



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2025
OF THE CONDITION AND AFFAIRS OF THE

Ohio Mutual Insurance Company

NAIC Group Code 0963 (Current) 0963 (Prior) NAIC Company Code 10202 Employer's ID Number 34-4320350

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

Incorporated/Organized 03/05/1901 Commenced Business 03/05/1901

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

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

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

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

Internet Website Address www.omig.com

Statutory Statement Contact Teri Ann Miller, 419-562-3011
(Name) (Area Code) (Telephone Number)
tmiller@omig.com, 877-753-0580
(E-mail Address) (FAX Number)

OFFICERS

President Mark Clarence Russell Secretary Thomas Eugene Woolley
Treasurer Andrew Michael Wallen Assistant Secretary Marcella Slone Smith

OTHER

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

DIRECTORS OR TRUSTEES

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

State of Ohio SS
County of Crawford

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

Mark Clarence Russell
President and CEO

Andrew Michael Wallen
Treasurer and CFO

Marcella Slone Smith
Assistant Secretary

Subscribed and sworn to before me this
day of

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.....



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963

BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2025

NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability - occurrence												
11.2 Medical professional liability - claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and Individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability - occurrence												
17.2 Other liability - claims-Made												
17.3 Excess workers' compensation												
18.1 Products liability - occurrence												
18.2 Products liability - claims-made												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. Total (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

NONE

(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

19 CT



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company
EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963

BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2025

NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril	4,548,554	3,926,765		2,401,284	3,202,381	3,402,978	780,218	60,671	3,529	53,750	866,828	75,518
4. Homeowners multiple peril	10,862,856	9,336,480		5,710,243	3,871,155	3,838,418	852,839	187,446	142,296	79,302	2,269,575	180,352
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability - occurrence												
11.2 Medical professional liability - claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and Individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability - occurrence												
17.2 Other liability - claims-Made												
17.3 Excess workers' compensation												
18.1 Products liability - occurrence												
18.2 Products liability - claims-made												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability	5,251,132	5,048,544		2,658,175	2,265,960	3,313,637	3,831,122	117,877	326,690	499,836	787,433	87,183
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage	5,469,377	5,367,056		2,756,186	3,144,053	3,073,708	515,115	12,299	11,262	8,352	819,395	90,807
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. Total (a)	26,131,919	23,678,845		13,525,888	12,483,549	13,628,741	5,979,294	378,293	483,777	641,240	4,743,231	433,860
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

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

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

19.1N



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963

BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2025

NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability - occurrence												
11.2 Medical professional liability - claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and Individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability - occurrence												
17.2 Other liability - claims-Made												
17.3 Excess workers' compensation												
18.1 Products liability - occurrence												
18.2 Products liability - claims-made												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. Total (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

NONE

(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

19 ME



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963

BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2025

NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability - occurrence												
11.2 Medical professional liability - claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and Individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability - occurrence												
17.2 Other liability - claims-Made												
17.3 Excess workers' compensation												
18.1 Products liability - occurrence												
18.2 Products liability - claims-made												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. Total (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

NONE

(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

19 NH



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963

BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2025

NAIC Company Code 10202

Table with 12 columns: Line of Business, 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. Rows include Fire, Multiple peril crop, Farmowners multiple peril, Homeowners multiple peril, Commercial multiple peril, Ocean marine, Pet insurance plans, Medical professional liability, Earthquake, Comprehensive (hospital and medical) ind (b), Credit A&H, Vision only, Dental only, Disability income, Medicare supplement, Medicaid Title XIX, Medicare Title XVIII, Long-term care, Federal employees health benefits plan, Other health, Workers' compensation, Other liability, Excess workers' compensation, Products liability, Private passenger auto, Commercial auto, Fidelity, Surety, Burglary and theft, Boiler and machinery, Credit, International, Warranty, Reins nonproportional assumed property, Reins nonproportional assumed liability, Reins nonproportional assumed financial lines, Aggregate write-ins for other lines of business, Total (a), and DETAILS OF WRITE-INS (3401-3499).

(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

19 OH



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963

BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2025

NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability - occurrence												
11.2 Medical professional liability - claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and Individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability - occurrence												
17.2 Other liability - claims-Made												
17.3 Excess workers' compensation												
18.1 Products liability - occurrence												
18.2 Products liability - claims-made												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. Total (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

NONE

(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

19.RI



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963

BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2025

NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
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5.2 Commercial multiple peril (liability portion)												
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13.2 Comprehensive (hospital and medical) group (b)												
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15.1 Vision only (b)												
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15.3 Disability income (b)												
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16. Workers' compensation												
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19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. Total (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

NONE

(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

19.TN



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963

BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2025

NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability - occurrence												
11.2 Medical professional liability - claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and Individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability - occurrence												
17.2 Other liability - claims-Made												
17.3 Excess workers' compensation												
18.1 Products liability - occurrence												
18.2 Products liability - claims-made												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. Total (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

NONE

(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

19.VT



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963

BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2025

NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability - occurrence												
11.2 Medical professional liability - claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and Individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability - occurrence												
17.2 Other liability - claims-Made												
17.3 Excess workers' compensation												
18.1 Products liability - occurrence												
18.2 Products liability - claims-made												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. Total (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

NONE

(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

19 VA



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963

BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2025

NAIC Company Code 10202

Line of Business	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies not Taken		3 Dividends Paid or Credited to Policyholders on Direct Business	4 Direct Unearned Premium Reserves	5 Direct Losses Paid (deducting salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Direct Defense and Cost Containment Expense Paid	9 Direct Defense and Cost Containment Expense Incurred	10 Direct Defense and Cost Containment Expense Unpaid	11 Commissions and Brokerage Expenses	12 Taxes, Licenses and Fees
	1 Direct Premiums Written	2 Direct Premiums Earned										
1. Fire												
2.1 Allied lines												
2.2 Multiple peril crop												
2.3 Federal flood												
2.4 Private crop												
2.5 Private flood												
3. Farmowners multiple peril												
4. Homeowners multiple peril												
5.1 Commercial multiple peril (non-liability portion)												
5.2 Commercial multiple peril (liability portion)												
6. Mortgage guaranty												
8. Ocean marine												
9.1 Inland marine												
9.2 Pet insurance plans												
10. Financial guaranty												
11.1 Medical professional liability - occurrence												
11.2 Medical professional liability - claims-made												
12. Earthquake												
13.1 Comprehensive (hospital and medical) ind (b)												
13.2 Comprehensive (hospital and medical) group (b)												
14. Credit A&H (group and Individual)												
15.1 Vision only (b)												
15.2 Dental only (b)												
15.3 Disability income (b)												
15.4 Medicare supplement (b)												
15.5 Medicaid Title XIX (b)												
15.6 Medicare Title XVIII (b)												
15.7 Long-term care (b)												
15.8 Federal employees health benefits plan (b)												
15.9 Other health (b)												
16. Workers' compensation												
17.1 Other liability - occurrence												
17.2 Other liability - claims-Made												
17.3 Excess workers' compensation												
18.1 Products liability - occurrence												
18.2 Products liability - claims-made												
19.1 Private passenger auto no-fault (personal injury protection)												
19.2 Other private passenger auto liability												
19.3 Commercial auto no-fault (personal injury protection)												
19.4 Other commercial auto liability												
21.1 Private passenger auto physical damage												
21.2 Commercial auto physical damage												
22. Aircraft (all perils)												
23. Fidelity												
24. Surety												
26. Burglary and theft												
27. Boiler and machinery												
28. Credit												
29. International												
30. Warranty												
31. Reins nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
32. Reins nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
33. Reins nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business												
35. Total (a)												
DETAILS OF WRITE-INS												
3401.												
3402.												
3403.												
3498. Summary of remaining write-ins for Line 34 from overflow page												
3499. Totals (Lines 3401 through 3403 plus 3498)(Line 34 above)												

NONE

19.W1

(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 2025 OF THE Ohio Mutual Insurance Company

EXHIBIT OF PREMIUMS AND LOSSES (Statutory Page 14)

NAIC Group Code 0963

BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2025

NAIC Company Code 10202

Table with 12 columns: Line of Business, 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. Rows include various insurance categories like Fire, Auto, Life, and Total (a).

(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

19GT

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

SCHEDULE F - PART 1

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsured	4 Domiciliary Jurisdiction	5 Assumed Premium	Reinsurance On		8 Cols. 6 + 7	9 Contingent Commissions Payable	10 Assumed Premiums Receivable	11 Unearned Premium	12 Funds Held By or Deposited With Reinsured Companies	13 Letters of Credit Posted	14 Amount of Assets Pledged or Compensating Balances to Secure Letters of Credit	15 Amount of Assets Pledged or Collateral Held in Trust
					6 Paid Losses and Loss Adjustment Expenses	7 Known Case Losses and LAE								
34-1008736	.13072	UNITED OHIO INSURANCE COMPANY	OH	214,923	36,956	36,956	36,956		104,774					
01-0407315	.25950	CASCO INDEMNITY COMPANY	OH	35,228	4,769	4,769	4,769		19,685					
39-0274490	.10719	UNITED MUTUAL INSURANCE COMPANY	OH	14,651	853	853	853		8,259					
0199999. Affiliates - U.S. intercompany pooling				264,802	42,578	42,578			132,718					
0499999. Total - U.S. non-pool														
0799999. Total - other (non-U.S.)														
0899999. Total - affiliates				264,802	42,578	42,578			132,718					
AA-9995035	.00000	MUTUAL REINSURANCE BUREAU	IL	145										
1199999. Total pools, associations or other similar facilities - voluntary pools				145										
1299999. Total - pools and associations				145										
9999999 Totals				264,947	42,578	42,578			132,718					

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

SCHEDULE F - PART 2

Premium Portfolio Reinsurance Effected or (Canceled) during Current Year

1 ID Number	2 NAIC Com- pany Code	3 Name of Company	4 Date of Contract	5 Original Premium	6 Reinsurance Premium
NONE					

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers		
34-1008736	13072	UNITED OHIO INSURANCE COMPANY	OH		290,901			44,900		48,372		145,495		238,767			238,767		
01-0407315	25950	CASCO INDEMNITY COMPANY	OH		40,279			6,217		6,698		20,146		33,061			33,061		
39-0274490	10719	UNITED MUTUAL INSURANCE COMPANY	OH		13,426			2,072		2,233		6,715		11,020			11,020		
0199999. Total authorized - affiliates - U.S. intercompany pooling					344,606			53,189		57,303		172,356		282,848			282,848		
0499999. Total authorized - affiliates - U.S. non-pool																			
0799999. Total authorized - affiliates - other (non-U.S.)																			
0899999. Total authorized - affiliates					344,606			53,189		57,303		172,356		282,848			282,848		
06-1182357	22730	ALLIED WORLD INSURANCE COMPANY	NH		352					19				19	(6)		25		
36-2661954	10103	AMERICAN AGRICULTURAL INSURANCE COMPANY	IN		357	51		1	5	7				64	(6)		70		
06-1430254	10348	ARCH REINSURANCE COMPANY	DE		1,103					9		318		328	124		204		
47-0574325	32603	BERKLEY INSURANCE COMPANY	DE		6	102		1	11					114	2		112		
05-0316605	21482	FACTORY MUTUAL INSURANCE COMPANY	RI		1,620	74			55			822		951	87		864		
42-0245840	13897	FARMERS MUTUAL HAIL INSURANCE COMPANY	IA		4			1	9	2				94	2		92		
13-2673100	22039	GENERAL REINSURANCE CORPORATION	DE		943	10			37	1,009				1,559	(2)		1,561	500	
06-0384680	11452	HARTFORD STEAM BOILER INSPECTION & INS	CT		3							2		2			2		
47-0698507	23680	ODYSSEY REINSURANCE COMPANY	CT		186					11				11	(3)		14		
52-1952955	10357	RENAISSANCE REINSURANCE US INC	MD		4	61		1	7					69	1		68		
13-1675535	25364	SWISS REINSURANCE AMERICA CORPORATION	NY		657	41			4	22				67	(12)		79		
13-3031176	38636	PARTNER REINSURANCE COMPANY OF THE U.S.	NY		2	31			3					34	1		33		
23-2423138	23850	TOKIO MARINE SPECIALTY INS CO	DE		606				2			317		319	36		283		
43-0613000	23388	SHELTER MUTUAL INSURANCE COMPANY	MO		104					5				5	(2)		7		
0999999. Total authorized - other U.S. unaffiliated insurers					5,947	453		4	133	1,084		1,962		3,636	222		3,414	500	
AA-9991503	00000	OHIO MINE SUBSIDENCE FUND	OH		12							6		6	3		3		
AA-9991501	00000	INDIANA MINE SUBSIDENCE FUND	IN		3							1		1			1		
1099999. Total authorized - pools - mandatory pools					15							7		7		3	4		
AA-9995035	00000	MUTUAL REINSURANCE BUREAU	IL		318										(7)		7		
1199999. Total authorized - pools - voluntary pools					318										(7)		7		
AA-1128121	00000	LLOYD'S SYNDICATE NO. 2121	GBR							2				2			2		
AA-1120171	00000	LLOYD'S SYNDICATE NO. 1856	GBR		(1)					8				8	1		7		
AA-1126004	00000	LLOYD'S SYNDICATE NO. 4444	GBR		(1)					10				10	1		9		
AA-1120227	00000	LLOYD'S SYNDICATE NO. 3123	GBR		210										(5)		5		
1299999. Total authorized - other non-U.S. insurers					208					20				20	(3)		23		
1499999. Total authorized excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)					351,094	453		4	53,322	58,407		174,325		286,511	215		286,296	500	
1899999. Total unauthorized - affiliates - U.S. non-pool																			
2199999. Total unauthorized - affiliates - other (non-U.S.)																			
2299999. Total unauthorized - affiliates																			
AA-1340004	00000	R&V VERSICHERUNG AG	DEU		946					45				45	(17)		62		
2699999. Total unauthorized - other non-U.S. insurers					946					45				45	(17)		62		
2899999. Total unauthorized excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)					946					45				45	(17)		62		
3299999. Total certified - affiliates - U.S. non-pool																			
3599999. Total certified - affiliates - other (non-U.S.)																			
3699999. Total certified - affiliates																			
4299999. Total certified excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																			
4699999. Total reciprocal jurisdiction - affiliates - U.S. non-pool																			
4999999. Total reciprocal jurisdiction - affiliates - other (non-U.S.)																			

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

SCHEDULE F - PART 3

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

1 ID Number	2 NAIC Com- pany Code	3 Name of Reinsurer	4 Domiciliary Jurisdiction	5 Special Code	6 Reinsurance Premiums Ceded	Reinsurance Recoverable On									16 Amount in Dispute included in Column 15	Reinsurance Payable		19 Net Amount Recoverable From Reinsurers Cols. 15 - [17 + 18]	20 Funds Held by Company Under Reinsurance Treaties	
						7 Paid Losses	8 Paid LAE	9 Known Case Loss Reserves	10 Known Case LAE Reserves	11 IBNR Loss Reserves	12 IBNR LAE Reserves	13 Unearned Premiums	14 Contingent Commis- sions	15 Columns 7 through 14 Totals		17 Ceded Balances Payable	18 Other Amounts Due to Reinsurers			
5099999. Total reciprocal jurisdiction - affiliates																				
RJ-3191435	.00000	CONDUIT REINS LTD	BMU		259					11					11		(5)		16	
RJ-1120191	.00000	CONVEX INS UK LTD	GBR		415	1				18					19		(7)		26	
RJ-3191400	.00000	CONVEX RE LTD	BMU		155					7					7		(3)		10	
RJ-3194122	.00000	DAVINCI REINSURANCE LTD	BMU		187					7					7		(3)		10	
RJ-3191289	.00000	FIDELIS INSURANCE BERMUDA LTD	BMU		463					34					34		(6)		40	
RJ-1340125	.00000	HANNOVER RUCKVERSICHERUNGS AG	DEU		2	41		4							45		1		44	
RJ-3190060	.00000	HANNOVER RE (BERMUDA) LTD	BMU		260												(6)		6	
RJ-3190339	.00000	RENAISSANCE REINSURANCE LTD	BMU		187					7					7		(3)		10	
RJ-3191388	.00000	VERMEER REINSURANCE LTD	BMU		65												(1)		1	
5499999. Total reciprocal jurisdiction - other non-U.S. insurers					1,993	42		4		84					130		(33)		163	
5699999. Total reciprocal jurisdiction excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)					1,993	42		4		84					130		(33)		163	
5799999. Total authorized, unauthorized, reciprocal jurisdiction and certified excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)					354,033	495	4	53,326		58,536		174,325			286,686		165		286,521	500
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																				
9999999 Totals					354,033	495	4	53,326		58,536		174,325			286,686		165		286,521	500

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk								
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)	36 Credit Risk on Un-collateralized Recoverables (Col. 33 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
34-1008736	UNITED OHIO INSURANCE COMPANY					238,767		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
01-0407315	CASCO INDEMNITY COMPANY					33,061		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
39-0274490	UNITED MUTUAL INSURANCE COMPANY					11,020		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0199999	Total authorized - affiliates - U.S. intercompany pooling			XXX		282,848		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	
0799999	Total authorized - affiliates - other (non-U.S.)			XXX										XXX			
0899999	Total authorized - affiliates			XXX		282,848								XXX			
06-1182357	ALLIED WORLD INSURANCE COMPANY				(6)	25		19	23	(6)	29		29	2		1	
36-2661954	AMERICAN AGRICULTURAL INSURANCE COMPANY				(6)	70		64	77	(6)	83		83	3		2	
06-1430254	ARCH REINSURANCE COMPANY					204		328	394		270		270	2		6	
47-0574325	BERKLEY INSURANCE COMPANY					112		114	137		135		135	2		3	
05-0316605	FACTORY MUTUAL INSURANCE COMPANY					864		951	1,141		1,054		1,054	2		22	
42-0245840	FARMERS MUTUAL HAIL INSURANCE COMPANY					92		94	113		111		111	4		4	
13-2673100	GENERAL REINSURANCE CORPORATION					1,061		1,559	1,871		1,373		1,373	1		22	
06-0384680	HARTFORD STEAM BOILER INSPECTION & INS					2		2	2		2		2	1			
47-0698507	ODYSSEY REINSURANCE COMPANY				(3)	14		11	13	(3)	16		16	2			
52-1952955	RENAISSANCE REINSURANCE US INC					68		69	83		82		82	2		2	
13-1675535	SWISS REINSURANCE AMERICA CORPORATION				(12)	79		67	80	(12)	92		92	2		2	
13-3031176	PARTNER REINSURANCE COMPANY OF THE U.S.					33		34	41		40		40	2		1	
23-2423138	TOKIO MARINE SPECIALTY INS CO					283		319	383		347		347	1		6	
43-0613000	SHELTER MUTUAL INSURANCE COMPANY				(2)	7		5	6	(2)	8		8	3			
0999999	Total authorized - other U.S. unaffiliated insurers			XXX		722	2,914	3,636	4,363	722	3,641		3,641	XXX		70	
AA-9991503	OHIO MINE SUBSIDENCE FUND					3	3	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991501	INDIANA MINE SUBSIDENCE FUND					1	1	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1099999	Total authorized - pools - mandatory pools			XXX		3	4	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9995035	MUTUAL REINSURANCE BUREAU					7	7			(7)	7		7	3			
1199999	Total authorized - pools - voluntary pools			XXX		(7)	7			(7)	7		7	XXX			
AA-1128121	LLOYD'S SYNDICATE NO. 2121					2	2	2	2		2		2	2			
AA-1120171	LLOYD'S SYNDICATE NO. 1856					7	7	8	10		9		9	2			
AA-1126004	LLOYD'S SYNDICATE NO. 4444					9	9	10	12		11		11	2			
AA-1120227	LLOYD'S SYNDICATE NO. 3123				(5)	5	5			(5)	5		5	5			
1299999	Total authorized - other non-U.S. insurers			XXX		(3)	23	20	24	(3)	27		27	XXX		1	
1499999	Total authorized excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			XXX		715	285,796	3,656	4,387	712	3,675		3,675	XXX		71	
1899999	Total unauthorized - affiliates - U.S. non-pool			XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2199999	Total unauthorized - affiliates - other (non-U.S.)			XXX										XXX			
2299999	Total unauthorized - affiliates			XXX										XXX			
AA-1340004	R&V VERSICHERUNG AG		62	0001		45		45	54	(17)	71		62	9	3	2	
2699999	Total unauthorized - other non-U.S. insurers		62	XXX		45		45	54	(17)	71		62	9	XXX	2	
2899999	Total unauthorized excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)		62	XXX		45		45	54	(17)	71		62	9	XXX	2	
3299999	Total certified - affiliates - U.S. non-pool			XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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 Total Funds Held, Payables & Collateral	26 Net Recoverable Net of Funds Held & Collateral	27 Applicable Sch. F Penalty (Col. 78)	Ceded Reinsurance Credit Risk							
		21 Multiple Beneficiary Trusts	22 Letters of Credit	23 Issuing or Confirming Bank Reference Number	24 Single Beneficiary Trusts & Other Allowable Collateral				28 Total Amount Recoverable from Reinsurers Less Penalty (Cols. 15-27)	29 Stressed Recoverable (Col. 28 * 120%)	30 Reinsurance Payable & Funds Held (Cols. 17+18+20; but not in excess of Col. 29)	31 Stressed Net Recoverable (Cols. 29-30)	32 Total Collateral (Cols. 21+22 + 24, not in Excess of Col. 31)	33 Stressed Net Recoverable Net of Collateral Offsets (Cols. 31-32)	34 Reinsurer Designation Equivalent	35 Credit Risk on Collateralized Recoverables (Col. 32 * Factor Applicable to Reinsurer Designation Equivalent in Col. 34)
3599999	Total certified - affiliates - other (non-U.S.)			XXX											XXX	
3699999	Total certified - affiliates			XXX											XXX	
4299999	Total certified excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)			XXX											XXX	
4699999	Total reciprocal jurisdiction - affiliates - U.S. non-pool			XXX				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999	Total reciprocal jurisdiction - affiliates - other (non-U.S.)			XXX											XXX	
5099999	Total reciprocal jurisdiction - affiliates			XXX											XXX	
RJ-3191435	CONDUIT REINS LTD					(5)	16	11	13	(5)	18		18	4		1
RJ-1120191	CONVEX INS UK LTD					(7)	26	19	23	(7)	30		30	3		1
RJ-3191400	CONVEX RE LTD					(3)	10	7	8	(3)	11		11	3		
RJ-3194122	DAVINCI REINSURANCE LTD					(3)	10	7	8	(3)	11		11	3		
RJ-3191289	FIDELIS INSURANCE BERMUDA LTD					(6)	40	34	41	(6)	47		47	3		1
RJ-1340125	HANNOVER RUCKVERSICHERUNGS AG					1	44	45	54	1	53		53	2		1
RJ-3190060	HANNOVER RE (BERMUDA) LTD					(6)	6			(6)	6		6	2		
RJ-3190339	RENAISSANCE REINSURANCE LTD					(3)	10	7	8	(3)	11		11	2		
RJ-3191388	VERMEER REINSURANCE LTD					(1)	1			(1)	1		1	3		
5499999	Total reciprocal jurisdiction - other non-U.S. insurers			XXX		(33)	163	130	156	(33)	189		189	XXX		5
5699999	Total reciprocal jurisdiction excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)			XXX		(33)	163	130	156	(33)	189		189	XXX		5
5799999	Total authorized, unauthorized, reciprocal jurisdiction and certified excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)		62	XXX		727	285,959	3,831	4,597	662	3,935	62	3,873	XXX	2	76
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)			XXX				XXX	XXX	XXX	XXX		XXX	XXX	XXX	XXX
9999999	Totals		62	XXX		727	285,959	3,831	4,597	662	3,935	62	3,873	XXX	2	76

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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	Overdue				43										
		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										
34-1008736 ..	UNITED OHIO INSURANCE COMPANY																
01-0407315 ..	CASCO INDEMNITY COMPANY																
39-0274490 ..	UNITED MUTUAL INSURANCE COMPANY																
0199999.	Total authorized - affiliates - U.S. intercompany pooling																XXX
0499999.	Total authorized - affiliates - U.S. non-pool																XXX
0799999.	Total authorized - affiliates - other (non-U.S.)																XXX
0899999.	Total authorized - affiliates																XXX
06-1182357 ..	ALLIED WORLD INSURANCE COMPANY																YES
36-2661954 ..	AMERICAN AGRICULTURAL INSURANCE COMPANY	52					52			52							YES
06-1430254 ..	ARCH REINSURANCE COMPANY	1					1			1							YES
47-0574325 ..	BERKLEY INSURANCE COMPANY	103					103			103							YES
05-0316605 ..	FACTORY MUTUAL INSURANCE COMPANY	74					74			74							YES
42-0245840 ..	FARMERS MUTUAL HAIL INSURANCE COMPANY	83					83			83							YES
13-2673100 ..	GENERAL REINSURANCE CORPORATION	10					10			10							YES
06-0384680 ..	HARTFORD STEAM BOILER INSPECTION & INS																YES
47-0698507 ..	ODYSSEY REINSURANCE COMPANY																YES
52-1952955 ..	RENAISSANCE REINSURANCE US INC	62					62			62							YES
13-1675535 ..	SWISS REINSURANCE AMERICA CORPORATION	41					41			41							YES
13-3031176 ..	PARTNER REINSURANCE COMPANY OF THE U.S.	31					31			31							YES
23-2423138 ..	TOKIO MARINE SPECIALTY INS CO																YES
43-0613000 ..	SHELTER MUTUAL INSURANCE COMPANY																YES
0999999.	Total authorized - other U.S. unaffiliated insurers	457					457			457							XXX
AA-9991503 ..	OHIO MINE SUBSIDENCE FUND																YES
AA-9991501 ..	INDIANA MINE SUBSIDENCE FUND																YES
1099999.	Total authorized - pools - mandatory pools																XXX
AA-9995035 ..	MUTUAL REINSURANCE BUREAU																YES
1199999.	Total authorized - pools - voluntary pools																XXX
AA-1128121 ..	LLOYD'S SYNDICATE NO. 2121																YES
AA-1120171 ..	LLOYD'S SYNDICATE NO. 1856																YES
AA-1126004 ..	LLOYD'S SYNDICATE NO. 4444																YES
AA-1120227 ..	LLOYD'S SYNDICATE NO. 3123																YES
1299999.	Total authorized - other non-U.S. insurers																XXX
1499999.	Total authorized excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)	457					457			457							XXX
1899999.	Total unauthorized - affiliates - U.S. non-pool																XXX
2199999.	Total unauthorized - affiliates - other (non-U.S.)																XXX
2299999.	Total unauthorized - affiliates																XXX
AA-1340004 ..	R&V VERSICHERUNG AG																YES
2699999.	Total unauthorized - other non-U.S. insurers																XXX

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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	Overdue				43 Total Due Cols. 37+42 (In total should equal Cols. 7+8)											
		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										
2899999	Total unauthorized excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)																	XXX
3299999	Total certified - affiliates - U.S. non-pool																	XXX
3599999	Total certified - affiliates - other (non-U.S.)																	XXX
3699999	Total certified - affiliates																	XXX
4299999	Total certified excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)																	XXX
4699999	Total reciprocal jurisdiction - affiliates - U.S. non-pool																	XXX
4999999	Total reciprocal jurisdiction - affiliates - other (non-U.S.)																	XXX
5099999	Total reciprocal jurisdiction - affiliates																	XXX
RJ-3191435	CONDUIT REINS LTD																	YES
RJ-1120191	CONVEX INS UK LTD	1						1			1							YES
RJ-3191400	CONVEX RE LTD																	YES
RJ-3194122	DAVINCI REINSURANCE LTD																	YES
RJ-3191289	FIDELIS INSURANCE BERMUDA LTD																	YES
RJ-1340125	HANNOVER RUCKVERSICHERUNGS AG	41						41			41							YES
RJ-3190060	HANNOVER RE (BERMUDA) LTD																	YES
RJ-3190339	RENAISSANCE REINSURANCE LTD																	YES
RJ-3191388	VERMEER REINSURANCE LTD																	YES
5499999	Total reciprocal jurisdiction - other non-U.S. insurers	42						42			42							XXX
5699999	Total reciprocal jurisdiction excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)	42						42			42							XXX
5799999	Total authorized, unauthorized, reciprocal jurisdiction and certified excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)	499						499			499							XXX
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)																	XXX
9999999	Totals	499						499			499							XXX

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Over 90 Days Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67		
34-1008736	UNITED OHIO INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
01-0407315	CASCO INDEMNITY COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
39-0274490	UNITED 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	
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	
47-0574325	BERKLEY INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
05-0316605	FACTORY MUTUAL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
42-0245840	FARMERS MUTUAL HAIL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-2673100	GENERAL REINSURANCE CORPORATION	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
06-0384680	HARTFORD STEAM BOILER INSPECTION & INS	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
47-0698507	ODYSSEY REINSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
52-1952955	RENAISSANCE REINSURANCE US INC	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-1675535	SWISS REINSURANCE AMERICA CORPORATION	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
13-3031176	PARTNER REINSURANCE COMPANY OF THE U.S.	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23-2423138	TOKIO MARINE SPECIALTY INS CO	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
43-0613000	SHELTER MUTUAL INSURANCE COMPANY	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0999999	Total authorized - other U.S. unaffiliated insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991503	OHIO MINE SUBSIDENCE FUND	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-9991501	INDIANA 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-1128121	LLOYD'S SYNDICATE NO. 2121	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120171	LLOYD'S SYNDICATE NO. 1856	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1126004	LLOYD'S SYNDICATE NO. 4444	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1120227	LLOYD'S SYNDICATE NO. 3123	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1299999	Total authorized - other non-U.S. insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1499999	Total authorized excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1899999	Total unauthorized - affiliates - U.S. non-pool			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2199999	Total unauthorized - affiliates - other (non-U.S.)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2299999	Total unauthorized - affiliates			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
AA-1340004	R&V VERSICHERUNG AG	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2699999	Total unauthorized - other non-U.S. insurers			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
2899999	Total unauthorized excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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	61	62	63	64	65	66	67	68		
		Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% through 100%)	Catastrophe Recoverables Qualifying for Collateral Deferral	Net Recoverables Subject to Collateral Requirements for Full Credit (Col. 19 - Col. 57)	Dollar Amount of Collateral Required (Col. 56 * Col. 58)	Percent of Collateral Provided for Net Recoverables Subject to Collateral Requirements ([Col. 20 + Col. 21 + Col. 22 + Col. 24] / Col. 58)	Percent Credit Allowed on Net Recoverables Subject to Collateral Requirements (Col. 60 / Col. 56, not to exceed 100%)	20% of Recoverable on Paid Losses & LAE Past Due Amounts in Dispute (Col. 45 * 20%)	Amount of Credit Allowed for Net Recoverables (Col. 57 + [Col. 58 * Col. 61])	Provision for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 19 - Col. 63)	20% of Recoverable on Paid Losses & LAE Past Due Amounts Not in Dispute (Col. 47 * 20%)	Total Collateral Provided (Col. 20 + Col. 21 + Col. 24, not to Exceed Col. 63)	Net Unsecured Recoverable for Which Credit is Allowed (Col. 63 - Col. 66)	20% of Amount in Col. 67		
3299999. Total certified - affiliates - U.S. non-pool				XXX				XXX	XXX									
3599999. Total certified - affiliates - other (non-U.S.)				XXX				XXX	XXX									
3699999. Total certified - affiliates				XXX				XXX	XXX									
4299999. Total certified excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)				XXX				XXX	XXX									
4699999. Total reciprocal jurisdiction - affiliates - U.S. non-pool				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4999999. Total reciprocal jurisdiction - affiliates - other (non-U.S.)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5099999. Total reciprocal jurisdiction - affiliates				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3191435 ... CONDUIT REINS LTD		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1120191 ... CONVEX INS UK LTD		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3191400 ... CONVEX RE LTD		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3194122 ... DAVINCI REINSURANCE LTD		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3191289 ... FIDELIS INSURANCE BERMUDA LTD		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-1340125 ... HANNOVER RUCKVERSICHERUNGS AG		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3190060 ... HANNOVER RE (BERMUDA) LTD		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3190339 ... RENAISSANCE REINSURANCE LTD		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
RJ-3191388 ... VERMEER REINSURANCE LTD		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5499999. Total reciprocal jurisdiction - other non-U.S. insurers				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5699999. Total reciprocal jurisdiction excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)				XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5799999. Total authorized, unauthorized, reciprocal jurisdiction and certified excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)				XXX				XXX	XXX									
5899999. Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)				XXX				XXX	XXX									
9999999 Totals				XXX				XXX	XXX									

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71		72		73		74		75			
			Provision for Unauthorized Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		Total Provision for 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	Complete if Col. 52 = "No"; 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%])	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 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)		
34-1008736 ..	UNITED OHIO INSURANCE COMPANY		XXX	XXX						XXX	XXX			
01-0407315 ..	CASCO INDEMNITY COMPANY		XXX	XXX						XXX	XXX			
39-0274490 ..	UNITED MUTUAL INSURANCE COMPANY		XXX	XXX						XXX	XXX			
0199999.	Total authorized - affiliates - U.S. intercompany pooling		XXX	XXX						XXX	XXX			
0499999.	Total authorized - affiliates - U.S. non-pool		XXX	XXX						XXX	XXX			
0799999.	Total authorized - affiliates - other (non-U.S.)		XXX	XXX						XXX	XXX			
0899999.	Total authorized - affiliates		XXX	XXX						XXX	XXX			
06-1182357 ..	ALLIED WORLD INSURANCE COMPANY		XXX	XXX						XXX	XXX			
36-2661954 ..	AMERICAN AGRICULTURAL INSURANCE COMPANY		XXX	XXX						XXX	XXX			
06-1430254 ..	ARCH REINSURANCE COMPANY		XXX	XXX						XXX	XXX			
47-0574325 ..	BERKLEY INSURANCE COMPANY		XXX	XXX						XXX	XXX			
05-0316605 ..	FACTORY MUTUAL INSURANCE COMPANY		XXX	XXX						XXX	XXX			
42-0245840 ..	FARMERS MUTUAL HAIL INSURANCE COMPANY		XXX	XXX						XXX	XXX			
13-2673100 ..	GENERAL REINSURANCE CORPORATION		XXX	XXX						XXX	XXX			
06-0384680 ..	HARTFORD STEAM BOILER INSPECTION & INS		XXX	XXX						XXX	XXX			
47-0698507 ..	ODYSSEY REINSURANCE COMPANY		XXX	XXX						XXX	XXX			
52-1952955 ..	RENAISSANCE REINSURANCE US INC		XXX	XXX						XXX	XXX			
13-1675535 ..	SWISS REINSURANCE AMERICA CORPORATION		XXX	XXX						XXX	XXX			
13-3031176 ..	PARTNER REINSURANCE COMPANY OF THE U.S.		XXX	XXX						XXX	XXX			
23-2423138 ..	TOKIO MARINE SPECIALTY INS CO		XXX	XXX						XXX	XXX			
43-0613000 ..	SHELTER MUTUAL INSURANCE COMPANY		XXX	XXX						XXX	XXX			
0999999.	Total authorized - other U.S. unaffiliated insurers		XXX	XXX						XXX	XXX			
AA-9991503 ..	OHIO MINE SUBSIDENCE FUND		XXX	XXX						XXX	XXX			
AA-9991501 ..	INDIANA MINE SUBSIDENCE FUND		XXX	XXX						XXX	XXX			
1099999.	Total authorized - pools - mandatory pools		XXX	XXX						XXX	XXX			
AA-9995035 ..	MUTUAL REINSURANCE BUREAU		XXX	XXX						XXX	XXX			
1199999.	Total authorized - pools - voluntary pools		XXX	XXX						XXX	XXX			
AA-1128121 ..	LLOYD'S SYNDICATE NO. 2121		XXX	XXX						XXX	XXX			
AA-1120171 ..	LLOYD'S SYNDICATE NO. 1856		XXX	XXX						XXX	XXX			
AA-1126004 ..	LLOYD'S SYNDICATE NO. 4444		XXX	XXX						XXX	XXX			
AA-1120227 ..	LLYOD'S SYNDICATE NO. 3123		XXX	XXX						XXX	XXX			
1299999.	Total authorized - other non-U.S. insurers		XXX	XXX						XXX	XXX			
1499999.	Total authorized excluding Protected Cells (Sum of 0899999, 0999999, 1099999, 1199999 and 1299999)		XXX	XXX						XXX	XXX			
1899999.	Total unauthorized - affiliates - U.S. non-pool				XXX	XXX	XXX	XXX	XXX					
2199999.	Total unauthorized - affiliates - other (non-U.S.)				XXX	XXX	XXX	XXX	XXX					
2299999.	Total unauthorized - affiliates				XXX	XXX	XXX	XXX	XXX					
AA-1340004 ..	R&V VERSICHERUNG AG				XXX	XXX	XXX	XXX	XXX					
2699999.	Total unauthorized - other non-U.S. insurers				XXX	XXX	XXX	XXX	XXX					

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

SCHEDULE F - PART 3 (Continued)

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

ID Number From Col. 1	Name of Reinsurer From Col. 3	70 20% of Recoverable on Paid Losses & LAE Over 90 Days past Due Amounts Not in Dispute (Col. 47 * 20%)	71 Provision for Unauthorized Reinsurance		73 Provision for Overdue Authorized and Reciprocal Jurisdiction Reinsurance		75 Total Provision for Reinsurance			
			71 Provision for Reinsurance with Unauthorized Reinsurers Due to Collateral Deficiency (Col. 26)	72 Provision for Overdue Reinsurance from Unauthorized Reinsurers and Amounts in Dispute (Col. 70 + 20% of the Amount in Col. 16)	73 Complete if Col. 52 = "Yes"; Otherwise Enter 0 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 Provision for Amounts Ceded to Authorized and Reciprocal Reinsurers (Cols. 73 + 74)	76 Provision for Amounts Ceded to Unauthorized Reinsurers (Cols. 71 + 72 Not in Excess of Col. 15)	77 Provision for Amounts Ceded to Certified Reinsurers (Cols. 64 + 69)	78 Total Provision for Reinsurance (Cols. 75 + 76 + 77)
2899999	Total unauthorized excluding Protected Cells (Sum of 2299999, 2399999, 2499999, 2599999 and 2699999)				XXX	XXX	XXX		XXX	
3299999	Total certified - affiliates - U.S. non-pool	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3599999	Total certified - affiliates - other (non-U.S.)	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
3699999	Total certified - affiliates	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
4299999	Total certified excluding Protected Cells (Sum of 3699999, 3799999, 3899999, 3999999 and 4099999)	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
4699999	Total reciprocal jurisdiction - affiliates - U.S. non-pool		XXX	XXX				XXX		XXX
4999999	Total reciprocal jurisdiction - affiliates - other (non-U.S.)		XXX	XXX				XXX		XXX
5099999	Total reciprocal jurisdiction - affiliates		XXX	XXX				XXX		XXX
RJ-3191435	CONDUIT REINS LTD		XXX	XXX				XXX		XXX
RJ-1120191	CONVEX INS UK LTD		XXX	XXX				XXX		XXX
RJ-3191400	CONVEX RE LTD		XXX	XXX				XXX		XXX
RJ-3194122	DAVINCI REINSURANCE LTD		XXX	XXX				XXX		XXX
RJ-3191289	FIDELIS INSURANCE BERMUDA LTD		XXX	XXX				XXX		XXX
RJ-1340125	HANNOVER RUCKVERSICHERUNGS AG		XXX	XXX				XXX		XXX
RJ-3190060	HANNOVER RE (BERMUDA) LTD		XXX	XXX				XXX		XXX
RJ-3190339	RENAISSANCE REINSURANCE LTD		XXX	XXX				XXX		XXX
RJ-3191388	VERMEER REINSURANCE LTD		XXX	XXX				XXX		XXX
5499999	Total reciprocal jurisdiction - other non-U.S. insurers		XXX	XXX				XXX		XXX
5699999	Total reciprocal jurisdiction excluding Protected Cells (Sum of 5099999, 5199999, 5299999, 5399999 and 5499999)		XXX	XXX				XXX		XXX
5799999	Total authorized, unauthorized, reciprocal jurisdiction and certified excluding Protected Cells (Sum of 1499999, 2899999, 4299999 and 5699999)									
5899999	Total Protected Cells (Sum of 1399999, 2799999, 4199999 and 5599999)									
9999999	Totals									

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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 <u>Name of Reinsurer</u>	2 <u>Commission Rate</u>	3 <u>Ceded Premium</u>
1.	FACTORY MUTUAL INSURANCE COMPANY	35.000	1,620
2.	TOKIO MARINE SPECIALTY INS CO	30.000	606
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 <u>Name of Reinsurer</u>	2 <u>Total Recoverables</u>	3 <u>Ceded Premiums</u>	4 <u>Affiliated</u>
6.	UNITED OHIO INSURANCE COMPANY	238,768	290,901	Yes [X] No []
7.	CASCO INDEMNITY COMPANY	33,060	40,279	Yes [X] No []
8.	UNITED MUTUAL INSURANCE COMPANY	11,020	13,426	Yes [X] No []
9.	GENERAL REINSURANCE CORPORATION	1,559	943	Yes [] No [X]
10.	FACTORY MUTUAL INSURANCE COMPANY	952	1,620	Yes [] No [X]

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

SCHEDULE F - PART 6

Restatement of Balance Sheet to Identify Net Credit for Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	470,670,650		470,670,650
2. Premiums and considerations (Line 15)	26,079,480		26,079,480
3. Reinsurance recoverable on loss and loss adjustment expense payments (Line 16.1)	498,645	(498,645)	
4. Funds held by or deposited with reinsured companies (Line 16.2)			
5. Other assets	4,507,821		4,507,821
6. Net amount recoverable from reinsurers		286,018,133	286,018,133
7. Protected cell assets (Line 27)			
8. Totals (Line 28)	501,756,596	285,519,488	787,276,084
LIABILITIES (Page 3)			
9. Losses and loss adjustment expenses (Lines 1 through 3)	40,918,137	111,861,898	152,780,035
10. Taxes, expenses, and other obligations (Lines 4 through 8)	9,212,470		9,212,470
11. Unearned premiums (Line 9)	51,482,954	174,319,639	225,802,593
12. Advance premiums (Line 10)	768,799		768,799
13. Dividends declared and unpaid (Line 11.1 and 11.2)			
14. Ceded reinsurance premiums payable (net of ceding commissions (Line 12)	165,118	(162,347)	2,771
15. Funds held by company under reinsurance treaties (Line 13)	499,702	(499,702)	
16. Amounts withheld or retained by company for account of others (Line 14)			
17. Provision for reinsurance (Line 16)			
18. Other liabilities			
19. Total liabilities excluding protected cell business (Line 26)	103,047,180	285,519,488	388,566,668
20. Protected cell liabilities (Line 27)			
21. Surplus as regards policyholders (Line 37)	398,709,416	XXX	398,709,416
22. Totals (Line 38)	501,756,596	285,519,488	787,276,084

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

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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	48	XXX		XXX		XXX		XXX		XXX		XXX		XXX
2. Premiums earned	48	XXX		XXX		XXX		XXX		XXX		XXX		XXX
3. Incurred claims														
4. Cost containment expenses														
5. Incurred claims and cost containment expenses (Lines 3 and 4)														
6. Increase in contract reserves														
7. Commissions (a)	8	16.7												
8. Other general insurance expenses	6	12.5												
9. Taxes, licenses and fees														
10. Total other expenses incurred	14	29.2												
11. Aggregate write-ins for deductions														
12. Gain from underwriting before dividends or refunds	34	70.8												
13. Dividends or refunds														
14. Gain from underwriting after dividends or refunds	34	70.8												
DETAILS OF WRITE-INS														
1101.														
1102.														
1103.														
1198. Summary of remaining write-ins for Line 11 from overflow page														
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)														

	Medicare Title XVIII		Medicaid Title XIX		Credit A&H		Disability Income		Long-Term Care		Other Health	
	15 Amount	16 %	17 Amount	18 %	19 Amount	20 %	21 Amount	22 %	23 Amount	24 %	25 Amount	26 %
1. Premiums written		XXX		XXX		XXX		XXX		XXX	48	XXX
2. Premiums earned		XXX		XXX		XXX		XXX		XXX	48	XXX
3. Incurred claims												
4. Cost containment expenses												
5. Incurred claims and cost containment expenses (Lines 3 and 4)												
6. Increase in contract reserves												
7. Commissions (a)											8	16.7
8. Other general insurance expenses											6	12.5
9. Taxes, licenses and fees												
10. Total other expenses incurred											14	29.2
11. Aggregate write-ins for deductions												
12. Gain from underwriting before dividends or refunds											34	70.8
13. Dividends or refunds												
14. Gain from underwriting after dividends or refunds											34	70.8
DETAILS OF WRITE-INS												
1101.												
1102.												
1103.												
1198. Summary of remaining write-ins for Line 11 from overflow page												
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)												

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

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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	18												18
2. Advance premiums													
3. Reserve for rate credits													
4. Total premium reserves, current year	18												18
5. Total premium reserves, prior year	18												18
6. Increase in total premium reserves													
B. Contract Reserves:													
1. Additional reserves (a)													
2. Reserve for future contingent benefits													
3. Total contract reserves, current year													
4. Total contract reserves, prior year													
5. Increase in contract reserves													
C. Claim Reserves and Liabilities:													
1. Total current year													
2. Total prior year													
3. Increase													

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

	1	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													
1.2 On claims incurred during current year													
2. Claim reserves and liabilities, December 31, current year:													
2.1 On claims incurred prior to current year													
2.2 On claims incurred during current year													
3. Test:													
3.1 Lines 1.1 and 2.1													
3.2 Claim reserves and liabilities, December 31, prior year													
3.3 Line 3.1 minus Line 3.2													

NONE

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	210												210
2. Premiums earned													
3. Incurred claims													
4. Commissions													
B. Reinsurance Ceded:													
1. Premiums written	162												162
2. Premiums earned													
3. Incurred claims													
4. Commissions													

(a) Includes \$ premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

SCHEDULE H - PART 5 - HEALTH CLAIMS

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company
SCHEDULE P - PART 1A - HOMEOWNERS/FAROWNERS

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2016.....	14,561	1,518	13,043	5,096	285	142	1	639	2	110	5,589	626
3. 2017.....	14,918	1,510	13,408	8,694	1,430	270	13	789	50	149	8,260	873
4. 2018.....	15,878	1,528	14,350	6,558	459	195		615	7	106	6,902	714
5. 2019.....	17,215	1,372	15,843	9,441	783	259	2	744	53	228	9,606	980
6. 2020.....	18,037	1,443	16,594	9,057	218	184	1	772	7	80	9,787	942
7. 2021.....	19,081	1,627	17,454	10,333	626	265	1	791	23	133	10,739	697
8. 2022.....	21,203	2,360	18,843	17,633	2,771	355	85	1,106	28	120	16,210	252
9. 2023.....	24,417	2,508	21,909	19,367	333	514	2	1,217	2	193	20,761	1,291
10. 2024.....	29,124	2,993	26,131	22,197	3,021	558	59	1,560		127	21,235	1,171
11. 2025.....	34,400	2,978	31,422	14,523	342	290	2	1,269		56	15,738	840
12. Totals	XXX	XXX	XXX	122,899	10,268	3,032	166	9,502	172	1,302	124,827	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....	1											1	
2. 2016.....													
3. 2017.....													
4. 2018.....	1											1	
5. 2019.....	3		2			2						7	
6. 2020.....	6		3			2						11	
7. 2021.....	29		12			11						52	1
8. 2022.....	76		35			26		1				138	1
9. 2023.....	70		84	2		79		4				235	2
10. 2024.....	497		624	71		115		33				1,198	10
11. 2025.....	1,923	25	2,061	138		263		269				4,353	49
12. Totals	2,606	25	2,821	211		498		307				5,996	63

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX	1	
2. 2016.....	5,877	288	5,589	40.4	19.0	42.9			23.0		
3. 2017.....	9,753	1,493	8,260	65.4	98.9	61.6			23.0		
4. 2018.....	7,369	466	6,903	46.4	30.5	48.1			23.0	1	
5. 2019.....	10,451	838	9,613	60.7	61.1	60.7			23.0	5	2
6. 2020.....	10,024	226	9,798	55.6	15.7	59.0			23.0	9	2
7. 2021.....	11,441	650	10,791	60.0	40.0	61.8			23.0	41	11
8. 2022.....	19,232	2,884	16,348	90.7	122.2	86.8			23.0	111	27
9. 2023.....	21,335	339	20,996	87.4	13.5	95.8			23.0	152	83
10. 2024.....	25,584	3,151	22,433	87.8	105.3	85.8			23.0	1,050	148
11. 2025.....	20,598	507	20,091	59.9	17.0	63.9			23.0	3,821	532
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	5,191	805

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
	1. Prior.....	XXX.....	XXX.....	XXX.....	(3).....							
2. 2016.....	10,518.....	55.....	10,463.....	6,939.....	5.....	234.....			756.....	221.....	7,924.....	830.....
3. 2017.....	11,645.....	73.....	11,572.....	7,286.....	13.....	271.....			758.....	282.....	8,302.....	868.....
4. 2018.....	13,337.....	63.....	13,274.....	8,572.....		548.....			793.....	290.....	9,913.....	1,044.....
5. 2019.....	14,785.....	59.....	14,726.....	9,916.....		680.....			781.....	257.....	11,377.....	1,090.....
6. 2020.....	13,880.....	27.....	13,853.....	7,463.....	72.....	396.....	1.....		625.....	172.....	8,411.....	759.....
7. 2021.....	13,972.....	84.....	13,888.....	8,361.....	14.....	333.....			633.....	194.....	9,313.....	606.....
8. 2022.....	13,987.....	91.....	13,896.....	9,702.....		450.....			659.....	186.....	10,811.....	432.....
9. 2023.....	14,608.....	100.....	14,508.....	9,162.....		231.....			695.....	222.....	10,088.....	987.....
10. 2024.....	15,739.....	107.....	15,632.....	6,924.....		101.....			713.....	150.....	7,738.....	847.....
11. 2025.....	16,062.....	78.....	15,984.....	4,279.....		43.....			565.....	103.....	4,887.....	789.....
12. Totals.....	XXX.....	XXX.....	XXX.....	78,601.....	104.....	3,287.....	1.....		6,978.....	2,084.....	88,761.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13	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.....	12.....											12.....	1.....
2. 2016.....	26.....		10.....				2.....					38.....	
3. 2017.....	46.....		18.....				4.....		1.....			69.....	
4. 2018.....	1.....		1.....									2.....	
5. 2019.....	45.....		18.....				11.....		6.....			80.....	1.....
6. 2020.....	58.....		38.....	1.....			22.....		10.....			127.....	2.....
7. 2021.....	76.....		203.....				45.....		11.....			335.....	3.....
8. 2022.....	420.....		208.....	2.....			153.....		39.....			818.....	13.....
9. 2023.....	1,150.....		935.....	4.....			386.....		61.....			2,528.....	32.....
10. 2024.....	1,695.....		1,406.....	14.....			623.....		139.....			3,849.....	61.....
11. 2025.....	3,473.....	8.....	3,794.....	95.....			889.....		523.....			8,576.....	246.....
12. Totals.....	7,002.....	8.....	6,631.....	116.....			2,135.....		790.....			16,434.....	359.....

	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. 2016.....	7,967.....	5.....	7,962.....	75.7.....	9.1.....	76.1.....			23.0.....	36.....	2.....
3. 2017.....	8,384.....	13.....	8,371.....	72.0.....	17.8.....	72.3.....			23.0.....	64.....	5.....
4. 2018.....	9,915.....		9,915.....	74.3.....		74.7.....			23.0.....	2.....	
5. 2019.....	11,457.....		11,457.....	77.5.....		77.8.....			23.0.....	63.....	17.....
6. 2020.....	8,612.....	74.....	8,538.....	62.0.....	274.1.....	61.6.....			23.0.....	95.....	32.....
7. 2021.....	9,662.....	14.....	9,648.....	69.2.....	16.7.....	69.5.....			23.0.....	279.....	56.....
8. 2022.....	11,631.....	2.....	11,629.....	83.2.....	2.2.....	83.7.....			23.0.....	626.....	192.....
9. 2023.....	12,620.....	4.....	12,616.....	86.4.....	4.0.....	87.0.....			23.0.....	2,081.....	447.....
10. 2024.....	11,601.....	14.....	11,587.....	73.7.....	13.1.....	74.1.....			23.0.....	3,087.....	762.....
11. 2025.....	13,566.....	103.....	13,463.....	84.5.....	132.1.....	84.2.....			23.0.....	7,164.....	1,412.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	13,509.....	2,925.....

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company
SCHEDULE P - PART 1C - COMMERCIAL AUTO/TRUCK LIABILITY/MEDICAL
(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....									XXX.....
2. 2016.....	3,907.....	250.....	3,657.....	2,423.....	262.....	207.....	16.....	223.....		10.....	2,575.....	198.....
3. 2017.....	4,071.....	299.....	3,772.....	1,943.....	3.....	199.....		237.....		46.....	2,376.....	208.....
4. 2018.....	4,247.....	169.....	4,078.....	1,877.....	58.....	122.....	1.....	230.....		28.....	2,170.....	204.....
5. 2019.....	4,410.....	95.....	4,315.....	2,913.....	83.....	176.....	1.....	214.....		34.....	3,219.....	205.....
6. 2020.....	4,661.....	58.....	4,603.....	2,058.....	123.....	141.....	11.....	180.....		48.....	2,245.....	168.....
7. 2021.....	5,008.....	30.....	4,978.....	2,511.....	49.....	140.....	2.....	177.....		24.....	2,777.....	128.....
8. 2022.....	5,403.....	35.....	5,368.....	2,770.....	47.....	120.....	2.....	159.....		24.....	3,000.....	57.....
9. 2023.....	6,023.....	41.....	5,982.....	2,217.....		114.....		145.....		121.....	2,476.....	121.....
10. 2024.....	6,827.....	46.....	6,781.....	1,553.....	17.....	27.....		78.....		20.....	1,641.....	55.....
11. 2025.....	7,379.....	36.....	7,343.....	865.....		12.....		143.....		12.....	1,020.....	147.....
12. Totals.....	XXX.....	XXX.....	XXX.....	21,130.....	642.....	1,258.....	33.....	1,786.....		367.....	23,499.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....													
2. 2016.....													
3. 2017.....	20.....		8.....				4.....					32.....	
4. 2018.....													
5. 2019.....			34.....	1.....			6.....		1.....			40.....	
6. 2020.....	33.....		6.....				8.....		4.....			51.....	1.....
7. 2021.....	20.....		66.....				17.....		11.....			114.....	1.....
8. 2022.....	70.....		163.....	1.....			37.....		30.....			299.....	2.....
9. 2023.....	520.....		422.....	3.....			126.....		31.....			1,096.....	7.....
10. 2024.....	743.....	8.....	933.....	7.....			127.....		61.....			1,849.....	14.....
11. 2025.....	866.....		1,643.....	12.....			211.....		208.....			2,916.....	38.....
12. Totals.....	2,272.....	8.....	3,275.....	24.....			536.....		346.....			6,397.....	63.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....		
2. 2016.....	2,853.....	278.....	2,575.....	73.0.....	111.2.....	70.4.....			23.0.....		
3. 2017.....	2,411.....	3.....	2,408.....	59.2.....	1.0.....	63.8.....			23.0.....	28.....	4.....
4. 2018.....	2,229.....	59.....	2,170.....	52.5.....	34.9.....	53.2.....			23.0.....		
5. 2019.....	3,344.....	85.....	3,259.....	75.8.....	89.5.....	75.5.....			23.0.....	33.....	7.....
6. 2020.....	2,430.....	134.....	2,296.....	52.1.....	231.0.....	49.9.....			23.0.....	39.....	12.....
7. 2021.....	2,942.....	51.....	2,891.....	58.7.....	170.0.....	58.1.....			23.0.....	86.....	28.....
8. 2022.....	3,349.....	50.....	3,299.....	62.0.....	142.9.....	61.5.....			23.0.....	232.....	67.....
9. 2023.....	3,575.....	3.....	3,572.....	59.4.....	7.3.....	59.7.....			23.0.....	939.....	157.....
10. 2024.....	3,522.....	32.....	3,490.....	51.6.....	69.6.....	51.5.....			23.0.....	1,661.....	188.....
11. 2025.....	3,948.....	12.....	3,936.....	53.5.....	33.3.....	53.6.....			23.0.....	2,497.....	419.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	5,515.....	882.....

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2016.....												
3. 2017.....												
4. 2018.....												
5. 2019.....												
6. 2020.....												
7. 2021.....												
8. 2022.....												
9. 2023.....												
10. 2024.....												
11. 2025.....												
12. Totals	XXX	XXX	XXX									XXX

NONE

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....													
2. 2016.....													
3. 2017.....													
4. 2018.....													
5. 2019.....													
6. 2020.....													
7. 2021.....													
8. 2022.....													
9. 2023.....													
10. 2024.....													
11. 2025.....													
12. Totals													

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 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2016.....											
3. 2017.....											
4. 2018.....											
5. 2019.....											
6. 2020.....											
7. 2021.....											
8. 2022.....											
9. 2023.....											
10. 2024.....											
11. 2025.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company
SCHEDULE P - PART 1E - COMMERCIAL MULTIPLE PERIL

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments						12 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	26.....		24.....		1.....			51.....	XXX.....
2. 2016.....	6,285.....	784.....	5,501.....	2,494.....	123.....	599.....		286.....		55.....	3,256.....	239.....
3. 2017.....	6,493.....	796.....	5,697.....	2,571.....	158.....	451.....	1.....	261.....		58.....	3,124.....	230.....
4. 2018.....	6,633.....	653.....	5,980.....	2,572.....	135.....	601.....	17.....	261.....		21.....	3,282.....	212.....
5. 2019.....	7,027.....	616.....	6,411.....	3,475.....	118.....	672.....	3.....	261.....		108.....	4,287.....	224.....
6. 2020.....	7,556.....	705.....	6,851.....	2,583.....	181.....	298.....	12.....	244.....		38.....	2,932.....	213.....
7. 2021.....	8,227.....	693.....	7,534.....	2,502.....	74.....	316.....	3.....	211.....	1.....	52.....	2,951.....	155.....
8. 2022.....	9,094.....	852.....	8,242.....	3,480.....	426.....	311.....	14.....	229.....		49.....	3,580.....	90.....
9. 2023.....	10,166.....	869.....	9,297.....	4,298.....	311.....	247.....	2.....	298.....		88.....	4,530.....	226.....
10. 2024.....	11,368.....	1,009.....	10,359.....	3,434.....	316.....	161.....	9.....	275.....		88.....	3,545.....	183.....
11. 2025.....	12,388.....	1,105.....	11,283.....	2,256.....	32.....	55.....		240.....		16.....	2,519.....	154.....
12. Totals	XXX	XXX	XXX	29,691	1,874	3,735	61	2,567	1	573	34,057	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		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.....	48.....											48.....	2.....
2. 2016.....													
3. 2017.....	18.....		7.....			12.....		3.....				40.....	1.....
4. 2018.....	20.....		8.....			16.....		16.....				60.....	1.....
5. 2019.....	48.....		10.....			37.....		28.....				123.....	2.....
6. 2020.....	59.....		18.....			29.....		2.....				108.....	2.....
7. 2021.....	94.....		28.....	1.....		69.....		8.....				198.....	4.....
8. 2022.....	271.....		155.....	2.....		218.....		5.....				647.....	5.....
9. 2023.....	188.....		202.....	2.....		361.....		7.....				756.....	8.....
10. 2024.....	342.....	2.....	386.....	15.....		570.....		25.....				1,306.....	10.....
11. 2025.....	918.....	39.....	1,294.....	9.....		901.....		148.....				3,213.....	30.....
12. Totals	2,006	41	2,108	29		2,213		242				6,499	65

	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.....	48.....	
2. 2016.....	3,379.....	123.....	3,256.....	53.8.....	15.7.....	59.2.....			23.0.....		
3. 2017.....	3,323.....	159.....	3,164.....	51.2.....	20.0.....	55.5.....			23.0.....	25.....	15.....
4. 2018.....	3,494.....	152.....	3,342.....	52.7.....	23.3.....	55.9.....			23.0.....	28.....	32.....
5. 2019.....	4,531.....	121.....	4,410.....	64.5.....	19.6.....	68.8.....			23.0.....	58.....	65.....
6. 2020.....	3,233.....	193.....	3,040.....	42.8.....	27.4.....	44.4.....			23.0.....	77.....	31.....
7. 2021.....	3,228.....	79.....	3,149.....	39.2.....	11.4.....	41.8.....			23.0.....	121.....	77.....
8. 2022.....	4,669.....	442.....	4,227.....	51.3.....	51.9.....	51.3.....			23.0.....	424.....	223.....
9. 2023.....	5,601.....	315.....	5,286.....	55.1.....	36.2.....	56.9.....			23.0.....	388.....	368.....
10. 2024.....	5,193.....	342.....	4,851.....	45.7.....	33.9.....	46.8.....			23.0.....	711.....	595.....
11. 2025.....	5,812.....	80.....	5,732.....	46.9.....	7.2.....	50.8.....			23.0.....	2,164.....	1,049.....
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	4,044	2,455

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments					
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX	XXX	XXX									XXX	
2. 2016.....	1,575	768	807	455	207	35		34				317	28
3. 2017.....	1,439	796	643	379	176	31		53				287	16
4. 2018.....	1,493	854	639	574	436	67	3	44		1		246	14
5. 2019.....	1,583	947	636	679	591	4	2	37				127	11
6. 2020.....	1,692	613	1,079	1,872	1,155	19		58				794	12
7. 2021.....	1,816	560	1,256	444	54	20		41				451	6
8. 2022.....	1,990	708	1,282	427	117	19		81				410	4
9. 2023.....	2,258	885	1,373	105		21		39				165	8
10. 2024.....	2,585	1,058	1,527	261		10		19		1		290	9
11. 2025.....	2,891	1,006	1,885	21		3		25				49	7
12. Totals	XXX	XXX	XXX	5,217	2,736	229	5	431		2		3,136	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....													
2. 2016.....													
3. 2017.....									9			9	
4. 2018.....									1			1	
5. 2019.....													
6. 2020.....	3		1									4	
7. 2021.....								1	6			7	
8. 2022.....	2		2					4	11			19	
9. 2023.....	23		74	3				14	6			114	1
10. 2024.....	96		539	114				62	28			611	3
11. 2025.....	537	13	652	12				361	55			1,580	3
12. Totals	661	13	1,268	129				442	116			2,345	7

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount		
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid	
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX			
2. 2016.....	524	207	317	33.3	27.0	39.3			23.0			
3. 2017.....	472	176	296	32.8	22.1	46.0			23.0		9	
4. 2018.....	686	439	247	45.9	51.4	38.7			23.0		1	
5. 2019.....	720	593	127	45.5	62.6	20.0			23.0			
6. 2020.....	1,953	1,155	798	115.4	188.4	74.0			23.0		4	
7. 2021.....	512	54	458	28.2	9.6	36.5			23.0		7	
8. 2022.....	546	117	429	27.4	16.5	33.5			23.0		4	15
9. 2023.....	282	3	279	12.5	0.3	20.3			23.0		94	20
10. 2024.....	1,015	114	901	39.3	10.8	59.0			23.0		521	90
11. 2025.....	1,654	25	1,629	57.2	2.5	86.4			23.0		1,164	416
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		1,787	558

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2016.....												
3. 2017.....												
4. 2018.....												
5. 2019.....												
6. 2020.....												
7. 2021.....												
8. 2022.....												
9. 2023.....												
10. 2024.....												
11. 2025.....												
12. Totals	XXX	XXX	XXX									XXX

NONE

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....													
2. 2016.....													
3. 2017.....													
4. 2018.....													
5. 2019.....													
6. 2020.....													
7. 2021.....													
8. 2022.....													
9. 2023.....													
10. 2024.....													
11. 2025.....													
12. Totals													

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 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2016.....											
3. 2017.....											
4. 2018.....											
5. 2019.....											
6. 2020.....											
7. 2021.....											
8. 2022.....											
9. 2023.....											
10. 2024.....											
11. 2025.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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 Number of Claims Reported Direct and Assumed		
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments			10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2016.....	5,069	382	4,687	1,538	3	48		180		30	1,763	XXX
3. 2017.....	4,964	355	4,609	1,707	25	58		186	3	53	1,923	XXX
4. 2018.....	4,923	344	4,579	1,339	3	58		138	1	32	1,531	XXX
5. 2019.....	4,867	271	4,596	1,917	37	50		165	6	48	2,089	XXX
6. 2020.....	4,923	285	4,638	2,070	3	45		179	1	86	2,290	XXX
7. 2021.....	5,063	328	4,735	2,300	63	56		183	3	75	2,473	XXX
8. 2022.....	5,301	402	4,899	3,404	341	79	16	219		119	3,345	XXX
9. 2023.....	5,905	456	5,449	3,869	62	125		249	1	140	4,180	XXX
10. 2024.....	6,913	473	6,440	3,795	331	122	10	268		6	3,844	XXX
11. 2025.....	8,130	474	7,656	2,723		64		227		7	3,014	XXX
12. Totals	XXX	XXX	XXX	24,662	868	705	26	1,994	15	596	26,452	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....													
2. 2016.....													
3. 2017.....													
4. 2018.....													
5. 2019.....													
6. 2020.....													
7. 2021.....													
8. 2022.....													
9. 2023.....	1							2				3	
10. 2024.....	47	7	25	12				6	3			62	1
11. 2025.....	328		167					33	26			554	8
12. Totals	376	7	192	12				41	29			619	9

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2016.....	1,766	3	1,763	34.8	0.8	37.6			23.0		
3. 2017.....	1,951	28	1,923	39.3	7.9	41.7			23.0		
4. 2018.....	1,535	4	1,531	31.2	1.2	33.4			23.0		
5. 2019.....	2,132	43	2,089	43.8	15.9	45.5			23.0		
6. 2020.....	2,294	4	2,290	46.6	1.4	49.4			23.0		
7. 2021.....	2,539	66	2,473	50.1	20.1	52.2			23.0		
8. 2022.....	3,702	357	3,345	69.8	88.8	68.3			23.0		
9. 2023.....	4,246	63	4,183	71.9	13.8	76.8			23.0	1	2
10. 2024.....	4,266	360	3,906	61.7	76.1	60.7			23.0	53	9
11. 2025.....	3,568		3,568	43.9		46.6			23.0	495	59
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	549	70

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company
SCHEDULE P - PART 1J - AUTO PHYSICAL DAMAGE

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments							12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received		11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)
				4	5	6	7	8	9			
				Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....	XXX.....	XXX.....	XXX.....	(13).....		1.....		(1).....		12.....	(13).....	XXX.....
2. 2016.....	9,524.....	204.....	9,320.....	5,844.....	4.....	68.....		753.....		978.....	6,661.....	
3. 2017.....	10,511.....	204.....	10,307.....	6,366.....		71.....		763.....		1,031.....	7,200.....	
4. 2018.....	12,250.....	239.....	12,011.....	7,604.....		75.....		895.....		1,416.....	8,574.....	
5. 2019.....	13,871.....	206.....	13,665.....	8,722.....	3.....	98.....		872.....		1,633.....	9,689.....	
6. 2020.....	13,736.....	196.....	13,540.....	7,979.....	7.....	82.....		843.....		1,541.....	8,897.....	1.....
7. 2021.....	14,801.....	244.....	14,557.....	9,765.....	4.....	63.....		921.....		2,112.....	10,745.....	
8. 2022.....	16,129.....	345.....	15,784.....	12,682.....	187.....	76.....	6.....	963.....		2,457.....	13,528.....	1.....
9. 2023.....	18,887.....	472.....	18,415.....	13,038.....		92.....		963.....		2,421.....	14,093.....	2.....
10. 2024.....	22,251.....	605.....	21,646.....	12,882.....	175.....	88.....	2.....	1,093.....		2,362.....	13,886.....	2.....
11. 2025.....	23,736.....	619.....	23,117.....	11,901.....		47.....		1,153.....		1,519.....	13,101.....	148.....
12. Totals.....	XXX.....	XXX.....	XXX.....	96,770.....	380.....	761.....	8.....	9,218.....		17,482.....	106,361.....	XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13	14	15	16	17	18	19	20					
	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded	Direct and Assumed	Ceded			
1. Prior.....													
2. 2016.....													
3. 2017.....													
4. 2018.....													
5. 2019.....													
6. 2020.....	2.....		1.....									3.....	1.....
7. 2021.....													
8. 2022.....	3.....		2.....									5.....	1.....
9. 2023.....	2.....		3.....				3.....					8.....	2.....
10. 2024.....	11.....		56.....	7.....			10.....		13.....			83.....	2.....
11. 2025.....	1,048.....	1.....	1,289.....				59.....		135.....			2,530.....	148.....
12. Totals.....	1,066.....	1.....	1,351.....	7.....			72.....		148.....			2,629.....	154.....

	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. 2016.....	6,665.....	4.....	6,661.....	70.0.....	2.0.....	71.5.....			23.0.....		
3. 2017.....	7,200.....		7,200.....	68.5.....		69.9.....			23.0.....		
4. 2018.....	8,574.....		8,574.....	70.0.....		71.4.....			23.0.....		
5. 2019.....	9,692.....	3.....	9,689.....	69.9.....	1.5.....	70.9.....			23.0.....		
6. 2020.....	8,907.....	7.....	8,900.....	64.8.....	3.6.....	65.7.....			23.0.....	3.....	
7. 2021.....	10,749.....	4.....	10,745.....	72.6.....	1.6.....	73.8.....			23.0.....		
8. 2022.....	13,726.....	193.....	13,533.....	85.1.....	55.9.....	85.7.....			23.0.....	5.....	
9. 2023.....	14,101.....		14,101.....	74.7.....		76.6.....			23.0.....	5.....	3.....
10. 2024.....	14,153.....	184.....	13,969.....	63.6.....	30.4.....	64.5.....			23.0.....	60.....	23.....
11. 2025.....	15,632.....	1.....	15,631.....	65.9.....	0.2.....	67.6.....			23.0.....	2,336.....	194.....
12. Totals.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			XXX.....	2,409.....	220.....

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2016.....												XXX
3. 2017.....												XXX
4. 2018.....												XXX
5. 2019.....												XXX
6. 2020.....												XXX
7. 2021.....												XXX
8. 2022.....												XXX
9. 2023.....												XXX
10. 2024.....												XXX
11. 2025.....												XXX
12. Totals	XXX	XXX	XXX									XXX

NONE

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		Adjusting and Other Unpaid				
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded			
1. Prior.....													
2. 2016.....													
3. 2017.....													
4. 2018.....													
5. 2019.....													
6. 2020.....													
7. 2021.....													
8. 2022.....													
9. 2023.....													
10. 2024.....													
11. 2025.....													
12. Totals													

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 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX				XXX
2. 2016.....											
3. 2017.....											
4. 2018.....											
5. 2019.....											
6. 2020.....											
7. 2021.....											
8. 2022.....											
9. 2023.....											
10. 2024.....											
11. 2025.....											
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments				
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	XXX	XXX	XXX									XXX
2. 2016.....	1		1									XXX
3. 2017.....	1		1									XXX
4. 2018.....	1		1									XXX
5. 2019.....	1		1									XXX
6. 2020.....												XXX
7. 2021.....												XXX
8. 2022.....												XXX
9. 2023.....												XXX
10. 2024.....												XXX
11. 2025.....												XXX
12. Totals	XXX	XXX	XXX									XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....													
2. 2016.....													
3. 2017.....													
4. 2018.....													
5. 2019.....													
6. 2020.....													
7. 2021.....													
8. 2022.....													
9. 2023.....													
10. 2024.....													
11. 2025.....													
12. Totals													

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2016.....									23.0		
3. 2017.....									23.0		
4. 2018.....									23.0		
5. 2019.....									23.0		
6. 2020.....									23.0		
7. 2021.....									23.0		
8. 2022.....									23.0		
9. 2023.....									23.0		
10. 2024.....									23.0		
11. 2025.....									23.0		
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

Schedule P - Part 1M - International

N O N E

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

N O N E

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

N O N E

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

N O N E

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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						10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)	12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments					
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.....	XXX	XXX	XXX									XXX	
2. 2016.....	45		45	2								2	1
3. 2017.....	46		46	10		2						12	
4. 2018.....	46		46	6		2						8	2
5. 2019.....	43		43	3		1						4	
6. 2020.....	44		44										
7. 2021.....	50		50	5		1						6	1
8. 2022.....	55		55			1						1	
9. 2023.....	68		68	4		2						6	
10. 2024.....	77	1	76										
11. 2025.....	76		76										
12. Totals	XXX	XXX	XXX	30		9						39	XXX

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....													
2. 2016.....													
3. 2017.....													
4. 2018.....													
5. 2019.....													
6. 2020.....													
7. 2021.....													
8. 2022.....													
9. 2023.....													
10. 2024.....													
11. 2025.....													
12. Totals													

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred / Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior.....	XXX	XXX	XXX	XXX	XXX	XXX			XXX		
2. 2016.....	2		2	4.4		4.4			23.0		
3. 2017.....	12		12	26.1		26.1			23.0		
4. 2018.....	8		8	17.4		17.4			23.0		
5. 2019.....	4		4	9.3		9.3			23.0		
6. 2020.....									23.0		
7. 2021.....	6		6	12.0		12.0			23.0		
8. 2022.....	1		1	1.8		1.8			23.0		
9. 2023.....	6		6	8.8		8.8			23.0		
10. 2024.....									23.0		
11. 2025.....									23.0		
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX		

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

N O N E

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

N O N E

Schedule P - Part 1T - Warranty

N O N E

Schedule P - Part 1U - Pet Insurance Plans

N O N E

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

SCHEDULE P - PART 2A - HOMEOWNERS/FAROWNERS

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior.....	473	380	422	414	361	352	334	331	330	330		(1)
2. 2016.....	5,670	5,143	5,109	4,966	4,967	4,953	4,952	4,952	4,952	4,952		
3. 2017.....	XXX	7,864	7,550	7,492	7,475	7,484	7,530	7,527	7,521	7,521		(6)
4. 2018.....	XXX	XXX	6,599	6,338	6,299	6,267	6,285	6,286	6,290	6,295	5	9
5. 2019.....	XXX	XXX	XXX	8,961	8,795	8,716	8,889	8,917	8,911	8,922	11	5
6. 2020.....	XXX	XXX	XXX	XXX	9,534	9,331	9,143	9,066	9,050	9,033	(17)	(33)
7. 2021.....	XXX	XXX	XXX	XXX	XXX	10,328	10,106	10,063	10,088	10,023	(65)	(40)
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	16,558	15,708	15,431	15,269	(162)	(439)
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,207	20,212	19,777	(435)	(1,430)
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	21,346	20,840	(506)	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,553	XXX	XXX
12. Totals											(1,169)	(1,935)

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

1. Prior.....	3,325	2,507	2,246	2,197	2,154	2,113	2,114	2,113	2,128	2,120	(8)	7
2. 2016.....	8,094	7,601	7,292	7,271	7,262	7,282	7,234	7,219	7,219	7,206	(13)	(13)
3. 2017.....	XXX	8,362	7,881	7,813	7,456	7,504	7,522	7,575	7,593	7,612	19	37
4. 2018.....	XXX	XXX	9,825	8,958	8,658	9,142	9,188	9,216	9,148	9,122	(26)	(94)
5. 2019.....	XXX	XXX	XXX	9,917	9,861	10,543	10,746	10,832	10,766	10,670	(96)	(162)
6. 2020.....	XXX	XXX	XXX	XXX	7,806	7,312	7,697	7,786	7,783	7,903	120	117
7. 2021.....	XXX	XXX	XXX	XXX	XXX	8,412	8,865	9,269	8,944	9,004	60	(265)
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	10,399	10,675	10,698	10,931	233	256
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,843	11,673	11,860	187	1,017
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,914	10,735	(179)	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,375	XXX	XXX
12. Totals											297	900

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

1. Prior.....	2,298	1,910	1,791	2,187	2,098	2,118	2,080	2,080	2,080	2,080		
2. 2016.....	2,086	2,208	2,450	2,473	2,404	2,326	2,327	2,351	2,352	2,352		1
3. 2017.....	XXX	2,378	2,325	2,202	2,416	2,217	2,163	2,185	2,155	2,171	16	(14)
4. 2018.....	XXX	XXX	2,317	2,082	2,380	2,350	2,116	2,006	2,025	1,940	(85)	(66)
5. 2019.....	XXX	XXX	XXX	3,065	3,356	3,112	3,090	3,206	3,131	3,044	(87)	(162)
6. 2020.....	XXX	XXX	XXX	XXX	2,103	2,684	2,297	2,166	2,170	2,112	(58)	(54)
7. 2021.....	XXX	XXX	XXX	XXX	XXX	2,743	3,070	3,007	2,819	2,703	(116)	(304)
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	2,865	3,204	3,304	3,110	(194)	(94)
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,416	3,323	3,396	73	(20)
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,980	3,351	371	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,585	XXX	XXX
12. Totals											(80)	(713)

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
7. 2021.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
12. Totals												

SCHEDULE P - PART 2E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	1,673	1,820	2,182	1,946	1,940	1,878	1,947	1,990	2,016	1,995	(21)	5
2. 2016.....	2,831	2,871	2,832	2,996	3,095	3,038	3,045	3,012	2,970	2,970		(42)
3. 2017.....	XXX	3,085	2,792	2,983	2,855	2,950	2,902	2,840	2,885	2,900	15	60
4. 2018.....	XXX	XXX	2,796	2,909	3,181	3,593	3,653	3,268	3,425	3,065	(360)	(203)
5. 2019.....	XXX	XXX	XXX	3,613	4,229	4,000	4,162	3,890	4,049	4,121	72	231
6. 2020.....	XXX	XXX	XXX	XXX	3,475	3,237	3,229	3,179	2,898	2,794	(104)	(385)
7. 2021.....	XXX	XXX	XXX	XXX	XXX	3,550	2,918	3,357	2,925	2,931	6	(426)
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	4,707	4,618	3,772	3,993	221	(625)
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,681	5,059	4,981	(78)	(700)
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,119	4,551	(568)	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,344	XXX	XXX
12. Totals											(817)	(2,085)

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

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

1. Prior.....	672	589	530	442	438	426	426	426	426	426			
2. 2016.....	491	431	394	318	281	284	283	283	283	283			
3. 2017.....	XXX	405	300	244	266	263	255	270	279	234	(45)	(36)	
4. 2018.....	XXX	XXX	268	277	182	183	212	312	311	202	(109)	(110)	
5. 2019.....	XXX	XXX	XXX	188	129	158	108	92	90	90		(2)	
6. 2020.....	XXX	XXX	XXX	XXX	1,305	1,331	813	744	742	740	(2)	(4)	
7. 2021.....	XXX	XXX	XXX	XXX	XXX	442	921	483	551	411	(140)	(72)	
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	606	429	289	337	48	(92)	
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	557	314	234	(80)	(323)	
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,148	854	(294)	XXX	
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,549	XXX	XXX	
12. Totals												(622)	(639)

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior.....	9	(7)	11	11	11	11	11	11	(471)	(471)		(482)
2. 2016.....	1,679	1,596	1,585	1,587	1,585	1,584	1,584	1,583	1,583	1,583		
3. 2017.....	XXX	1,782	1,746	1,739	1,740	1,741	1,741	1,740	1,740	1,740		
4. 2018.....	XXX	XXX	1,525	1,412	1,394	1,395	1,395	1,394	1,394	1,394		
5. 2019.....	XXX	XXX	XXX	2,064	1,920	1,925	1,922	1,925	1,928	1,930	2	5
6. 2020.....	XXX	XXX	XXX	XXX	2,289	2,159	2,117	2,113	2,113	2,112	(1)	(1)
7. 2021.....	XXX	XXX	XXX	XXX	XXX	2,374	2,331	2,296	2,293	2,293		(3)
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	3,293	3,181	3,155	3,126	(29)	(55)
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,333	3,965	3,935	(30)	(398)
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,821	3,635	(186)	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,315	XXX	XXX
12. Totals											(244)	(934)

SCHEDULE P - PART 2J - AUTO PHYSICAL DAMAGE

1. Prior.....	40	13	17		(3)	(1)	(5)	(8)	439	427	(12)	435
2. 2016.....	6,535	5,973	5,927	5,921	5,913	5,916	5,914	5,911	5,910	5,908	(2)	(3)
3. 2017.....	XXX	6,810	6,496	6,470	6,458	6,457	6,453	6,448	6,444	6,437	(7)	(11)
4. 2018.....	XXX	XXX	8,356	7,764	7,732	7,718	7,699	7,688	7,683	7,679	(4)	(9)
5. 2019.....	XXX	XXX	XXX	9,546	8,849	8,848	8,839	8,830	8,823	8,817	(6)	(13)
6. 2020.....	XXX	XXX	XXX	XXX	8,803	8,097	8,084	8,069	8,062	8,057	(5)	(12)
7. 2021.....	XXX	XXX	XXX	XXX	XXX	10,748	9,881	9,852	9,833	9,824	(9)	(28)
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	13,926	12,745	12,586	12,570	(16)	(175)
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14,513	13,413	13,138	(275)	(1,375)
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14,400	12,863	(1,537)	XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	14,343	XXX	XXX
12. Totals											(1,873)	(1,191)

SCHEDULE P - PART 2K - FIDELITY/SURETY

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX									
7. 2021.....	XXX	XXX	XXX									
8. 2022.....	XXX	XXX	XXX									
9. 2023.....	XXX	XXX	XXX									
10. 2024.....	XXX	XXX	XXX									XXX
11. 2025.....	XXX	XXX	XXX									XXX
12. Totals												

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX									
7. 2021.....	XXX	XXX	XXX									
8. 2022.....	XXX	XXX	XXX									
9. 2023.....	XXX	XXX	XXX									
10. 2024.....	XXX	XXX	XXX									XXX
11. 2025.....	XXX	XXX	XXX									XXX
12. Totals												

SCHEDULE P - PART 2M - INTERNATIONAL

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX									
7. 2021.....	XXX	XXX	XXX									
8. 2022.....	XXX	XXX	XXX									
9. 2023.....	XXX	XXX	XXX									
10. 2024.....	XXX	XXX	XXX									XXX
11. 2025.....	XXX	XXX	XXX									XXX
12. Totals												

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

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

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX									
7. 2021.....	XXX	XXX	XXX	XXX								
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX							
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX						
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX					
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	11 One Year	12 Two Year
1. Prior.....	1											
2. 2016.....	1	2	2	3	3	3	3	3	2	2		(1)
3. 2017.....	XXX		1	28	13	13	13	13	12	12		(1)
4. 2018.....	XXX	XXX	7	6	8	8	8	8	8	8		
5. 2019.....	XXX	XXX	XXX	3	6	5	4	4	4	4		
6. 2020.....	XXX	XXX	XXX	XXX								
7. 2021.....	XXX	XXX	XXX	XXX	XXX	7	9	6	6	6		
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	3	2	1	1		(1)
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17	6	6		(11)
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												(14)

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX									
7. 2021.....	XXX	XXX	XXX									
8. 2022.....	XXX	XXX	XXX									
9. 2023.....	XXX	XXX	XXX									
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

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

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX									
7. 2021.....	XXX	XXX	XXX									
8. 2022.....	XXX	XXX	XXX									
9. 2023.....	XXX	XXX	XXX									
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2T - WARRANTY

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX									
7. 2021.....	XXX	XXX	XXX									
8. 2022.....	XXX	XXX	XXX									
9. 2023.....	XXX	XXX	XXX									
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

SCHEDULE P - PART 2U - PET INSURANCE PLANS

1. Prior.....												
2. 2016.....												
3. 2017.....	XXX											
4. 2018.....	XXX	XXX										
5. 2019.....	XXX	XXX	XXX									
6. 2020.....	XXX	XXX	XXX									
7. 2021.....	XXX	XXX	XXX									
8. 2022.....	XXX	XXX	XXX									
9. 2023.....	XXX	XXX	XXX									
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		XXX	XXX
12. Totals												

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

SCHEDULE P - PART 3A - HOMEOWNERS/FAROWNERS

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		
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025		
1. Prior.....	000.....	127.....	199.....	212.....	281.....	318.....	333.....	330.....	329.....	329.....	25.....	
2. 2016.....	4,211.....	4,801.....	4,862.....	4,936.....	4,946.....	4,952.....	4,952.....	4,952.....	4,952.....	4,952.....	510.....	116.....
3. 2017.....	XXX.....	5,940.....	7,215.....	7,338.....	7,410.....	7,454.....	7,470.....	7,515.....	7,521.....	7,521.....	721.....	152.....
4. 2018.....	XXX.....	XXX.....	4,786.....	5,931.....	6,175.....	6,236.....	6,267.....	6,286.....	6,289.....	6,294.....	586.....	128.....
5. 2019.....	XXX.....	XXX.....	XXX.....	7,182.....	8,402.....	8,594.....	8,842.....	8,883.....	8,903.....	8,915.....	801.....	179.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	7,484.....	8,737.....	9,024.....	9,014.....	9,024.....	9,022.....	789.....	153.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	8,044.....	9,608.....	9,794.....	9,929.....	9,971.....	630.....	66.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	12,333.....	14,708.....	14,962.....	15,132.....	211.....	40.....
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	16,184.....	19,189.....	19,546.....	1,132.....	157.....
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	17,516.....	19,675.....	870.....	291.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	14,469.....	729.....	62.....

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

1. Prior.....	000.....	1,254.....	1,807.....	2,010.....	2,086.....	2,091.....	2,112.....	2,112.....	2,111.....	2,108.....	118.....	
2. 2016.....	3,049.....	5,288.....	6,245.....	6,874.....	6,986.....	7,066.....	7,160.....	7,160.....	7,159.....	7,168.....	692.....	138.....
3. 2017.....	XXX.....	3,345.....	5,465.....	6,708.....	7,157.....	7,359.....	7,383.....	7,506.....	7,537.....	7,544.....	727.....	141.....
4. 2018.....	XXX.....	XXX.....	3,798.....	6,170.....	7,432.....	8,326.....	8,653.....	9,080.....	9,109.....	9,120.....	881.....	163.....
5. 2019.....	XXX.....	XXX.....	XXX.....	4,028.....	6,785.....	8,250.....	9,442.....	10,164.....	10,402.....	10,596.....	927.....	162.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	2,906.....	5,090.....	6,266.....	7,167.....	7,514.....	7,786.....	616.....	141.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3,397.....	6,297.....	7,704.....	8,383.....	8,680.....	518.....	85.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	4,075.....	7,470.....	8,958.....	10,152.....	337.....	82.....
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	4,577.....	7,663.....	9,393.....	821.....	134.....
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	4,228.....	7,025.....	671.....	115.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	4,322.....	485.....	58.....

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

1. Prior.....	000.....	879.....	1,434.....	1,873.....	2,026.....	2,051.....	2,080.....	2,080.....	2,080.....	2,080.....	36.....	
2. 2016.....	657.....	1,233.....	1,792.....	1,895.....	2,114.....	2,267.....	2,269.....	2,351.....	2,352.....	2,352.....	173.....	25.....
3. 2017.....	XXX.....	708.....	1,268.....	1,616.....	1,959.....	2,028.....	2,105.....	2,111.....	2,138.....	2,139.....	180.....	28.....
4. 2018.....	XXX.....	XXX.....	687.....	1,130.....	1,569.....	1,883.....	1,920.....	1,921.....	1,940.....	1,940.....	177.....	27.....
5. 2019.....	XXX.....	XXX.....	XXX.....	848.....	1,512.....	2,025.....	2,675.....	2,898.....	2,988.....	3,005.....	181.....	24.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	607.....	1,254.....	1,558.....	1,818.....	1,989.....	2,065.....	149.....	18.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	716.....	1,310.....	2,038.....	2,400.....	2,600.....	116.....	11.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	741.....	1,646.....	2,297.....	2,841.....	49.....	6.....
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	835.....	1,748.....	2,331.....	103.....	11.....
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	821.....	1,563.....	37.....	4.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	877.....	103.....	6.....

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

1. Prior.....	000.....											
2. 2016.....												
3. 2017.....	XXX.....											
4. 2018.....	XXX.....	XXX.....										
5. 2019.....	XXX.....	XXX.....	XXX.....									
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....								
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

SCHEDULE P - PART 3E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	000.....	534.....	1,104.....	1,449.....	1,594.....	1,737.....	1,771.....	1,862.....	1,897.....	1,947.....	56.....	
2. 2016.....	1,426.....	2,020.....	2,211.....	2,474.....	2,612.....	2,800.....	2,851.....	2,929.....	2,970.....	2,970.....	195.....	44.....
3. 2017.....	XXX.....	1,396.....	1,973.....	2,162.....	2,460.....	2,558.....	2,649.....	2,746.....	2,818.....	2,863.....	185.....	44.....
4. 2018.....	XXX.....	XXX.....	1,324.....	1,811.....	2,243.....	2,464.....	2,614.....	2,816.....	2,828.....	3,021.....	176.....	35.....
5. 2019.....	XXX.....	XXX.....	XXX.....	1,665.....	2,563.....	3,031.....	3,308.....	3,497.....	3,699.....	4,026.....	190.....	32.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	1,576.....	2,204.....	2,475.....	2,593.....	2,640.....	2,688.....	180.....	31.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1,496.....	2,030.....	2,457.....	2,566.....	2,741.....	133.....	18.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,147.....	3,076.....	3,200.....	3,351.....	70.....	15.....
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3,237.....	4,070.....	4,232.....	189.....	29.....
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,691.....	3,270.....	150.....	23.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	2,279.....	113.....	11.....

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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			
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025			
1. Prior.....	000.....												
2. 2016.....													
3. 2017.....	XXX.....												
4. 2018.....	XXX.....	XXX.....											
5. 2019.....	XXX.....	XXX.....	XXX.....										
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				

NONE

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

1. Prior.....	000.....												
2. 2016.....													
3. 2017.....	XXX.....												
4. 2018.....	XXX.....	XXX.....											
5. 2019.....	XXX.....	XXX.....	XXX.....										
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				

NONE

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

1. Prior.....	000.....											XXX.....	XXX.....
2. 2016.....												XXX.....	XXX.....
3. 2017.....	XXX.....											XXX.....	XXX.....
4. 2018.....	XXX.....	XXX.....										XXX.....	XXX.....
5. 2019.....	XXX.....	XXX.....	XXX.....									XXX.....	XXX.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

NONE

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

1. Prior.....	000.....	186.....	356.....	358.....	409.....	426.....	426.....	426.....	426.....	426.....	426.....	6.....	
2. 2016.....	32.....	88.....	240.....	268.....	275.....	283.....	283.....	283.....	283.....	283.....	283.....	22.....	6.....
3. 2017.....	XXX.....	42.....	127.....	154.....	168.....	173.....	176.....	177.....	203.....	234.....	234.....	13.....	3.....
4. 2018.....	XXX.....	XXX.....	23.....	73.....	108.....	143.....	189.....	196.....	196.....	202.....	202.....	11.....	3.....
5. 2019.....	XXX.....	XXX.....	XXX.....	16.....	34.....	45.....	86.....	91.....	90.....	90.....	90.....	9.....	2.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....	30.....	128.....	610.....	722.....	733.....	736.....	736.....	10.....	2.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	24.....	247.....	353.....	362.....	410.....	410.....	6.....	
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	30.....	173.....	200.....	329.....	329.....	3.....	1.....
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	13.....	50.....	126.....	126.....	7.....	
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	21.....	271.....	271.....	5.....	1.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	24.....	24.....	4.....	

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

1. Prior.....	000.....												
2. 2016.....													
3. 2017.....	XXX.....												
4. 2018.....	XXX.....	XXX.....											
5. 2019.....	XXX.....	XXX.....	XXX.....										
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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		
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025		
1. Prior	000	(10)	226	(467)	(468)	(469)	(469)	(470)	(471)	(471)	XXX	XXX
2. 2016	1,306	1,554	1,584	1,585	1,584	1,584	1,584	1,583	1,583	1,583	XXX	XXX
3. 2017	XXX	1,454	1,733	1,738	1,739	1,741	1,741	1,740	1,740	1,740	XXX	XXX
4. 2018	XXX	XXX	1,163	1,390	1,393	1,395	1,395	1,394	1,394	1,394	XXX	XXX
5. 2019	XXX	XXX	XXX	1,718	1,914	1,923	1,922	1,925	1,928	1,930	XXX	XXX
6. 2020	XXX	XXX	XXX	XXX	1,866	2,128	2,116	2,113	2,113	2,112	XXX	XXX
7. 2021	XXX	XXX	XXX	XXX	XXX	1,989	2,303	2,294	2,293	2,293	XXX	XXX
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	2,716	3,162	3,154	3,126	XXX	XXX
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,684	3,941	3,932	XXX	XXX
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,301	3,576	XXX	XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,787	XXX	XXX

SCHEDULE P - PART 3J - AUTO PHYSICAL DAMAGE

1. Prior	000	(68)	(118)	518	496	470	466	451	439	427		
2. 2016	5,799	5,960	5,924	5,920	5,913	5,909	5,914	5,911	5,910	5,908		
3. 2017	XXX	6,079	6,479	6,466	6,455	6,448	6,453	6,448	6,444	6,437		
4. 2018	XXX	XXX	7,309	7,738	7,720	7,699	7,694	7,688	7,683	7,679		
5. 2019	XXX	XXX	XXX	8,418	8,827	8,825	8,836	8,830	8,823	8,817		
6. 2020	XXX	XXX	XXX	XXX	7,682	8,068	8,070	8,064	8,059	8,054		
7. 2021	XXX	XXX	XXX	XXX	XXX	9,280	9,848	9,835	9,831	9,824		
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	11,620	12,636	12,573	12,565		
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,098	13,188	13,130		
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,856	12,793		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,948		

SCHEDULE P - PART 3K - FIDELITY/SURETY

1. Prior	000										XXX	XXX
2. 2016											XXX	XXX
3. 2017	XXX										XXX	XXX
4. 2018	XXX	XXX									XXX	XXX
5. 2019	XXX	XXX	XXX								XXX	XXX
6. 2020	XXX	XXX	XXX	XXX							XXX	XXX
7. 2021	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

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

1. Prior	000										XXX	XXX
2. 2016											XXX	XXX
3. 2017	XXX										XXX	XXX
4. 2018	XXX	XXX									XXX	XXX
5. 2019	XXX	XXX	XXX								XXX	XXX
6. 2020	XXX	XXX	XXX	XXX							XXX	XXX
7. 2021	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

SCHEDULE P - PART 3M - INTERNATIONAL

1. Prior	000										XXX	XXX
2. 2016											XXX	XXX
3. 2017	XXX										XXX	XXX
4. 2018	XXX	XXX									XXX	XXX
5. 2019	XXX	XXX	XXX								XXX	XXX
6. 2020	XXX	XXX	XXX	XXX							XXX	XXX
7. 2021	XXX	XXX	XXX	XXX	XXX						XXX	XXX
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX					XXX	XXX
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX				XXX	XXX
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			XXX	XXX
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

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

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment	
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025			
1. Prior.....	000.....											XXX.....	XXX.....
2. 2016.....												XXX.....	XXX.....
3. 2017.....	XXX.....											XXX.....	XXX.....
4. 2018.....	XXX.....	XXX.....										XXX.....	XXX.....
5. 2019.....	XXX.....	XXX.....	XXX.....									XXX.....	XXX.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

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

1. Prior.....	000.....											XXX.....	XXX.....
2. 2016.....												XXX.....	XXX.....
3. 2017.....	XXX.....											XXX.....	XXX.....
4. 2018.....	XXX.....	XXX.....										XXX.....	XXX.....
5. 2019.....	XXX.....	XXX.....	XXX.....									XXX.....	XXX.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

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

1. Prior.....	000.....											XXX.....	XXX.....
2. 2016.....												XXX.....	XXX.....
3. 2017.....	XXX.....											XXX.....	XXX.....
4. 2018.....	XXX.....	XXX.....										XXX.....	XXX.....
5. 2019.....	XXX.....	XXX.....	XXX.....									XXX.....	XXX.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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			
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025			
1. Prior.....	000.....												
2. 2016.....		2.....	2.....	3.....	3.....	3.....	3.....	3.....	2.....	2.....		1.....	
3. 2017.....	XXX.....		1.....	1.....	13.....	13.....	13.....	13.....	12.....	12.....			
4. 2018.....	XXX.....	XXX.....	4.....	4.....	8.....	8.....	8.....	8.....	8.....	8.....		2.....	
5. 2019.....	XXX.....	XXX.....	XXX.....	2.....	2.....	3.....	4.....	4.....	4.....	4.....			
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	3.....	5.....	5.....	6.....	6.....		1.....	
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		1.....	1.....	1.....			
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	1.....	6.....	6.....			
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				

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

1. Prior.....	000.....												
2. 2016.....													
3. 2017.....	XXX.....												
4. 2018.....	XXX.....	XXX.....											
5. 2019.....	XXX.....	XXX.....	XXX.....										
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				

NONE

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

1. Prior.....	000.....											XXX.....	XXX.....
2. 2016.....												XXX.....	XXX.....
3. 2017.....	XXX.....											XXX.....	XXX.....
4. 2018.....	XXX.....	XXX.....										XXX.....	XXX.....
5. 2019.....	XXX.....	XXX.....	XXX.....									XXX.....	XXX.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

NONE

SCHEDULE P - PART 3T - WARRANTY

1. Prior.....	000.....												
2. 2016.....													
3. 2017.....	XXX.....												
4. 2018.....	XXX.....	XXX.....											
5. 2019.....	XXX.....	XXX.....	XXX.....										
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....									
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....								
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....			

NONE

SCHEDULE P - PART 3U - PET INSURANCE PLANS

1. Prior.....	000.....											XXX.....	XXX.....
2. 2016.....												XXX.....	XXX.....
3. 2017.....	XXX.....											XXX.....	XXX.....
4. 2018.....	XXX.....	XXX.....										XXX.....	XXX.....
5. 2019.....	XXX.....	XXX.....	XXX.....									XXX.....	XXX.....
6. 2020.....	XXX.....	XXX.....	XXX.....	XXX.....								XXX.....	XXX.....
7. 2021.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....							XXX.....	XXX.....
8. 2022.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....						XXX.....	XXX.....
9. 2023.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....					XXX.....	XXX.....
10. 2024.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....				XXX.....	XXX.....
11. 2025.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....	XXX.....		XXX.....	XXX.....

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

SCHEDULE P - PART 4A - HOMEOWNERS/FAROWNERS

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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	176	92	78	64	28	13				
2. 2016.....	668	147	104	13	9	2				
3. 2017.....	XXX	645	144	83	34	15	24	5		
4. 2018.....	XXX	XXX	669	152	64	16	6			
5. 2019.....	XXX	XXX	XXX	718	149	59	24	26	4	4
6. 2020.....	XXX	XXX	XXX	XXX	948	278	101	35	20	5
7. 2021.....	XXX	XXX	XXX	XXX	XXX	1,040	290	177	96	23
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	1,729	554	255	61
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,452	650	161
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,030	668
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,186

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

1. Prior.....	1,191	369	143	81	37	6	1			
2. 2016.....	1,805	856	240	131	92	72	33	22	22	12
3. 2017.....	XXX	2,218	903	583	89	43	41	24	21	22
4. 2018.....	XXX	XXX	3,094	1,353	286	312	226	107	26	1
5. 2019.....	XXX	XXX	XXX	2,564	1,134	734	495	282	129	29
6. 2020.....	XXX	XXX	XXX	XXX	2,525	998	562	266	94	59
7. 2021.....	XXX	XXX	XXX	XXX	XXX	2,727	1,240	861	267	248
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	3,131	1,638	899	359
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,470	2,152	1,317
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,068	2,015
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,588

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

1. Prior.....	960	381	124	127	21	27				
2. 2016.....	687	509	490	249	112	25	23			
3. 2017.....	XXX	951	548	342	352	100	34	50	7	12
4. 2018.....	XXX	XXX	1,142	644	649	435	177	71	85	
5. 2019.....	XXX	XXX	XXX	1,229	922	505	176	227	127	39
6. 2020.....	XXX	XXX	XXX	XXX	945	998	412	123	80	14
7. 2021.....	XXX	XXX	XXX	XXX	XXX	1,163	1,013	466	226	83
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	1,432	1,132	784	199
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,619	899	545
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,427	1,053
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,842

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

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4E - COMMERCIAL MULTIPLE PERIL

1. Prior.....	966	584	555	288	154	71	89	77	73	
2. 2016.....	863	556	343	273	258	123	127	52		
3. 2017.....	XXX	1,093	561	476	218	205	136	47	37	19
4. 2018.....	XXX	XXX	959	752	553	747	692	273	406	24
5. 2019.....	XXX	XXX	XXX	1,254	1,212	655	584	158	210	47
6. 2020.....	XXX	XXX	XXX	XXX	1,466	791	658	515	225	47
7. 2021.....	XXX	XXX	XXX	XXX	XXX	1,605	719	759	222	96
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	1,728	1,324	379	371
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,694	810	561
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,678	941
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,186

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XX							
6. 2020.....	XXX	XXX	XX	XX						
7. 2021.....	XXX	XXX	XX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XX	XXX						
7. 2021.....	XXX	XXX	XX	XXX	XXX					
8. 2022.....	XXX	XXX	XX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

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

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XX	XXX						
7. 2021.....	XXX	XXX	XX	XXX	XXX					
8. 2022.....	XXX	XXX	XX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

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

1. Prior.....	342	222	122	38	12					
2. 2016.....	350	205	120	47	4	1				
3. 2017.....	XXX	249	134	65	63	38	27	39	45	
4. 2018.....	XXX	XXX	212	190	44	23	19	94	92	
5. 2019.....	XXX	XXX	XXX	157	70	74	18	1		
6. 2020.....	XXX	XXX	XXX	XXX	861	740	51	13	6	1
7. 2021.....	XXX	XXX	XXX	XXX	XXX	361	648	121	176	1
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	409	223	87	6
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	504	211	85
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	855	487
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,001

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

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XX	XXX						
7. 2021.....	XXX	XXX	XX	XXX	XXX					
8. 2022.....	XXX	XXX	XX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	13	3								
2. 2016.....	105	16	1	1						
3. 2017.....	XXX	92	9	1	1					
4. 2018.....	XXX	XXX	133	9						
5. 2019.....	XXX	XXX	XXX	147	3	1				
6. 2020.....	XXX	XXX	XXX	XXX	92	12	1			
7. 2021.....	XXX	XXX	XXX	XXX	XXX	107	9	2		
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	129	12	1	
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	443	24	2
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	252	19
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	200

SCHEDULE P - PART 4J - AUTO PHYSICAL DAMAGE

1. Prior.....	9	9	13			14				
2. 2016.....	341	12	3	1		6				
3. 2017.....	XXX	318	13	5	2	9				
4. 2018.....	XXX	XXX	444	18	7	14	2			
5. 2019.....	XXX	XXX	XXX	498	17	22	2			
6. 2020.....	XXX	XXX	XXX	XXX	510	30	16	3	1	1
7. 2021.....	XXX	XXX	XXX	XXX	XXX	686	26	10	2	
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	956	96	8	2
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,211	214	6
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,347	59
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,348

SCHEDULE P - PART 4K - FIDELITY/SURETY

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

SCHEDULE P - PART 4M - INTERNATIONAL

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

**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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XX							
6. 2020.....	XXX	XXX	XX	XX						
7. 2021.....	XXX	XXX	XX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XX	XX						
7. 2021.....	XXX	XXX	XX	XX	XX					
8. 2022.....	XXX	XXX	XX	XX	XX	XX				
9. 2023.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

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

1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XX	XX						
7. 2021.....	XXX	XXX	XX	XX	XX					
8. 2022.....	XXX	XXX	XX	XX	XX	XX				
9. 2023.....	XXX	XXX	XX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....										
3. 2017.....	.XXX				9					
4. 2018.....	.XXX	.XXX	3	2						
5. 2019.....	.XXX	.XXX	.XXX	1	3	2				
6. 2020.....	.XXX	.XXX	.XXX	.XXX						
7. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX	3	4			
8. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	3	2		
9. 2023.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	9		
10. 2024.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2025.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

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

1. Prior.....										
2. 2016.....										
3. 2017.....	.XXX									
4. 2018.....	.XXX	.XXX								
5. 2019.....	.XXX	.XXX	.XXX							
6. 2020.....	.XXX	.XXX	.XXX	.XXX						
7. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2023.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2024.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2025.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

NONE

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

1. Prior.....										
2. 2016.....										
3. 2017.....	.XXX									
4. 2018.....	.XXX	.XXX								
5. 2019.....	.XXX	.XXX	.XXX							
6. 2020.....	.XXX	.XXX	.XXX	.XXX						
7. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2023.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2024.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2025.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

NONE

SCHEDULE P - PART 4T - WARRANTY

1. Prior.....										
2. 2016.....										
3. 2017.....	.XXX									
4. 2018.....	.XXX	.XXX								
5. 2019.....	.XXX	.XXX	.XXX							
6. 2020.....	.XXX	.XXX	.XXX	.XXX						
7. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2023.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2024.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2025.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

NONE

SCHEDULE P - PART 4U - PET INSURANCE PLANS

1. Prior.....										
2. 2016.....										
3. 2017.....	.XXX									
4. 2018.....	.XXX	.XXX								
5. 2019.....	.XXX	.XXX	.XXX							
6. 2020.....	.XXX	.XXX	.XXX	.XXX						
7. 2021.....	.XXX	.XXX	.XXX	.XXX	.XXX					
8. 2022.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX				
9. 2023.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX			
10. 2024.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX		
11. 2025.....	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	.XXX	

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	80	16	5	1	3					
2. 2016.....	415	492	504	509	509	510	510	510	510	510
3. 2017.....	XXX	545	689	716	718	720	720	721	721	721
4. 2018.....	XXX	XXX	466	571	583	585	585	586	586	586
5. 2019.....	XXX	XXX	XXX	666	789	798	799	800	801	801
6. 2020.....	XXX	XXX	XXX	XXX	692	783	786	788	789	789
7. 2021.....	XXX	XXX	XXX	XXX	XXX	590	613	625	628	630
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	38	198	208	211
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	992	1,124	1,132
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	770	870
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	729

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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	22	9	6	4	2	1				
2. 2016.....	78	10	5	1	1					
3. 2017.....	XXX	103	24	4	4	3	2			
4. 2018.....	XXX	XXX	92	10	2	1	1			
5. 2019.....	XXX	XXX	XXX	99	10	5	3	1	1	
6. 2020.....	XXX	XXX	XXX	XXX	67	7	1	1		
7. 2021.....	XXX	XXX	XXX	XXX	XXX	77	9	4	3	1
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	133	9	3	1
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	100	7	2
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	70	10
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	49

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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	32	7	1			1			(2)	
2. 2016.....	587	613	625	626	627	626	626	626	626	626
3. 2017.....	XXX	766	863	871	874	874	873	873	873	873
4. 2018.....	XXX	XXX	664	708	713	715	714	714	714	714
5. 2019.....	XXX	XXX	XXX	920	976	982	980	980	981	980
6. 2020.....	XXX	XXX	XXX	XXX	897	943	940	942	942	942
7. 2021.....	XXX	XXX	XXX	XXX	XXX	730	686	695	697	697
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	182	246	251	252
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,178	1,288	1,291
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,117	1,171
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	840

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior	211	68	28	11	5	2		2	1	1
2. 2016	407	613	656	679	686	691	691	692	692	692
3. 2017	XXX	464	643	694	714	723	723	725	727	727
4. 2018	XXX	XXX	539	784	845	871	871	878	880	881
5. 2019	XXX	XXX	XXX	588	846	902	902	918	923	927
6. 2020	XXX	XXX	XXX	XXX	428	580	580	603	612	616
7. 2021	XXX	XXX	XXX	XXX	XXX	434	434	489	509	518
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX		260	310	337
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	503	756	821
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	452	671
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	485

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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior	114	34	14	6	3	1			1	1
2. 2016	364	81	31	9	4	3	1			
3. 2017	XXX	300	81	26	11	4	3	2	1	
4. 2018	XXX	XXX	359	89	36	15	8	1	1	
5. 2019	XXX	XXX	XXX	351	82	37	17	9	4	1
6. 2020	XXX	XXX	XXX	XXX	236	58	27	10	5	2
7. 2021	XXX	XXX	XXX	XXX	XXX	276	63	26	10	3
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	296	71	34	13
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	256	78	32
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	261	61
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	246

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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior	56	(1)	10	4	2	2	(1)	2		1
2. 2016	848	821	823	826	828	831	830	830	830	830
3. 2017	XXX	842	853	860	867	868	868	868	869	868
4. 2018	XXX	XXX	988	1,025	1,043	1,049	1,042	1,042	1,044	1,044
5. 2019	XXX	XXX	XXX	1,032	1,085	1,101	1,081	1,089	1,089	1,090
6. 2020	XXX	XXX	XXX	XXX	761	778	747	754	758	759
7. 2021	XXX	XXX	XXX	XXX	XXX	789	576	599	604	606
8. 2022	XXX	XXX	XXX	XXX	XXX	XXX	296	405	424	432
9. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	828	959	987
10. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	765	847
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	789

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	51	22	8	5	1					
2. 2016.....	108	152	166	170	172	173	173	173	173	173
3. 2017.....	XXX	111	159	173	177	179	179	180	180	180
4. 2018.....	XXX	XXX	110	162	172	177	177	177	177	177
5. 2019.....	XXX	XXX	XXX	124	166	177	177	180	180	181
6. 2020.....	XXX	XXX	XXX	XXX	100	144	144	147	147	149
7. 2021.....	XXX	XXX	XXX	XXX	XXX	106	106	114	114	116
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX		43	43	49
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	89	89	103
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		37
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	103

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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	34	14	7	1	1					
2. 2016.....	55	17	5	3	1					
3. 2017.....	XXX	49	17	6	3	2	1	1		
4. 2018.....	XXX	XXX	47	12	6	1	1			
5. 2019.....	XXX	XXX	XXX	42	15	8	3	2		
6. 2020.....	XXX	XXX	XXX	XXX	38	11	6	3	2	1
7. 2021.....	XXX	XXX	XXX	XXX	XXX	38	10	5	3	1
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	42	12	6	2
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	38	17	7
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	34	14
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	38

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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	21	4	2	1						
2. 2016.....	177	193	196	198	198	198	198	198	198	198
3. 2017.....	XXX	175	202	206	208	209	208	209	208	208
4. 2018.....	XXX	XXX	172	198	204	205	204	204	204	204
5. 2019.....	XXX	XXX	XXX	180	205	209	205	206	204	205
6. 2020.....	XXX	XXX	XXX	XXX	152	172	168	168	167	168
7. 2021.....	XXX	XXX	XXX	XXX	XXX	155	127	130	128	128
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	42	61	55	57
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	138	116	121
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	34	55
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	147

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SECTION 2

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

SECTION 3

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	68	25	12	10	4	2		1	1	1
2. 2016.....	118	163	175	184	189	192	192	193	195	195
3. 2017.....	XXX	121	157	168	177	181	181	183	184	185
4. 2018.....	XXX	XXX	109	151	164	169	169	174	175	176
5. 2019.....	XXX	XXX	XXX	123	167	179	179	184	187	190
6. 2020.....	XXX	XXX	XXX	XXX	136	172	172	176	179	180
7. 2021.....	XXX	XXX	XXX	XXX	XXX	112	113	123	129	133
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	1	55	64	70
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	137	178	189
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	113	150
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	113

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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	45	28	18	8	3	2	3	3		2
2. 2016.....	48	23	16	12	7	5	3	2		
3. 2017.....	XXX	41	20	13	9	7	3	2	1	1
4. 2018.....	XXX	XXX	45	16	12	11	6	1	1	1
5. 2019.....	XXX	XXX	XXX	35	20	17	12	7	5	2
6. 2020.....	XXX	XXX	XXX	XXX	29	9	4	4	3	2
7. 2021.....	XXX	XXX	XXX	XXX	XXX	34	12	9	7	4
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	50	11	8	5
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	33	13	8
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	26	10
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	30

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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	66	20	6			2	2	2	(48)	3
2. 2016.....	225	264	273	280	280	281	279	279	239	239
3. 2017.....	XXX	217	250	260	267	270	266	266	229	230
4. 2018.....	XXX	XXX	204	233	245	250	245	246	211	212
5. 2019.....	XXX	XXX	XXX	209	252	265	259	260	224	224
6. 2020.....	XXX	XXX	XXX	XXX	222	248	243	249	213	213
7. 2021.....	XXX	XXX	XXX	XXX	XXX	187	163	171	153	155
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	59	90	87	90
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	217	217	226
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	154	183
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	154

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 2025 OF THE Ohio 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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	8	4	2							
2. 2016.....	10	16	21	21	22	22	22	22	22	22
3. 2017.....	XXX	7	9	11	12	12	12	12	12	13
4. 2018.....	XXX	XXX	6	9	10	11	11	11	11	11
5. 2019.....	XXX	XXX	XXX	4	8	9	9	9	9	9
6. 2020.....	XXX	XXX	XXX	XXX	7	9	9	9	10	10
7. 2021.....	XXX	XXX	XXX	XXX	XXX	4	4	4	5	6
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX		3	3	3
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	5	7
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	5
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4

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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....		3	2							
2. 2016.....	3	8	3	1	1					
3. 2017.....	XXX	3	1	1	1			1	1	
4. 2018.....	XXX	XXX	3	2	2	1				
5. 2019.....	XXX	XXX	XXX	3	2	1				
6. 2020.....	XXX	XXX	XXX	XXX	3	3	2	1		
7. 2021.....	XXX	XXX	XXX	XXX	XXX	4	1	2	1	
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	3	2	1	
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	2	1
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3	3
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3

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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	(3)	7	1				1		(1)	
2. 2016.....	16	29	29	28	28	28	28	28	28	28
3. 2017.....	XXX	12	14	15	15	15	15	16	16	16
4. 2018.....	XXX	XXX	11	14	15	15	14	14	14	14
5. 2019.....	XXX	XXX	XXX	9	12	12	11	11	11	11
6. 2020.....	XXX	XXX	XXX	XXX	11	13	13	12	12	12
7. 2021.....	XXX	XXX	XXX	XXX	XXX	9	6	7	6	6
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	3	5	5	4
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	7	8
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6	9
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....	1									
2. 2016.....		1	1	1	1	1	1	1	1	1
3. 2017.....	XXX									
4. 2018.....	XXX	XXX	1	1	2	2	2	2	2	2
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX	1	1	1	1	1
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 2A

Years in Which Premiums Were Earned and Losses Were Incurred	NUMBER OF CLAIMS OUTSTANDING DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

SECTION 3A

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE NUMBER OF CLAIMS REPORTED DIRECT AND ASSUMED AT YEAR END									
	1	2	3	4	5	6	7	8	9	10
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....	1	1	1	1	1	1	1	1	1	1
3. 2017.....	XXX									
4. 2018.....	XXX	XXX	1	1	2	2	2	2	2	2
5. 2019.....	XXX	XXX	XXX							
6. 2020.....	XXX	XXX	XXX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX	1	1	1	1	1
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

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 2025 OF THE Ohio 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	
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
1. Prior.....											
2. 2016.....	3,907	3,907	3,907	3,907	3,907	3,907	3,907	3,907	3,907	3,907	
3. 2017.....	XXX	4,071	4,071	4,071	4,071	4,071	4,071	4,071	4,071	4,071	
4. 2018.....	XXX	XXX	4,247	4,247	4,247	4,247	4,247	4,247	4,247	4,247	
5. 2019.....	XXX	XXX	XXX	4,410	4,410	4,410	4,410	4,410	4,410	4,410	
6. 2020.....	XXX	XXX	XXX	XXX	4,661	4,661	4,661	4,661	4,661	4,661	
7. 2021.....	XXX	XXX	XXX	XXX	XXX	5,008	5,008	5,008	5,008	5,008	
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	5,403	5,403	5,403	5,403	
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,023	6,023	6,023	
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,827	6,827	
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,379	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,379
13. Earned Premiums (Sch P-Pt. 1)	3,907	4,071	4,247	4,410	4,661	5,008	5,403	6,023	6,827	7,379	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	
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
1. Prior.....											
2. 2016.....	250	250	250	250	250	250	250	250	250	250	
3. 2017.....	XXX	299	299	299	299	299	299	299	299	299	
4. 2018.....	XXX	XXX	169	169	169	169	169	169	169	169	
5. 2019.....	XXX	XXX	XXX	95	95	95	95	95	95	95	
6. 2020.....	XXX	XXX	XXX	XXX	58	58	58	58	58	58	
7. 2021.....	XXX	XXX	XXX	XXX	XXX	30	30	30	30	30	
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	35	35	35	35	
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	41	41	41	
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	46	46	
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36	
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	36
13. Earned Premiums (Sch P-Pt. 1)	250	299	169	95	58	30	35	41	46	36	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	
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
1. Prior.....											
2. 2016.....											
3. 2017.....	XXX										
4. 2018.....	XXX	XXX									
5. 2019.....	XXX	XXX									
6. 2020.....	XXX	XXX									
7. 2021.....	XXX	XXX									
8. 2022.....	XXX	XXX									
9. 2023.....	XXX	XXX									
10. 2024.....	XXX	XXX									
11. 2025.....	XXX	XXX									
12. Totals.....	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	
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
1. Prior.....											
2. 2016.....											
3. 2017.....	XXX										
4. 2018.....	XXX	XXX									
5. 2019.....	XXX	XXX									
6. 2020.....	XXX	XXX									
7. 2021.....	XXX	XXX									
8. 2022.....	XXX	XXX									
9. 2023.....	XXX	XXX									
10. 2024.....	XXX	XXX									
11. 2025.....	XXX	XXX									
12. Totals.....	XXX	XXX									
13. Earned Premiums (Sch P-Pt. 1)											XXX

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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	
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
1. Prior.....											
2. 2016.....	6,285	6,285	6,285	6,285	6,285	6,285	6,285	6,285	6,285	6,285	
3. 2017.....	XXX	6,493	6,493	6,493	6,493	6,493	6,493	6,493	6,493	6,493	
4. 2018.....	XXX	XXX	6,633	6,633	6,633	6,633	6,633	6,633	6,633	6,633	
5. 2019.....	XXX	XXX	XXX	7,027	7,027	7,027	7,027	7,027	7,027	7,027	
6. 2020.....	XXX	XXX	XXX	XXX	7,556	7,556	7,556	7,556	7,556	7,556	
7. 2021.....	XXX	XXX	XXX	XXX	XXX	8,227	8,227	8,227	8,227	8,227	
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	9,094	9,094	9,094	9,094	
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	10,166	10,166	10,166	
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,368	11,368	
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,388	12,388
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,388
13. Earned Premiums (Sch P-Pt. 1)	6,285	6,493	6,633	7,027	7,556	8,227	9,094	10,166	11,368	12,388	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	
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
1. Prior.....											
2. 2016.....	784	784	784	784	784	784	784	784	784	784	
3. 2017.....	XXX	796	796	796	796	796	796	796	796	796	
4. 2018.....	XXX	XXX	653	653	653	653	653	653	653	653	
5. 2019.....	XXX	XXX	XXX	616	616	616	616	616	616	616	
6. 2020.....	XXX	XXX	XXX	XXX	705	705	705	705	705	705	
7. 2021.....	XXX	XXX	XXX	XXX	XXX	693	693	693	693	693	
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	852	852	852	852	
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	869	869	869	
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,009	1,009	
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,105	1,105
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,105
13. Earned Premiums (Sch P-Pt. 1)	784	796	653	616	705	693	852	869	1,009	1,105	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	
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
1. Prior.....											
2. 2016.....	1,575	1,575	1,575	1,575	1,575	1,575	1,575	1,575	1,575	1,575	
3. 2017.....	XXX	1,439	1,439	1,439	1,439	1,439	1,439	1,439	1,439	1,439	
4. 2018.....	XXX	XXX	1,493	1,493	1,493	1,493	1,493	1,493	1,493	1,493	
5. 2019.....	XXX	XXX	XXX	1,583	1,583	1,583	1,583	1,583	1,583	1,583	
6. 2020.....	XXX	XXX	XXX	XXX	1,692	1,692	1,692	1,692	1,692	1,692	
7. 2021.....	XXX	XXX	XXX	XXX	XXX	1,816	1,816	1,816	1,816	1,816	
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	1,990	1,990	1,990	1,990	
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,258	2,258	2,258	
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,585	2,585	
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,891	2,891
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,891
13. Earned Premiums (Sch P-Pt. 1)	1,575	1,439	1,493	1,583	1,692	1,816	1,990	2,258	2,585	2,891	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	
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
1. Prior.....											
2. 2016.....	768	768	768	768	768	768	768	768	768	768	
3. 2017.....	XXX	796	796	796	796	796	796	796	796	796	
4. 2018.....	XXX	XXX	854	854	854	854	854	854	854	854	
5. 2019.....	XXX	XXX	XXX	947	947	947	947	947	947	947	
6. 2020.....	XXX	XXX	XXX	XXX	613	613	613	613	613	613	
7. 2021.....	XXX	XXX	XXX	XXX	XXX	560	560	560	560	560	
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	708	708	708	708	
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	885	885	885	
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,058	1,058	
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,006	1,006
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,006
13. Earned Premiums (Sch P-Pt. 1)	768	796	854	947	613	560	708	885	1,058	1,006	XXX

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

NONE

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

NONE

Schedule P - Part 6M - International - Section 1

NONE

Schedule P - Part 6M - International - Section 2

NONE

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

NONE

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

NONE

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

NONE

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

NONE

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	
1. Prior.....											
2. 2016.....	45	45	45	45	45	45	45	45	45	45	
3. 2017.....	XXX	46	46	46	46	46	46	46	46	46	
4. 2018.....	XXX	XXX	46	46	46	46	46	46	46	46	
5. 2019.....	XXX	XXX	XXX	43	43	43	43	43	43	43	
6. 2020.....	XXX	XXX	XXX	XXX	44	44	44	44	44	44	
7. 2021.....	XXX	XXX	XXX	XXX	XXX	50	50	50	50	50	
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX	55	55	55	55	
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	68	68	68	
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	77	77	
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	76	76
12. Totals.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	76
13. Earned Premiums (Sch P-Pt. 1)	45	46	46	43	44	50	55	68	77	76	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 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	
1. Prior.....											
2. 2016.....											
3. 2017.....	XXX										
4. 2018.....	XXX	XXX									
5. 2019.....	XXX	XXX	XXX								
6. 2020.....	XXX	XXX	XXX	XXX							
7. 2021.....	XXX	XXX	XXX	XXX	XXX						
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1	1	
11. 2025.....	XXX	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)									1		XXX

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

Years in Which Premiums Were Earned and Losses Were Incurred	CUMULATIVE PREMIUMS EARNED DIRECT AND ASSUMED AT YEAR END (\$000 OMITTED)										11 Current Year Premiums Earned
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	
1. Prior.....											
2. 2016.....											
3. 2017.....	XXX										
4. 2018.....	XXX	XXX									
5. 2019.....	XXX	XXX	XXX								
6. 2020.....	XXX	XXX	XXX	XXX							
7. 2021.....	XXX	XXX	XXX	XXX	XXX						
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2025.....	XXX	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 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025	
1. Prior.....											
2. 2016.....											
3. 2017.....	XXX										
4. 2018.....	XXX	XXX									
5. 2019.....	XXX	XXX	XXX								
6. 2020.....	XXX	XXX	XXX	XXX							
7. 2021.....	XXX	XXX	XXX	XXX	XXX						
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX					
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX				
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
11. 2025.....	XXX	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 2025 OF THE Ohio 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	5,996			33,845		
2. Private passenger auto liability/medical	16,434			15,838		
3. Commercial auto/truck liability/medical	6,397			7,618		
4. Workers' compensation						
5. Commercial multiple peril	6,499			11,734		
6. Medical professional liability - occurrence						
7. Medical professional liability - claims - made						
8. Special liability						
9. Other liability - occurrence	2,345			2,103		
10. Other liability - claims-made						
11. Special property	619			8,257		
12. Auto physical damage	2,629			23,461		
13. Fidelity/surety						
14. Other						
15. International						
16. Reinsurance - nonproportional assumed property	XXX	XXX	XXX	XXX	XXX	XXX
17. Reinsurance - nonproportional assumed liability	XXX	XXX	XXX	XXX	XXX	XXX
18. Reinsurance - nonproportional assumed financial lines	XXX	XXX	XXX	XXX	XXX	XXX
19. Products liability - occurrence				78		
20. Products liability - claims-made						
21. Financial guaranty/mortgage guaranty						
22. Warranty						
23. Pet insurance plans						
24. Totals	40,919			102,934		

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XX							
6. 2020.....	XXX	XXX	XX	XX						
7. 2021.....	XXX	XXX	XX	XXX	XX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	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 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XX							
6. 2020.....	XXX	XXX	XX	XX						
7. 2021.....	XXX	XXX	XX	XXX	XX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XX							
6. 2020.....	XXX	XXX	XX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	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
	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XX							
6. 2020.....	XXX	XXX	XX	XXX						
7. 2021.....	XXX	XXX	XXX	XXX	XXX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company
SCHEDULE P - PART 7B - REINSURANCE LOSS SENSITIVE CONTRACTS (\$000 OMITTED)
SECTION 1

Schedule P - Part 1	1 Total Net Losses and Expenses Unpaid	2 Net Losses and Expenses Unpaid on Loss Sensitive Contracts	3 Loss Sensitive as Percentage of Total	4 Total Net Premiums Written	5 Net Premiums Written on Loss Sensitive Contracts	6 Loss Sensitive as Percentage of Total
1. Homeowners/farmowners	5,996			33,845		
2. Private passenger auto liability/medical	16,434			15,838		
3. Commercial auto/truck liability/medical	6,397			7,618		
4. Workers' compensation						
5. Commercial multiple peril	6,499			11,734		
6. Medical professional liability - occurrence						
7. Medical professional liability - claims - made						
8. Special liability						
9. Other liability - occurrence	2,345			2,103		
10. Other liability - claims-made						
11. Special property	619			8,257		
12. Auto physical damage	2,629			23,461		
13. Fidelity/surety						
14. Other						
15. International						
16. Reinsurance - nonproportional assumed property						
17. Reinsurance - nonproportional assumed liability						
18. Reinsurance - nonproportional assumed financial lines						
19. Products liability - occurrence				78		
20. Products liability - claims-made						
21. Financial guaranty/mortgage guaranty						
22. Warranty						
23. Pet insurance plans						
24. Totals	40,919			102,934		

SECTION 2

Years in Which Policies Were Issued	INCURRED LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XX							
6. 2020.....	XXX	XXX	XX	XX						
7. 2021.....	XXX	XXX	XX	XXX	XX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	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 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XX							
6. 2020.....	XXX	XXX	XX	XX						
7. 2021.....	XXX	XXX	XX	XXX	XX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XX							
6. 2020.....	XXX	XXX	XX	XX						
7. 2021.....	XXX	XXX	XX	XXX	XX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	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 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XX							
6. 2020.....	XXX	XXX	XX	XX						
7. 2021.....	XXX	XXX	XX	XXX	XX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	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 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XX							
6. 2020.....	XXX	XXX	XX	XX						
7. 2021.....	XXX	XXX	XX	XXX	XX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	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 2016	2 2017	3 2018	4 2019	5 2020	6 2021	7 2022	8 2023	9 2024	10 2025
1. Prior.....										
2. 2016.....										
3. 2017.....	XXX									
4. 2018.....	XXX	XXX								
5. 2019.....	XXX	XXX	XX							
6. 2020.....	XXX	XXX	XX	XX						
7. 2021.....	XXX	XXX	XX	XXX	XX					
8. 2022.....	XXX	XXX	XXX	XXX	XXX	XXX				
9. 2023.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
10. 2024.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		
11. 2025.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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	2016		
1.603	2017		
1.604	2018		
1.605	2019		
1.606	2020		
1.607	2021		
1.608	2022		
1.609	2023		
1.610	2024		
1.611	2025		
1.612	Totals		

2. The definition of allocated loss adjustment expenses (ALAE) and, therefore, unallocated loss adjustment expenses (ULAE) was changed effective January 1, 1998. This change in definition applies to both paid and unpaid expenses. Are these expenses (now reported as "Defense and Cost Containment" and "Adjusting and Other") reported in compliance with these definitions in this statement? Yes [] No [X]
3. The Adjusting and Other expense payments and reserves should be allocated to the years in which the losses were incurred based on the number of claims reported, closed and outstanding in those years. When allocating Adjusting and Other expense between companies in a group or a pool, the Adjusting and Other expense should be allocated in the same percentage used for the loss amounts and the claim counts. For reinsurers, Adjusting and Other expense assumed should be reported according to the reinsurance contract. For Adjusting and Other expense incurred by reinsurers, or in those situations where suitable claim count information is not available, Adjusting and Other expense should be allocated by a reasonable method determined by the company and described in Interrogatory 7, below. Are they so reported in this Statement? Yes [X] No []
4. Do any lines in Schedule P include reserves that are reported gross of any discount to present value of future payments, and that are reported net of such discounts on Page 10? Yes [] No [X]
- If yes, proper disclosure must be made in the Notes to Financial Statements, as specified in the Instructions. Also, the discounts must be reported in Schedule P - Part 1, Columns 32 and 33. Schedule P must be completed gross of non-tabular discounting. Work papers relating to discount calculations must be available for examination upon request.
 Discounting is allowed only if expressly permitted by the state insurance department to which this Annual Statement is being filed.
5. What were the net premiums in force at the end of the year for:
 (in thousands of dollars) 5.1 Fidelity
 5.2 Surety
6. Claim count information is reported per claim or per claimant (Indicate which) per claim.....
 If not the same in all years, explain in Interrogatory 7.
- 7.1 The information provided in Schedule P will be used by many persons to estimate the adequacy of the current loss and expense reserves, among other things. Are there any especially significant events, coverage, retention or accounting changes that have occurred that must be considered when making such analyses? Yes [] No [X]
- 7.2 (An extended statement may be attached.)

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company

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

Allocated by States and Territories

States, Etc.		Direct Business Only					6 Totals
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	
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 2025 OF THE Ohio Mutual Insurance Company

SCHEDULE Y

PART 1A - DETAILS 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	Domiciliary Location	Relationship 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 Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Yes/No)	*
			86-1575957				Ohio Mutual Insurance Group, Inc.	OH	UIP	Ohio Mutual Insurance Group, Inc.	Board		Ohio Mutual Insurance Group, Inc.	NO	
			86-1550946				OMIG Holdings, Inc.	OH	UDP	Ohio Mutual Insurance Group, Inc.	Ownership	100.000	Ohio Mutual Insurance Group, Inc.	NO	
0963	Ohio Mutual Insurance Group	10202	34-4320350				Ohio Mutual Insurance Company	OH	RE	OMIG Holdings, Inc.	Ownership	100.000	Ohio Mutual Insurance Group, Inc.	NO	
0963	Ohio Mutual Insurance Group	13072	34-1008736				United Ohio Insurance Company	OH	DS	Ohio Mutual Insurance Company	Ownership	100.000	Ohio Mutual Insurance Group, Inc.	NO	
			34-1026454				Ohio United Agency, Inc.	OH	NIA	Ohio Mutual Insurance Company	Ownership	100.000	Ohio Mutual Insurance Group, Inc.	NO	
0963	Ohio Mutual Insurance Group	25950	01-0407315				Casco Indemnity Company	OH	DS	Ohio Mutual Insurance Company	Ownership	100.000	Ohio Mutual Insurance Group, Inc.	NO	
0963	Ohio Mutual Insurance Group	10719	39-0274490				United Mutual Insurance Company	OH	DS	Ohio Mutual Insurance Company	Ownership	100.000	Ohio Mutual Insurance Group, Inc.	NO	

NONE

Asterisk	
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ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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)
10202	34-4320350	Ohio Mutual Insurance Company	25,372				38,608,857		*		38,634,229	(50,248,808)
13072	34-1008736	United Ohio Insurance Company					(61,202,007)		*		(61,202,007)	48,665,106
25950	01-0407315	Casco Indemnity Company					16,524,827		*		16,524,827	1,908,150
10719	39-0274490	United Mutual Insurance Company					6,068,323		*		6,068,323	(324,448)
	34-1026454	Ohio United Agency	(25,372)								(25,372)	
9999999 Control Totals												
Ohio Mutual Insurance Company (Lead Company) (23%), United Ohio Insurance Company (65%), Casco Indemnity Company (9%), United Mutual Insurance Company (3%)												

ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio 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?	YES
33. Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1?	NO
34. Will the Cybersecurity Insurance Coverage Supplement be filed with the state of domicile and the NAIC by April 1?	YES
35. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?	NO
36. Will the Private Flood Insurance Supplement be filed with the state of domicile and the NAIC by April 1?	NO
37. Will the Mortgage Guaranty Insurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
AUGUST FILING	
38. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO

Explanations:

- 11.
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Bar Codes:

11. SIS Stockholder Information Supplement [Document Identifier 420]



12. Financial Guaranty Insurance Exhibit [Document Identifier 240]



13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]



14. Supplement A to Schedule T [Document Identifier 455]



15. Trusteed Surplus Statement [Document Identifier 490]



16. Premiums Attributed to Protected Cells Exhibit [Document Identifier 385]



ANNUAL STATEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

17. Reinsurance Summary Supplemental Filing [Document Identifier 401]



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



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



22. Bail Bond Supplement [Document Identifier 500]



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



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



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



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



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



30. Credit Insurance Experience Exhibit [Document Identifier 230]



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



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



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



36. Private Flood Insurance Supplement [Document Identifier 560]



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



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



OVERFLOW PAGE FOR WRITE-INS

NONE



SUPPLEMENT FOR THE YEAR 2025 OF THE Ohio 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 0963

NAIC Company Code 10202

	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				
7. Personal umbrella				
8. Employment liability	117	117		
9. Aggregate write-ins for facilities & premises (CGL)	89	89		
10. Internet & cyber liability				
11. Aggregate write-ins for other	169,423	153,695	13,790	2,500
12. Total ASL 17 - other liability (sum of lines 1 through 11)	169,629	153,901	13,790	2,500
DETAILS OF WRITE-INS				
0901. Aggregate of facilities & premises (CGL) lines of business less than 10% of category	89	89		
0902.				
0903.				
0998. Summary of remaining write-ins for Line 9 from overflow page				
0999. Totals (Lines 0901 through 0903 plus 0998)(Line 9 above)	89	89		
1101. Dwelling Fire Liability	165,974	150,318	13,790	2,500
1102. Aggregate of other lines of business less than 10% of category	3,449	3,377		
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page				
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	169,423	153,695	13,790	2,500



SUPPLEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed by March 1)

FOR THE STATE OF: Connecticut

NAIC Group Code 0963

NAIC Company Code 10202

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability income	NO
2. Health	NO
3. Homeowners	NO
4. Individual annuity	NO
5. Individual life	NO
6. Lender-placed home and auto	NO
7. Long-term care	NO
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO



SUPPLEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed by March 1)

FOR THE STATE OF: Indiana

NAIC Group Code 0963

NAIC Company Code 10202

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
13. Pet insurance plans	NO



SUPPLEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed by March 1)

FOR THE STATE OF: Maine

NAIC Group Code 0963

NAIC Company Code 10202

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability income	NO
2. Health	NO
3. Homeowners	NO
4. Individual annuity	NO
5. Individual life	NO
6. Lender-placed home and auto	NO
7. Long-term care	NO
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO



SUPPLEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed by March 1)

FOR THE STATE OF: New Hampshire

NAIC Group Code 0963

NAIC Company Code 10202

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability income	NO
2. Health	NO
3. Homeowners	NO
4. Individual annuity	NO
5. Individual life	NO
6. Lender-placed home and auto	NO
7. Long-term care	NO
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO



SUPPLEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed by March 1)

FOR THE STATE OF: Ohio

NAIC Group Code 0963

NAIC Company Code 10202

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
13. Pet insurance plans	NO



SUPPLEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed by March 1)

FOR THE STATE OF: Rhode Island

NAIC Group Code 0963

NAIC Company Code 10202

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability income	NO
2. Health	NO
3. Homeowners	NO
4. Individual annuity	NO
5. Individual life	NO
6. Lender-placed home and auto	NO
7. Long-term care	NO
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO



SUPPLEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed by March 1)

FOR THE STATE OF: Tennessee

NAIC Group Code 0963

NAIC Company Code 10202

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability income	NO
2. Health	NO
3. Homeowners	NO
4. Individual annuity	NO
5. Individual life	NO
6. Lender-placed home and auto	NO
7. Long-term care	NO
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO



SUPPLEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed by March 1)

FOR THE STATE OF: Vermont

NAIC Group Code 0963

NAIC Company Code 10202

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability income	NO
2. Health	NO
3. Homeowners	NO
4. Individual annuity	NO
5. Individual life	NO
6. Lender-placed home and auto	NO
7. Long-term care	NO
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO



SUPPLEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed by March 1)

FOR THE STATE OF: Virginia

NAIC Group Code 0963

NAIC Company Code 10202

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability income	NO
2. Health	NO
3. Homeowners	NO
4. Individual annuity	NO
5. Individual life	NO
6. Lender-placed home and auto	NO
7. Long-term care	NO
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO



SUPPLEMENT FOR THE YEAR 2025 OF THE Ohio Mutual Insurance Company
MARKET CONDUCT ANNUAL STATEMENT (MCAS) PREMIUM EXHIBIT FOR YEAR

For The Year Ended December 31, 2025
 (To Be Filed by March 1)

FOR THE STATE OF: Wisconsin

NAIC Group Code 0963

NAIC Company Code 10202

MCAS LINE OF BUSINESS	MCAS Reportable Premium/Considerations (Yes/No)
1. Disability income	NO
2. Health	NO
3. Homeowners	NO
4. Individual annuity	NO
5. Individual life	NO
6. Lender-placed home and auto	NO
7. Long-term care	NO
8. Other health	NO
9. Private flood	NO
10. Private passenger auto	NO
11. Short-term limited duration health plans	NO
12. Travel	NO
13. Pet insurance plans	NO