.....	XXX	XXX	14	20	22	22	23	24	25	25
5. 2018.....	XXX	XXX	XXX	12	16	18	19	20	21	21
6. 2019.....	XXX	XXX	XXX	XXX	9	12	13	14	14	15
7. 2020.....	XXX	XXX	XXX	XXX	XXX	2	3	3	3	3
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	1	1	1
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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	10	6	4	3	0	2	3	1	1	0
2. 2015.....	9	4	3	2	0	1	1	0	0	0
3. 2016.....	XXX	9	5	3	0	1	1	1	1	0
4. 2017.....	XXX	XXX	9	4	1	3	2	1	1	0
5. 2018.....	XXX	XXX	XXX	8	1	3	2	1	1	0
6. 2019.....	XXX	XXX	XXX	XXX	1	3	2	2	1	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	1	1	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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	7	2	1	1	(1)	3	1	0	1	(1)
2. 2015.....	29	34	36	37	36	37	37	38	38	38
3. 2016.....	XXX	30	37	39	38	40	40	40	41	41
4. 2017.....	XXX	XXX	33	40	39	43	43	44	44	44
5. 2018.....	XXX	XXX	XXX	363	365	370	371	372	372	372
6. 2019.....	XXX	XXX	XXX	XXX	329	337	338	339	340	339
7. 2020.....	XXX	XXX	XXX	XXX	XXX	5	6	6	6	7
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1	2
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	1
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 5H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

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

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

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 5R - PRODUCTS LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS CLOSED WITH LOSS PAYMENT DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	1	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	1	1	1	1	1	1	1	1
3. 2016.....	XXX	0	1	1	1	1	1	1	1	1
4. 2017.....	XXX	XXX	0	1	1	1	1	1	1	1
5. 2018.....	XXX	XXX	XXX	1	1	1	1	1	1	1
6. 2019.....	XXX	XXX	XXX	XXX	0	0	1	1	1	1
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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	2	2	1	1	0	1	2	2	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	1	0	0	1	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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
1. Prior.....	1	1	0	0	0	2	1	0	(2)	0
2. 2015.....	2	2	2	2	2	2	2	2	2	2
3. 2016.....	XXX	2	2	2	2	2	2	2	2	2
4. 2017.....	XXX	XXX	2	2	2	2	2	2	2	2
5. 2018.....	XXX	XXX	XXX	35	35	36	36	36	36	36
6. 2019.....	XXX	XXX	XXX	XXX	31	32	32	32	32	32
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	1
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 5R - Products Liability - Claims-Made - Section 1B

N O N E

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

N O N E

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

N O N E

Schedule P - Part 5T - Warranty - Section 1

N O N E

Schedule P - Part 5T - Warranty - Section 2

N O N E

Schedule P - Part 5T - Warranty - Section 3

N O N E

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 6C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	6	1	0	0	0	0	0	0	0	0	0
2. 2015.....	1,126	1,132	1,133	1,133	1,133	1,133	1,133	1,133	1,133	1,133	0
3. 2016.....	XXX	1,252	1,258	1,260	1,260	1,260	1,260	1,260	1,260	1,260	0
4. 2017.....	XXX	XXX	1,372	1,379	1,381	1,381	1,381	1,381	1,381	1,381	0
5. 2018.....	XXX	XXX	XXX	1,400	1,411	1,411	1,411	1,411	1,411	1,411	0
6. 2019.....	XXX	XXX	XXX	XXX	1,454	1,460	1,460	1,460	1,460	1,460	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	1,575	1,575	1,575	1,575	1,575	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	1,698	1,698	1,698	1,698	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,676	1,676	1,676	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,686	1,686	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,689	1,689
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,689
13. Earned Premiums (Sch P-Pt. 1)	1,089	1,210	1,327	1,409	1,466	1,581	1,698	1,676	1,686	1,689	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	0	(2)	0	0	0	0	0	0	0	0	0
2. 2015.....	22	22	22	22	22	22	22	22	22	22	0
3. 2016.....	XXX	22	22	22	22	22	22	22	22	22	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0	0	0	0	0	0	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	3	3	3	3	3	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	54	54	54	54	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	130	130	130	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	105	105	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	55	55
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	55
13. Earned Premiums (Sch P-Pt. 1)	21	19	1	0	0	3	54	130	105	55	XXX

SCHEDULE P - PART 6D - WORKERS' COMPENSATION

(EXCLUDING EXCESS WORKERS' COMPENSATION)

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	139	(5)	(4)	3	(2)	(2)	0	0	0	0	0
2. 2015.....	5,335	5,475	5,501	5,501	5,501	5,501	5,501	5,501	5,501	5,501	0
3. 2016.....	XXX	5,672	5,761	5,784	5,787	5,786	5,786	5,786	5,786	5,786	0
4. 2017.....	XXX	XXX	6,078	6,308	6,325	6,325	6,325	6,325	6,325	6,325	0
5. 2018.....	XXX	XXX	XXX	5,483	5,684	5,684	5,684	5,684	5,684	5,684	0
6. 2019.....	XXX	XXX	XXX	XXX	5,640	5,710	5,710	5,710	5,710	5,710	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	6,025	6,025	6,025	6,025	6,025	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	6,281	6,281	6,281	6,281	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,954	6,954	6,954	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,630	7,630	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,030	8,030
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,030
13. Earned Premiums (Sch P-Pt. 1)	5,743	6,097	6,496	5,739	5,859	6,092	6,281	6,954	7,630	8,030	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	223	(1)	(10)	0	0	0	0	0	0	0	0
2. 2015.....	1,212	1,247	1,263	1,263	1,263	1,263	1,263	1,263	1,263	1,263	0
3. 2016.....	XXX	1,094	1,079	1,079	1,079	1,079	1,079	1,079	1,079	1,079	0
4. 2017.....	XXX	XXX	669	669	669	669	669	669	669	669	0
5. 2018.....	XXX	XXX	XXX	107	107	119	119	119	119	119	0
6. 2019.....	XXX	XXX	XXX	XXX	53	59	59	59	59	59	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	37	37	37	37	37	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	90	90	90	90	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	51	51	51	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	69	69	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	100	100
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	100
13. Earned Premiums (Sch P-Pt. 1)	1,523	1,196	700	62	53	56	90	51	69	100	XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 6E - COMMERCIAL MULTIPLE PERIL

SECTION 1

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	18	0	0	0	0	0	0	0	0	0	0
2. 2015.....	1,536	1,547	1,547	1,547	1,547	1,547	1,547	1,547	1,547	1,547	0
3. 2016.....	XXX	1,608	1,609	1,609	1,609	1,609	1,609	1,609	1,609	1,609	0
4. 2017.....	XXX	XXX	1,637	1,637	1,637	1,637	1,637	1,637	1,637	1,637	0
5. 2018.....	XXX	XXX	XXX	1,186	1,186	1,186	1,186	1,186	1,186	1,186	0
6. 2019.....	XXX	XXX	XXX	XXX	1,403	1,399	1,399	1,399	1,399	1,399	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	1,987	1,987	1,987	1,987	1,987	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	2,377	2,377	2,377	2,377	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,449	2,449	2,449	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,765	2,765	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,299	3,299
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,299
13. Earned Premiums (Sch P-Pt. 1)	1,109	1,156	1,169	1,186	1,403	1,984	2,377	2,449	2,765	3,299	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	0	0	0	1	0	0	0	0	0	0	0
2. 2015.....	171	171	171	171	171	171	171	171	171	171	0
3. 2016.....	XXX	104	104	104	104	104	104	104	104	104	0
4. 2017.....	XXX	XXX	75	75	75	75	75	75	75	75	0
5. 2018.....	XXX	XXX	XXX	46	46	46	46	46	46	46	0
6. 2019.....	XXX	XXX	XXX	XXX	68	68	68	68	68	68	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	99	99	99	99	99	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	145	145	145	145	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	185	185	185	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	187	187	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	154	154
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	154
13. Earned Premiums (Sch P-Pt. 1)	122	74	53	46	68	99	145	185	187	154	XXX

SCHEDULE P - PART 6H - OTHER LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	1	2	0	0	0	29	0	0	0	0	0
2. 2015.....	1,505	1,512	1,512	1,512	1,512	1,512	1,512	1,512	1,512	1,512	0
3. 2016.....	XXX	1,714	1,730	1,730	1,730	1,730	1,730	1,730	1,730	1,730	0
4. 2017.....	XXX	XXX	1,857	1,860	1,860	1,860	1,860	1,860	1,860	1,860	0
5. 2018.....	XXX	XXX	XXX	1,329	1,330	1,330	1,330	1,330	1,330	1,330	0
6. 2019.....	XXX	XXX	XXX	XXX	1,178	1,167	1,167	1,167	1,167	1,167	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	735	735	735	735	735	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	641	641	641	641	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	671	671	671	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	758	758	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	832	832
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	832
13. Earned Premiums (Sch P-Pt. 1)	1,075	1,230	1,337	1,332	1,179	752	641	671	758	832	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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	0	(2)	2	0	0	0	0	0	0	0	0
2. 2015.....	79	79	79	79	79	79	79	79	79	79	0
3. 2016.....	XXX	164	164	164	164	164	164	164	164	164	0
4. 2017.....	XXX	XXX	162	162	162	162	162	162	162	162	0
5. 2018.....	XXX	XXX	XXX	103	103	103	103	103	103	103	0
6. 2019.....	XXX	XXX	XXX	XXX	108	108	108	108	108	108	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	73	73	73	73	73	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	44	44	44	44	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	17	17	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	20	20	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15	15
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	15
13. Earned Premiums (Sch P-Pt. 1)	57	115	117	103	108	73	44	17	20	15	XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY
SCHEDULE P - PART 6H - OTHER LIABILITY - CLAIMS-MADE

SECTION 1B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	8	0	0	0	0	0	0	0	0	0	0
2. 2015.....	1	4	4	4	4	4	4	4	4	4	0
3. 2016.....	XXX	2	2	2	2	2	2	2	2	2	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	2	2	2	2	2	2	2	0
6. 2019.....	XXX	XXX	XXX	XXX	14	14	14	14	14	14	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	49	49	49	49	49	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	64	64	64	64	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	62	62	62	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	57	57	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	55	55
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	55
13. Earned Premiums (Sch P-Pt. 1)	6	3	0	2	14	49	64	62	57	55	XXX

SECTION 2B

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED CEDED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	0	0	0	0	0	0	0	0	0	0	0
3. 2016.....	XXX	0	0	0	0	0	0	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	2	2	2	2	2	2	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	22	22	22	22	22	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	40	40	40	40	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9	9	9	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	9	9	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4	4
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4
13. Earned Premiums (Sch P-Pt. 1)	0	0	0	0	2	22	40	9	9	4	XXX

SCHEDULE P - PART 6M - INTERNATIONAL
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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX									
6. 2019.....	XXX	XXX									
7. 2020.....	XXX	XXX									
8. 2021.....	XXX	XXX									
9. 2022.....	XXX	XXX									
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....											
2. 2015.....											
3. 2016.....	XXX										
4. 2017.....	XXX	XXX									
5. 2018.....	XXX	XXX									
6. 2019.....	XXX	XXX									
7. 2020.....	XXX	XXX									
8. 2021.....	XXX	XXX									
9. 2022.....	XXX	XXX									
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13. Earned Premiums (Sch P-Pt. 1)											XXX

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 6N - REINSURANCE - NONPROPORTIONAL ASSUMED PROPERTY

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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	13	0	0	0	0	0	0	0	0	0	0
2. 2015.....	95	97	97	97	97	97	97	97	97	97	0
3. 2016.....	XXX	102	104	104	104	104	104	104	104	104	0
4. 2017.....	XXX	XXX	85	86	86	86	86	86	86	86	0
5. 2018.....	XXX	XXX	XXX	57	60	60	60	60	60	60	0
6. 2019.....	XXX	XXX	XXX	XXX	76	76	76	76	76	76	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	88	88	88	88	88	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	104	104	104	104	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	114	114	114	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	118	118	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	114	114
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	114
13. Earned Premiums (Sch P-Pt. 1)	76	74	61	59	78	88	104	114	118	114	XXX

SECTION 2

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

SCHEDULE P - PART 6O - REINSURANCE - NONPROPORTIONAL ASSUMED LIABILITY

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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	1	0	0	0	0	36	0	0	0	0	0
2. 2015.....	19	17	17	17	17	17	17	17	17	17	0
3. 2016.....	XXX	27	28	28	28	28	28	28	28	28	0
4. 2017.....	XXX	XXX	36	37	37	37	37	37	37	37	0
5. 2018.....	XXX	XXX	XXX	47	49	49	49	49	49	49	0
6. 2019.....	XXX	XXX	XXX	XXX	91	85	85	85	85	85	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	91	91	91	91	91	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	152	152	152	152	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	169	169	169	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	165	165	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	122	122
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	122
13. Earned Premiums (Sch P-Pt. 1)	19	25	34	48	93	120	152	169	165	122	XXX

SECTION 2

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 6R - PRODUCTS LIABILITY - OCCURRENCE

SECTION 1A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	86	86	86	86	86	86	86	86	86	86	0
3. 2016.....	XXX	95	96	96	96	96	96	96	96	96	0
4. 2017.....	XXX	XXX	101	101	101	101	101	101	101	101	0
5. 2018.....	XXX	XXX	XXX	94	94	94	94	94	94	94	0
6. 2019.....	XXX	XXX	XXX	XXX	65	65	65	65	65	65	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	23	23	23	23	23	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	6	6	6	6	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	8	8	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8	8	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11	11
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11
13. Earned Premiums (Sch P-Pt. 1)	82	90	96	94	65	23	6	8	8	11	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	2	3	4	5	6	7	8	9	10	
	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	
1. Prior.....	0	0	0	0	0	0	0	0	0	0	0
2. 2015.....	1	1	1	1	1	1	1	1	1	1	0
3. 2016.....	XXX	1	1	1	1	1	1	1	1	1	0
4. 2017.....	XXX	XXX	0	0	0	0	0	0	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0	0	0	0	0	0	0
6. 2019.....	XXX	XXX	XXX	XXX	1	1	1	1	1	1	0
7. 2020.....	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0	0
8. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0	0
9. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0	0
10. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
11. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
13. Earned Premiums (Sch P-Pt. 1)	2	2	0	0	1	0	0	0	0	0	XXX

SCHEDULE P - PART 6R - PRODUCTS LIABILITY - CLAIMS-MADE

SECTION 1B

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

SECTION 2B

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

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (\$000 OMITTED)

SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	370	0	0.0	0	0	0.0
2. Private Passenger Auto Liability/ Medical	829	0	0.0	0	0	0.0
3. Commercial Auto/Truck Liability/ Medical	2,952	0	0.0	0	0	0.0
4. Workers' Compensation	18,410	0	0.0	0	0	0.0
5. Commercial Multiple Peril	3,834	0	0.0	0	0	0.0
6. Medical Professional Liability - Occurrence	0	0	0.0	0	0	0.0
7. Medical Professional Liability - Claims - Made	0	0	0.0	0	0	0.0
8. Special Liability	5	0	0.0	0	0	0.0
9. Other Liability - Occurrence	1,773	0	0.0	0	0	0.0
10. Other Liability - Claims-Made	57	0	0.0	0	0	0.0
11. Special Property	70	0	0.0	0	0	0.0
12. Auto Physical Damage	164	0	0.0	0	0	0.0
13. Fidelity/Surety	0	0	0.0	0	0	0.0
14. Other	0	0	0.0	0	0	0.0
15. International	0	0	0.0	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	21	0	0.0	0	0	0.0
20. Products Liability - Claims-Made	0	0	0.0	0	0	0.0
21. Financial Guaranty/Mortgage Guaranty	0	0	0.0	0	0	0.0
22. Warranty	0	0	0.0	0	0	0.0
23. Pet Insurance Plans	0	0	0.0	0	0	0.0
24. Totals	28,486	0	0.0	0	0	0.0

SECTION 2

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

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

SCHEDULE P - PART 7A - PRIMARY LOSS SENSITIVE CONTRACTS (Continued)

SECTION 4

Years in Which Policies Were Issued	NET EARNED PREMIUMS REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	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 WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (\$000 OMITTED)

SECTION 1

Schedule P - Part 1	1	2	3	4	5	6
	Total Net Losses and Expenses Unpaid	Net Losses and Expenses Unpaid on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total	Total Net Premiums Written	Net Premiums Written on Loss Sensitive Contracts	Loss Sensitive as Percentage of Total
1. Homeowners/Farmowners	370	0	0.0	0	0	0.0
2. Private Passenger Auto Liability/Medical	829	0	0.0	0	0	0.0
3. Commercial Auto/Truck Liability/Medical	2,952	0	0.0	0	0	0.0
4. Workers' Compensation	18,410	0	0.0	0	0	0.0
5. Commercial Multiple Peril	3,834	0	0.0	0	0	0.0
6. Medical Professional Liability - Occurrence	0	0	0.0	0	0	0.0
7. Medical Professional Liability - Claims - Made	0	0	0.0	0	0	0.0
8. Special Liability	5	0	0.0	0	0	0.0
9. Other Liability - Occurrence	1,773	0	0.0	0	0	0.0
10. Other Liability - Claims-Made	57	0	0.0	0	0	0.0
11. Special Property	70	0	0.0	0	0	0.0
12. Auto Physical Damage	164	0	0.0	0	0	0.0
13. Fidelity/Surety	0	0	0.0	0	0	0.0
14. Other	0	0	0.0	0	0	0.0
15. International	0	0	0.0	0	0	0.0
16. Reinsurance - Nonproportional Assumed Property	106	0	0.0	0	0	0.0
17. Reinsurance - Nonproportional Assumed Liability	625	0	0.0	0	0	0.0
18. Reinsurance - Nonproportional Assumed Financial Lines	0	0	0.0	0	0	0.0
19. Products Liability - Occurrence	21	0	0.0	0	0	0.0
20. Products Liability - Claims-Made	0	0	0.0	0	0	0.0
21. Financial Guaranty/Mortgage Guaranty	0	0	0.0	0	0	0.0
22. Warranty	0	0	0.0	0	0	0.0
23. Pet Insurance Plans	0	0	0.0	0	0	0.0
24. Totals	29,216	0	0.0	0	0	0.0

SECTION 2

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

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

SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (Continued)

SECTION 4

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

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

Years in Which Policies Were Issued	INCURRED ADJUSTABLE COMMISSIONS REPORTED AT YEAR END (\$000 OMITTED)									
	1	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	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	2	3	4	5	6	7	8	9	10
	2015	2016	2017	2018	2019	2020	2021	2022	2023	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 WILSON MUTUAL INSURANCE COMPANY

SCHEDULE P INTERROGATORIES

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

Years in Which Premiums Were Earned and Losses Were Incurred		DDR Reserve Included in Schedule P, Part 1F, Medical Professional Liability Column 24: Total Net Losses and Expenses Unpaid	
		1 Section 1: Occurrence	2 Section 2: Claims-Made
1.601	Prior .....	.....	.....
1.602	2015 .....	.....	.....
1.603	2016 .....	.....	.....
1.604	2017 .....	.....	.....
1.605	2018 .....	.....	.....
1.606	2019 .....	.....	.....
1.607	2020 .....	.....	.....
1.608	2021 .....	.....	.....
1.609	2022 .....	.....	.....
1.610	2023 .....	.....	.....
1.611	2024 .....	.....	.....
1.612	Totals	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 Fidelity0

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

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

Allocated by States and Territories

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
. 0291 ...	Encova Mutual Insurance Group .....	..... 10204	62-1590861 42-1496478 .....	.....	.....	.....	Consumers Insurance USA, Inc. IMARC, LLC .....	.. OH.....	..... IA.....	Motorists Mutual Insurance Company	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
. 0291 ...	Encova Mutual Insurance Group .....	..... 31577	42-1019089 42-0333120 .....	.....	.....	.....	Iowa American Insurance Company .....	.. OH.....	..... IA.....	Iowa Mutual Insurance Company	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
. 0291 ...	Encova Mutual Insurance Group .....	..... 14338 ....	.....	.....	.....	.....	Iowa Mutual Insurance Company .....	.. OH.....	..... IA.....	Encova Holdings, Inc. Motorists Commercial Mutual Insurance Company	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
. 0291 ...	Encova Mutual Insurance Group .....	..... 40932	41-1563134 31-1022150 .....	.....	.....	.....	Encova Insurance Agency, Inc. MICO Insurance Company .....	.. MN.....	..... NIA.....	Motorists Mutual Insurance Company	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
. 0291 ...	Encova Mutual Insurance Group .....	..... 13331	41-0299900 ..	.....	.....	.....	Motorists Commercial Mutual Insurance Company .....	.. OH.....	..... IA.....	Motorists Mutual Insurance Company	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
. 0291 ...	Encova Mutual Insurance Group .....	..... 14621	31-4259550 31-0851906 .....	.....	.....	.....	Motorists Mutual Insurance Company .....	.. OH.....	..... IA.....	Encova Holdings, Inc.	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
. 0291 ...	Encova Mutual Insurance Group .....	..... 23175	02-0178290 ..	.....	.....	.....	Encova Service Corporation .....	.. OH.....	..... NIA.....	Motorists Mutual Insurance Company	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
. 0291 ...	Encova Mutual Insurance Group .....	..... 19950	39-0739760 81-4951462 .....	.....	.....	.....	Phenix Mutual Fire Insurance Company .....	.. OH.....	..... IA.....	Encova Holdings, Inc.	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
. 0291 ...	Encova Mutual Insurance Group .....	.....	.....	.....	.....	.....	Wilson Mutual Insurance Company .....	.. OH.....	..... RE.....	Encova Holdings, Inc.	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
. 0291 ...	Encova Mutual Insurance Group .....	.....	.....	.....	.....	.....	Encova Realty, LLC .....	.. OH.....	..... NIA.....	Motorists Mutual Insurance Company	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
. 0291 ...	Encova Mutual Insurance Group .....	.....	.....	.....	.....	.....	Encova Foundation of Ohio .....	.. OH.....	..... NIA.....	Motorists Mutual Insurance Company	Board	0.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
. 0291 ...	Encova Mutual Insurance Group .....	..... 12372	20-2394166 ..	.....	.....	.....	BrickStreet Mutual Insurance Company .....	.. WV.....	..... IA.....	Encova Holdings, Inc.	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
. 0291 ...	Encova Mutual Insurance Group .....	..... 15137	46-1783383 ..	.....	.....	.....	PinnaclePoint Insurance Company .....	.. WV.....	..... IA.....	BrickStreet Mutual Insurance Company	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
. 0291 ...	Encova Mutual Insurance Group .....	..... 13045	26-0818900 ..	.....	.....	.....	NorthStone Insurance Company .....	.. WV.....	..... IA.....	BrickStreet Mutual Insurance Company	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
. 0291 ...	Encova Mutual Insurance Group .....	..... 15136	46-1795752 ..	.....	.....	.....	SummitPoint Insurance Company .....	.. WV.....	..... IA.....	BrickStreet Mutual Insurance Company	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
. 0291 ...	Encova Mutual Insurance Group .....	..... 13016	87-0807723 88-3837925 .....	.....	.....	.....	AlleghenyPoint Insurance Company .....	.. WV.....	..... IA.....	BrickStreet Mutual Insurance Company	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	Wolf Road Realty, LLC .....	.. IL.....	..... NIA.....	BrickStreet Mutual Insurance Company	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	Encova Foundation of West Virginia, Inc .....	.. WV.....	..... NIA.....	BrickStreet Mutual Insurance Company	Board	0.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	STCE HTC Federal Investor, LLC .....	.. GA.....	..... NIA.....	BrickStreet Mutual Insurance Company	Ownership.....	99.990 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	MPC Brickstreet 2017 Historic Fund, LLC .....	.. GA.....	..... NIA.....	BrickStreet Mutual Insurance Company	Ownership.....	99.990 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	MPC Brickstreet 2018 Historic Fund, LLC .....	.. GA.....	..... NIA.....	BrickStreet Mutual Insurance Company	Ownership.....	99.990 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	MPC Brickstreet 2019 Historic Fund, LLC .....	.. GA.....	..... NIA.....	BrickStreet Mutual Insurance Company	Ownership.....	99.990 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	MPC Brickstreet 2022 Historic Fund, LLC .....	.. GA.....	..... NIA.....	BrickStreet Mutual Insurance Company	Ownership.....	99.990 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	IGS ESG I, LLC .....	.. OH.....	..... NIA.....	BrickStreet Mutual Insurance Company	Ownership.....	50.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	Encova Insurance Service Center, LLC .....	.. OH.....	..... NIA.....	Motorists Mutual Insurance Company	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	Encova Holdings, Inc. ....	.. OH.....	..... UDP.....	Encova Mutual Insurance Group, Inc.	Ownership.....	100.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	Encova Mutual Insurance Group, Inc. ....	.. OH.....	..... UIP.....	.....	Ownership.....	100.000 ...	.....	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	MPC Fed 2022 Energy Fund II, LLC .....	.. GA.....	..... NIA.....	BrickStreet Mutual Insurance Company	Ownership.....	99.990 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	MPC Brickstreet 2023 Historic Fund, LLC .....	.. GA.....	..... NIA.....	BrickStreet Mutual Insurance Company	Ownership.....	99.990 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	IGS ESG IV, LLC .....	.. OH.....	..... NIA.....	BrickStreet Mutual Insurance Company	Ownership.....	33.333 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....
.....	.....	.....	.....	.....	.....	.....	IGS ESG II, LLC .....	.. OH.....	..... NIA.....	BrickStreet Mutual Insurance Company	Ownership.....	80.000 ...	Encova Mutual Insurance Group, Inc. ..	.... NO.....	.....

Asterisk	.....
.....

NONE

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
.....	41-1563134	Encova Insurance Agency, Inc. ....	.....0	.....440,896	.....0	.....0	.....615,752	.....0	.....	.....0	.....1,056,648	.....0
13331	41-0299900	Motorists Commercial Mutual Insurance Co. ....	.....0	.....1,955,375	.....0	.....0	.....123,188,054	.....0	.....*	.....0	.....125,143,428	.....0
10204	62-1590891	Consumers Insurance USA, Inc. ....	.....0	.....0	.....0	.....0	.....237,368	.....0	.....*	.....0	.....237,368	.....0
31577	42-1019089	Iowa American Insurance Company .....	.....0	.....0	.....0	.....0	.....13,966	.....0	.....*	.....0	.....13,966	.....0
14338	42-0333120	Iowa Mutual Insurance Company .....	.....0	.....0	.....0	.....0	.....1,976,051	.....0	.....*	.....0	.....1,976,051	.....0
40932	31-1022150	MICO Insurance Company .....	.....0	.....0	.....0	.....0	.....32,002,355	.....0	.....*	.....0	.....32,002,355	.....0
66311	31-0717055	Encova Holdings, Inc. ....	.....50,000,000	.....45,911,075	.....0	.....0	.....0	.....0	.....	.....(64,543,487)	.....31,367,588	.....0
14621	31-4259550	Motorists Mutual Insurance Company .....	.....(22,850,000)	.....(2,396,413)	.....0	.....0	.....(293,123,239)	.....0	.....*	.....5,509,895	.....(312,859,757)	.....0
.....	31-0851906	Encova Service Corporation .....	.....0	.....0	.....0	.....0	.....0	.....0	.....	.....15,707,005	.....15,707,005	.....0
23175	02-0178290	Phenix Mutual Fire Insurance Company .....	.....0	.....1,175,000	.....0	.....0	.....4,040,634	.....0	.....*	.....0	.....5,215,634	.....0
19950	39-0739760	Wilson Mutual Insurance Company .....	.....0	.....0	.....0	.....0	.....2,765,498	.....0	.....*	.....0	.....2,765,498	.....0
.....	81-4951462	Encova Realty, LLC .....	.....0	.....0	.....0	.....0	.....0	.....0	.....	.....(2,471,538)	.....(2,471,538)	.....0
12372	20-2394166	BrickStreet Mutual Insurance Company .....	.....(27,150,000)	.....(47,086,075)	.....0	.....0	.....28,345,781	.....0	.....*	.....45,798,126	.....(92,168)	.....0
15136	46-1795752	SummitPoint Insurance Company .....	.....0	.....0	.....0	.....0	.....12,099,239	.....0	.....*	.....0	.....12,099,239	.....0
15137	46-1783383	PinnaclePoint Insurance Company .....	.....0	.....0	.....0	.....0	.....47,419,453	.....0	.....*	.....0	.....47,419,453	.....0
13045	26-0818900	NorthStone Insurance Company .....	.....0	.....0	.....0	.....0	.....30,727,705	.....0	.....*	.....0	.....30,727,705	.....0
13016	87-0807723	AlleghenyPoint Insurance Company .....	.....0	.....0	.....0	.....0	.....9,691,382	.....0	.....*	.....0	.....9,691,382	.....0
.....	86-1546423	Encova Insurance Service Center .....	.....0	.....142	.....0	.....0	.....0	.....0	.....	.....0	.....142	.....0
.....
.....
.....
9999999	Control Totals	.....	0	0	0	0	0	0	XXX	0	0	0

Pooling Percentage Information		
NAIC Code.....	Company Name	Pooling %
12372.....	Brickstreet Mutual Insurance Company	48.2%
14621.....	Motorists Mutual Insurance Company	24.1%
13331.....	Motorists Commerical Mutual Insurance Company	13.4%
10204.....	Consumers Insurance USA, Inc.	1.9%
14338.....	Iowa Mutual Insurance Company	1.9%
40932.....	MICO Insurance Company	1.7%
15136.....	Summitpoint Insurance Company	1.7%
15137.....	Pinncalepoint Insurance Company	1.7%
23175.....	Phenix Mutual Fire Insurance Company	1.4%
13016.....	Alleghenypoint Insurance Company	1.4%
19950.....	Wilson Mutual Insurance Company	1.3%
13045.....	Northstone Insurance Company	1.3%
31577.....	Iowa American Insurance Company	0.0%

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SCHEDULE Y

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

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

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

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


















SUPPLEMENTAL FILINGS

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

MARCH FILING		
11.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
12.	Will the Financial Guaranty Insurance Exhibit be filed by March 1?.....	NO
13.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?.....	NO
14.	Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed by March 1?	NO
15.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
16.	Will the Premiums Attributed to Protected Cells Exhibit be filed by March 1?	NO
17.	Will the Reinsurance Summary Supplemental Filing for General Interrogatory 9 be filed with the state of domicile and the NAIC by March 1? ...	NO
18.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?.....	NO
19.	Will the confidential Actuarial Opinion Summary be filed with the state of domicile, if required, by March 15 (or the date otherwise specified)?..	YES
20.	Will the Reinsurance Attestation Supplement be filed with the state of domicile and the NAIC by March 1?	YES
21.	Will the Exceptions to the Reinsurance Attestation Supplement be filed with the state of domicile by March 1?	NO
22.	Will the Bail Bond Supplement be filed with the state of domicile and the NAIC by March 1?	NO
23.	Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
24.	Will an approval from the reporting entity’s state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
25.	Will an approval from the reporting entity’s state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
26.	Will an approval from the reporting entity’s state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?.....	NO
27.	Will the Supplemental Schedule for Reinsurance Counterparty Reporting Exception - Asbestos and Pollution Contracts be filed with the state of domicile and the NAIC by March 1?.....	NO
28.	Will the Exhibit of Other Liabilities by Lines of Business be filed with the state of domicile and the NAIC by March 1?.....	YES
29.	Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with appropriate jurisdictions and with the NAIC by March 1?.....	YES
APRIL FILING		
30.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
31.	Will the Long-term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
32.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	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?	YES
35.	Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?	NO
36.	Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?	NO
37.	Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
AUGUST FILING		
38.	Will Management’s Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO
Explanations:		
11.	The data for this supplement is not required to be filed	
12.	The data for this supplement is not required to be filed	
13.	The data for this supplement is not required to be filed	
14.	The data for this supplement is not required to be filed	
15.	The data for this supplement is not required to be filed	
16.	The data for this supplement is not required to be filed	
17.	The data for this supplement is not required to be filed	
18.	The data for this supplement is not required to be filed	
21.	The data for this supplement is not required to be filed	
22.	The data for this supplement is not required to be filed	
23.	The data for this supplement is not required to be filed	
24.	The data for this supplement is not required to be filed	
25.	The data for this supplement is not required to be filed	
26.	The data for this supplement is not required to be filed	
27.	The data for this supplement is not required to be filed	
30.	The data for this supplement is not required to be filed	
31.	The data for this supplement is not required to be filed	
32.	The data for this supplement is not required to be filed	
33.	The data for this supplement is not required to be filed	
35.	The data for this supplement is not required to be filed	
36.	The data for this supplement is not required to be filed	
37.	The data for this supplement is not required to be filed	
38.	The data for this supplement is not required to be filed	
Bar Codes:		
11.	SIS Stockholder Information Supplement [Document Identifier 420]	
12.	Financial Guaranty Insurance Exhibit [Document Identifier 240]	
13.	Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	
14.	Supplement A to Schedule T [Document Identifier 455]	
15.	Trusteed Surplus Statement [Document Identifier 490]	
16.	Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]	

ANNUAL STATEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

17.	Reinsurance Summary Supplemental Filing [Document Identifier 401]	 1 9 9 5 0 2 0 2 4 4 0 1 0 0 0 0 0
18.	Medicare Part D Coverage Supplement [Document Identifier 365]	 1 9 9 5 0 2 0 2 4 3 6 5 0 0 0 0 0
21.	Exceptions to the Reinsurance Attestation Supplement [Document Identifier 400]	 1 9 9 5 0 2 0 2 4 4 0 0 0 0 0 0 0
22.	Bail Bond Supplement [Document Identifier 500]	 1 9 9 5 0 2 0 2 4 5 0 0 0 0 0 0 0
23.	Director and Officer Insurance Coverage Supplement [Document Identifier 505]	 1 9 9 5 0 2 0 2 4 5 0 5 0 0 0 0 0
24.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	 1 9 9 5 0 2 0 2 4 2 2 4 0 0 0 0 0
25.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	 1 9 9 5 0 2 0 2 4 2 2 5 0 0 0 0 0
26.	Relief from the Requirements for Audit Committees [Document Identifier 226]	 1 9 9 5 0 2 0 2 4 2 2 6 0 0 0 0 0
27.	Reinsurance Counterparty Reporting Exception – Asbestos and Pollution Contracts [Document Identifier 555]	 1 9 9 5 0 2 0 2 4 5 5 5 0 0 0 0 0
30.	Credit Insurance Experience Exhibit [Document Identifier 230]	 1 9 9 5 0 2 0 2 4 2 3 0 0 0 0 0 0
31.	Long-Term Care Experience Reporting Forms [Document Identifier 306]	 1 9 9 5 0 2 0 2 4 3 0 6 0 0 0 0 0
32.	Accident and Health Policy Experience Exhibit [Document Identifier 210]	 1 9 9 5 0 2 0 2 4 2 1 0 0 0 0 0 0
33.	Supplemental Health Care Exhibit (Parts 1 and 2) [Document Identifier 216]	 1 9 9 5 0 2 0 2 4 2 1 6 0 0 0 0 0
35.	Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 [Document Identifier 290]	 1 9 9 5 0 2 0 2 4 2 9 0 0 0 0 0 0
36.	Private Flood Insurance Supplement [Document Identifier 560]	 1 9 9 5 0 2 0 2 4 5 6 0 0 0 0 0 0
37.	Will the Mortgage Guaranty Insurance Exhibit [Document Identifier 565]	 1 9 9 5 0 2 0 2 4 5 6 5 0 0 0 0 0
38.	Management's Report of Internal Control Over Financial Reporting [Document Identifier 223]	 1 9 9 5 0 2 0 2 4 2 2 3 0 0 0 0 0

NONE



SUPPLEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

EXHIBIT OF OTHER LIABILITIES BY LINES OF BUSINESS

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

(To Be Filed by March 1)

NAIC Group Code 0291

NAIC Company Code 19950

	Direct Business Only			
	Prior Year	Current Year		
	1 Written Premium	2 Written Premium	3 Losses Paid (deducting salvage)	4 Losses Unpaid (Case Base)
1. Completed operations				
2. Errors & omissions (E&O)				
3. Directors & officers (D&O)				
4. Environmental liability				
5. Excess workers' compensation				
6. Commercial excess & umbrella		715,973		
7. Personal umbrella	280,385			100,000
8. Employment liability				
9. Aggregate write-ins for facilities & premises (CGL)	4,421	118,319	216,740	123,000
10. Internet & cyber liability		282		
11. Aggregate write-ins for other	0	4,424	0	0
12. Total ASL 17 - other liability (sum of lines 1 through 11)	284,806	838,998	216,740	223,000
DETAILS OF WRITE-INS				
0901. Commercial General Liability	(300)	38,372		
0902. Comprehensive Personal Liability	4,721	79,947		
0903. Premises and Operations Liability			216,740	123,000
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0
0999. Totals (Lines 0901 through 0903 plus 0998)(Line 9 above)	4,421	118,319	216,740	123,000
1101. Miscellaneous	0	4,424		
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	4,424	0	0



SUPPLEMENT FOR THE YEAR 2024 OF THE WILSON MUTUAL INSURANCE COMPANY

MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

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

FOR THE STATE OF: Wisconsin

NAIC Group Code 0291

NAIC Company Code 19950

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