



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

AS OF JUNE 30, 2025

OF THE CONDITION AND AFFAIRS OF THE

STATE AUTO INSURANCE COMPANY OF OHIO

NAIC Group Code 0111 0175 NAIC Company Code 11017 Employer's ID Number 31-1651026

Organized under the Laws of Ohio, State of Domicile or Port of Entry OH

Country of Domicile United States of America

Incorporated/Organized 05/17/1999 Commenced Business 01/01/2000

Statutory Home Office 518 East Broad Street Columbus, OH, US 43215

Main Administrative Office 175 Berkeley Street Boston, MA, US 43215 833-724-3577

Mail Address 175 Berkeley Street Boston, MA, US 43215

Primary Location of Books and Records 175 Berkeley Street Boston, MA, US 43215 614-464-5000

Internet Website Address www.stateauto.com

Statutory Statement Contact Joel Peltokangas 617-357-9500

OFFICERS

President and Chief Executive Officer Hamid Talal Mirza Executive Vice President and Treasurer Nikos Vasilakos

OTHER

Christopher Locke Peirce, Executive Vice President Matthew Edwin Johnson #, Chief Financial Officer Paul Sanghera, EVP and Comptroller

DIRECTORS OR TRUSTEES

James Matthew Czapla Matthew Paul Dolan Alison Brooke Erbig

State of Massachusetts SS: County of Suffolk

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.

Hamid Talal Mirza President and Chief Executive Officer

Damon Paul Hart Executive Vice President, Chief Legal Officer and Secretary

Nikos Vasilakos Executive Vice President and Treasurer

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.....

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

ASSETS

| | Current Statement Date | | | 4 December 31 Prior Year Net Admitted Assets |
|--|------------------------|-------------------------|---|---|
| | 1 Assets | 2 Nonadmitted Assets | 3 Net Admitted Assets (Cols. 1 - 2) | |
| 1. Bonds | 7,900,555 | | 7,900,555 | 7,798,636 |
| 2. Stocks: | | | | |
| 2.1 Preferred stocks | | | | |
| 2.2 Common stocks | | | | |
| 3. Mortgage loans on real estate: | | | | |
| 3.1 First liens | | | | |
| 3.2 Other than first liens..... | | | | |
| 4. Real estate: | | | | |
| 4.1 Properties occupied by the company (less \$0 encumbrances) | | | | |
| 4.2 Properties held for the production of income (less \$0 encumbrances) | | | | |
| 4.3 Properties held for sale (less \$0 encumbrances) | | | | |
| 5. Cash (\$42,390), cash equivalents (\$) and short-term investments (\$) | 42,390 | | 42,390 | 42,566 |
| 6. Contract loans (including \$0 premium notes) | | | | |
| 7. Derivatives | | | | |
| 8. Other invested assets | | | | |
| 9. Receivables for securities | | | | |
| 10. Securities lending reinvested collateral assets | | | | |
| 11. Aggregate write-ins for invested assets | | | | |
| 12. Subtotals, cash and invested assets (Lines 1 to 11) | 7,942,945 | | 7,942,945 | 7,841,202 |
| 13. Title plants less \$0 charged off (for Title insurers only) | | | | |
| 14. Investment income due and accrued | 70,200 | | 70,200 | 63,459 |
| 15. Premiums and considerations: | | | | |
| 15.1 Uncollected premiums and agents' balances in the course of collection | | | | |
| 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$0 earned but unbilled premiums) | | | | |
| 15.3 Accrued retrospective premiums (\$0) and contracts subject to redetermination (\$0) | | | | |
| 16. Reinsurance: | | | | |
| 16.1 Amounts recoverable from reinsurers | 384,562 | | 384,562 | 489,890 |
| 16.2 Funds held by or deposited with reinsured companies | | | | |
| 16.3 Other amounts receivable under reinsurance contracts | | | | |
| 17. Amounts receivable relating to uninsured plans | | | | |
| 18.1 Current federal and foreign income tax recoverable and interest thereon | | | | |
| 18.2 Net deferred tax asset | 73,000 | 73,000 | | |
| 19. Guaranty funds receivable or on deposit | | | | |
| 20. Electronic data processing equipment and software | | | | |
| 21. Furniture and equipment, including health care delivery assets (\$0) | | | | |
| 22. Net adjustment in assets and liabilities due to foreign exchange rates | | | | |
| 23. Receivables from parent, subsidiaries and affiliates | 798,515 | | 798,515 | 849,979 |
| 24. Health care (\$0) and other amounts receivable | | | | |
| 25. Aggregate write-ins for other than invested assets | | | | |
| 26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) | 9,269,222 | 73,000 | 9,196,222 | 9,244,530 |
| 27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | | |
| 28. Total (Lines 26 and 27) | 9,269,222 | 73,000 | 9,196,222 | 9,244,530 |
| 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) | | | | |
| 2501. | | | | |
| 2502. | | | | |
| 2503. | | | | |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | | | | |
| 2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above) | | | | |

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

LIABILITIES, SURPLUS AND OTHER FUNDS

| | 1 Current Statement Date | 2 December 31, Prior Year |
|---|--------------------------------|---------------------------------|
| 1. Losses (current accident year \$0) | | |
| 2. Reinsurance payable on paid losses and loss adjustment expenses | | |
| 3. Loss adjustment expenses | | |
| 4. Commissions payable, contingent commissions and other similar charges | | |
| 5. Other expenses (excluding taxes, licenses and fees) | | |
| 6. Taxes, licenses and fees (excluding federal and foreign income taxes) | | |
| 7.1 Current federal and foreign income taxes (including \$0 on realized capital gains (losses)) | 13,183 | 9,980 |
| 7.2 Net deferred tax liability | 6,000 | 6,000 |
| 8. Borrowed money \$0 and interest thereon \$0 | | |
| 9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$0 and including warranty reserves of \$0 and accrued accident and health experience rating refunds including \$ for medical loss ratio rebate per the Public Health Service Act) | | |
| 10. Advance premium | | |
| 11. Dividends declared and unpaid: | | |
| 11.1 Stockholders | | |
| 11.2 Policyholders | | |
| 12. Ceded reinsurance premiums payable (net of ceding commissions) | 1,042,457 | 1,042,422 |
| 13. Funds held by company under reinsurance treaties | | |
| 14. Amounts withheld or retained by company for account of others | | |
| 15. Remittances and items not allocated | | |
| 16. Provision for reinsurance (including \$0 certified) | | |
| 17. Net adjustments in assets and liabilities due to foreign exchange rates | | |
| 18. Drafts outstanding | | |
| 19. Payable to parent, subsidiaries and affiliates | 375,852 | 503,776 |
| 20. Derivatives | | |
| 21. Payable for securities | | |
| 22. Payable for securities lending | | |
| 23. Liability for amounts held under uninsured plans | | |
| 24. Capital notes \$0 and interest thereon \$0 | | |
| 25. Aggregate write-ins for liabilities | 1 | 1 |
| 26. Total liabilities excluding protected cell liabilities (Lines 1 through 25) | 1,437,493 | 1,562,179 |
| 27. Protected cell liabilities | | |
| 28. Total liabilities (Lines 26 and 27) | 1,437,493 | 1,562,179 |
| 29. Aggregate write-ins for special surplus funds | | |
| 30. Common capital stock | 2,300,000 | 2,300,000 |
| 31. Preferred capital stock | | |
| 32. Aggregate write-ins for other than special surplus funds | | |
| 33. Surplus notes | | |
| 34. Gross paid in and contributed surplus | 3,823,680 | 3,823,680 |
| 35. Unassigned funds (surplus) | 1,635,049 | 1,558,671 |
| 36. Less treasury stock, at cost: | | |
| 36.1 .....0 shares common (value included in Line 30 \$0) | | |
| 36.2 .....0 shares preferred (value included in Line 31 \$0) | | |
| 37. Surplus as regards policyholders (Lines 29 to 35, less 36) | 7,758,729 | 7,682,351 |
| 38. Totals (Page 2, Line 28, Col. 3) | 9,196,222 | 9,244,530 |
| DETAILS OF WRITE-INS | | |
| 2501. Other liabilities | 1 | 1 |
| 2502. | | |
| 2503. | | |
| 2598. Summary of remaining write-ins for Line 25 from overflow page | | |
| 2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above) | 1 | 1 |
| 2901. | | |
| 2902. | | |
| 2903. | | |
| 2998. Summary of remaining write-ins for Line 29 from overflow page | | |
| 2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above) | | |
| 3201. | | |
| 3202. | | |
| 3203. | | |
| 3298. Summary of remaining write-ins for Line 32 from overflow page | | |
| 3299. Totals (Lines 3201 through 3203 plus 3298)(Line 32 above) | | |

STATEMENT OF INCOME

| | 1 | 2 | 3 |
|---|-------------------------|-----------------------|---------------------------------|
| | Current Year to Date | Prior Year to Date | Prior Year Ended December 31 |
| UNDERWRITING INCOME | | | |
| 1. Premiums earned: | | | |
| 1.1 Direct (written \$ (66)) | 3,442 | 4,492,677 | 5,342,309 |
| 1.2 Assumed (written \$ 13,486) | 13,486 | 12,099 | 24,478 |
| 1.3 Ceded (written \$ 13,420) | 16,928 | 4,504,776 | 5,366,787 |
| 1.4 Net (written \$) | | | |
| DEDUCTIONS: | | | |
| 2. Losses incurred (current accident year \$ 0): | | | |
| 2.1 Direct | (69,257) | 2,353,389 | 3,107,526 |
| 2.2 Assumed | 6,601 | 3,738 | 8,434 |
| 2.3 Ceded | (62,656) | 2,357,127 | 3,115,960 |
| 2.4 Net | | | |
| 3. Loss adjustment expenses incurred | | | |
| 4. Other underwriting expenses incurred | | | |
| 5. Aggregate write-ins for underwriting deductions | | | |
| 6. Total underwriting deductions (Lines 2 through 5) | | | |
| 7. Net income of protected cells | | | |
| 8. Net underwriting gain (loss) (Line 1 minus Line 6 + Line 7) | | | |
| INVESTMENT INCOME | | | |
| 9. Net investment income earned | 124,754 | 110,017 | 244,079 |
| 10. Net realized capital gains (losses) less capital gains tax of \$ (4,914) | (18,485) | | |
| 11. Net investment gain (loss) (Lines 9 + 10) | 106,269 | 110,017 | 244,079 |
| OTHER INCOME | | | |
| 12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ 0 amount charged off \$ 0) | | | |
| 13. Finance and service charges not included in premiums | | | |
| 14. Aggregate write-ins for miscellaneous income | | | |
| 15. Total other income (Lines 12 through 14) | | | |
| 16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15) | 106,269 | 110,017 | 244,079 |
| 17. Dividends to policyholders | | | |
| 18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17) | 106,269 | 110,017 | 244,079 |
| 19. Federal and foreign income taxes incurred | 29,890 | 34,000 | 47,000 |
| 20. Net income (Line 18 minus Line 19)(to Line 22) | 76,379 | 76,017 | 197,079 |
| CAPITAL AND SURPLUS ACCOUNT | | | |
| 21. Surplus as regards policyholders, December 31 prior year | 7,682,351 | 7,488,273 | 7,488,273 |
| 22. Net income (from Line 20) | 76,379 | 76,017 | 197,079 |
| 23. Net transfers (to) from Protected Cell accounts | | | |
| 24. Change in net unrealized capital gains (losses) less capital gains tax of \$ 0 | | | |
| 25. Change in net unrealized foreign exchange capital gain (loss) | | | |
| 26. Change in net deferred income tax | | | (1,000) |
| 27. Change in nonadmitted assets | | | (5,000) |
| 28. Change in provision for reinsurance | | | 3,000 |
| 29. Change in surplus notes | | | |
| 30. Surplus (contributed to) withdrawn from protected cells | | | |
| 31. Cumulative effect of changes in accounting principles | | | |
| 32. Capital changes: | | | |
| 32.1 Paid in | | | |
| 32.2 Transferred from surplus (Stock Dividend) | | | |
| 32.3 Transferred to surplus | | | |
| 33. Surplus adjustments: | | | |
| 33.1 Paid in | | | |
| 33.2 Transferred to capital (Stock Dividend) | | | |
| 33.3 Transferred from capital | | | |
| 34. Net remittances from or (to) Home Office | | | |
| 35. Dividends to stockholders | | | |
| 36. Change in treasury stock | | | |
| 37. Aggregate write-ins for gains and losses in surplus | (1) | | (1) |
| 38. Change in surplus as regards policyholders (Lines 22 through 37) | 76,378 | 76,017 | 194,078 |
| 39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38) | 7,758,729 | 7,564,290 | 7,682,351 |
| DETAILS OF WRITE-INS | | | |
| 0501. | | | |
| 0502. | | | |
| 0503. | | | |
| 0598. Summary of remaining write-ins for Line 5 from overflow page | | | |
| 0599. Totals (Lines 0501 through 0503 plus 0598)(Line 5 above) | | | |
| 1401. Other income/(expense) | | | |
| 1402. Retroactive reinsurance gain/(loss) | | | |
| 1403. | | | |
| 1498. Summary of remaining write-ins for Line 14 from overflow page | | | |
| 1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above) | | | |
| 3701. Other changes in surplus | (1) | | (1) |
| 3702. SSAP 10R incremental change | | | |
| 3703. | | | |
| 3798. Summary of remaining write-ins for Line 37 from overflow page | | | |
| 3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above) | (1) | | (1) |

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

CASH FLOW

| | 1 Current Year To Date | 2 Prior Year To Date | 3 Prior Year Ended December 31 |
|---|------------------------------|----------------------------|--------------------------------------|
| Cash from Operations | | | |
| 1. Premiums collected net of reinsurance | 35 | (2,693,148) | (1,562,361) |
| 2. Net investment income | 113,312 | 107,366 | 225,643 |
| 3. Miscellaneous income | | | |
| 4. Total (Lines 1 to 3) | 113,347 | (2,585,782) | (1,336,718) |
| 5. Benefit and loss related payments | (105,327) | (979,245) | (2,777,824) |
| 6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | |
| 7. Commissions, expenses paid and aggregate write-ins for deductions | | | |
| 8. Dividends paid to policyholders | | | |
| 9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses) | 21,773 | 60,078 | 86,276 |
| 10. Total (Lines 5 through 9) | (83,554) | (919,167) | (2,691,548) |
| 11. Net cash from operations (Line 4 minus Line 10) | 196,901 | (1,666,616) | 1,354,830 |
| Cash from Investments | | | |
| 12. Proceeds from investments sold, matured or repaid: | | | |
| 12.1 Bonds | 1,650,700 | 1,340,000 | 1,340,881 |
| 12.2 Stocks | | | |
| 12.3 Mortgage loans | | | |
| 12.4 Real estate | | | |
| 12.5 Other invested assets | | | |
| 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments | | | |
| 12.7 Miscellaneous proceeds | | | |
| 12.8 Total investment proceeds (Lines 12.1 to 12.7) | 1,650,700 | 1,340,000 | 1,340,881 |
| 13. Cost of investments acquired (long-term only): | | | |
| 13.1 Bonds | 1,771,316 | 1,436,149 | 2,057,948 |
| 13.2 Stocks | | | |
| 13.3 Mortgage loans | | | |
| 13.4 Real estate | | | |
| 13.5 Other invested assets | | | |
| 13.6 Miscellaneous applications | | | |
| 13.7 Total investments acquired (Lines 13.1 to 13.6) | 1,771,316 | 1,436,149 | 2,057,948 |
| 14. Net increase/(decrease) in contract loans and premium notes | | | |
| 15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) | (120,616) | (96,149) | (717,067) |
| Cash from Financing and Miscellaneous Sources | | | |
| 16. Cash provided (applied): | | | |
| 16.1 Surplus notes, capital notes | | | |
| 16.2 Capital and paid in surplus, less treasury stock | | | |
| 16.3 Borrowed funds | | | |
| 16.4 Net deposits on deposit-type contracts and other insurance liabilities | | | |
| 16.5 Dividends to stockholders | | | |
| 16.6 Other cash provided (applied) | (76,461) | 1,776,675 | (1,111,865) |
| 17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) | (76,461) | 1,776,675 | (1,111,864) |
| RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS | | | |
| 18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) . | (176) | 13,910 | (474,101) |
| 19. Cash, cash equivalents and short-term investments: | | | |
| 19.1 Beginning of year | 42,566 | 516,667 | 516,667 |
| 19.2 End of period (Line 18 plus Line 19.1) | 42,390 | 530,577 | 42,566 |

Note: Supplemental disclosures of cash flow information for non-cash transactions:

| | | | |
|---------------|--|--|--|
| 20.0001. | | | |
|---------------|--|--|--|

NOTES TO FINANCIAL STATEMENTS

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices
Company input

| | SSAP # | F/S Page | F/S Line # | 2025 | 2024 |
|---|--------|-------------|---------------|--------------|--------------|
| NET INCOME | | | | | |
| (1) State basis (Page 4, Line 20, Columns 1 & 3) | XXX | XXX | XXX | \$ 76,379 | \$ 197,079 |
| (2) State Prescribed Practices that are an increase/ (decrease) from NAIC SAP: | | | | | |
| (3) State Permitted Practices that are an increase/(decrease) from NAIC SAP: | | | | | |
| (4) NAIC SAP (1-2-3=4) | XXX | XXX | XXX | \$ 76,379 | \$ 197,079 |
| SURPLUS | | | | | |
| (5) State basis (Page 3, Line 37, Columns 1 & 2) | XXX | XXX | XXX | \$ 7,758,729 | \$ 7,682,351 |
| (6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP: | | | | | |
| (7) State Permitted Practices that are an increase/(decrease) from NAIC SAP: | | | | | |
| (8) NAIC SAP (5-6-7=8) | XXX | XXX | XXX | \$ 7,758,729 | \$ 7,682,351 |

B. Use of Estimates in the Preparation of the Financial Statements
Company input

C. Accounting Policy
Company input

D. Going Concern
Company input

NOTE 2 Accounting Changes and Corrections of Errors
Company input

NOTE 3 Business Combinations and Goodwill

A. Statutory Purchase Method

The transaction was accounted for as a statutory purchase, and reflects the following:

| 1 | 2 | 3 | 4 | 5 |
|------------------|------------------|-------------------------|-----------------------------|--------------------------------------|
| Purchased Entity | Acquisition Date | Cost of Acquired Entity | Original Amount of Goodwill | Original Amount of Admitted Goodwill |
| | | | | |
| Total | XXX | \$ - | \$ - | \$ - |

| 1 | 6 | 7 | 8 | 9 |
|------------------|--|--|-------------------|--|
| Purchased Entity | Admitted Goodwill as of the Reporting Date | Amount of Goodwill Amortized During the Reporting Period | Book Value of SCA | Admitted Goodwill as a % of SCA BACV, Gross of Admitted Goodwill Col. 6/Col. 8 |
| | | | | |
| Total | \$ - | \$ - | \$ - | XXX |

B. Statutory Merger
Company input

C. Impairment Loss
Company input

D. Subcomponents and Calculation of Adjusted Surplus and Total Admitted Goodwill

| | |
|--|--|
| (1) Capital & Surplus | |
| Less: | |
| (2) Admitted Positive Goodwill | |
| (3) Admitted EDP Equipment & Operating System Software | |
| (4) Admitted Net Deferred Taxes | |
| (5) Adjusted Capital and Surplus (Line 1-2-3-4) | |
| (6) Limitation on amount of goodwill (adjusted capital and surplus times 10% goodwill limitation [Line 5*10%]) | |
| (7) Current period reported Admitted Goodwill | |
| (8) Current Period Admitted Goodwill as a % of prior period Adjusted Capital and Surplus (Line 7/Line 5) | |

| Calculation of Limitation Using Prior Quarter Numbers | Current Reporting Period |
|---|--------------------------|
| | XXX |
| | XXX |
| | XXX |
| | XXX |
| \$ - | XXX |
| \$ - | XXX |
| XXX | |
| XXX | |

NOTE 4 Discontinued Operations

NOTES TO FINANCIAL STATEMENTS

- A. Discontinued Operation Disposed of or Classified as Held for Sale
(1) List of Discontinued Operations Disposed of or Classified as Held for Sale

| Discontinued Operation Identifier | Description of Discontinued Operation |
|---|---------------------------------------|
|---|---------------------------------------|

- (2) Company input
- (3) Loss Recognized on Discontinued Operations

| Discontinued Operation Identifier | Amount for Reporting Period | Cumulative Amount Since Classified as Held for Sale |
|---|--------------------------------|--|
|---|--------------------------------|--|

- (4) Carrying Amount and Fair Value of Discontinued Operations and the Effect on Assets, Liabilities, Surplus and Income
a. Carrying Amount of Discontinued Operations

| Discontinued Operation Identifier | Carrying Amount Immediately Prior to Classification as Held for Sale | Current Fair Value Less Costs to Sell |
|---|---|---|
|---|---|---|

- b. Effect of Discontinued Operations on Assets, Liabilities, Surplus and Income

| | Discontinued Operation Identifier | Line Number | Line Description | Amount Attributable to Discontinued Operations |
|----------------|---|----------------|------------------|---|
| 1. Assets | | | | |
| 2. Liabilities | | | | |
| 3. Surplus | | | | |
| 4. Income | | | | |

- B. Change in Plan of Sale of Discontinued Operation
Company input
- C. Nature of Any Significant Continuing Involvement with Discontinued Operations After Disposal
Company input
- D. Equity Interest Retained in the Discontinued Operation After Disposal
Company input

NOTE 5 Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans
(1) Company input
- (2) Company input

- (3) Taxes, assessments and any amounts advanced and not included in the mortgage loan total
- (4) Age Analysis of Mortgage Loans and Identification of Mortgage Loans in Which the Insurer is a Participant or Co-lender in a Mortgage Loan Agreement:

| | Farm | Residential | | Commercial | | Mezzanine | Total |
|---|------|-------------|-----------|------------|-----------|-----------|-------|
| | | Insured | All Other | Insured | All Other | | |
| a. Current Year | | | | | | | |
| 1. Recorded Investment (All) | | | | | | | |
| (a) Current | | | | | | | \$ - |
| (b) 30 - 59 Days Past Due | | | | | | | \$ - |
| (c) 60 - 89 Days Past Due | | | | | | | \$ - |
| (d) 90 - 179 Days Past Due | | | | | | | \$ - |
| (e) 180+ Days Past Due | | | | | | | \$ - |
| 2. Accruing Interest 90 - 179 Days Past Due | | | | | | | |
| (a) Recorded Investment | | | | | | | \$ - |
| (b) Interest Accrued | | | | | | | \$ - |
| 3. Accruing Interest 180+ Days Past Due | | | | | | | |
| (a) Recorded Investment | | | | | | | \$ - |
| (b) Interest Accrued | | | | | | | \$ - |
| 4. Interest Reduced | | | | | | | |
| (a) Recorded Investment | | | | | | | \$ - |
| (b) Number of Loans | | | | | | | \$ - |
| (c) Percent Reduced | | | | | | | |

NOTES TO FINANCIAL STATEMENTS

| | | | | | | | |
|--|--|--|--|--|--|----|---|
| 5. Participant or Co-lender in a Mortgage Loan Agreement | | | | | | | |
| (a) Recorded Investment | | | | | | \$ | - |
| b. Prior Year | | | | | | | |
| 1. Recorded Investment (All) | | | | | | | |
| (a) Current | | | | | | \$ | - |
| (b) 30 - 59 Days Past Due | | | | | | \$ | - |
| (c) 60 - 89 Days Past Due | | | | | | \$ | - |
| (d) 90 - 179 Days Past Due | | | | | | \$ | - |
| (e) 180+ Days Past Due | | | | | | \$ | - |
| 2. Accruing Interest 90 - 179 Days Past Due | | | | | | | |
| (a) Recorded Investment | | | | | | \$ | - |
| (b) Interest Accrued | | | | | | \$ | - |
| 3. Accruing Interest 180+ Days Past Due | | | | | | | |
| (a) Recorded Investment | | | | | | \$ | - |
| (b) Interest Accrued | | | | | | \$ | - |
| 4. Interest Reduced | | | | | | | |
| (a) Recorded Investment | | | | | | \$ | - |
| (b) Number of Loans | | | | | | \$ | - |
| (c) Percent Reduced | | | | | | | |
| 5. Participant or Co-lender in a Mortgage Loan Agreement | | | | | | | |
| (a) Recorded Investment | | | | | | \$ | - |

(5) Investment in Impaired Loans With or Without Allowance for Credit Losses and Impaired Loans Subject to a Participant or Co-lender Mortgage Loan Agreement for Which the Reporting Entity is Restricted from Unilaterally Foreclosing on the Mortgage Loan Agreement:

| | Farm | Residential | | Commercial | | Mezzanine | Total |
|--|------|-------------|-----------|------------|-----------|-----------|-------|
| | | Insured | All Other | Insured | All Other | | |
| a. Current Year | | | | | | | |
| 1. With Allowance for Credit Losses | | | | | | | \$ - |
| 2. No Allowance for Credit Losses | | | | | | | \$ - |
| 3. Total (1 + 2) | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| 4. Subject to a participant or co-lender mortgage loan agreement for which the reporting entity is restricted from unilaterally foreclosing on the mortgage loan | | | | | | | \$ - |
| b. Prior Year | | | | | | | |
| 1. With Allowance for Credit Losses | | | | | | | \$ - |
| 2. No Allowance for Credit Losses | | | | | | | \$ - |
| 3. Total (1 + 2) | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| 4. Subject to a participant or co-lender mortgage loan agreement for which the reporting entity is restricted from unilaterally foreclosing on the mortgage loan | | | | | | | \$ - |

(6) Investment in Impaired Loans – Average Recorded Investment, Interest Income Recognized, Recorded Investment on Nonaccrual Status and Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting:

| | Farm | Residential | | Commercial | | Mezzanine | Total |
|---|------|-------------|-----------|------------|-----------|-----------|-------|
| | | Insured | All Other | Insured | All Other | | |
| a. Current Year | | | | | | | |
| 1. Average Recorded Investment | | | | | | | \$ - |
| 2. Interest Income Recognized | | | | | | | \$ - |
| 3. Recorded Investments on Nonaccrual Status | | | | | | | \$ - |
| 4. Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting | | | | | | | \$ - |
| b. Prior Year | | | | | | | |
| 1. Average Recorded Investment | | | | | | | \$ - |
| 2. Interest Income Recognized | | | | | | | \$ - |
| 3. Recorded Investments on Nonaccrual Status | | | | | | | \$ - |
| 4. Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting | | | | | | | \$ - |

(7) Allowance for credit losses:

| | Current Year | Prior Year |
|--|--------------|------------|
| a) Balance at beginning of period | | |
| b) Additions charged to operations | | |
| c) Direct write-downs charged against the allowances | | |
| d) Recoveries of amounts previously charged off | | |
| e) Balance at end of period (a+b-c-d) | \$ - | \$ - |

(8) Mortgage Loans Derecognized as a Result of Foreclosure:

| | Current Year |
|---|--------------|
| a) Aggregate amount of mortgage loans derecognized | |
| b) Real estate collateral recognized | |
| c) Other collateral recognized | |
| d) Receivables recognized from a government guarantee of the foreclosed mortgage loan | |

(9) Company input

B. Debt Restructuring

| | Current Year | Prior Year |
|---|--------------|------------|
| (1) The total recorded investment in restructured loans, as of year end | | |
| (2) The realized capital losses related to these loans | | |
| (3) Total contractual commitments to extend credit to debtors owning receivables whose terms have been modified in troubled debt restructurings | | |

NOTES TO FINANCIAL STATEMENTS

(4) Company input

- C. Reverse Mortgages
- (1) Company input

(2) Company input

(3) Reverse Mortgages: Enter the reserve amount that is netted against the asset

(4) Reverse Mortgages: Investment income or (loss) recognized in the period as a result of the re-estimated cash flows
- D. Asset-Backed Securities
- (1) Prepayment speed assumptions are updated monthly with data sourced from the Bloomberg data service.

- (2) OTTI recognized 1st Quarter
- a. Intent to sell

b. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis

c. Total 1st Quarter (a+b)
- OTTI recognized 2nd Quarter
- d. Intent to sell

e. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis

f. Total 2nd Quarter (d+e)
- OTTI recognized 3rd Quarter
- g. Intent to sell

h. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis

i. Total 3rd Quarter (g+h)
- OTTI recognized 4th Quarter
- j. Intent to sell

k. Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis

l. Total 4th Quarter (j+k)
- m. Annual Aggregate Total (c+f+i+l)

| 1 Amortized Cost Basis Before Other-than- Temporary Impairment | 2 Other-than- Temporary Impairment Recognized in Loss | 3 Fair Value 1 - 2 |
|---|--|------------------------------|
| \$ - | \$ - | \$ - |
| \$ - | \$ - | \$ - |
| \$ - | \$ - | \$ - |
| | | \$ - |
| | | \$ - |
| \$ - | \$ - | \$ - |
| | | \$ - |
| \$ - | \$ - | \$ - |
| | | \$ - |
| \$ - | \$ - | \$ - |
| | | \$ - |
| \$ - | \$ - | \$ - |
| | \$ - | |

(3)

| 1 | 2 | 3 | 4 | 5 | 6 | 7 |
|-------|--|---|--|--|-------------------------------|--|
| CUSIP | Book/Adjusted Carrying Value Amortized Cost Before Current Period OTTI | Present Value of Projected Cash Flows | Recognized Other-Than- Temporary Impairment | Amortized Cost After Other-Than- Temporary Impairment | Fair Value at time of OTTI | Date of Financial Statement Where Reported |
| | | | | | | |
| Total | XXX | XXX | \$ - | XXX | XXX | XXX |

All impaired Loaned Backed Securities for which an other-than-temporary impairment has not been recognized in earnings as a realized loss as of June 30,2025:

- a) The aggregate amount of unrealized losses:
1. Less than 12 Months

2. 12 Months or Longer
- b)The aggregate related fair value of securities with unrealized losses:
1. Less than 12 Months

2. 12 Months or Longer

(5) The Company reviews fixed income securities for impairment on a quarterly basis. Securities are reviewed for both quantitative and qualitative considerations including, but not limited to: (a) the extent of the decline in fair value below book value, (b) the duration of the decline, (c) significant adverse changes in the financial condition or near term prospects of the investment or issuer, (d) significant change in the business climate or credit ratings of the issuer, (e) general market conditions and volatility, (f) industry factors, and (g) the past impairment of the security holding or the issuer. If the Company believes a decline in the value of a particular investment is temporary, the decline is recorded as an unrealized loss in policyholders' equity. If the decline is believed to be "other-than-temporary," and the Company believes it will not be able to collect all cash flows due on its fixed income securities, then the carrying value of the investment is written down to the expected cash flow amount and a realized loss is recorded as a credit impairment.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

- (1) The company has not entered into any repurchase agreements during the year. Refer to Note 17B of the annual statement for the policy on requiring collateral for securities lending.
- (2) The Company has not pledged any of its assets as collateral as of June 30, 2025.
- (3) Collateral Received
- a. Aggregate Amount Collateral Received

| | Fair Value |
|-------------------------------------|------------|
| 1. Securities Lending | |
| (a) Open | \$ - |
| (b) 30 Days or Less | \$ - |
| (c) 31 to 60 Days | \$ - |
| (d) 61 to 90 Days | \$ - |
| (e) Greater Than 90 Days | \$ - |
| (f) Subtotal (a+b+c+d+e) | \$ - |
| (g) Securities Received | \$ - |
| (h) Total Collateral Received (f+g) | \$ - |
| 2. Dollar Repurchase Agreement | |
| (a) Open | \$ - |
| (b) 30 Days or Less | \$ - |

NOTES TO FINANCIAL STATEMENTS

| | | |
|--|----------------|------------|
| (c) 31 to 60 Days | \$ | - |
| (d) 61 to 90 Days | \$ | - |
| (e) Greater Than 90 Days | \$ | - |
| (f) Subtotal (a+b+c+d+e) | \$ | - |
| (g) Securities Received | \$ | - |
| (h) Total Collateral Received (f+g) | \$ | - |
| b. The fair value of that collateral and of the portion of that collateral that it has sold or repledged | \$ | - |
| c. Company input | | |
| (4) Company input | | |
| (5) Collateral Reinvestment | | |
| a. Aggregate Amount Collateral Reinvested | | |
| | Amortized Cost | Fair Value |
| 1. Securities Lending | | |
| (a) Open | \$ - | \$ - |
| (b) 30 Days or Less | \$ - | \$ - |
| (c) 31 to 60 Days | \$ - | \$ - |
| (d) 61 to 90 Days | \$ - | \$ - |
| (e) 91 to 120 Days | \$ - | \$ - |
| (f) 121 to 180 Days | \$ - | \$ - |
| (g) 181 to 365 Days | \$ - | \$ - |
| (h) 1 to 2 years | \$ - | \$ - |
| (i) 2 to 3 years | \$ - | \$ - |
| (j) Greater than 3 years | \$ - | \$ - |
| (k) Subtotal (Sum of a through j) | \$ - | \$ - |
| (l) Securities Received | \$ - | \$ - |
| (m) Total Collateral Reinvested (k+l) | \$ - | \$ - |
| 2. Dollar Repurchase Agreement | | |
| (a) Open | \$ - | \$ - |
| (b) 30 Days or Less | \$ - | \$ - |
| (c) 31 to 60 Days | \$ - | \$ - |
| (d) 61 to 90 Days | \$ - | \$ - |
| (e) 91 to 120 Days | \$ - | \$ - |
| (f) 121 to 180 Days | \$ - | \$ - |
| (g) 181 to 365 Days | \$ - | \$ - |
| (h) 1 to 2 years | \$ - | \$ - |
| (i) 2 to 3 years | \$ - | \$ - |
| (j) Greater than 3 years | \$ - | \$ - |
| (k) Subtotal (Sum of a through j) | \$ - | \$ - |
| (l) Securities Received | \$ - | \$ - |
| (m) Total Collateral Reinvested (k+l) | \$ - | \$ - |
| b. Company input | | |

(6) Company input

(7) Collateral for securities lending transactions that extend beyond one year from the reporting date.

| Description of Collateral | Amount |
|--|--------|
| | |
| Total Collateral Extending beyond one year of the reporting date | \$ - |

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

(1) Company input

REPURCHASE TRANSACTION – CASH TAKER – OVERVIEW OF SECURED BORROWING TRANSACTIONS

(2) Type of Repo Trades Used

- a. Bilateral (YES/NO)
b. Tri-Party (YES/NO)

| FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
|---------------|----------------|---------------|----------------|
| No | No | | |
| No | No | | |

(3) Original (Flow) & Residual Maturity

- a. Maximum Amount
1. Open – No Maturity
2. Overnight
3. 2 Days to 1 Week
4. > 1 Week to 1 Month
5. > 1 Month to 3 Months
6. > 3 Months to 1 Year
7. > 1 Year
- b. Ending Balance
1. Open – No Maturity
2. Overnight
3. 2 Days to 1 Week
4. > 1 Week to 1 Month
5. > 1 Month to 3 Months
6. > 3 Months to 1 Year
7. > 1 Year

| FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
|---------------|----------------|---------------|----------------|
| | | | |

(4) Company input

(5) Securities "Sold" Under Repo – Secured Borrowing

| FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
|---------------|----------------|---------------|----------------|
|---------------|----------------|---------------|----------------|

NOTES TO FINANCIAL STATEMENTS

| | | | | |
|---------------------------------|-----|-----|-----|--|
| a. Maximum Amount | | | | |
| 1. BACV | XXX | XXX | XXX | |
| 2. Nonadmitted - Subset of BACV | XXX | XXX | XXX | |
| 3. Fair Value | | | | |
| b. Ending Balance | | | | |
| 1. BACV | XXX | XXX | XXX | |
| 2. Nonadmitted - Subset of BACV | XXX | XXX | XXX | |
| 3. Fair Value | | | | |

(6) Securities Sold Under Repo – Secured Borrowing by NAIC Designation

| | | | | |
|---------------------------------|-----------|-------------|-------------|-------------|
| ENDING BALANCE | | | | |
| | 1 NONE | 2 NAIC 1 | 3 NAIC 2 | 4 NAIC 3 |
| a. ICO - BACV | | | | |
| b. ICO - FV | | | | |
| c. ABS - BACV | | | | |
| d. ABS - FV | | | | |
| e. Preferred Stock - BACV | | | | |
| f. Preferred Stock - FV | | | | |
| g. Common Stock | | | | |
| h. Mortgage Loans - BACV | | | | |
| i. Mortgage Loans - FV | | | | |
| j. Real Estate - BACV | | | | |
| k. Real Estate - FV | | | | |
| l. Derivatives - BACV | | | | |
| m. Derivatives - FV | | | | |
| n. Other Invested Assets - BACV | | | | |
| o. Other Invested Assets - FV | | | | |
| p. Total Assets - BACV | \$ - | \$ - | \$ - | \$ - |
| q. Total Assets - FV | \$ - | \$ - | \$ - | \$ - |

| | | | | |
|---------------------------------|-------------|-------------|-------------|-----------------------|
| ENDING BALANCE | | | | |
| | 5 NAIC 4 | 6 NAIC 5 | 7 NAIC 6 | 8 NON- ADMITTED |
| a. ICO - BACV | | | | |
| b. ICO - FV | | | | |
| c. ABS - BACV | | | | |
| d. ABS - FV | | | | |
| e. Preferred Stock - BACV | | | | |
| f. Preferred Stock - FV | | | | |
| g. Common Stock | | | | |
| h. Mortgage Loans - BACV | | | | |
| i. Mortgage Loans - FV | | | | |
| j. Real Estate - BACV | | | | |
| k. Real Estate - FV | | | | |
| l. Derivatives - BACV | | | | |
| m. Derivatives - FV | | | | |
| n. Other Invested Assets - BACV | | | | |
| o. Other Invested Assets - FV | | | | |
| p. Total Assets - BACV | \$ - | \$ - | \$ - | \$ - |
| q. Total Assets - FV | \$ - | \$ - | \$ - | \$ - |

(7) Collateral Received – Secured Borrowing

| | | | | |
|--------------------|------------------|-------------------|------------------|-------------------|
| | FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
| a. Maximum Amount | | | | |
| 1. Cash | | | | |
| 2. Securities (FV) | | | | |
| b. Ending Balance | | | | |
| 1. Cash | | | | |
| 2. Securities (FV) | | | | |

(8) Cash & Non-Cash Collateral Received – Secured Borrowing by NAIC Designation

| | | | | |
|--|-------------|-------------|-------------|---|
| ENDING BALANCE | | | | |
| | 1 NONE | 2 NAIC 1 | 3 NAIC 2 | 4 NAIC 3 |
| a. Cash | | | | |
| b. ICO - FV | | | | |
| c. ABS - FV | | | | |
| d. Preferred Stock - FV | | | | |
| e. Common Stock | | | | |
| f. Mortgage Loans - FV | | | | |
| g. Real Estate - FV | | | | |
| h. Derivatives - FV | | | | |
| i. Other Invested Assets - FV | | | | |
| j. Total Collateral Assets - FV (Sum of a through i) | \$ - | \$ - | \$ - | \$ - |
| ENDING BALANCE | | | | |
| | 5 NAIC 4 | 6 NAIC 5 | 7 NAIC 6 | 8 DOES NOT QUALIFY AS ADMITTED |
| a. Cash | | | | |
| b. ICO - FV | | | | |
| c. ABS - FV | | | | |
| d. Preferred Stock - FV | | | | |
| e. Common Stock | | | | |

NOTES TO FINANCIAL STATEMENTS

- f. Mortgage Loans - FV
- g. Real Estate - FV
- h. Derivatives - FV
- i. Other Invested Assets - FV
- j. Total Collateral Assets - FV (Sum of a through i)

| | | | |
|----|---|----|---|
| | | | |
| \$ | - | \$ | - |
| \$ | - | \$ | - |
| \$ | - | \$ | - |

(9) Allocation of Aggregate Collateral by Remaining Contractual Maturity

- a. Overnight and Continuous
- b. 30 Days or Less
- c. 31 to 90 Days
- d. > 90 Days

| FAIR VALUE |
|------------|
| |

(10) Allocation of Aggregate Collateral Reinvested by Remaining Contractual Maturity

- a. 30 Days or Less
- b. 31 to 60 Days
- c. 61 to 90 Days
- d. 91 to 120 Days
- e. 121 to 180 Days
- f. 181 to 365 Days
- g. 1 to 2 years
- h. 2 to 3 years
- i. > than 3 years

| AMORTIZED COST | FAIR VALUE |
|----------------|------------|
| | |

(11) Liability to Return Collateral – Secured Borrowing (Total)

- a. Maximum Amount
 - 1. Cash (Collateral – All)
 - 2. Securities Collateral (FV)
- b. Ending Balance
 - 1. Cash (Collateral – All)
 - 2. Securities Collateral (FV)

| FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
|---------------|----------------|---------------|----------------|
| | | | |

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

(1) Company input

REPURCHASE TRANSACTION – CASH PROVIDER – OVERVIEW OF SECURED BORROWING TRANSACTIONS

(2) Type of Repo Trades Used

- a. Bilateral (YES/NO)
- b. Tri-Party (YES/NO)

| FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
|---------------|----------------|---------------|----------------|
| No | No | | |
| No | No | | |

(3) Original (Flow) & Residual Maturity

- a. Maximum Amount
 - 1. Open – No Maturity
 - 2. Overnight
 - 3. 2 Days to 1 Week
 - 4. > 1 Week to 1 Month
 - 5. > 1 Month to 3 Months
 - 6. > 3 Months to 1 Year
 - 7. > 1 Year
- b. Ending Balance
 - 1. Open – No Maturity
 - 2. Overnight
 - 3. 2 Days to 1 Week
 - 4. > 1 Week to 1 Month
 - 5. > 1 Month to 3 Months
 - 6. > 3 Months to 1 Year
 - 7. > 1 Year

| FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
|---------------|----------------|---------------|----------------|
| | | | |

(4) Company input

(5) Fair Value of Securities Acquired Under Repo – Secured Borrowing

- a. Maximum Amount
- b. Ending Balance

| FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
|---------------|----------------|---------------|----------------|
| | | | |

(6) Securities Acquired Under Repo – Secured Borrowing by NAIC Designation

ENDING BALANCE

- a. ICO - FV
- b. ABS - FV
- c. Preferred Stock - FV
- d. Common Stock
- e. Mortgage Loans - FV
- f. Real Estate - FV
- g. Derivatives - FV

| 1 NONE | 2 NAIC 1 | 3 NAIC 2 | 4 NAIC 3 |
|-----------|-------------|-------------|-------------|
| | | | |

NOTES TO FINANCIAL STATEMENTS

| | | | | |
|---|------|------|------|------|
| h. Other Invested Assets - FV | | | | |
| i. Total Assets - FV (Sum of a through h) | \$ - | \$ - | \$ - | \$ - |

ENDING BALANCE

| | | | | |
|---|--------|--------|--------|------------------------------|
| | 5 | 6 | 7 | 8 |
| | NAIC 4 | NAIC 5 | NAIC 6 | DOES NOT QUALIFY AS ADMITTED |
| a. ICO - FV | | | | |
| b. ABS - FV | | | | |
| c. Preferred Stock - FV | | | | |
| d. Common Stock | | | | |
| e. Mortgage Loans - FV | | | | |
| f. Real Estate - FV | | | | |
| g. Derivatives - FV | | | | |
| h. Other Invested Assets - FV | | | | |
| i. Total Assets - FV (Sum of a through h) | \$ - | \$ - | \$ - | \$ - |

(7) Collateral Provided – Secured Borrowing

| | | | | |
|------------------------------|---------------|----------------|---------------|----------------|
| | FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
| a. Maximum Amount | | | | |
| 1. Cash | | | | |
| 2. Securities (FV) | | | | |
| 3. Securities (BACV) | XXX | XXX | XXX | XXX |
| 4. Nonadmitted Subset (BACV) | XXX | XXX | XXX | XXX |
| b. Ending Balance | | | | |
| 1. Cash | | | | |
| 2. Securities (FV) | | | | |
| 3. Securities (BACV) | | | | |
| 4. Nonadmitted Subset (BACV) | | | | |

(8) Allocation of Aggregate Collateral Pledged by Remaining Contractual Maturity

| | | |
|-----------------------------|----------------|------------|
| | AMORTIZED COST | FAIR VALUE |
| a. Overnight and Continuous | | |
| b. 30 Days or Less | | |
| c. 31 to 90 Days | | |
| d. > 90 Days | | |

(9) Recognized Receivable for Return of Collateral – Secured Borrowing

| | | | | |
|--------------------|---------------|----------------|---------------|----------------|
| | FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
| a. Maximum Amount | | | | |
| 1. Cash | | | | |
| 2. Securities (FV) | | | | |
| b. Ending Balance | | | | |
| 1. Cash | | | | |
| 2. Securities (FV) | | | | |

(10) Recognized Liability to Return Collateral – Secured Borrowing (Total)

| | | | | |
|--|---------------|----------------|---------------|----------------|
| | FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
| a. Maximum Amount | | | | |
| 1. Repo Securities Sold/Acquired with Cash Collateral | | | | |
| 2. Repo Securities Sold/Acquired with Securities Collateral (FV) | | | | |
| b. Ending Balance | | | | |
| 1. Repo Securities Sold/Acquired with Cash Collateral | | | | |
| 2. Repo Securities Sold/Acquired with Securities Collateral (FV) | | | | |

H. Repurchase Agreements Transactions Accounted for as a Sale

(1) Company input

REPURCHASE TRANSACTION – CASH TAKER – OVERVIEW OF SALE TRANSACTIONS

(2) Type of Repo Trades Used

| | | | | |
|-----------------------|---------------|----------------|---------------|----------------|
| | FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
| a. Bilateral (YES/NO) | No | No | | |
| b. Tri-Party (YES/NO) | No | No | | |

(3) Original (Flow) & Residual Maturity

| | | | | |
|--------------------------|---------------|----------------|---------------|----------------|
| | FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
| a. Maximum Amount | | | | |
| 1. Open – No Maturity | | | | |
| 2. Overnight | | | | |
| 3. 2 Days to 1 Week | | | | |
| 4. > 1 Week to 1 Month | | | | |
| 5. > 1 Month to 3 Months | | | | |
| 6. > 3 Months to 1 Year | | | | |
| 7. > 1 Year | | | | |
| b. Ending Balance | | | | |
| 1. Open – No Maturity | | | | |
| 2. Overnight | | | | |

NOTES TO FINANCIAL STATEMENTS

(5) Securities "Sold" Under Repo – Sale

| FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
|------------------|-------------------|------------------|-------------------|
| XXX XXX | XXX XXX | XXX XXX | |
| XXX XXX | XXX XXX | XXX XXX | |

ENDING BALANCE

| 1 NONE | 2 NAIC 1 | 3 NAIC 2 | 4 NAIC 3 |
|-----------|-------------|-------------|-------------|
| | | | |

ENDING BALANCE

| 5 NAIC 4 | 6 NAIC 5 | 7 NAIC 6 | 8 NON- ADMITTED |
|-------------|-------------|-------------|-----------------------|
| \$ - | \$ - | \$ - | \$ - |

| FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
|------------------|-------------------|------------------|-------------------|
| | | | |

ENDING BALANCE

| 1 NONE | 2 NAIC 1 | 3 NAIC 2 | 4 NAIC 3 |
|-----------|-------------|-------------|-------------|
| | | | |

NOTES TO FINANCIAL STATEMENTS

| | | | | | | | | |
|--|----|---|----|---|----|---|----|---|
| i. Total Collateral Assets - FV (Sum of a through h) | \$ | - | \$ | - | \$ | - | \$ | - |
|--|----|---|----|---|----|---|----|---|

ENDING BALANCE

- a. ICO - FV
- b. ABS - FV
- c. Preferred Stock - FV
- d. Common Stock
- e. Mortgage Loans - FV
- f. Real Estate - FV
- g. Derivatives - FV
- h. Other Invested Assets - FV
- i. Total Collateral Assets - FV (Sum of a through h)

| 5 NAIC 4 | 6 NAIC 5 | 7 NAIC 6 | 8 NON- ADMITTED |
|-------------|-------------|-------------|-----------------------|
| | | | |
| \$ | \$ | \$ | \$ |
| - | - | - | - |

(9) Recognized Forward Resale Commitment

- a. Maximum Amount
- b. Ending Balance

| FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
|------------------|-------------------|------------------|-------------------|
| | | | |

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

(1) Company input

REPURCHASE TRANSACTION – CASH PROVIDER – OVERVIEW OF SALE TRANSACTIONS

(2) Type of Repo Trades Used

- a. Bilateral (YES/NO)
- b. Tri-Party (YES/NO)

| FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
|------------------|-------------------|------------------|-------------------|
| No | No | | |
| No | No | | |

(3) Original (Flow) & Residual Maturity

- a. Maximum Amount
1. Open – No Maturity
2. Overnight
3. 2 Days to 1 Week
4. > 1 Week to 1 Month
5. > 1 Month to 3 Months
6. > 3 Months to 1 Year
7. > 1 Year
- b. Ending Balance
1. Open – No Maturity
2. Overnight
3. 2 Days to 1 Week
4. > 1 Week to 1 Month
5. > 1 Month to 3 Months
6. > 3 Months to 1 Year
7. > 1 Year

| FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
|------------------|-------------------|------------------|-------------------|
| | | | |

(4) Company input

(5) Securities Acquired Under Repo – Sale

- a. Maximum Amount
1. BACV
2. Nonadmitted - Subset of BACV
3. Fair Value
- b. Ending Balance
1. BACV
2. Nonadmitted - Subset of BACV
3. Fair Value

| FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
|------------------|-------------------|------------------|-------------------|
| XXX XXX | XXX XXX | XXX XXX | |
| XXX XXX | XXX XXX | XXX XXX | |

(6) Securities Acquired Under Repo – Sale by NAIC Designation

ENDING BALANCE

- a. ICO - BACV
- b. ICO - FV
- c. ABS - BACV
- d. ABS - FV
- e. Preferred Stock - BACV
- f. Preferred Stock - FV
- g. Common Stock
- h. Mortgage Loans - BACV
- i. Mortgage Loans - FV
- j. Real Estate - BACV
- k. Real Estate - FV
- l. Derivatives - BACV
- m. Derivatives - FV
- n. Other Invested Assets - BACV
- o. Other Invested Assets - FV
- p. Total Assets - BACV
- q. Total Assets - FV

| 1 NONE | 2 NAIC 1 | 3 NAIC 2 | 4 NAIC 3 |
|-----------|-------------|-------------|-------------|
| | | | |
| \$ | \$ | \$ | \$ |
| - | - | - | - |
| \$ | \$ | \$ | \$ |
| - | - | - | - |

| 5 NAIC 4 | 6 NAIC 5 | 7 NAIC 6 | 8 NON- ADMITTED |
|-------------|-------------|-------------|-----------------------|
| | | | |

| FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
|------------------|-------------------|------------------|-------------------|
| XXX XXX | XXX XXX | XXX XXX | XXX XXX |

| FIRST QUARTER | SECOND QUARTER | THIRD QUARTER | FOURTH QUARTER |
|------------------|-------------------|------------------|-------------------|
| | | | |

| Restricted Asset Category | Gross (Admitted & Nonadmitted) Restricted | | | | | | |
|---|---|--|--|---|------------------|-----------------------|----------------------------------|
| | Current Year | | | | | 6 | 7 |
| | 1 | 2 | 3 | 4 | 5 | | |
| | Total General Account (G/A) | G/A Supporting Protected Cell Account Activity (a) | Total Protected Cell Account Restricted Assets | Protected Cell Account Assets Supporting G/A Activity (b) | Total (1 plus 3) | Total From Prior Year | Increase/ (Decrease) (5 minus 6) |
| a. Subject to contractual obligation for which liability is not shown | | | | | \$ - | | \$ - |
| b. Collateral held under security lending agreements | | | | | \$ - | | \$ - |
| c. Subject to repurchase agreements | | | | | \$ - | | \$ - |
| d. Subject to reverse repurchase agreements | | | | | \$ - | | \$ - |
| e. Subject to dollar repurchase agreements | | | | | \$ - | | \$ - |

NOTES TO FINANCIAL STATEMENTS

| | | | | | | | | | | |
|--|----|---|----|---|----|---|----|----|----|---|
| f. Subject to dollar reverse repurchase agreements | | | | | \$ | - | | \$ | - | |
| g. Placed under option contracts | | | | | \$ | - | | \$ | - | |
| h. Letter stock or securities restricted as to sale - excluding FHLB capital stock | | | | | \$ | - | | \$ | - | |
| i. FHLB capital stock | | | | | \$ | - | | \$ | - | |
| j. On deposit with states | | | | | \$ | - | | \$ | - | |
| k. On deposit with other regulatory bodies | | | | | \$ | - | | \$ | - | |
| l. Pledged collateral to FHLB (including assets backing funding agreements) | | | | | \$ | - | | \$ | - | |
| m. Pledged as collateral not captured in other categories | | | | | \$ | - | | \$ | - | |
| n. Other restricted assets | | | | | \$ | - | | \$ | - | |
| o. Total Restricted Assets (Sum of a through n) | \$ | - | \$ | - | \$ | - | \$ | - | \$ | - |

- (a) Subset of Column 1
(b) Subset of Column 3

| Restricted Asset Category | Current Year | | | |
|--|-------------------------------|---------------------------------------|--|--|
| | 8 | 9 | Percentage | |
| | | | 10 | 11 |
| | Total Non-admitted Restricted | Total Admitted Restricted (5 minus 8) | Gross (Admitted & Non-admitted) Restricted to Total Assets (c) | Admitted Restricted to Total Admitted Assets (d) |
| a. Subject to contractual obligation for which liability is not shown | | \$ - | 0.000% | 0.000% |
| b. Collateral held under security lending agreements | | \$ - | 0.000% | 0.000% |
| c. Subject to repurchase agreements | | \$ - | 0.000% | 0.000% |
| d. Subject to reverse repurchase agreements | | \$ - | 0.000% | 0.000% |
| e. Subject to dollar repurchase agreements | | \$ - | 0.000% | 0.000% |
| f. Subject to dollar reverse repurchase agreements | | \$ - | 0.000% | 0.000% |
| g. Placed under option contracts | | \$ - | 0.000% | 0.000% |
| h. Letter stock or securities restricted as to sale - excluding FHLB capital stock | | \$ - | 0.000% | 0.000% |
| i. FHLB capital stock | | \$ - | 0.000% | 0.000% |
| j. On deposit with states | | \$ - | 0.000% | 0.000% |
| k. On deposit with other regulatory bodies | | \$ - | 0.000% | 0.000% |
| l. Pledged collateral to FHLB (including assets backing funding agreements) | | \$ - | 0.000% | 0.000% |
| m. Pledged as collateral not captured in other categories | | \$ - | 0.000% | 0.000% |
| n. Other restricted assets | | \$ - | 0.000% | 0.000% |
| o. Total Restricted Assets (Sum of a through n) | \$ - | \$ - | 0.000% | 0.000% |

- (c) Column 5 divided by Asset Page, Column 1, Line 28
(d) Column 9 divided by Asset Page, Column 3, Line 28

2. Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

| | Gross (Admitted & Nonadmitted) Restricted | | | | | | | 8 | Percentage | |
|-----------------------|---|--|--|---|------------------|-----------------------|----------------------------------|--|---|--|
| | Current Year | | | | | 6 | 7 | | 9 | 10 |
| | 1 | 2 | 3 | 4 | 5 | | | | | |
| Description of Assets | Total General Account (G/A) | G/A Supporting Protected Cell Account Activity (a) | Total Protected Cell Account (S/A) Restricted Assets | Protected Cell Account Assets Supporting G/A Activity (b) | Total (1 plus 3) | Total From Prior Year | Increase/ (Decrease) (5 minus 6) | Total Current Year Admitted Restricted | Gross (Admitted & Nonadmitted) Restricted to Total Assets | Admitted Restricted to Total Admitted Assets |
| | | | | | | | | | | |
| Total (c) | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | 0.000% | 0.000% |

- (a) Subset of column 1
(b) Subset of column 3
(c) Total Line for Columns 1 through 7 should equal 5L(1)m Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5L(1)m Columns 9 through 11 respectively.

3. Detail of Other Restricted Assets (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

| | Gross (Admitted & Nonadmitted) Restricted | | | | | | | 8 | Percentage | |
|-----------------------|---|--|--|---|------------------|-----------------------|----------------------------------|--|---|--|
| | Current Year | | | | | 6 | 7 | | 9 | 10 |
| | 1 | 2 | 3 | 4 | 5 | | | | | |
| Description of Assets | Total General Account (G/A) | G/A Supporting Protected Cell Account Activity (a) | Total Protected Cell Account (S/A) Restricted Assets | Protected Cell Account Assets Supporting G/A Activity (b) | Total (1 plus 3) | Total From Prior Year | Increase/ (Decrease) (5 minus 6) | Total Current Year Admitted Restricted | Gross (Admitted & Nonadmitted) Restricted to Total Assets | Admitted Restricted to Total Admitted Assets |
| | | | | | | | | | | |
| Total (c) | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | 0.000% | 0.000% |

- (a) Subset of column 1
(b) Subset of column 3
(c) Total Line for Columns 1 through 7 should equal 5L(1)n Columns 1 through 7 respectively and Total Line for Columns 8 through 10 should equal 5L(1)n Columns 9 through 11 respectively.

4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements

NOTES TO FINANCIAL STATEMENTS

| | 1 | 2 | 3 | 4 |
|--|---|------------|--|--|
| Collateral Assets | Book/Adjusted Carrying Value (BACV) | Fair Value | % of BACV to Total Assets (Admitted and Nonadmitted)* | % of BACV to Total Admitted Assets ** |
| General Account: | | | | |
| a. Cash, Cash Equivalents and Short-Term Investments | | | 0.000% | 0.000% |
| b. Schedule D, Part 1, Section 1 | | | 0.000% | 0.000% |
| c. Schedule D, Part 1, Section 2 | | | 0.000% | 0.000% |
| d. Schedule D, Part 2, Section 1 | | | 0.000% | 0.000% |
| e. Schedule D, Part 2, Section 2 | | | 0.000% | 0.000% |
| f. Schedule B | | | 0.000% | 0.000% |
| g. Schedule A | | | 0.000% | 0.000% |
| h. Schedule BA, Part 1 | | | 0.000% | 0.000% |
| i. Schedule DL, Part 1 | | | 0.000% | 0.000% |
| j. Other | | | 0.000% | 0.000% |
| k. Total Collateral Assets (a+b+c+d+e+f+g+h+i+j) | \$ - | \$ - | 0.000% | 0.000% |
| Protected Cell: | | | | |
| l. Cash, Cash Equivalents and Short-Term Investments | | | 0.000% | 0.000% |
| m. Schedule D, Part 1, Section 1 | | | 0.000% | 0.000% |
| n. Schedule D, Part 1, Section 2 | | | 0.000% | 0.000% |
| o. Schedule D, Part 2, Section 1 | | | 0.000% | 0.000% |
| p. Schedule D, Part 2, Section 2 | | | 0.000% | 0.000% |
| q. Schedule B | | | 0.000% | 0.000% |
| r. Schedule A | | | 0.000% | 0.000% |
| s. Schedule BA, Part 1 | | | 0.000% | 0.000% |
| t. Schedule DL, Part 1 | | | 0.000% | 0.000% |
| u. Other | | | 0.000% | 0.000% |
| v. Total Collateral Assets (l+m+n+o+p+q+r+s+t+u) | \$ - | \$ - | 0.000% | 0.000% |

* k = Column 1 divided by Asset Page, Line 26 (Column 1)
v = Column 1 divided by Asset Page, Line 27 (Column 1)
** k = Column 1 divided by Asset Page, Line 26 (Column 3)
v = Column 1 divided by Asset Page, Line 27 (Column 3)

| | 1 | 2 |
|--|--------|--|
| | Amount | % of Liability to Total Liabilities * |
| w. Recognized Obligation to Return Collateral Asset (General Account) | | 0.000% |
| x. Recognized Obligation to Return Collateral Asset (Separate Account) | | 0.000% |
| * w = Column 1 divided by Liability Page, Line 26 (Column 1) | | |
| x = Column 1 divided by Liability Page, Line 27 (Column 1) | | |

M. Working Capital Finance Investments

1. Aggregate Working Capital Finance Investments (WCFI) Book/Adjusted Carrying Value by NAIC Designation:

| | Gross Asset CY | Non-admitted Asset CY | Net Admitted Asset CY |
|------------------------|----------------|--------------------------|--------------------------|
| a. WCFI Designation 1 | | | \$ - |
| b. WCFI Designation 2 | | | \$ - |
| c. WCFI Designation 3 | | | \$ - |
| d. WCFI Designation 4 | | | \$ - |
| e. WCFI Designation 5 | | | \$ - |
| f. WCFI Designation 6 | | | \$ - |
| g. Total (a+b+c+d+e+f) | \$ - | \$ - | \$ - |

2. Aggregate Maturity Distribution on the Underlying Working Capital Finance Programs

| | Book/Adjusted Carrying Value |
|--------------------|---------------------------------|
| a. Up to 180 Days | |
| b. 181 to 365 Days | |
| c. Total (a+b) | \$ - |

3. Company input

N. Offsetting and Netting of Assets and Liabilities

| | Gross Amount Recognized | Amount Offset* | Net Amount Presented on Financial Statements |
|------------|----------------------------|----------------|---|
| (1) Assets | | | |

* For derivative assets and derivative liabilities, the amount offset shall agree to Schedule DB, Part D, Section 1

| | Gross Amount Recognized | Amount Offset* | Net Amount Presented on Financial Statements |
|-----------------|----------------------------|----------------|---|
| (2) Liabilities | | | |

* For derivative assets and derivative liabilities, the amount offset shall agree to Schedule DB, Part D, Section 1

O. 5GI Securities

Not Applicable

P. Short Sales

(1) Unsettled Short Sale Transactions (Outstanding as of Reporting Date)

NOTES TO FINANCIAL STATEMENTS

| | Proceeds Received | Current Fair Value of Securities Sold Short | Unrealized Gain or (Loss) | Expected Settlement (# of Days) | Fair Value of Short Sales Exceeding (or expected to exceed) 3 Settlement Days | Fair Value of Short Sales Expected to be Settled by Secured Borrowing |
|---------------------|----------------------|--|------------------------------|---------------------------------------|---|--|
| a. ICO | | | | | | |
| b. ABS | | | | | | |
| c. Preferred Stock | | | | | | |
| d. Common Stock | | | | | | |
| e. Totals (a+b+c+d) | \$ - | \$ - | \$ - | XXX | \$ - | \$ - |

(2) Settled Short Sale Transactions

| | Proceeds Received | Current Fair Value of Securities Sold Short | Realized Gain or (Loss) on Transaction | Fair Value of Short Sales that Exceeded 3 Settlement Days | Fair Value of Short Sales Settled by Secured Borrowing |
|---------------------|----------------------|--|--|---|--|
| a. ICO | | | | | |
| b. ABS | | | | | |
| c. Preferred Stock | | | | | |
| d. Common Stock | | | | | |
| e. Totals (a+b+c+d) | \$ - | \$ - | \$ - | \$ - | \$ - |

Q. Prepayment Penalty and Acceleration Fees

Not Applicable

R. Reporting Entity's Share of Cash Pool by Asset Type

S. Aggregate Collateral Loans by Qualifying Investment Collateral

Not Applicable

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

A. Company input

B. Company input

NOTE 7 Investment Income

No Change

NOTE 8 Derivative Instruments

The Company's investment activities do not include derivatives. However, the Company may acquire derivatives as additions to bond, common stock, or preferred stock investments. These derivatives are ancillary to the overall investment and are immaterial to the underlying investment portfolio.

NOTE 9 Income Taxes

No change

NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

No change

NOTE 11 Debt

A. Debt (Including Capital Notes)

The Company has no debt, including capital notes.

B. FHLB (Federal Home Loan Bank) Agreements

Not Applicable.

C. There were no outstanding borrowings as of June 30, 2025.

NOTE 12 Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan
Company input

(1) Change in benefit obligation

NOTES TO FINANCIAL STATEMENTS

| | | | | | | | | | | | |
|--|--|--|--|------------------|------|-------------------------|------|---|------|------|------|
| a. Pension Benefits | | | | | | | | | | | |
| | | | | Overfunded | | | | Underfunded | | | |
| | | | | 2025 | 2024 | 2025 | 2024 | 2025 | 2024 | 2025 | 2024 |
| 1. Benefit obligation at beginning of year | | | | \$ | - | | | \$ | - | | |
| 2. Service cost | | | | | | | | | | | |
| 3. Interest cost | | | | | | | | | | | |
| 4. Contribution by plan participants | | | | | | | | | | | |
| 5. Actuarial gain/loss | | | | | | | | | | | |
| 6. Foreign currency exchange rate changes | | | | | | | | | | | |
| 7. Benefits paid | | | | | | | | | | | |
| 8. Plan amendments | | | | | | | | | | | |
| 9. Business combinations, divestitures, curtailments, settlements and special termination benefits | | | | | | | | | | | |
| 10. Benefit obligation at end of year | | | | \$ | - | \$ | - | \$ | - | \$ | - |
| b. Postretirement Benefits | | | | | | | | | | | |
| | | | | Overfunded | | | | Underfunded | | | |
| | | | | 2025 | 2024 | 2025 | 2024 | 2025 | 2024 | 2025 | 2024 |
| 1. Benefit obligation at beginning of year | | | | \$ | - | | | \$ | - | | |
| 2. Service cost | | | | | | | | | | | |
| 3. Interest cost | | | | | | | | | | | |
| 4. Contribution by plan participants | | | | | | | | | | | |
| 5. Actuarial gain/loss | | | | | | | | | | | |
| 6. Foreign currency exchange rate changes | | | | | | | | | | | |
| 7. Benefits paid | | | | | | | | | | | |
| 8. Plan amendments | | | | | | | | | | | |
| 9. Business combinations, divestitures, curtailments, settlements and special termination benefits | | | | | | | | | | | |
| 10. Benefit obligation at end of year | | | | \$ | - | \$ | - | \$ | - | \$ | - |
| c. Special or Contractual Benefits Per SSAP No. 11 | | | | | | | | | | | |
| | | | | Overfunded | | | | Underfunded | | | |
| | | | | 2025 | 2024 | 2025 | 2024 | 2025 | 2024 | 2025 | 2024 |
| 1. Benefit obligation at beginning of year | | | | \$ | - | | | \$ | - | | |
| 2. Service cost | | | | | | | | | | | |
| 3. Interest cost | | | | | | | | | | | |
| 4. Contribution by plan participants | | | | | | | | | | | |
| 5. Actuarial gain/loss | | | | | | | | | | | |
| 6. Foreign currency exchange rate changes | | | | | | | | | | | |
| 7. Benefits paid | | | | | | | | | | | |
| 8. Plan amendments | | | | | | | | | | | |
| 9. Business combinations, divestitures, curtailments, settlements and special termination benefits | | | | | | | | | | | |
| 10. Benefit obligation at end of year | | | | \$ | - | \$ | - | \$ | - | \$ | - |
| (2) Change in plan assets | | | | | | | | | | | |
| | | | | Pension Benefits | | Postretirement Benefits | | Special or Contractual Benefits Per SSAP No. 11 | | | |
| | | | | 2025 | 2024 | 2025 | 2024 | 2025 | 2024 | 2025 | 2024 |
| a. Fair value of plan assets at beginning of year | | | | \$ | - | \$ | - | \$ | - | | |
| b. Actual return on plan assets | | | | | | | | | | | |
| c. Foreign currency exchange rate changes | | | | | | | | | | | |
| d. Reporting entity contribution | | | | | | | | | | | |
| e. Plan participants' contributions | | | | | | | | | | | |
| f. Benefits paid | | | | | | | | | | | |
| g. Business combinations, divestitures and settlements | | | | | | | | | | | |
| h. Fair value of plan assets at end of year | | | | \$ | - | \$ | - | \$ | - | \$ | - |
| (3) Funded status | | | | | | | | | | | |
| | | | | Pension Benefits | | Postretirement Benefits | | | | | |
| | | | | 2025 | 2024 | 2025 | 2024 | 2025 | 2024 | 2025 | 2024 |
| a. Components: | | | | | | | | | | | |
| 1. Prepaid benefit costs | | | | | | | | | | | |
| 2. Overfunded plan assets | | | | | | | | | | | |
| 3. Accrued benefit costs | | | | | | | | | | | |
| 4. Liability for pension benefits | | | | | | | | | | | |
| b. Assets and liabilities recognized: | | | | | | | | | | | |
| 1. Assets (nonadmitted) | | | | | | | | | | | |
| 2. Liabilities recognized | | | | | | | | | | | |
| c. Unrecognized liabilities | | | | | | | | | | | |
| (4) Components of net periodic benefit cost | | | | | | | | | | | |
| | | | | Pension Benefits | | Postretirement Benefits | | Special or Contractual Benefits Per SSAP No. 11 | | | |
| | | | | 2025 | 2024 | 2025 | 2024 | 2025 | 2024 | 2025 | 2024 |
| a. Service cost | | | | | | | | | | | |
| b. Interest cost | | | | | | | | | | | |
| c. Expected return on plan assets | | | | | | | | | | | |
| d. Transition asset or obligation | | | | | | | | | | | |
| e. Gains and losses | | | | | | | | | | | |
| f. Prior service cost or credit | | | | | | | | | | | |
| g. Gain or loss recognized due to a settlement or curtailment | | | | | | | | | | | |
| h. Total net periodic benefit cost | | | | \$ | - | \$ | - | \$ | - | \$ | - |

NOTES TO FINANCIAL STATEMENTS

| | | | | |
|---|------------------|------|-------------------------|------|
| (5) Amounts in unassigned funds (surplus) recognized as components of net periodic benefit cost | Pension Benefits | | Postretirement Benefits | |
| | 2025 | 2024 | 2025 | 2024 |
| a. Items not yet recognized as a component of net periodic cost - prior year | \$ | - | \$ | - |
| b. Net transition asset or obligation recognized | | | | |
| c. Net prior service cost or credit arising during the period | | | | |
| d. Net prior service cost or credit recognized | | | | |
| e. Net gain and loss arising during the period | | | | |
| f. Net gain and loss recognized | | | | |
| g. Items not yet recognized as a component of net periodic cost - current year | \$ | - | \$ | - |

| | | | | |
|--|------------------|------|-------------------------|------|
| (6) Amounts in unassigned funds (surplus) that have not yet been recognized as components of net periodic benefit cost | Pension Benefits | | Postretirement Benefits | |
| | 2025 | 2024 | 2025 | 2024 |
| a. Net transition asset or obligation | | | | |
| b. Net prior service cost or credit | | | | |
| c. Net recognized gains and losses | | | | |

| | | |
|---|------|------|
| (7) Weighted-average assumptions used to determine net periodic benefit cost as of the end of current period: | 2025 | 2024 |
| | | |
| a. Weighted average discount rate | | |
| b. Expected long-term rate of return on plan assets | | |
| c. Rate of compensation increase | | |
| d. Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates) | | |
| Weighted average assumptions used to determine projected benefit obligations as of end of current period: | | |
| | 2025 | 2024 |
| | | |
| e. Weighted average discount rate | | |
| f. Rate of compensation increase | | |
| g. Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates) | | |

(8) Company input

(9) Company input

| | | |
|--|--|--------|
| (10) The following estimated future payments, which reflect expected future service, as appropriate, are expected to be paid in the years indicated: | | Amount |
| a. 2026 | | |
| b. 2027 | | |
| c. 2028 | | |
| d. 2029 | | |
| e. 2030 | | |
| f. 2031 through 20xx | | |

(11) Company input

(12) Company input

(13) Company input

(14) Company input

(15) Company input

(16) Company input

(17) Company input

B. Company input

C. The fair value of each class of plan assets

| | | | | |
|--|-----------|-----------|-----------|-------|
| (1) Fair Value Measurements of Plan Assets at Reporting Date | | | | |
| Description for each class of plan assets | (Level 1) | (Level 2) | (Level 3) | Total |
| | | | | |
| Total Plan Assets | \$ - | \$ - | \$ - | \$ - |

(2) Company input

D. Company input

E. Defined Contribution Plan
Company input

F. Multiemployer Plans
Company input

G. Consolidated/Holding Company Plans
Company input

H. Postemployment Benefits and Compensated Absences
Company input

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)
Company input

NOTE 13 Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

No Change

NOTES TO FINANCIAL STATEMENTS

NOTE 14 Liabilities, Contingencies and Assessments

A. Contingent Commitments
Company input

(1) Total contingent liabilities:

(2)

| (1) | (2) | (3) | (4) | (5) |
|--|---|---|--|---|
| | Liability recognition of guarantee. (Include amount recognized at inception. If no initial recognition, document exception allowed under SSAP No. 5.) | | Maximum potential amount of future payments (undiscounted) the guarantor could be required to make under the guarantee. If unable to develop an estimate, this should be specifically noted. | |
| Nature and circumstances of guarantee and key attributes, including date and duration of agreement | | Ultimate financial statement impact if action under the guarantee is required | | Current status of payment or performance risk of guarantee. Also provide additional discussion as warranted |
| | | | | |
| Total | \$ - | XXX | \$ - | XXX |

(3)

| | Amount |
|--|--------|
| a. Aggregate Maximum Potential of Future Payments of All Guarantees (undiscounted) the guarantor could be required to make under guarantees. (Should equal total of Column 4 for (2) above.) | \$ - |
| b. Current Liability Recognized in F/S: | |
| 1. Noncontingent Liabilities | |
| 2. Contingent Liabilities | |
| c. Ultimate Financial Statement Impact if action under the guarantee is required: | |
| 1. Investments in SCA | |
| 2. Joint Venture | |
| 3. Dividends to Stockholders (capital contribution) | |
| 4. Expense | |
| 5. Other | |
| 6. Total (1+2+3+4+5) (Should equal (3)a.) | \$ - |

B. Assessments

(1)
Company input

(2) a. Assets recognized from paid and accrued premium tax offsets and policy surcharges prior year-end

b. Decreases current period:

c. Increases current period:

d. Assets recognized from paid and accrued premium tax offsets and policy surcharges current year-end \$ -

(3)

a. Discount Rate Applied

b. The Undiscounted and Discounted Amount of the Guaranty Fund Assessments and Related Assets by Insolvency

| Name of the Insolvency | Guaranty Fund Assessment | | Related Assets | |
|------------------------|--------------------------|------------|----------------|------------|
| | Undiscounted | Discounted | Undiscounted | Discounted |
| | | | | |

c. Number of Jurisdictions, Ranges of Years Used to Discount and Weighted Average Number of Years of the Discounting Time Period for Payables and Recoverables by Insolvency

| Name of the Insolvency | Payables | | | Recoverables | | |
|------------------------|-------------------------|----------------|----------------------------------|-------------------------|----------------|----------------------------------|
| | Number of Jurisdictions | Range of Years | Weighted Average Number of Years | Number of Jurisdictions | Range of Years | Weighted Average Number of Years |
| | | | | | | |

C. Gain Contingencies
Company input

D. Claims related extra contractual obligations and bad faith losses stemming from lawsuits

NOTES TO FINANCIAL STATEMENTS

| | Direct |
|---|--------|
| (1) The company paid the following amounts in the reporting period to settle claims related extra contractual obligations or bad faith claims stemming from lawsuits | |
| (2) Number of claims where amounts were paid to settle claims related extra contractual obligations or bad faith claims resulting from lawsuits during the reporting period | |
| (3) Indicate whether claim count information is disclosed per claim or per claimant | |
| E. Product Warranties | |
| (1) Company input | |
| (2) Reconciliation of aggregate product warranty liability | |
| a. Product warranty liability beginning balance | |
| b. Reductions for payments made under the warranty | |
| c. Liability accrual for product warranties issued during the current period | |
| d. Change in liability accrual for product warranties issued in previous periods | |
| e. Product warranty liability ending balance | \$ - |
| F. Joint and Several Liabilities | |
| Company input | |
| G. All Other Contingencies | |
| Company input | |

NOTE 15 Leases

| | | | |
|--|----|------|------------------|
| A. Lessee Operating Lease: | | | |
| (1) Company input | | | |
| (2) a. At January 1, 2025, the minimum aggregate rental commitments are as follows: | | | Operating Leases |
| 1. 2025 | | | |
| 2. 2026 | | | |
| 3. 2027 | | | |
| 4. 2028 | | | |
| 5. 2029 | | | |
| 6. Thereafter | | | |
| 7. Total (sum of 1 through 6) | | \$ | - |
| (3) Company input | | | |
| B. Lessor Leases | | | |
| (1) Company input | | | |
| c. Future minimum lease payment receivables under noncancelable leasing arrangements as of the end of current period are as follows: | | | Operating Leases |
| 1. 2025 | | | |
| 2. 2026 | | | |
| 3. 2027 | | | |
| 4. 2028 | | | |
| 5. 2029 | | | |
| 6. Thereafter | | | |
| 7. Total (sum of 1 through 6) | | \$ | - |
| d. Company input | | | |
| (2) Leveraged Leases | | | |
| Company input | | | |
| b. The Company's investment in leveraged leases relates to equipment used primarily in the transportation industries. The component of net income from leveraged leases as of the end of current period and December 31, 2024 were as shown below: | | | |
| 1. Income from leveraged leases before income tax including investment tax credit | | 2025 | 2024 |
| 2. Less current income tax | | | |
| 3. Net income from leveraged leases (1 - 2) | \$ | - | \$ - |
| c. The components of the investment in leveraged leases as of the end of current period and December 31, 2024 were as shown below: | | | |
| 1. Lease contracts receivable (net of principal and interest on non-recourse financing) | | 2025 | 2024 |
| 2. Estimated residual value of leased assets | | | |
| 3. Unearned and deferred income | | | |
| 4. Investment in leveraged leases | | | |
| 5. Deferred income taxes related to leveraged leases | | | |
| 6. Net investment in leveraged leases | \$ | - | \$ - |

NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

The Company is not exposed to financial instruments with off-balance sheet risk or concentration of credit risk.

NOTE 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

| | |
|--|--|
| A. Transfers of Receivables Reported as Sales | |
| The Company did not have any transfers of receivables reported as sales. | |
| B. Transfer and Servicing of Financial Assets | |
| No change | |

NOTES TO FINANCIAL STATEMENTS

C. Wash Sales

NOTE 18 Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. ASO Plans:
The gain from operations from Administrative Services Only (ASO) uninsured plans and the uninsured portion of partially insured plans was as follows during 2025:

| | ASO Uninsured Plans | Uninsured Portion of Partially Insured Plans | Total ASO |
|---|---------------------------|---|-----------|
| a. Net reimbursement for administrative Expenses (including administrative fees) in excess of actual expenses | | | \$ - |
| b. Total net other income or expenses (including interest paid to or received from plans) | | | \$ - |
| c. Net gain or (loss) from operations (a+b) | \$ - | \$ - | \$ - |
| d. Total claim payment volume | | | \$ - |

B. ASC Plans:
The gain from operations from Administrative Services Contract (ASC) uninsured plans and the uninsured portion of partially insured plans was as follows during 2025:

| | ASC Uninsured Plans | Uninsured Portion of Partially Insured Plans | Total ASC |
|---|---------------------------|---|-----------|
| a. Gross reimbursement for medical cost incurred | | | \$ - |
| b. Gross administrative fees accrued | | | \$ - |
| c. Other income or expenses (including interest paid to or received from plans) | | | \$ - |
| d. Gross expenses incurred (claims and administrative) (a+b+c) | \$ - | \$ - | \$ - |
| e. Total net gain or loss from operations | | | \$ - |

C. Medicare or Similarly Structured Cost Based Reimbursement Contract
Company input

NOTE 19 Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

| Name and Address of Managing General Agent or Third Party Administrator | FEIN NUMBER | Exclusive Contract | Types of Business Written | Type of Authority Granted | Total Direct Premiums Written/ Produced By |
|---|-------------|--------------------|---------------------------|---------------------------|--|
| | | | | | |
| Total | XXX | XXX | XXX | XXX | \$ - |

C - Claims Payment
CA - Claims Adjustment
R - Reinsurance Ceding
B - Binding Authority
P - Premium Collection
U - Underwriting

NOTE 20 Fair Value Measurements

A.

(1) Fair Value Measurements at Reporting Date

| Description for each class of asset or liability | (Level 1) | (Level 2) | (Level 3) | Net Asset Value (NAV) | Total |
|--|-----------|-----------|-----------|-----------------------|-------|
| a. Assets at fair value | | | | | |
| Total assets at fair value/NAV | \$ - | \$ - | \$ - | \$ - | \$ - |

| Description for each class of asset or liability | (Level 1) | (Level 2) | (Level 3) | Net Asset Value (NAV) | Total |
|--|-----------|-----------|-----------|-----------------------|-------|
| b. Liabilities at fair value | | | | | |
| Total liabilities at fair value | \$ - | \$ - | \$ - | \$ - | \$ - |

(2) Fair Value Measurements in (Level 3) of the Fair Value hierarchy

| Description | Ending Balance as of Prior Quarter End | Transfers into Level 3 | Transfers out of Level 3 | Total gains and (losses) included in Net Income | Total gains and (losses) included in Surplus | Purchases | Issuances | Sales | Settlements | Ending Balance for Current Quarter End |
|--------------|--|------------------------|--------------------------|---|--|-----------|-----------|-------|-------------|--|
| a. Assets | | | | | | | | | | |
| Total Assets | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |

| Description | Ending Balance as of Prior Quarter End | Transfers into Level 3 | Transfers out of Level 3 | Total gains and (losses) included in Net Income | Total gains and (losses) included in Surplus | Purchases | Issuances | Sales | Settlements | Ending Balance for Current Quarter End |
|----------------|--|------------------------|--------------------------|---|--|-----------|-----------|-------|-------------|--|
| b. Liabilities | | | | | | | | | | |

NOTES TO FINANCIAL STATEMENTS

| | | | | | | | | | | | | |
|-------------------|----|---|----|---|----|---|----|---|----|---|----|---|
| | | | | | | | | | | | | |
| Total Liabilities | \$ | - | \$ | - | \$ | - | \$ | - | \$ | - | \$ | - |

(3) Company input

(4) Company input

(5) Company input

B. Company input

C. Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall.

| Type of Financial Instrument | Aggregate Fair Value | Admitted Assets | (Level 1) | (Level 2) | (Level 3) | Net Asset Value (NAV) | Not Practicable (Carrying Value) |
|-------------------------------------|----------------------|-----------------|--------------|------------|-----------|-----------------------|----------------------------------|
| Cash, Cash Equivalents & Short Term | \$ 42,390 | \$ 42,390 | \$ 42,390 | \$ - | \$ - | \$ - | \$ - |
| Bonds | \$ 7,929,935 | \$ 7,900,647 | \$ 7,473,768 | \$ 456,167 | \$ - | \$ - | \$ - |
| Preferred Stock | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| Common Stock | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| Securities Lending | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| Mortgage Loans | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| Surplus Notes | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| Net Derivatives | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| Total | \$ 7,972,325 | \$ 7,943,037 | \$ 7,516,158 | \$ 456,167 | \$ - | \$ - | \$ - |

D. Not Practicable to Estimate Fair Value

| Type or Class of Financial Instrument | Carrying Value | Effective Interest Rate | Maturity Date | Explanation |
|---------------------------------------|----------------|-------------------------|---------------|-------------|
| | | | | |

E. Company input

NOTE 21 Other Items

A. Unusual or Infrequent Items
Company input

B. Troubled Debt Restructuring: Debtors
Company input

C. Other Disclosures
Company input

D. Business Interruption Insurance Recoveries
Company input

E. State Transferable and Non-transferable Tax Credits

(1) Carrying Value of Transferable and Non-transferable State Tax Credits Gross of any Related Tax Liabilities and Total Unused Transferable and Non-transferable State Tax Credits by State and in Total

| Description of Transferable and Non-transferable Tax Credits | Jurisdiction | Carrying Value | Unused Amount |
|--|--------------|----------------|---------------|
| | | | |
| Total | | \$ - | \$ - |

(2) Total unused tax credits by jurisdiction, disaggregated by transferable/certificated and non-transferable

| | Jurisdiction * | Transferable / Certificated | Nontransferable | Total |
|----------------|----------------|-----------------------------|-----------------|-------|
| a. State | | | | |
| a. Total | XXX | \$ - | \$ - | \$ - |
| b. Federal | XXX | | | \$ - |
| c. Total (a+b) | XXX | \$ - | \$ - | \$ - |

* Only applicable to State section of table

(3) Company input

(4) Company input

(5) State and Federal Tax Credits Admitted and Nonadmitted disaggregated by Transferable/Certificated and Non-transferable

| | Total Admitted | Total Nonadmitted |
|---------------------|----------------|-------------------|
| a. State | | |
| 1. Transferable | | |
| 2. Non-transferable | | |
| b. Federal | | |
| 1. Transferable | | |
| 2. Non-transferable | | |

F. Subprime Mortgage Related Risk Exposure
(1) Company input

(2) Direct exposure through investments in subprime mortgage loans.

NOTES TO FINANCIAL STATEMENTS

| | Book/Adjusted Carrying Value (excluding interest) | Fair Value | Value of Land and Buildings | Other-Than- Temporary Impairment Losses Recognized | Default Rate |
|--|--|------------|--------------------------------|--|--------------|
| a. Mortgages in the process of foreclosure | | | | | |
| b. Mortgages in good standing | | | | | |
| c. Mortgages with restructured terms | | | | | |
| d. Total (a+b+c) | \$ - | \$ - | \$ - | \$ - | XXX |

(3) Direct exposure through other investments.

| | Actual Cost | Book/Adjusted Carrying Value (excluding interest) | Fair Value | Other-Than- Temporary Impairment Losses Recognized |
|------------------------------------|-------------|--|------------|--|
| a. Asset-backed securities | | | | |
| b. Collateralized loan obligations | | | | |
| c. Equity investment in SCAs * | | | | |
| d. Other assets | | | | |
| e. Total (a+b+c+d) | | | | |

* These investments comprise of the companies invested assets.

(4) Underwriting exposure to subprime mortgage risk through Mortgage Guaranty or Financial Guaranty insurance coverage.

| | Losses Paid in the Current Year | Losses Incurred in the Current Year | Case Reserves at End of Current Period | IBNR Reserves at End of Current Period |
|--------------------------------|---------------------------------------|---|--|--|
| a. Mortgage Guaranty Coverage | | | | |
| b. Financial Guaranty Coverage | | | | |

| | Losses Paid in the Current Year | Losses Incurred in the Current Year | Case Reserves at End of Current Period | IBNR Reserves at End of Current Period |
|-------------------------------|---------------------------------------|---|--|--|
| c. Other Lines (specify): | | | | |
| d. Total (Sum of a through c) | \$ - | \$ - | \$ - | \$ - |

G. Insurance-Linked Securities (ILS) Contracts

| | Number of Outstanding ILS Contracts | Aggregate Maximum Proceeds |
|--------------------------------------|---|----------------------------------|
| Management of Risk Related To: | | |
| (1) Directly-Written Insurance Risks | | |
| a. ILS Contracts as Issuer | | |
| b. ILS Contracts as Ceding Insurer | | |
| c. ILS Contracts as Counterparty | | |
| (2) Assumed Insurance Risks | | |
| a. ILS Contracts as Issuer | | |
| b. ILS Contracts as Ceding Insurer | | |
| c. ILS Contracts as Counterparty | | |

H. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy

- (1) Amount of admitted balance that could be realized from an investment vehicle
- (2) Percentage Bonds
- (3) Percentage Stocks
- (4) Percentage Mortgage Loans
- (5) Percentage Real Estate
- (6) Percentage Cash and Short-Term Investments
- (7) Percentage Derivatives
- (8) Percentage Other Invested Assets

NOTE 22 Events Subsequent

Type I – Recognized Subsequent Events:
Company input

Type II – Nonrecognized Subsequent Events:
Company input

NOTE 23 Reinsurance

A. Unsecured Reinsurance Recoverables

Individual Reinsurers with Unsecured Reinsurance Recoverables Exceeding 3% of Policyholder Surplus

Individual Reinsurers Who Are Not Members of a Group

| ID Number | Reinsurer Name | Unsecured Amount |
|-----------|----------------|---------------------|
| | detail row 1 | \$ - |
| | detail row 2 | \$ - |

Individual Reinsurers Who Are Members of a Group

| Group Code | ID Number | Reinsurer Name | Unsecured Amount |
|---------------|-----------|----------------|---------------------|
| | | detail row 1 | \$ - |
| | | detail row 2 | \$ - |

All Members of the Groups Shown above with Unsecured Reinsurance Recoverables

NOTES TO FINANCIAL STATEMENTS

| Group Code | ID Number | Reinsurer Name | Unsecured Amount |
|------------|-----------|----------------|------------------|
| | | detail row 1 | XXX |
| | | detail row 2 | XXX |
| Total | | | \$ - |
| | | detail row 1 | XXX |
| | | detail row 2 | XXX |
| Total | | | \$ - |
| | | detail row 1 | XXX |
| | | detail row 2 | XXX |
| Total | | | \$ - |

B. Reinsurance Recoverable in Dispute

| Name of Reinsurer | Total Amount in Dispute (Including IBNR) | Notification | Arbitration | Litigation |
|-------------------|--|--------------|-------------|------------|
|-------------------|--|--------------|-------------|------------|

C. Reinsurance Assumed and Ceded

(1)

| | Assumed Reinsurance | | Ceded Reinsurance | | Net | |
|------------------------------------|---------------------|-------------------|-------------------|-------------------|-----------------|-------------------|
| | Premium Reserve | Commission Equity | Premium Reserve | Commission Equity | Premium Reserve | Commission Equity |
| a. Affiliates | | | | | \$ - | \$ - |
| b. All Other | | | | | \$ - | \$ - |
| c. Total (a+b) | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - |
| d. Direct Unearned Premium Reserve | | | | | | |

(2)

| | Direct | Assumed | Ceded | Net |
|---|--------|---------|-------|------|
| a. Contingent Commission | | | | \$ - |
| b. Sliding Scale Adjustments | | | | \$ - |
| c. Other Profit Commission Arrangements | | | | \$ - |
| d. TOTAL (a+b+c) | \$ - | \$ - | \$ - | \$ - |

(3)

| Protected Cell Name | Covered Exposure | Ultimate Exposure Amt. | Fair Value of Assets as of Statement Date | Initial Contract Date of Securitization Instrument | Maturity Date of Securitized Instrument |
|---------------------|------------------|------------------------|---|--|---|
| TOTAL | XXX | \$ - | \$ - | XXX | XXX |

D. Uncollectible Reinsurance

(1) The Company has written off in the current year reinsurance balances due from the companies listed below, the amount of:

Which is reflected as:

- a. Losses incurred
- b. Loss adjustment expenses incurred
- c. Premiums earned
- d. Other

| | | |
|----|---------|--------|
| e. | Company | Amount |
|----|---------|--------|

E. Commutation of Reinsurance Reflected in Income and Expenses.

The company has reported in its operations in the current year as a result of commutation of reinsurance with the companies listed below, amounts that are reflected as:

- (1) Losses incurred
- (2) Loss adjustment expenses incurred
- (3) Premiums earned
- (4) Other

| | | |
|-----|---------|--------|
| (5) | Company | Amount |
|-----|---------|--------|

F. Retroactive Reinsurance

(1)

| As: | Reported Company | |
|------------------------------------|------------------|-------|
| | Assumed | Ceded |
| a. Reserves Transferred: | | |
| 1. Initial Reserves | | |
| 2. Adjustments - Prior Year (s) | | |
| 3. Adjustments - Current Year | | |
| 4. Current Total (1+2+3) | \$ - | \$ - |
| b. Consideration Paid or Received: | | |
| 1. Initial Consideration | | |
| 2. Adjustments - Prior Year (s) | | |

NOTES TO FINANCIAL STATEMENTS

| | | |
|---|----|---|
| 3. Adjustments - Current Year | | |
| 4. Current Total (1+2+3) | \$ | - |
| c. Paid Losses Reimbursed or Recovered: | | |
| 1. Prior Year (s) | | |
| 2. Current Year | | |
| 3. Current Total (1+2) | \$ | - |
| d. Special Surplus from Retroactive Reinsurance: | | |
| 1. Initial Surplus Gain or Loss | | |
| 2. Adjustments - Prior Year (s) | | |
| 3. Adjustments - Current Year | | |
| 4. Current Year Restricted Surplus | | |
| 5. Cumulative Total Transferred to Unassigned Funds (1+2+3+4) | \$ | - |

e. All cedents and reinsurers involved in all transactions included in summary totals above:

| Company | Assumed Amount | Ceded Amount |
|---------|----------------|--------------|
| Total | \$ | - |

* Total amounts must agree with totals in a.4 above. Include the NAIC Company Code or Alien Insurer Identification Number for each insurer listed.

f. Total Paid Loss/LAE amounts recoverable (for authorized, reciprocal jurisdiction, unauthorized and certified reinsurers), any amounts more than 90 days overdue (for authorized, reciprocal jurisdiction, unauthorized and certified reinsurers), and for amounts recoverable the collateral held (for unauthorized and certified reinsurers) as respects amounts recoverable from unauthorized and certified reinsurers:

1. Authorized Reinsurers

| Company | Total Paid/Loss/LAE Recoverable | Amounts Over 90 Days Overdue |
|---------|---------------------------------|------------------------------|
| Total | \$ | - |

2. Unauthorized Reinsurers

| Company | Total Paid/Loss/LAE Recoverable | Amounts Over 90 Days Overdue | Collateral Held |
|---------|---------------------------------|------------------------------|-----------------|
| Total | \$ | - | \$ |

3. Certified Reinsurers

| Company | Total Paid/Loss/LAE Recoverable | Amounts Over 90 Days Overdue | Collateral Held |
|---------|---------------------------------|------------------------------|-----------------|
| Total | \$ | - | \$ |

4. Reciprocal Jurisdiction Reinsurers

| Company | Total Paid/Loss/LAE Recoverable | Amounts Over 90 Days Overdue |
|---------|---------------------------------|------------------------------|
| Total | \$ | - |

G. Reinsurance Accounted for as a Deposit

| Description | Interest Income | Cash Recoveries | Deposit Balance |
|-------------|-----------------|-----------------|-----------------|
|-------------|-----------------|-----------------|-----------------|

H. Disclosures for the Transfer of Property and Casualty Run-off Agreements
Company input

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

(1) Reporting Entity Ceding to Certified Reinsurer Whose Rating Was Downgraded or Status Subject to Revocation

| Name of Certified Reinsurer | Relationship to Reporting Entity | Date of Action | Jurisdiction of Action | Collateral Percentage Requirement | | Net Obligation Subject to Collateral | Collateral Required (but not received) |
|-----------------------------|----------------------------------|----------------|------------------------|-----------------------------------|-------|--------------------------------------|--|
| | | | | Before | After | | |
| | | | | | | | |

(2) Reporting Entity's Certified Reinsurer Rating Downgraded or Status Subject to Revocation

| Date of Action | Jurisdiction of Action | Collateral Percentage Requirement | | Net Obligation Subject to Collateral | Collateral Required (but not yet Funded) |
|----------------|------------------------|-----------------------------------|-------|--------------------------------------|--|
| | | Before | After | | |

NOTES TO FINANCIAL STATEMENTS

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
|--|--|--|--|--|--|

- J. Reinsurance Agreements Qualifying for Reinsurer Aggregation
- (1) Company input
- (2) The amount of unexhausted limit as of the reporting date.

| Name of Reinsurer | Amount of Unexhausted Limit |
|-------------------|-----------------------------------|
|-------------------|-----------------------------------|

- K. Reinsurance Credit
- Company input

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

- A. Company input
- B. Company input
- C. Company input
- D. Medical loss ratio rebates required pursuant to the Public Health Service Act.

| | 1 | 2 | 3 | 4 | 5 |
|---|------------|-------------------------|-------------------------|-------------------------------------|-------|
| | Individual | Small Group Employer | Large Group Employer | Other Categories with Rebates | Total |
| Prior Reporting Year | | | | | |
| (1) Medical loss ratio rebates incurred | \$ - | \$ - | \$ - | \$ - | \$ - |
| (2) Medical loss ratio rebates paid | \$ - | \$ - | \$ - | \$ - | \$ - |
| (3) Medical loss ratio rebates unpaid | \$ - | \$ - | \$ - | \$ - | \$ - |
| (4) Plus reinsurance assumed amounts | XXX | XXX | XXX | XXX | |
| (5) Less reinsurance ceded amounts | XXX | XXX | XXX | XXX | |
| (6) Rebates unpaid net of reinsurance | XXX | XXX | XXX | XXX | \$ - |
| Current Reporting Year-to-Date | | | | | |
| (7) Medical loss ratio rebates incurred | \$ - | \$ - | \$ - | \$ - | \$ - |
| (8) Medical loss ratio rebates paid | | | | | \$ - |
| (9) Medical loss ratio rebates unpaid | | | | | \$ - |
| (10) Plus reinsurance assumed amounts | XXX | XXX | XXX | XXX | |
| (11) Less reinsurance ceded amounts | XXX | XXX | XXX | XXX | |
| (12) Rebates unpaid net of reinsurance | XXX | XXX | XXX | XXX | \$ - |

- E.
- (1) For Ten Percent (10%) Method of Determining Nonadmitted Retrospective Premium
- a. Total accrued retro premium
- b. Unsecured amount
- c. Less: Nonadmitted amount (10%) \$ -
- d. Less: Nonadmitted for any person for whom agents' balances or uncollected premiums are nonadmitted
- e. Admitted amount (a) - (c) - (d) \$ -

- (2) For Quality Rating Method of Determining Nonadmitted Retrospective Premium

| | (1) | (2) | (3) | (4) |
|-------|--|--------------|-----------------------|----------------------------------|
| | Insured's Current Quality Rating | Total Amount | Unsecured Balances | Nonadmitted Amount (2) x % |
| a. | 1 | | | \$ - |
| b. | 2 | | | \$ - |
| c. | 3 | | | \$ - |
| d. | 4 | | | \$ - |
| e. | 5 | | | \$ - |
| f. | 6 | | | \$ - |
| g. | Nonadmitted for any person for whom agents' balances or uncollected premiums are nonadmitted | | | |
| h. | Total (a) through (f) | | | |
| - (g) | \$ - | \$ - | \$ - | \$ - |

- F. Risk Sharing Provisions of the Affordable Care Act

- (1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions (YES/NO)?

- (2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year

| | Amount |
|--|--------|
| a. Permanent ACA Risk Adjustment Program | |
| Assets | |
| 1. Premium adjustments receivable due to ACA Risk Adjustment (including high risk pool payments) | |
| Liabilities | |
| 2. Risk adjustment user fees payable for ACA Risk Adjustment | |
| 3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premium) | |
| Operations (Revenue & Expense) | |
| 4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment | |
| 5. Reported in expenses as ACA risk adjustment user fees (incurred/paid) | |

- (3) Roll forward of prior year ACA risk sharing provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to prior year balance.

NOTES TO FINANCIAL STATEMENTS

| | Accrued During the Prior Year on Business Written Before December 31 of the Prior Year | | Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year | | Differences | | Adjustments | | | Unsettled Balances as of the Reporting Date | |
|---|--|---------|--|---------|--|--|------------------------|------------------------|-----|---|---|
| | | | | | Prior Year Accrued Less Payments (Col 1 - 3) | Prior Year Accrued Less Payments (Col 2 - 4) | To Prior Year Balances | To Prior Year Balances | | Cumulative Balance from Prior Years (Col 1-3+7) | Cumulative Balance from Prior Years (Col 2-4+8) |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | | 9 | 10 |
| | Receivable | Payable | Receivable | Payable | Receivable | Payable | Receivable | Payable | Ref | Receivable | Payable |
| a. Permanent ACA Risk Adjustment Program | | | | | | | | | | | |
| 1. Premium adjustments receivable (including high risk pool payments) | | | | | \$ - | \$ - | | | A | \$ - | \$ - |
| 2. Premium adjustments (payable) (including high risk pool premium) | | | | | \$ - | \$ - | | | B | \$ - | \$ - |
| 3. Subtotal ACA Permanent Risk Adjustment Program | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | \$ - | | \$ - | \$ - |

Explanations of Adjustments

A.

B.

NOTE 25 Change in Incurred Losses and Loss Adjustment Expenses

Company input

NOTE 26 Intercompany Pooling Arrangements

Company input

NOTE 27 Structured Settlements

| | Loss Reserves Eliminated by Annuities | Unrecorded Loss Contingencies |
|-------------------------------------|--|--|
| 27A. Structured Settlements | | |
| 27B. | Licensed in Company's State of Domicile Yes/No | Statement Value (i.e., Present Value) of Annuities |
| Life Insurance Company And Location | | |

NOTE 28 Health Care Receivables

A. Pharmaceutical Rebate Receivables

| Date | Estimated Pharmacy Rebates as Reported on Financial Statements | Pharmacy Rebates as Billed or Otherwise Confirmed | Actual Rebates Received Within 90 Days of Billing | Actual Rebates Received Within 91 to 180 Days of Billing | Actual Rebates Received More Than 180 Days After Billing |
|------|--|---|---|--|--|
| | | | | | |

B. Risk-Sharing Receivables

| Calendar Year | Evaluation Period Year Ending | Risk Sharing Receivable as Estimated in the Prior Year | Risk Sharing Receivable as Estimated in the Current Year | Risk Sharing Receivable Billed | Risk Sharing Receivable Not Yet Billed | Actual Risk Sharing Amounts Received in Year Billed | Actual Risk Sharing Amounts Received First Year Subsequent | Actual Risk Sharing Amounts Received Second Year Subsequent | Actual Risk Sharing Amounts Received - All Other |
|---------------|-------------------------------|--|--|--------------------------------|--|---|--|---|--|
| | | | | | | | | | |

NOTE 29 Participating Policies

Company input

NOTE 30 Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves
2. Date of the most recent evaluation of this liability
3. Was anticipated investment income utilized in the calculation?

NOTE 31 High Deductibles

Company input

A. Reserve Credit Recorded on Unpaid Claims and Amount Billed and Recoverable on Paid Claims for High Deductibles

(1) Counter Party Exposure Recorded on Unpaid Claims and Billed Recoverables on Paid Claims

| Annual Statement Line of Business (ASL) | 3 | 4 | 5 | 6 |
|---|---|---|---|---|
|---|---|---|---|---|

NOTES TO FINANCIAL STATEMENTS

| 1 | 2 | | | | Total High Deductibles and Billed Recoverables (Col 4 + Col 5) |
|-------|-----------------|--|-------------------------------------|------------------------------------|--|
| ASL # | ASL Description | Gross (of High Deductible) Loss Reserves | Reserve Credit for High Deductibles | Billed Recoverables on Paid Claims | |
| | | | | | |
| Total | | \$ - | \$ - | \$ - | \$ - |

- (2) Unsecured Amounts of High Deductibles

a. Total high deductibles and billed recoverables on paid claims (Should equal total line for Column 6 for A(1) above)\$ -

b. Collateral on balance sheet (Must be equal to or greater than zero)

c. Collateral off balance sheet (Must be equal to or greater than zero)

d. Total unsecured deductibles and billed recoverables on paid claims d=a-(b+c) (Must be equal to or greater than zero)\$ -

e. Percentage unsecured
- (3) High Deductible Recoverables Amounts on Paid Claims

a. Amount of overdue nonadmitted (either due to aging or collateral)

b. Total over 90 days overdue admitted

c. Total overdue (a+b)\$ -

(4) The Deductible Amounts for the Highest Ten Unsecured High Deductible Policies

| Counterparty Ranking | Top Ten Unsecured High Deductibles Amounts |
|----------------------|--|
| Counterparty 1 | |
| Counterparty 2 | |
| Counterparty 3 | |
| Counterparty 4 | |
| Counterparty 5 | |
| Counterparty 6 | |
| Counterparty 7 | |
| Counterparty 8 | |
| Counterparty 9 | |
| Counterparty 10 | |

B. Unsecured High Deductible Recoverables for Individual Obligors Part of a Group Under the Same Management or Control Which Are Greater Than 1% of Capital and Surplus. For this purpose, a group of entities under common control shall be regarded as a single customer.

(1) Total Group Unsecured Aggregate Recoverable

| Group Name | Total Unsecured Aggregate Recoverable |
|------------|---------------------------------------|
| | |

(2) Obligors and Related Members in the Group

| Group Name | Obligors and Related Group Members |
|------------|------------------------------------|
| | |

NOTE 32 Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses

A. Tabular Discount

| | Tabular Discount Included in Schedule P, Part 1* | |
|---|--|-------------|
| | (1) Case | (2) IBNR |
| 1. Homeowners/Farmowners | | |
| 2. Private Passenger Auto Liability/Medical | | |
| 3. Commercial Auto/Truck Liability/Medical | | |
| 4. Workers' Compensation | | |
| 5. Commercial Multiple Peril | | |
| 6. Medical Professional Liability - occurrence | | |
| 7. Medical Professional Liability - claims-made | | |
| 8. Special Liability | | |
| 9. Other Liability - occurrence | | |
| 10. Other Liability - claims-made | | |
| 11. Special Property | | |
| 12. Auto Physical Damage | | |
| 13. Fidelity, Surety | | |
| 14. Other (including Credit, Accident & Health) | | |
| 15. International | | |
| 16. Reinsurance Nonproportional Assumed Property | | |
| 17. Reinsurance Nonproportional Assumed Liability | | |
| 18. Reinsurance Nonproportional Assumed Financial Lines | | |
| 19. Products Liability - occurrence | | |
| 20. Products Liability - claims-made | | |
| 21. Financial Guaranty/Mortgage Guaranty | | |
| 22. Warranty | | |
| 23. Total (Sum of Lines 1 through 22) | \$ - | \$ - |

* Must exclude medical loss reserves and all loss adjustment expense reserves.

B. Nontabular Discount

NOTES TO FINANCIAL STATEMENTS

| | (1) | (2) | (3) | (4) |
|---|------|------|--|------------------------------|
| | Case | IBNR | Defense & Cost Containment Expense | Adjusting & Other Expense |
| 1. Homeowners/Farmowners | | | | |
| 2. Private Passenger Auto Liability/Medical | | | | |
| 3. Commercial Auto/Truck Liability/Medical | | | | |
| 4. Workers' Compensation | | | | |
| 5. Commercial Multiple Peril | | | | |
| 6. Medical Professional Liability - occurrence | | | | |
| 7. Medical Professional Liability - claims-made | | | | |
| 8. Special Liability | | | | |
| 9. Other Liability - occurrence | | | | |
| 10. Other Liability - claims-made | | | | |
| 11. Special Property | | | | |
| 12. Auto Physical Damage | | | | |
| 13. Fidelity, Surety | | | | |
| 14. Other (including Credit, Accident & Health) | | | | |
| 15. International | | | | |
| 16. Reinsurance Nonproportional Assumed Property | | | | |
| 17. Reinsurance Nonproportional Assumed Liability | | | | |
| 18. Reinsurance Nonproportional Assumed Financial Lines | | | | |
| 19. Products Liability - occurrence | | | | |
| 20. Products Liability - claims-made | | | | |
| 21. Financial Guaranty/Mortgage Guaranty | | | | |
| 22. Warranty | | | | |
| 23. Total (Sum of Lines 1 through 22) | \$ - | \$ - | \$ - | \$ - |

** Should include medical loss reserves and all loss adjustment expense reserves, whether reported as tabular or nontabular in Schedule P.

C. Company input

NOTE 33 Asbestos/Environmental Reserves

A. Company input

(1) Direct

| | 2021 | 2022 | 2023 | 2024 | 2025 |
|--|------|------|------|------|------|
| a. Beginning reserves: | | | | | |
| b. Incurred losses and loss adjustment expense: | | | | | |
| c. Calendar year payments for losses and loss adjustment expenses: | | | | | |
| d. Ending reserves (a+b-c): | \$ - | \$ - | \$ - | \$ - | \$ - |

(2) Assumed Reinsurance

| | 2021 | 2022 | 2023 | 2024 | 2025 |
|--|------|------|------|------|------|
| a. Beginning reserves: | | | | | |
| b. Incurred losses and loss adjustment expense: | | | | | |
| c. Calendar year payments for losses and loss adjustment expenses: | | | | | |
| d. Ending reserves (a+b-c): | \$ - | \$ - | \$ - | \$ - | \$ - |

(3) Net of Ceded Reinsurance

| | 2021 | 2022 | 2023 | 2024 | 2025 |
|--|------|------|------|------|------|
| a. Beginning reserves: | | | | | |
| b. Incurred losses and loss adjustment expense: | | | | | |
| c. Calendar year payments for losses and loss adjustment expenses: | | | | | |
| d. Ending reserves (a+b-c): | \$ - | \$ - | \$ - | \$ - | \$ - |

B. State the amount of the ending reserves for Bulk + IBNR included in A (Loss & LAE):

- (1) Direct Basis:
- (2) Assumed Reinsurance Basis:
- (3) Net of Ceded Reinsurance Basis:

C. State the amount of the ending reserves for loss adjustment expenses included in A (Case, Bulk + IBNR):

- (1) Direct Basis:
- (2) Assumed Reinsurance Basis:
- (3) Net of Ceded Reinsurance Basis:

D. Company input

(1) Direct

| | 2021 | 2022 | 2023 | 2024 | 2025 |
|--|------|------|------|------|------|
| a. Beginning reserves: | | | | | |
| b. Incurred losses and loss adjustment expense: | | | | | |
| c. Calendar year payments for losses and loss adjustment expenses: | | | | | |
| d. Ending reserves (a+b-c): | \$ - | \$ - | \$ - | \$ - | \$ - |

NOTES TO FINANCIAL STATEMENTS

(2) Assumed Reinsurance

| | 2021 | 2022 | 2023 | 2024 | 2025 |
|--|------|------|------|------|------|
| a. Beginning reserves: | | | | | |
| b. Incurred losses and loss adjustment expense: | | | | | |
| c. Calendar year payments for losses and loss adjustment expenses: | | | | | |
| d. Ending reserves (a+b-c): | \$ - | \$ - | \$ - | \$ - | \$ - |

(3) Net of Ceded Reinsurance

| | 2021 | 2022 | 2023 | 2024 | 2025 |
|--|------|------|------|------|------|
| a. Beginning reserves: | | | | | |
| b. Incurred losses and loss adjustment expense: | | | | | |
| c. Calendar year payments for losses and loss adjustment expenses: | | | | | |
| d. Ending reserves (a+b-c): | \$ - | \$ - | \$ - | \$ - | \$ - |

E. State the amount of the ending reserves for Bulk + IBNR included in D (Loss & LAE):

- (1) Direct Basis:
- (2) Assumed Reinsurance Basis:
- (3) Net of Ceded Reinsurance Basis:

F. State the amount of the ending reserves for loss adjustment expenses included in D (Case, Bulk + IBNR):

- (1) Direct Basis:
- (2) Assumed Reinsurance Basis:
- (3) Net of Ceded Reinsurance Basis:

NOTE 34 Subscriber Savings Accounts

Company input

NOTE 35 Multiple Peril Crop Insurance

Company input

NOTE 36 Financial Guaranty Insurance

A.

(1) Financial guarantee insurance contracts where premiums are received as installment payments over the period of the contract, rather than at inception:

a. Company input

b. Schedule of premiums (undiscounted) expected to be collected under all installment contracts:

- 1. (a) 1st Quarter 2026
- (b) 2nd Quarter 2026
- (c) 3rd Quarter 2026
- (d) 4th Quarter 2026
- (e) Year 2027
- (f) Year 2028
- (g) Year 2029
- (h) Year 2030
- 2. (a) 2031 through 2035
- (b) 2036 through 2040
- (c) 2041 through 2045
- (d) 2046 through 2050
- (e) 2051 through 2055
- (f) 2056 through 2060
- (g) 2061 through 2065
- (h) 2066 through 2070
- (i) 2071 through 2075
- (j) 2076 through 2080
- (k) 2081 through 2085
- (l) 2086 through 2090
- (m) 2091 through 2095
- (n) 2096 through 2100
- (o) 2101 through 2105
- (p) 2106 through 2110
- (q) 2111 through 2115
- (r) 2116 through 2120
- (s) 2121 through 2125
- (t) 2126 through 2130
- (u) 2131 through 2135
- (v) 2136 through 2140
- (w) 2141 through 2145
- (x) 2146 through 2150
- (y) 2151 through 2155

c. Roll forward of the expected future premiums (undiscounted), including:

- 1. Expected future premiums - Beginning of Year
- 2. Less - Premium payments received for existing installment contracts
- 3. Add - Expected premium payments for new installment contracts
- 4. Adjustments to the expected future premium payments
- 5. Expected future premiums - End of Year (1-2+3+4)

\$ -

NOTES TO FINANCIAL STATEMENTS

(2) Non-installment contracts:

- a. Company input
- b. Schedule of the future expected earned premium revenue on non-installment contracts as of the latest date of the statement of financial position:

1. (a) 1st Quarter 2026
(b) 2nd Quarter 2026
(c) 3rd Quarter 2026
(d) 4th Quarter 2026
(e) Year 2027
(f) Year 2028
(g) Year 2029
(h) Year 2030

2. (a) 2031 through 2035
(b) 2036 through 2040
(c) 2041 through 2045
(d) 2046 through 2050
(e) 2051 through 2055
(f) 2056 through 2060
(g) 2061 through 2065
(h) 2066 through 2070
(i) 2071 through 2075
(j) 2076 through 2080
(k) 2081 through 2085
(l) 2086 through 2090
(m) 2091 through 2095
(n) 2096 through 2100
(o) 2101 through 2105
(p) 2106 through 2110
(q) 2111 through 2115
(r) 2116 through 2120
(s) 2121 through 2125
(t) 2126 through 2130
(u) 2131 through 2135
(v) 2136 through 2140
(w) 2141 through 2145
(x) 2146 through 2150
(y) 2151 through 2155

(3) Claim liability

| | | |
|---|------------|--------|
| a. Company input | | |
| b. Significant components of the change in the claim liability for the period | Components | Amount |
| (1) Accretion of the discount | | |
| (2) Changes in timing | | |
| (3) New reserves for defaults of insured contracts | | |
| (4) Change in deficiency reserves | | |
| (5) Change in incurred but not reported claims | | |
| (6) Total (1+2+3+4+5) | | \$ - |

(4) Company input

B. Schedule of insured financial obligations at the end of the period

| | Surveillance Categories | | | | |
|--|-------------------------|------|------|------|-------|
| | A | B | C | D | Total |
| 1. Number of policies | | | | | 0 |
| 2. Remaining weighted-average contract period (in years) | | | | | |
| Insured contractual payments outstanding: | | | | | |
| 3a.Insured contractual payments outstanding: Principal | | | | | \$ - |
| 3b. Interest | | | | | \$ - |
| 3c. Total (3a+3b) | \$ - | \$ - | \$ - | \$ - | \$ - |
| 4. Gross claim liability | | | | | \$ - |
| Less: | | | | | |
| 5a.Gross potential recoveries | | | | | \$ - |
| 5b. Discount, net | | | | | \$ - |
| 6. Net claim liability (4-5a-5b) | \$ - | \$ - | \$ - | \$ - | \$ - |
| 7. Unearned premium reserve | | | | | \$ - |
| 8. Reinsurance recoverables | | | | | \$ - |

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1

Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

Yes [] No [X]

1.2

If yes, has the report been filed with the domiciliary state?

Yes [] No []

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes [] No [X]

2.2

If yes, date of change:

3.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?
If yes, complete Schedule Y, Parts 1 and 1A.

Yes [X] No []

3.2

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes [X] No []

3.3

If the response to 3.2 is yes, provide a brief description of those changes.
The formation of 3 new domestic entities, 2 new international entities and the acquisition of 1 new international entity. The dissolution of 1 international entity. Change in ownership to 1 domestic limited liability company. Name change for 2 international entities.

3.4

Is the reporting entity publicly traded or a member of a publicly traded group?

Yes [] No [X]

3.5

If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes [] No [X]

4.2

If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

| 1 Name of Entity | 2 NAIC Company Code | 3 State of Domicile |
|---------------------|------------------------|------------------------|
| | | |

5.

If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?
If yes, attach an explanation.

Yes [] No [X] N/A []

6.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2023

6.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2023

6.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

05/30/2025

6.4

By what department or departments?
Ohio Department of Insurance

6.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes [] No [] N/A [X]

6.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes [] No [] N/A [X]

7.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes [] No [X]

7.2

If yes, give full information:
No

8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes [] No [X]

8.2

If response to 8.1 is yes, please identify the name of the bank holding company.

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [] No [X]

8.4

If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

| 1 Affiliate Name | 2 Location (City, State) | 3 FRB | 4 OCC | 5 FDIC | 6 SEC |
|---------------------|-----------------------------|----------|----------|-----------|----------|
| | | | | | |

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

GENERAL INTERROGATORIES

- 9.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
(c) Compliance with applicable governmental laws, rules and regulations;
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
(e) Accountability for adherence to the code.

Yes [X] No []
- 9.11

If the response to 9.1 is No, please explain:
.....
- 9.2

Has the code of ethics for senior managers been amended?

Yes [X] No []
- 9.21

If the response to 9.2 is Yes, provide information related to amendment(s).
A welcome message from Nicole Arangio replaced the welcome message from Karen Morton
- 9.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes [] No [X]
- 9.31

If the response to 9.3 is Yes, provide the nature of any waiver(s).
.....

FINANCIAL

- 10.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes [X] No []
- 10.2

If yes, indicate any amounts receivable from parent included in the Page 2 amount:\$

INVESTMENT

- 11.1

Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)

Yes [] No [X]
- 11.2

If yes, give full and complete information relating thereto:
.....
12.

Amount of real estate and mortgages held in other invested assets in Schedule BA:

\$
13.

Amount of real estate and mortgages held in short-term investments:

\$
- 14.1

Does the reporting entity have any investments in parent, subsidiaries and affiliates?

Yes [] No [X]
- 14.2

If yes, please complete the following:

| | 1 | 2 |
|---|---|--|
| | Prior Year-End Book/Adjusted Carrying Value | Current Quarter Book/Adjusted Carrying Value |
| 14.21 Bonds | \$ | \$ |
| 14.22 Preferred Stock | \$ | \$ |
| 14.23 Common Stock | \$ | \$ |
| 14.24 Short-Term Investments | \$ | \$ |
| 14.25 Mortgage Loans on Real Estate | \$ | \$ |
| 14.26 All Other | \$ | \$ |
| 14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) | \$ | \$ |
| 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above | \$ | \$ |

15.1

Has the reporting entity entered into any hedging transactions reported on Schedule DB?

Yes [] No [X]

15.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [X] N/A []
If no, attach a description with this statement.
.....

16.

For the reporting entity's security lending program, state the amount of the following as of the current statement date:

16.1

Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.

\$

16.2

Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

\$

16.3

Total payable for securities lending reported on the liability page.

\$
- 7.1

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

GENERAL INTERROGATORIES

17. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []
- 17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

| 1 Name of Custodian(s) | 2 Custodian Address |
|---------------------------|---|
| JP Morgan Chase | 1 Chase Manhattan Plaza, New York, NY 10005 |

- 17.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

| 1 Name(s) | 2 Location(s) | 3 Complete Explanation(s) |
|--------------|------------------|------------------------------|
| | | |

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [] No [X]
- 17.4 If yes, give full information relating thereto:

| 1 Old Custodian | 2 New Custodian | 3 Date of Change | 4 Reason |
|--------------------|--------------------|---------------------|-------------|
| | | | |

- 17.5 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. This includes both primary and sub-advisors. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

| 1 Name of Firm or Individual | 2 Affiliation |
|---|------------------|
| Liberty Mutual Group Asset Management Inc. | A..... |
| Liberty Mutual Investment Advisors, LLC | A..... |
| | |

- 17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [] No [X]

- 17.5098 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [] No [X]

- 17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

| 1 | 2 | 3 | 4 | 5 |
|---|---|-------------------------------|-----------------|--|
| Central Registration Depository Number | Name of Firm or Individual | Legal Entity Identifier (LEI) | Registered With | Investment Management Agreement (IMA) Filed |
| ..... | Liberty Mutual Group Asset Management Inc. | N/A | N/A | DS..... |
| ..... | Liberty Mutual Investment Advisors, LLC | N/A | N/A | DS..... |
| | | | | |

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []
- 18.2 If no, list exceptions:

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:
- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- b. Issuer or obligor is current on all contracted interest and principal payments.
- c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.
- Has the reporting entity self-designated 5GI securities? Yes [] No [X]

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
- a. The security was purchased prior to January 1, 2018.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
- d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.
- Has the reporting entity self-designated PLGI securities? Yes [] No [X]

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
- a. The shares were purchased prior to January 1, 2019.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
- d. The fund only or predominantly holds bonds in its portfolio.
- e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
- f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.
- Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No [X]

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.

If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change?
If yes, attach an explanation.
.....

Yes [] No [X] N/A []
2.

Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured?
If yes, attach an explanation.
.....

Yes [] No [X]
- 3.1

Have any of the reporting entity's primary reinsurance contracts been canceled?

Yes [] No [X]
- 3.2

If yes, give full and complete information thereto.
.....
- 4.1

Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of " tabular reserves") discounted at a rate of interest greater than zero?

Yes [] No [X]

4.2 If yes, complete the following schedule:

| | | | TOTAL DISCOUNT | | | | DISCOUNT TAKEN DURING PERIOD | | | |
|------------------|------------------|---------------|----------------|------------|------|-------|------------------------------|------------|------|-------|
| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 |
| Line of Business | Maximum Interest | Discount Rate | Unpaid Losses | Unpaid LAE | IBNR | TOTAL | Unpaid Losses | Unpaid LAE | IBNR | TOTAL |
| TOTAL | | | | | | | | | | |

5.

Operating Percentages:
- 5.1

A&H loss percent

0.000 %
- 5.2

A&H cost containment percent

0.000 %
- 5.3

A&H expense percent excluding cost containment expenses

0.000 %
- 6.1

Do you act as a custodian for health savings accounts?

Yes [] No [X]
- 6.2

If yes, please provide the amount of custodial funds held as of the reporting date\$.....
- 6.3

Do you act as an administrator for health savings accounts?

Yes [] No [X]
- 6.4

If yes, please provide the balance of the funds administered as of the reporting date\$.....
7.

Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?

Yes [X] No []
- 7.1

If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?

Yes [] No []

SCHEDULE F - CEDED REINSURANCE

[illegible]

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

| Current Year to Date - Allocated by States and Territories | | | | | | | | |
|--|------------------------------|------------------------------|----------------------------|--|----------------------------|------------------------------|----------------------------|-----------|
| States, etc. | 1 Active Status (a) | Direct Premiums Written | | Direct Losses Paid (Deducting Salvage) | | Direct Losses Unpaid | | |
| | | 2 Current Year To Date | 3 Prior Year To Date | 4 Current Year To Date | 5 Prior Year To Date | 6 Current Year To Date | 7 Prior Year To Date | |
| 1. Alabama | AL | N | | | | | | |
| 2. Alaska | AK | N | | | | | | |
| 3. Arizona | AZ | N | | | | | | |
| 4. Arkansas | AR | N | | | | | | |
| 5. California | CA | N | | | | | | |
| 6. Colorado | CO | N | | | | | | |
| 7. Connecticut | CT | N | | | | | | |
| 8. Delaware | DE | N | | | | | | |
| 9. District of Columbia | DC | N | | | | | | |
| 10. Florida | FL | N | | | | | | |
| 11. Georgia | GA | N | | | | | | |
| 12. Hawaii | HI | N | | | | | | |
| 13. Idaho | ID | N | | | | | | |
| 14. Illinois | IL | N | | | | | | |
| 15. Indiana | IN | N | | | | | | |
| 16. Iowa | IA | N | | | | | | |
| 17. Kansas | KS | N | | | | | | |
| 18. Kentucky | KY | N | | | | | | |
| 19. Louisiana | LA | N | | | | | | |
| 20. Maine | ME | N | | | | | | |
| 21. Maryland | MD | N | | | | | | |
| 22. Massachusetts | MA | N | | | | | | |
| 23. Michigan | MI | N | | | | | | |
| 24. Minnesota | MN | N | | | | | | |
| 25. Mississippi | MS | N | | | | | | |
| 26. Missouri | MO | N | | | | | | |
| 27. Montana | MT | N | | | | | | |
| 28. Nebraska | NE | N | | | | | | |
| 29. Nevada | NV | N | | | | | | |
| 30. New Hampshire | NH | N | | | | | | |
| 31. New Jersey | NJ | N | | | | | | |
| 32. New Mexico | NM | N | | | | | | |
| 33. New York | NY | N | | | | | | |
| 34. North Carolina | NC | N | | | | | | |
| 35. North Dakota | ND | N | | | | | | |
| 36. Ohio | OH | L | (66) | (212,901) | 899,844 | 3,681,661 | 7,438,183 | 8,859,430 |
| 37. Oklahoma | OK | N | | | | | | |
| 38. Oregon | OR | N | | | | | | |
| 39. Pennsylvania | PA | N | | | | | | |
| 40. Rhode Island | RI | N | | | | | | |
| 41. South Carolina | SC | L | | | | | | |
| 42. South Dakota | SD | N | | | | | | |
| 43. Tennessee | TN | N | | | | | | |
| 44. Texas | TX | N | | | | | | |
| 45. Utah | UT | N | | | | | | |
| 46. Vermont | VT | N | | | | | | |
| 47. Virginia | VA | N | | | | | | |
| 48. Washington | WA | N | | | | | | |
| 49. West Virginia | WV | N | | | | | | |
| 50. Wisconsin | WI | N | | | | | | |
| 51. Wyoming | WY | N | | | | | | |
| 52. American Samoa | AS | N | | | | | | |
| 53. Guam | GU | N | | | | | | |
| 54. Puerto Rico | PR | N | | | | | | |
| 55. U.S. Virgin Islands | VI | N | | | | | | |
| 56. Northern Mariana Islands | MP | N | | | | | | |
| 57. Canada | CAN | N | | | | | | |
| 58. Aggregate Other Alien OT | XXX | | | | | | | |
| 59. Totals | XXX | (66) | (212,901) | 899,844 | 3,681,661 | 7,438,183 | 8,859,430 | |
| DETAILS OF WRITE-INS | | | | | | | | |
| 58001. State OTH | XXX | | | | | | | |
| 58002. | XXX | | | | | | | |
| 58003. | XXX | | | | | | | |
| 58998. Summary of remaining write-ins for Line 58 from overflow page | XXX | | | | | | | |
| 58999. Totals (Lines 58001 through 58003 plus 58998)(Line 58 above) | XXX | | | | | | | |

(a) Active Status Counts:

1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG.....

2. R - Registered - Non-domiciled RRGs.....

3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state (other than their state of domicile - see DSLI).....

4. Q - Qualified - Qualified or accredited reinsurer.....

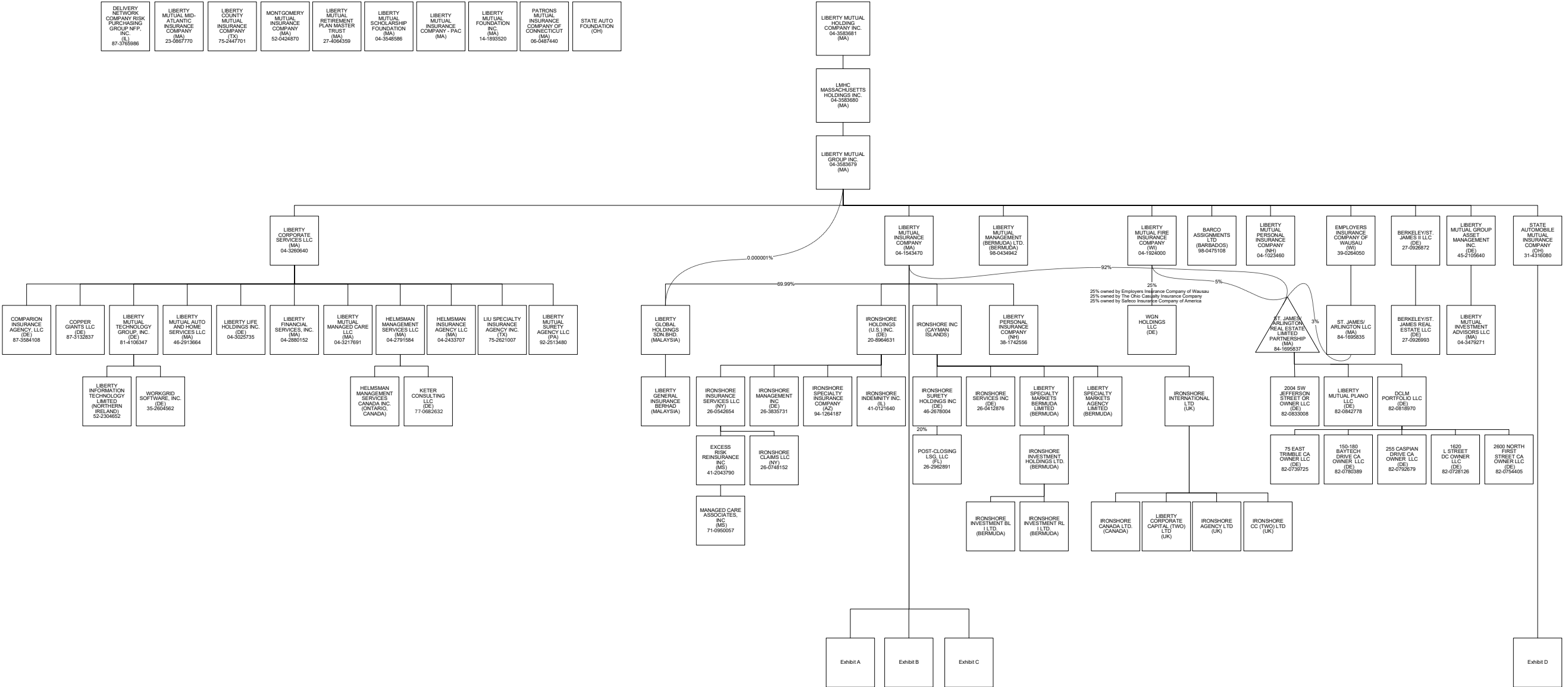
5. D - Domestic Surplus Lines Insurer (DSLII) - Reporting entities authorized to write surplus lines in the state of domicile.....

6. N - None of the above - Not allowed to write business in the state... ..

2

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STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO



STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

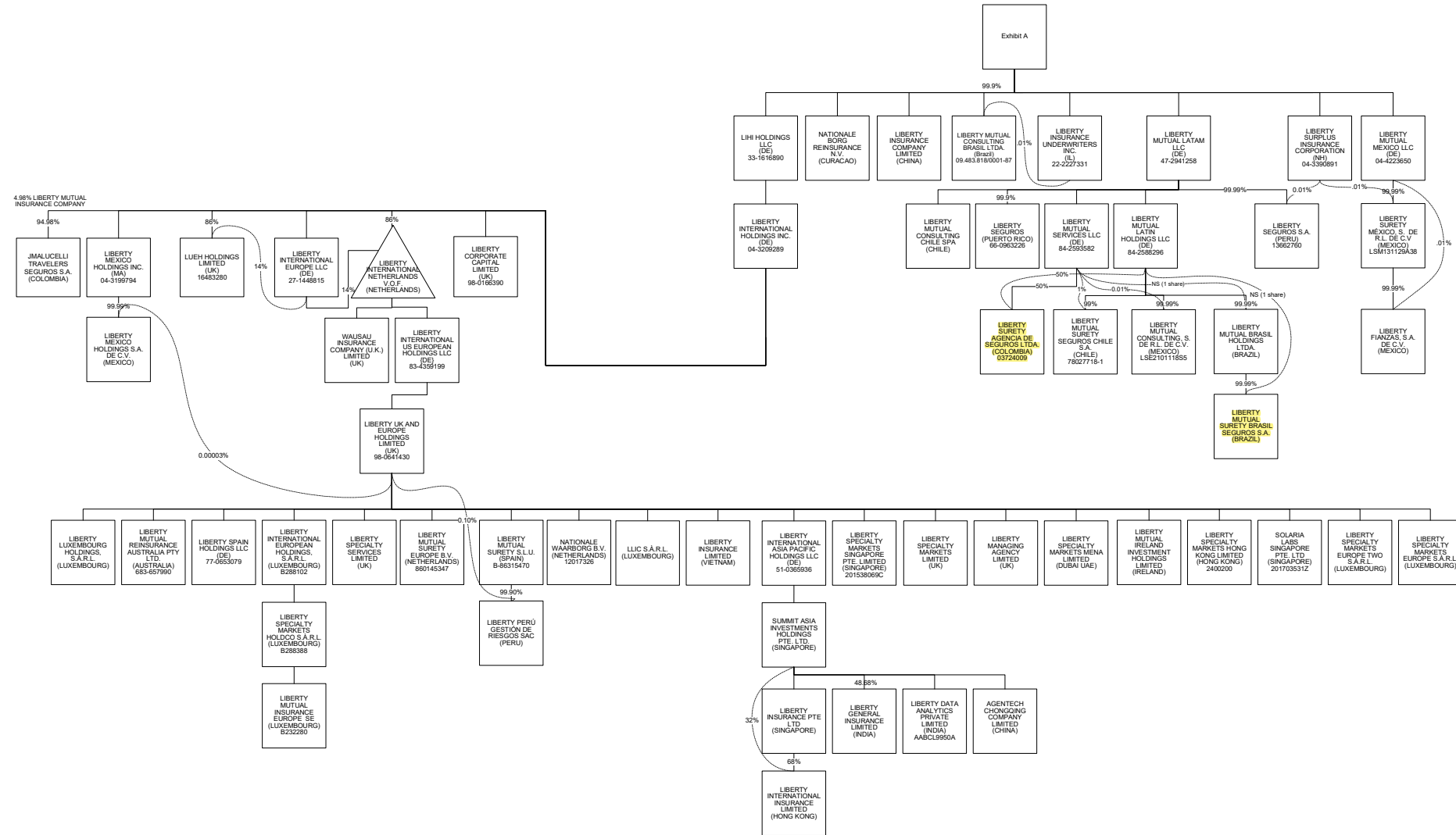
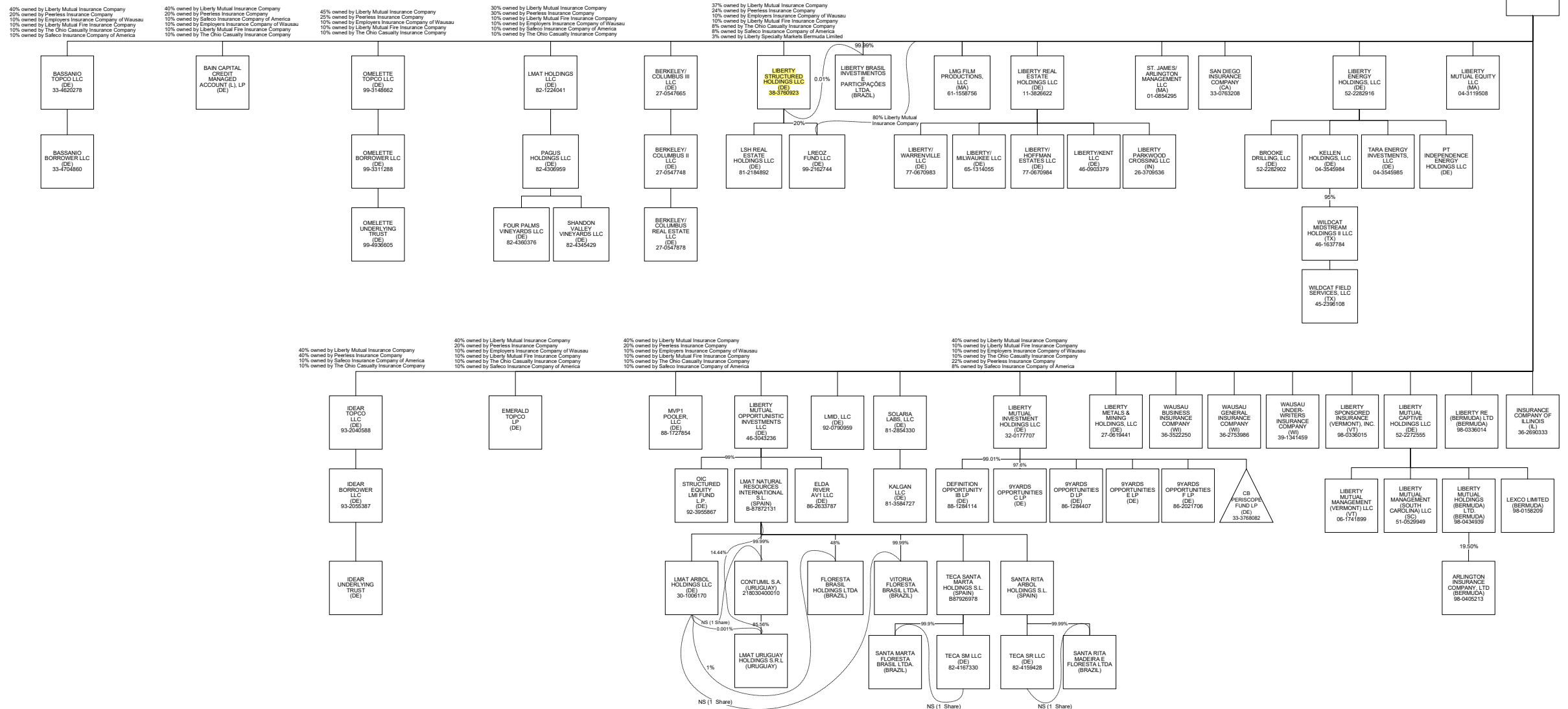
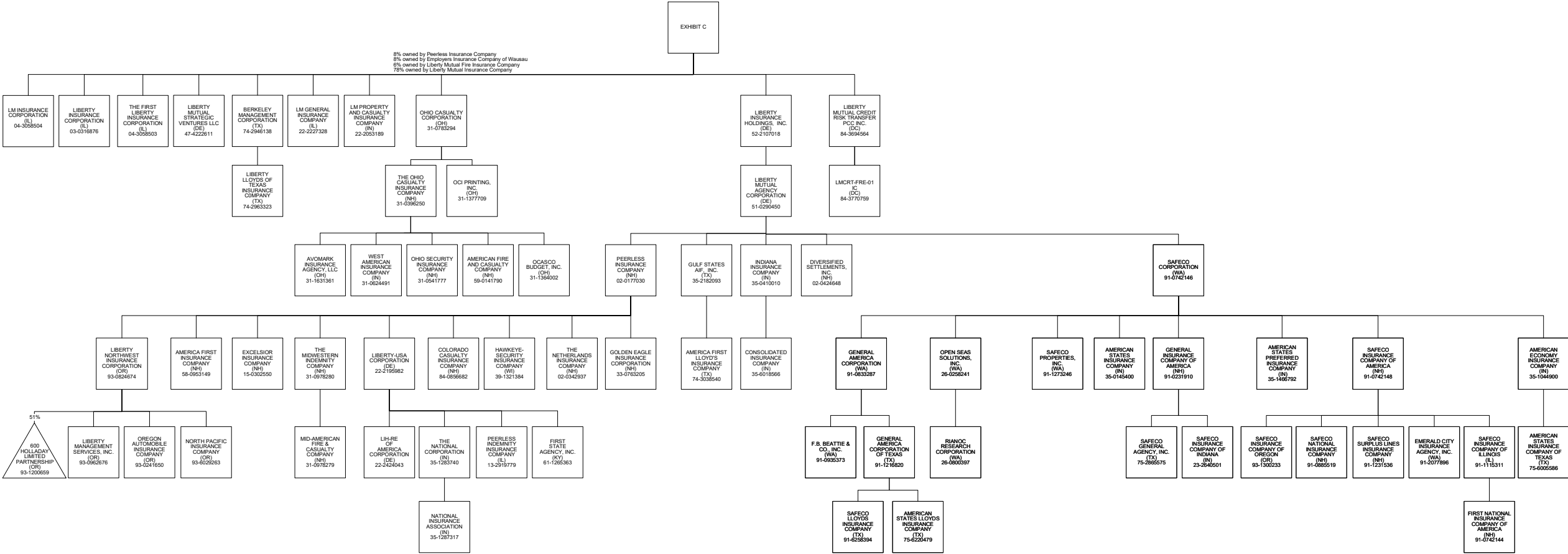


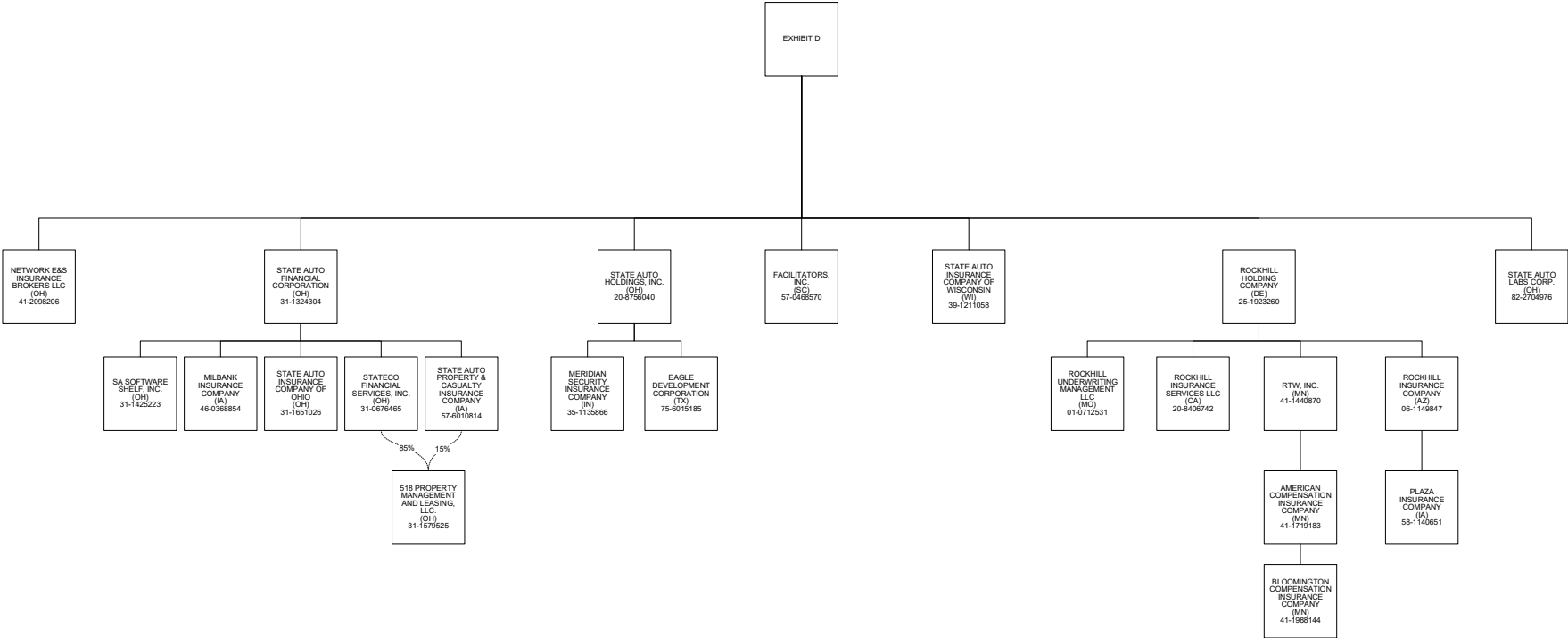
EXHIBIT B



STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO



STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO



STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13 If Control is Owner- ship Provide Percen- tage | 14 Ultimate Controlling Entity(ies)/Person(s) | 15 Is an SCA Filing Re- quired? (Yes/No) | 16 * |
|---------------|--|-------------------------|--------------|-----------------|-----|--|---|-----------------------------------|---|---|---|---|---|--|---------|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domi- ciliary Loca- tion | Rela- tion- ship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | | | | | |
| | | 00000 | 82-0780389 | | | | 150-180 Baytech Drive CA Owner LLC | DE | NIA | DGLM Portfolio LLC | Ownership, Board, Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 82-0728126 | | | | 1620 L Street DC Owner LLC | DE | NIA | DGLM Portfolio LLC | Ownership, Board, Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 82-0833008 | | | | 2004 SW Jefferson Street OR Owner LLC | DE | NIA | Partnership | Ownership, Board, Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 82-0792679 | | | | 255 Caspian Drive CA Owner LLC | DE | NIA | DGLM Portfolio LLC | Ownership, Board, Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 82-0754405 | | | | 2600 North First Street CA Owner LLC | DE | NIA | DGLM Portfolio LLC | Ownership, Board, Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 31-1579525 | | | | 518 Property Management and Leasing, LLC | OH | NIA | State Auto Property & Casualty Insurance Company | Ownership, Board, and Management | 15.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 31-1579525 | | | | 518 Property Management and Leasing, LLC | OH | NIA | Stateco Financial Services, Inc. | Ownership, Board, and Management | 85.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 93-1200659 | | | | 600 Holladay Limited Partnership | OR | NIA | Liberty Northwest Insurance Corporation | Ownership | 51.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 82-0739725 | | | | 75 East Trimble CA Owner LLC | DE | NIA | DGLM Portfolio LLC | Ownership, Board, Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | 9Yards Opportunities C LP | DE | NIA | Liberty Mutual Investment Holdings LLC | Ownership | 97.600 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 86-1284407 | | | | 9Yards Opportunities D LP | DE | NIA | Liberty Mutual Investment Holdings LLC | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 86-1284407 | | | | 9Yards Opportunities E LP | DE | NIA | Liberty Mutual Investment Holdings LLC | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 86-2021706 | | | | 9Yards Opportunities F LP | DE | NIA | Liberty Mutual Investment Holdings LLC | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | AgentTech Chongqing Company Limited | CHN | NIA | Summit Asia Investments Holdings Pte.Ltd. | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 12696 | 58-0953149 | | | | America First Insurance Company | NH | IA | Peerless Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 11526 | 74-3038540 | | | | America First Lloyd's Insurance Company | TX | IA | Gulf States AIF, Inc. | Management and Attorney-in-Fact | 0.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 45934 | 41-1719183 | | | | American Compensation Insurance Company | IN | IA | RTW, Inc. | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 19690 | 35-1044900 | | | | American Economy Insurance Company | IN | IA | Safeco Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 24066 | 59-0141790 | | | | American Fire and Casualty Company | NH | IA | The Ohio Casualty Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 19704 | 35-0145400 | | | | American States Insurance Company | IN | IA | Safeco Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 19712 | 75-6005586 | | | | American States Insurance Company of Texas | TX | IA | American Economy Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 31933 | 75-6220479 | | | | American States Lloyds Insurance Company | TX | IA | General America Corporation of Texas | Management and Attorney-in-Fact | 0.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 37214 | 35-1466792 | | | | American States Preferred Insurance Company | IN | IA | Safeco Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 98-0405213 | | | | Arlington Insurance Company Ltd. | BMU | IA | Liberty Mutual Holdings (Bermuda) Ltd | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 31-1631361 | | | | Avomark Insurance Agency, LLC | OH | IA | The Ohio Casualty Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Bain Capital Credit Managed Account (L), LP | DE | NIA | Liberty Mutual Insurance Company | Ownership | 40.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Bain Capital Credit Managed Account (L), LP | DE | NIA | Peerless Insurance Company | Ownership | 20.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Bain Capital Credit Managed Account (L), LP | DE | NIA | Safeco Insurance Company of America | Ownership | 10.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Bain Capital Credit Managed Account (L), LP | DE | NIA | Employers Insurance Company of Wausau | Ownership | 10.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Bain Capital Credit Managed Account (L), LP | DE | NIA | Liberty Mutual Fire Insurance Company | Ownership | 10.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Bain Capital Credit Managed Account (L), LP | DE | NIA | The Ohio Casualty Insurance Company | Ownership | 10.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 98-0475108 | | | | BARCO Assignments Ltd. | BRB | NIA | Liberty Mutual Group Inc. | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 33-4704860 | | | | Bassanio Borrower LLC | DE | NIA | Bassanio Topco LLC | Ownership, Management | 1.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 33-4620278 | | | | Bassanio Topco LLC | DE | NIA | Employers Insurance Company of Wausau | Ownership, Management | 0.100 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 33-4620278 | | | | Bassanio Topco LLC | DE | NIA | Liberty Mutual Fire Insurance Company | Ownership, Management | 0.100 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 33-4620278 | | | | Bassanio Topco LLC | DE | NIA | Liberty Mutual Insurance Company | Ownership, Management | 0.400 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 33-4620278 | | | | Bassanio Topco LLC | DE | NIA | The Ohio Casualty Insurance Company | Ownership, Management | 0.100 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 33-4620278 | | | | Bassanio Topco LLC | DE | NIA | Peerless Insurance Company | Ownership, Management | 0.200 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 33-4620278 | | | | Bassanio Topco LLC | DE | NIA | Safeco Insurance Company of America | Ownership, Management | 0.100 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 74-2946138 | | | | Berkeley Management Corporation | TX | NIA | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

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 | Domi-ciliary Loca-tion | Rela-tion-ship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Owner-ship Provide Percen-tage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Re-quired? (Yes/No) | * |
| | | 00000 | 27-0547748 | | | | Berkeley/Columbus II LLC | DE | NIA | Berkeley/Columbus III LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 27-0547665 | | | | Berkeley/Columbus III LLC | DE | NIA | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 27-0547878 | | | | Berkeley/Columbus Real Estate LLC | DE | NIA | Berkeley/Columbus II LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 27-0926872 | | | | Berkeley/St. James II LLC | DE | NIA | Liberty Mutual Group Inc. | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 27-0926993 | | | | Berkeley/St. James Real Estate LLC | DE | NIA | Berkeley/St. James II LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 12311 | 41-1988144 | | | | Bloomington Compensation Insurance Company | IN | IA | American Compensation Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 52-2282902 | | | | Brooke Drilling, LLC | DE | NIA | Liberty Energy Holdings, LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 33-3768082 | | | | CB Periscope Fund LP | DE | NIA | Liberty Mutual Investment Holdings LLC | Ownership | 99.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 41785 | 84-0856682 | | | | Colorado Casualty Insurance Company | NH | IA | Peerless Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 87-3584108 | | | | Comparion Insurance Agency, LLC | DE | IA | Liberty Corporate Services LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 22640 | 35-6018566 | | | | Consolidated Insurance Company | IN | IA | Indiana Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Contumil S.A. | URY | NIA | LMAT Natural Resources International S.L. | Ownership | 99.990 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Contumil S.A. | URY | NIA | LMAT Arbol Holdings LLC | Ownership | 0.010 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 87-3132837 | | | | Copper Giants LLC | DE | NIA | Liberty Corporate Services LLC | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 82-0818970 | | | | DCLM Portfolio LLC | DE | NIA | St. James/Arlington Real Estate Limited Partnership | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 88-1284114 | | | | Definition Opportunity IB LP | DE | NIA | Liberty Mutual Investment Holdings LLC | Ownership | 99.010 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 87-3765986 | | | | Delivery Network Company Risk Purchasing Group NFP, Inc. | IL | NIA | Not Applicable | Board and Management | 0.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 02-0424648 | | | | Diversified Settlements, Inc. | NH | NIA | Liberty Mutual Agency Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 75-6015185 | | | | Eagle Development Corporation | TX | NIA | State Auto Holdings, Inc. | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 86-2633787 | | | | Elda River AV1 LLC | DE | NIA | Liberty Mutual Opportunistic Investments LLC | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 91-2077896 | | | | Emerald City Insurance Agency, Inc. | WA | IA | Safeco Insurance Company of America | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Emerald Topco LP | DE | NIA | Liberty Mutual Insurance Company | Ownership | 40.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Emerald Topco LP | DE | NIA | Peerless Insurance Company | Ownership | 20.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Emerald Topco LP | DE | NIA | Employers Insurance Company of Wausau | Ownership | 10.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Emerald Topco LP | DE | NIA | Liberty Mutual Fire Insurance Company | Ownership | 10.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Emerald Topco LP | DE | NIA | The Ohio Casualty Insurance Company | Ownership | 10.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Emerald Topco LP | DE | NIA | Safeco Insurance Company of America | Ownership | 10.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 21458 | 39-0264050 | | | | Employers Insurance Company of Wausau | WI | IA | Liberty Mutual Group Inc. | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 11045 | 15-0302550 | | | | Excelsior Insurance Company | NH | IA | Peerless Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 41-2043790 | | | | Excess Risk Reinsurance, Inc. | MS | IA | Ironshore Insurance Services LLC | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 91-0935373 | | | | F.B. Beattie & Co., Inc. | WA | IA | General America Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 57-0468570 | | | | Facilitators, Inc. | SC | IA | State Automobile Mutual Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | YES | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 24724 | 91-0742144 | | | | First National Insurance Company of America | NH | IA | Safeco Insurance Company of Illinois | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 61-1265363 | | | | First State Agency, Inc. | KY | NIA | Liberty-USA Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Floresta Brasil Holdings Ltda. | BRA | NIA | LMAT Natural Resources International, S.L. | Ownership | 48.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Floresta Brasil Holdings Ltda. | BRA | NIA | LMAT Arbol Holdings LLC | Ownership | 1.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 82-4360376 | | | | Four Palms Vineyards LLC | DE | NIA | PAGUS Holdings LLC | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 91-0833287 | | | | General America Corporation | WA | NIA | Safeco Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 91-1216820 | | | | General America Corporation of Texas | TX | NIA | General America Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

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 | Domi-ciliary Location | Relation-ship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Owner-ship Provide Percen-tage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Re-quired? (Yes/No) | * |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 24732 | 91-0231910 | | | | General Insurance Company of America | NH | IA | Safeco Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 10836 | 33-0763205 | | | | Golden Eagle Insurance Corporation | NH | IA | Peerless Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 35-2182093 | | | | Gulf States AIF, Inc. | TX | NIA | Liberty Mutual Agency Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 36919 | 39-1321384 | | | | Hawkeye-Security Insurance Company | WI | IA | Peerless Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 04-2433707 | | | | Helmsman Insurance Agency LLC | MA | IA | Liberty Corporate Services LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 93-2040588 | | | | Helmsman Management Services Canada Inc. | CAN | NIA | Helmsman Management Services LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 04-2791584 | | | | Helmsman Management Services LLC | MA | NIA | Liberty Corporate Services LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 93-2055387 | | | | Idear Borrower LLC | DE | NIA | Idear Topco LLC | Ownership, Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 93-2040588 | | | | Idear Topco LLC | DE | NIA | Liberty Mutual Insurance Company | Ownership, Management | 40.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 93-2040588 | | | | Idear Topco LLC | DE | NIA | Peerless Insurance Company | Ownership, Management | 40.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 93-2040588 | | | | Idear Topco LLC | DE | NIA | Safeco Insurance Company of America | Ownership, Management | 10.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 93-2040588 | | | | Idear Topco LLC | DE | NIA | The Ohio Casualty Insurance Company | Ownership, Management | 10.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 93-2040588 | | | | Idear Underlying Trust | DE | NIA | Idear Borrower LLC | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 22659 | 35-0410010 | | | | Indiana Insurance Company | IN | IA | Liberty Mutual Agency Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 26700 | 36-2690333 | | | | Insurance Company of Illinois | IL | IA | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Ironshore Agency Ltd. | GBR | NIA | Ironshore International Ltd. | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Ironshore Canada Ltd. | CAN | NIA | Ironshore International Ltd. | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Ironshore CC (Two) Ltd. | GBR | NIA | Ironshore International Ltd. | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 26-0748152 | | | | Ironshore Claims LLC | NY | NIA | Ironshore Insurance Services LLC | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 20-8964631 | | | | Ironshore Holdings (US) Inc. | DE | NIA | Liberty Mutual Insurance Company | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 98-0579286 | | | | Ironshore Inc. | CYM | NIA | Liberty Mutual Insurance Company | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 23647 | 41-0121640 | | | | Ironshore Indemnity Inc. | IL | IA | Ironshore Holdings (US) Inc. | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 26-0542654 | | | | Ironshore Insurance Services LLC | NY | IA | Ironshore Holdings (US) Inc. | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Ironshore International Ltd. | GBR | NIA | Ironshore Inc. | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Ironshore Investment BL I Ltd. | BMU | NIA | Ironshore Investment Holdings Ltd. | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Ironshore Investment Holdings Ltd. | BMU | NIA | Ironshore Insurance Ltd. | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Ironshore Investment RL I Ltd. | BMU | NIA | Ironshore Investment Holdings Ltd. | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 26-3835731 | | | | Ironshore Management Inc. | DE | NIA | Ironshore Holdings (US) Inc. | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 26-0412876 | | | | Ironshore Services Inc. | DE | NIA | Ironshore Inc. | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 25445 | 94-1264187 | | | | Ironshore Specialty Insurance Company | AZ | IA | Ironshore Holdings (US) Inc. | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 46-2678004 | | | | Ironshore Surety Holdings Inc. | DE | IA | Ironshore Inc. | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | JMalucelli Travelers Seguros S.A. | COL | IA | Liberty International Holdings Inc. | Ownership, Board, Management | 0.950 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | JMalucelli Travelers Seguros S.A. | COL | IA | Liberty Mutual Insurance Company | Ownership, Board, Management | 0.050 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 81-3584727 | | | | Kalgan LLC | DE | NIA | Solaria Labs LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 04-3545984 | | | | Kellen Holdings, LLC | DE | NIA | Liberty Energy Holdings, LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 77-0682632 | | | | Keter Consulting LLC | DE | NIA | Helmsman Management Services LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 98-0158209 | | | | LEXCO Limited | BMU | IA | Liberty Mutual Captive Holdings LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Liberty Brasil Investimentos e Participacoes Ltda. | BRA | NIA | Liberty Mutual Insurance Company | Ownership, Board and Management | 99.990 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Liberty Brasil Investimentos e Participacoes Ltda. | BRA | NIA | Liberty Structured Holdings LLC | Ownership, Board and Management | 0.010 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Liberty Corporate Capital (Two) Ltd. | GBR | NIA | Ironshore International Ltd. | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 98-0166390 | | | | Liberty Corporate Capital Limited | GBR | IA | Liberty International Holdings Inc. | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |

12.3

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 | Domi-ciliary Location | Relation-ship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Owner-ship Provide Percen-tage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Re-quired? (Yes/No) | * |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 00000 | 04-3280640 | | | | Liberty Corporate Services LLC | ..MA..... | ..NIA..... | Liberty Mutual Group Inc. | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 19544 | 75-2447701 | | | | Liberty County Mutual Insurance Company | ..TX..... | ..IA..... | Berkeley Management Corporation Summit Asia Investments Holdings Pte. Ltd. | Board and Management | 0.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Data Analytics Private Limited | ..IND..... | ..NIA..... | | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 52-2282916 | | | | Liberty Energy Holdings, LLC | ..DE..... | ..NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Fianzas, S.A. de C.V. | ..MEX..... | ..IA..... | Liberty Surety Mexico, S. de R.L. de C.V. | Ownership, Board and Management | 99.990 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Fianzas, S.A. de C.V. | ..MEX..... | ..IA..... | Liberty Mutual Mexico LLC | Ownership, Board and Management | 0.010 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 04-2880152 | | | | Liberty Financial Services, Inc. | ..MA..... | ..NIA..... | Liberty Corporate Services LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty General Insurance Berhad | ..MYS..... | ..IA..... | Liberty Global Holdings SDN.BHD. Summit Asia Investments Holdings Pte. Ltd. | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty General Insurance Limited | ..IND..... | ..IA..... | | Ownership, Management | 48.680 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Global Holdings SDN.BHD. | ..MYS..... | ..IA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 69.990 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 00000 | | | | | Liberty Global Holdings SDN.BHD. | ..MYS..... | ..IA..... | Liberty Mutual Group Inc. | Ownership, Board and Management | 0.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 52-2304652 | | | | Liberty Information Technology Limited | ..IRL..... | ..NIA..... | Liberty Mutual Technology Group Inc. | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Insurance Company Limited | ..CHN..... | ..IA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 42404 | 03-0316876 | | | | Liberty Insurance Corporation | ..IL..... | ..IA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 52-2107018 | | | | Liberty Insurance Holdings, Inc. | ..DE..... | ..NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Insurance Limited | ..VNM..... | ..IA..... | Liberty UK and Europe Holdings Limited Summit Asia Investments Holdings Pte. Ltd. | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Insurance Pte Ltd | ..SGP..... | ..IA..... | | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 19917 | 22-2227331 | | | | Liberty Insurance Underwriters Inc. | ..IL..... | ..IA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 51-0365936 | | | | Liberty International Asia Pacific Holdings LLC | ..DE..... | ..NIA..... | Liberty UK and Europe Holdings Limited | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 27-1448815 | | | | Liberty International Europe LLC | ..DE..... | ..NIA..... | Liberty International Holdings Inc. | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 00000 | | | | | Liberty International European Holdings,Sarl | ..LUX..... | ..NIA..... | Liberty UK and Europe Holdings Limited | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 04-3209289 | | | | Liberty International Holdings Inc. | ..DE..... | ..NIA..... | LIHI Holdings LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty International Insurance Limited | ..HKG..... | ..IA..... | Liberty Insurance Pte Ltd Summit Asia Investments Holdings Pte. Ltd. | Ownership, Board and Management | 68.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty International Insurance Limited | ..HKG..... | ..IA..... | | Ownership, Board and Management | 32.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty International Netherlands V.O.F. | ..NLD..... | ..NIA..... | Liberty International Holdings Inc. | Ownership, Board and Management | 86.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty International Netherlands V.O.F. | ..NLD..... | ..NIA..... | Liberty International Europe LLC | Ownership, Board and Management | 14.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 83-4359199 | | | | Liberty International US European Holdings LLC | ..DE..... | ..NIA..... | Liberty International Netherlands V.O.F. | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 04-3025735 | | | | Liberty Life Holdings Inc. | ..DE..... | ..NIA..... | Liberty Corporate Services LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 11041 | 74-2963323 | | | | Liberty Lloyds of Texas Insurance Company | ..TX..... | ..IA..... | Berkeley Management Corporation | Management and Attorney-in-Fact | 0.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Luxembourg Holdings, S.à r.l. | ..LUX..... | ..NIA..... | Liberty UK and Europe Holdings Limited | Ownership, Board, Management | 1.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 00000 | 93-0962676 | | | | Liberty Management Services, Inc. | ..OR..... | ..NIA..... | Liberty Northwest Insurance Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Managing Agency Limited | ..GBR..... | ..IA..... | Liberty UK and Europe Holdings Limited | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 27-0619441 | | | | Liberty Metals & Mining Holdings, LLC | ..DE..... | ..NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 04-3199794 | | | | Liberty Mexico Holdings Inc. | ..MA..... | ..NIA..... | Liberty International Holdings Inc. | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Mexico Holdings S.A. de C.V. | ..MEX..... | ..NIA..... | Liberty Mexico Holdings Inc. | Ownership, Board and Management | 99.990 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Mexico Holdings S.A. de C.V. | ..MEX..... | ..NIA..... | Liberty UK and Europe Holdings Limited | Ownership, Board and Management | 0.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 51-0290450 | | | | Liberty Mutual Agency Corporation | ..DE..... | ..NIA..... | Liberty Insurance Holdings, Inc. | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 46-2913664 | | | | Liberty Mutual Auto and Home Services LLC | ..MA..... | ..NIA..... | Liberty Corporate Services LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Mutual Brasil Holdings Ltda. | ..BRA..... | ..NIA..... | Liberty Mutual Latin Holdings LLC | Ownership, Board, Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

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 | Domi-ciliary Location | Relation-ship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Owner-ship Provide Percen-tage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Re-quired? (Yes/No) | * |
| | | 00000 | | | | | Liberty Mutual Brasil Holdings Ltda. | .BRA..... | NIA..... | Liberty Mutual Services LLC | Ownership, Board, Management | 0.000 | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 52-2272555 .. | | | | Liberty Mutual Captive Holdings LLC | .DE..... | NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | | | | | Liberty Mutual Consulting Brasil Ltda. | .BRA..... | NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 99.900 | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | | | | | Liberty Mutual Consulting Brasil Ltda. | .BRA..... | NIA..... | Liberty Insurance Underwriters Inc. | Ownership, Board and Management | 0.100 | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | | | | | Liberty Mutual Consulting Chile SpA | .CHL..... | NIA..... | Liberty Mutual Latam LLC | Ownership, Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | | | | | | Liberty Mutual Consulting, S. de R.L. de C.V. | | | | | | | | |
| | | 00000 | | | | | Liberty Mutual Consulting, S. de R.L. de C.V. | .MEX..... | IA..... | Liberty Mutual Latin Holdings LLC | Ownership, Board and Management | 99.990 | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | | | | | Liberty Mutual Credit Risk Transfer PCC Inc. | .MEX..... | IA..... | Liberty Mutual Services LLC | Ownership, Board and Management | 0.010 | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 84-3694564 | | | | Liberty Mutual Equity LLC | .DC..... | IA..... | Liberty Mutual Insurance Company | Ownership, Board, Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 04-3119508 .. | | | | Liberty Mutual Equity LLC | .MA..... | NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 23035 | 04-1924000 .. | | | | Liberty Mutual Fire Insurance Company | .WI..... | IA..... | Liberty Mutual Group Inc. | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 14-1893520 .. | | | | Liberty Mutual Foundation Inc. | .MA..... | NIA..... | Liberty Mutual Insurance Company | Board and Management | 0.000 | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 45-2105640 | | | | Liberty Mutual Group Asset Management Inc. . | .DE..... | NIA..... | Liberty Mutual Group Inc. | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 04-3583679 .. | | | | Liberty Mutual Group Inc. | .MA..... | UIP..... | LMHC Massachusetts Holdings Inc. | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 04-3583681 .. | | | | Liberty Mutual Holding Company Inc. | .MA..... | UIP..... | N/A | Ultimate Controlling Parent | 0.000 | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 98-0434939 .. | | | | Liberty Mutual Holdings (Bermuda) Ltd | .BMU..... | NIA..... | Liberty Mutual Captive Holdings LLC | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 23043 | 04-1543470 .. | | | | Liberty Mutual Insurance Company | .MA..... | IA..... | Liberty Mutual Group Inc. | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | | | | | Liberty Mutual Insurance Company – PAC | .MA..... | NIA..... | Liberty Mutual Insurance Company | Board and Management | 0.000 | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | | | | | Liberty Mutual Insurance Europe SE | .LUX..... | IA..... | Liberty Specialty Markets Holdco S.L.U. ... | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | | | | | | Liberty Mutual Group Asset Management Inc. | | | Liberty Mutual Group Asset Management Inc. | | | | | |
| | | 00000 | 04-3479271 .. | | | | Liberty Mutual Investment Advisors LLC | .MA..... | NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 32-0177707 .. | | | | Liberty Mutual Investment Holdings LLC | .DE..... | NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 40.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 32-0177707 .. | | | | Liberty Mutual Investment Holdings LLC | .DE..... | NIA..... | Peerless Insurance Company | Ownership, Board and Management | 22.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 32-0177707 .. | | | | Liberty Mutual Investment Holdings LLC | .DE..... | NIA..... | Employers Insurance Company of Wausau | Ownership, Board and Management | 10.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 32-0177707 .. | | | | Liberty Mutual Investment Holdings LLC | .DE..... | NIA..... | Liberty Mutual Fire Insurance Company | Ownership, Board and Management | 10.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 32-0177707 .. | | | | Liberty Mutual Investment Holdings LLC | .DE..... | NIA..... | The Ohio Casualty Insurance Company | Ownership, Board and Management | 10.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 32-0177707 .. | | | | Liberty Mutual Investment Holdings LLC | .DE..... | NIA..... | Safeco Insurance Company of America | Ownership, Board and Management | 8.000 | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | | | | | | Liberty Mutual Ireland Investment Holdings Limited | .IRL..... | NIA..... | Liberty UK and Europe Holdings Limited | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 47-2941258 | | | | Liberty Mutual Latam LLC | .DE..... | NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 84-2588296 .. | | | | Liberty Mutual Latin Holdings LLC | .DE..... | NIA..... | Liberty Mutual Latam LLC | Ownership, Board, Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 04-3217691 .. | | | | Liberty Mutual Managed Care LLC | .MA..... | NIA..... | Liberty Corporate Services LLC | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 98-0434942 | | | | Liberty Mutual Management (Bermuda) Ltd | .BMU..... | NIA..... | Liberty Mutual Group Inc. | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | | | | | | Liberty Mutual Management (South Carolina) LLC | .SC..... | NIA..... | Liberty Mutual Captive Holdings LLC | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 51-0529949 .. | | | | Liberty Mutual Management (Vermont) LLC | .VT..... | NIA..... | Liberty Mutual Captive Holdings LLC | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 06-1741899 .. | | | | Liberty Mutual Mexico LLC | .DE..... | NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 14486 | 23-0867770 .. | | | | Liberty Mutual Mid-Atlantic Insurance Company | .MA..... | IA..... | Liberty Mutual Insurance Company | Board and Management | 0.000 | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | | | | | | Liberty Mutual Opportunistic Investments LLC | | | | | | | | |
| | | 00000 | 46-3043236 .. | | | | | .DE..... | NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 12484 | 04-1023460 .. | | | | Liberty Mutual Personal Insurance Company ... | .NH..... | IA..... | Liberty Mutual Group Inc. | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | 82-0842778 .. | | | | Liberty Mutual Plano LLC | .DE..... | NIA..... | St. James/Arlington Real Estate Limited Partnership | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |
| | | 00000 | | | | | Liberty Mutual Reinsurance Australia Pty Ltd. | .AUS..... | IA..... | Liberty UK and Europe Holdings Limited | Ownership, Board, Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | |

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

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

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13 If Control is Owner- ship Provide Percen- tage | 14 Ultimate Controlling Entity(ies)/Person(s) | 15 Is an SCA Filing Re- quired? (Yes/No) | 16 * |
|---------------|---|-------------------------|--------------|-----------------|-----|--|---|-----------------------------------|---|---|---|---|---|--|---------|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domi- ciliary Loca- tion | Rela- tion- ship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | | | | | |
| | | 00000 | 27-4064359 | | | | Liberty Mutual Retirement Plan Master Trust | ..MA..... | ..NIA..... | Liberty Mutual Group Inc. | Board | 0.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 04-3548586 | | | | Liberty Mutual Scholarship Foundation | ..MA..... | ..NIA..... | Liberty Mutual Insurance Company | Board and Management | 0.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 84-2593582 | | | | Liberty Mutual Services LLC | ..DE..... | ..NIA..... | Liberty Mutual Latam LLC | Ownership, Board, Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 47-4222611 | | | | Liberty Mutual Strategic Ventures LLC | ..DE..... | ..NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 92-2513480 | | | | Liberty Mutual Surety Agency LLC | ..PA..... | ..IA..... | Liberty Corporate Services LLC | Ownership, Board, Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Mutual Surety Brasil Seguros S.A. | ..BRA..... | ..IA..... | Liberty Mutual Brasil Holdings Ltda. | Ownership, Board, Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Mutual Surety Brasil Seguros S.A. | ..BRA..... | ..IA..... | Liberty Mutual Latin Holdings LLC | Ownership, Board, Management | 0.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 86-0145347 | | | | Liberty Mutual Surety Europe B.V. | ..NLD..... | ..IA..... | Liberty UK and Europe Holdings Limited ... | Ownership..... | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Mutual Surety S.L.U. | ..ESP..... | ..IA..... | Liberty UK and Europe Holdings Limited ... | Ownership, Board, Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 78-0277181 | | | | Liberty Mutual Surety Seguros Chile S.A. | ..CHL..... | ..IA..... | Liberty Mutual Latin Holdings LLC | Ownership, Board, Management | 99.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 78-0277182 | | | | Liberty Mutual Surety Seguros Chile S.A. | ..CHL..... | ..IA..... | Liberty Mutual Services LLC | Ownership, Board, Management | 1.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 81-4106347 | | | | Liberty Mutual Technology Group, Inc. | ..DE..... | ..NIA..... | Liberty Corporate Services LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 41939 | 93-0824674 | | | | Liberty Northwest Insurance Corporation | ..OR..... | ..IA..... | Peerless Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 26-3709536 | | | | Liberty Parkwood Crossing LLC | ..IN..... | ..NIA..... | Liberty Real Estate Holdings LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| .0111 | Liberty Mutual Insurance Company and its Affiliated Insurers | 11746 | 38-1742556 | | | | Liberty Personal Insurance Company | ..NH..... | ..IA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Perú Gestión de Riesgos SAC | ..PER..... | ..NIA..... | Liberty Mutual Surety S.L.U. | Ownership, Board, Management | 99.900 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Perú Gestión de Riesgos SAC | ..PER..... | ..NIA..... | Liberty UK and Europe Holdings Limited ... | Ownership, Board, Management | 0.100 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 98-0336014 | | | | Liberty Re (Bermuda) Limited | ..BMU..... | ..IA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 11-3826622 | | | | Liberty Real Estate Holdings LLC | ..DE..... | ..NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 66-0963226 | | | | Liberty Seguros | ..PR..... | ..IA..... | Liberty Mutual Latam LLC | Ownership, Board and Management | 99.900 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Seguros S.A. | ..PER..... | ..IA..... | Liberty Mutual Latam LLC | Ownership, Board and Management | 99.990 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Seguros S.A. | ..PER..... | ..IA..... | Liberty Surplus Insurance Corporation | Ownership, Board and Management | 0.010 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 77-0653079 | | | | Liberty Spain Holdings LLC | ..DE..... | ..NIA..... | Liberty UK and Europe Holdings Limited ... | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Specialty Markets Agency Limited ... | ..BMU..... | ..NIA..... | Ironshore Inc. | Ownership..... | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 98-0579287 | | | | Liberty Specialty Markets Bermuda Limited ... | ..BMU..... | ..NIA..... | Ironshore Inc. | Ownership..... | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Specialty Markets Europe S.a.r.l. | ..LUX..... | ..NIA..... | Liberty UK and Europe Holdings Limited ... | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Specialty Markets Europe Two Sàrl ... | ..LUX..... | ..NIA..... | Liberty UK and Europe Holdings Limited ... | Ownership..... | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Specialty Markets Europe Two Sàrl ... | ..LUX..... | ..NIA..... | Liberty International European Holdings | | | | | |
| | | 00000 | | | | | Liberty Specialty Markets Holdco Sàrl | ..LUX..... | ..NIA..... | Sàrl | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Specialty Markets Hong Kong Limited | ..HKG..... | ..IA..... | Liberty UK and Europe Holdings Limited ... | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Specialty Markets Limited | ..GBR..... | ..NIA..... | Liberty UK and Europe Holdings Limited ... | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Specialty Markets MENA Limited | ..ARE..... | ..IA..... | Liberty UK and Europe Holdings Limited ... | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Specialty Markets Singapore Pte. Limited | ..SGP..... | ..IA..... | Liberty UK and Europe Holdings Limited ... | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Specialty Services Limited | ..GBR..... | ..NIA..... | Liberty UK and Europe Holdings Limited ... | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 98-0336015 | | | | Liberty Sponsored Insurance (Vermont), Inc. | ..VT..... | ..IA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 38-3760923 | | | | Liberty Structured Holdings LLC | ..DE..... | ..NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 37.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 38-3760923 | | | | Liberty Structured Holdings LLC | ..DE..... | ..NIA..... | Peerless Insurance Company | Ownership, Board and Management | 24.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 38-3760923 | | | | Liberty Structured Holdings LLC | ..DE..... | ..NIA..... | Employers Insurance Company of Wausau | Ownership, Board and Management | 10.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 38-3760923 | | | | Liberty Structured Holdings LLC | ..DE..... | ..NIA..... | Liberty Mutual Fire Insurance Company | Ownership, Board and Management | 10.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 38-3760923 | | | | Liberty Structured Holdings LLC | ..DE..... | ..NIA..... | The Ohio Casualty Insurance Company | Ownership, Board and Management | 8.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 38-3760923 | | | | Liberty Structured Holdings LLC | ..DE..... | ..NIA..... | Safeco Insurance Company of America | Ownership, Board and Management | 8.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | 38-3760923 | | | | Liberty Structured Holdings LLC | ..DE..... | ..NIA..... | Liberty Specialty Markets Bermuda Limited | Ownership, Board and Management | 3.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Surety Agencia de Seguros Ltda. | ..COL..... | ..IA..... | Liberty Mutual Latin Holdings LLC | Ownership, Board, Management | 50.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Surety Agencia de Seguros Ltda. | ..COL..... | ..IA..... | Liberty Mutual Services LLC | Ownership, Board, Management | 50.000 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Surety México, S. de R.L. de C.V. ... | ..MEX..... | ..NIA..... | Liberty Mutual Mexico LLC | Ownership, Board and Management | 99.990 | Liberty Mutual Holding Company Inc. | ...NO..... | |
| | | 00000 | | | | | Liberty Surety México, S. de R.L. de C.V. ... | ..MEX..... | ..NIA..... | Liberty Surplus Insurance Corporation | Ownership, Board and Management | 0.010 | Liberty Mutual Holding Company Inc. | ...NO..... | |

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

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 | Domi-ciliary Location | Relation-ship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Ownership Provide Percen-tage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Re-quired? (Yes/No) | * |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 10725 | 04-3390891 .. | ..... | ..... | ..... | Liberty Surplus Insurance Corporation | .. NH..... | IA..... | Liberty Mutual Insurance Company Liberty International US European Holdings LLC | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 98-0641430 .. | ..... | ..... | ..... | Liberty UK and Europe Holdings Limited | .. GBR..... | NIA..... | Liberty International US European Holdings LLC | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 77-0670984 .. | ..... | ..... | ..... | Liberty/Hoffman Estates LLC | .. DE..... | NIA..... | Liberty Real Estate Holdings LLC | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 46-0903379 .. | ..... | ..... | ..... | Liberty/Kent LLC | .. DE..... | NIA..... | Liberty Real Estate Holdings LLC | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 65-1314055 .. | ..... | ..... | ..... | Liberty/Milwaukee LLC | .. DE..... | NIA..... | Liberty Real Estate Holdings LLC | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 77-0670983 .. | ..... | ..... | ..... | Liberty/Warrenville LLC | .. DE..... | NIA..... | Liberty Real Estate Holdings LLC | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 22-2195982 .. | ..... | ..... | ..... | Liberty-USA Corporation | .. DE..... | NIA..... | Peerless Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 33-1616890 .. | ..... | ..... | ..... | LIHI Holdings LLC | .. DE..... | NIA..... | Liberty Mutual Insurance Company | Ownership, Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 22-2424043 .. | ..... | ..... | ..... | LIH-RE of America Corporation | .. DE..... | NIA..... | Liberty-USA Corporation | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 75-2621007 .. | ..... | ..... | ..... | LIU Specialty Insurance Agency Inc. | .. TX..... | IA..... | Liberty Corporate Services LLC | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 ..... | ..... | ..... | ..... | ..... | LLIC S.a. r.l. | .. LUX..... | NIA..... | Liberty UK and Europe Holdings Limited ... | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 36447 | 22-2227328 .. | ..... | ..... | ..... | LM General Insurance Company | .. IL..... | IA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 33600 | 04-3058504 .. | ..... | ..... | ..... | LM Insurance Corporation | .. IL..... | IA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 32352 | 22-2053189 .. | ..... | ..... | ..... | LM Property and Casualty Insurance Company .. | .. IN..... | IA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 30-1006170 .. | ..... | ..... | ..... | LMAT Arbol Holdings LLC | .. DE..... | NIA..... | LMAT Natural Resources International S.L. | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 82-1224041 .. | ..... | ..... | ..... | LMAT Holdings LLC | .. DE..... | NIA..... | Liberty Mutual Insurance Company | Ownership..... | 30.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 82-1224041 .. | ..... | ..... | ..... | LMAT Holdings LLC | .. DE..... | NIA..... | Peerless Insurance Company | Ownership..... | 30.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 82-1224041 .. | ..... | ..... | ..... | LMAT Holdings LLC | .. DE..... | NIA..... | Liberty Mutual Fire Insurance Company | Ownership..... | 10.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 82-1224041 .. | ..... | ..... | ..... | LMAT Holdings LLC | .. DE..... | NIA..... | Employers Insurance Company of Wausau | Ownership..... | 10.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 82-1224041 .. | ..... | ..... | ..... | LMAT Holdings LLC | .. DE..... | NIA..... | Safeco Insurance Company of America | Ownership..... | 10.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 82-1224041 .. | ..... | ..... | ..... | LMAT Holdings LLC | .. DE..... | NIA..... | The Ohio Casualty Insurance Company | Ownership..... | 10.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 ..... | ..... | ..... | ..... | ..... | LMAT Natural Resources International S.L. | .. ESP..... | NIA..... | Liberty Mutual Opportunistic Investments LLC | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 ..... | ..... | ..... | ..... | ..... | LMAT Uruguay Holdings S.R.L. | .. URY..... | NIA..... | Contumil S.A. | Ownership..... | 85.560 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 ..... | ..... | ..... | ..... | ..... | LMAT Uruguay Holdings S.R.L. | .. URY..... | NIA..... | LMAT Natural Resources International S.L. | Ownership..... | 14.440 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 ..... | ..... | ..... | ..... | ..... | LMAT Uruguay Holdings S.R.L. | .. URY..... | NIA..... | LMAT Arbol Holdings LLC | Ownership..... | 0.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 84-3770759 .. | ..... | ..... | ..... | LMCRT-FRE-01 IC | .. DC..... | IA..... | Liberty Mutual Credit Risk Transfer PCC Inc. | Ownership, Board, Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 61-1558756 .. | ..... | ..... | ..... | LMG Film Productions, LLC | .. MA..... | NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 04-3583680 .. | ..... | ..... | ..... | LMHC Massachusetts Holdings Inc. | .. MA..... | UIP..... | Liberty Mutual Holding Company Inc. | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 92-0790959 .. | ..... | ..... | ..... | LMID, LLC | .. DE..... | NIA..... | Liberty Mutual Insurance Company | Ownership..... | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 99-2162744 .. | ..... | ..... | ..... | LREOZ Fund LLC | .. DE..... | NIA..... | Liberty Structured Holdings LLC | Ownership, Management | 20.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 99-2162744 .. | ..... | ..... | ..... | LREOZ Fund LLC | .. DE..... | NIA..... | Liberty Mutual Insurance Company | Ownership, Management | 80.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 81-2184892 .. | ..... | ..... | ..... | LSH Real Estate Holdings LLC | .. DE..... | NIA..... | Liberty Structured Holdings LLC | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 ..... | ..... | ..... | ..... | ..... | LUEH Holdings Limited | .. GBR..... | NIA..... | Liberty International Holdings Inc. | Ownership, Board, Management | 0.860 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 ..... | ..... | ..... | ..... | ..... | LUEH Holdings Limited | .. GBR..... | NIA..... | Liberty International Europe LLC | Ownership, Board, Management | 0.140 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 71-0950057 .. | ..... | ..... | ..... | Managed Care Associates, Inc. | .. MS..... | IA..... | Excess Risk Reinsurance Inc. | Ownership..... | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 23353 | 35-1135866 .. | ..... | ..... | ..... | Meridian Security Insurance Company | .. IN..... | IA..... | State Auto Holdings, Inc. | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 23507 | 31-0978279 .. | ..... | ..... | ..... | Mid-American Fire & Casualty Company | .. NH..... | IA..... | The Midwestern Indemnity Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 41653 | 46-0368854 .. | ..... | ..... | ..... | Milbank Insurance Company | .. IA..... | IA..... | State Auto Financial Corporation | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 14613 | 52-0424870 .. | ..... | ..... | ..... | Montgomery Mutual Insurance Company | .. MA..... | IA..... | Liberty Mutual Insurance Company | Board and Management | 0.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |
| | | 00000 | 88-1727854 .. | ..... | ..... | ..... | MVP1 Pooler, LLC | .. DE..... | NIA..... | Liberty Mutual Insurance Company | Ownership..... | 40.000 ... | Liberty Mutual Holding Company Inc. ... | ... NO..... | ..... |

12.7

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) | * |
| | Liberty Mutual Insurance Company and its Affiliated Insurers | 00000 | 88-1727854 | | | | MVP1 Pooler, LLC | DE | NIA | Peerless Insurance Company | Ownership | 20.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 88-1727854 | | | | MVP1 Pooler, LLC | DE | NIA | Employers Insurance Company of Wausau | Ownership | 10.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 88-1727854 | | | | MVP1 Pooler, LLC | DE | NIA | Liberty Mutual Fire Insurance Company | Ownership | 10.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 88-1727854 | | | | MVP1 Pooler, LLC | DE | NIA | The Ohio Casualty Insurance Company | Ownership | 10.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 88-1727854 | | | | MVP1 Pooler, LLC | DE | NIA | Safeco Insurance Company of America | Ownership | 10.000 | Liberty Mutual Holding Company Inc. | NO | |
| | Liberty Mutual Insurance Company and its Affiliated Insurers | 27944 | 35-1287317 | | | | National Insurance Association | IN | IA | The National Corporation | Management and Attorney-in-Fact | 0.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Nationale Borg Reinsurance N.V. | CW | IA | Liberty Mutual Insurance Company | Ownership, Board, Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | Nationale Waarborg B.V. | NLD | IA | Liberty UK and Europe Holdings Limited | Ownership, Board, Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 41-2098206 | | | | Network E&S Insurance Brokers, LLC | OH | IA | State Automobile Mutual Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 23892 | 93-6029263 | | | | North Pacific Insurance Company | OR | IA | Liberty Northwest Insurance Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | Liberty Mutual Insurance Company and its Affiliated Insurers | 00000 | 31-1364002 | | | | Ocasco Budget, Inc. | OH | NIA | The Ohio Casualty Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 31-1377709 | | | | OCI Printing, Inc. | OH | NIA | Ohio Casualty Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 31-0783294 | | | | Ohio Casualty Corporation | OH | NIA | Liberty Mutual Insurance Company | Ownership, Board and Management | 78.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 31-0783294 | | | | Ohio Casualty Corporation | OH | NIA | Employers Insurance Company of Wausau | Ownership, Board and Management | 8.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 31-0783294 | | | | Ohio Casualty Corporation | OH | NIA | Peerless Insurance Company | Ownership, Board and Management | 8.000 | Liberty Mutual Holding Company Inc. | NO | |
| | Liberty Mutual Insurance Company and its Affiliated Insurers | 00000 | 31-0783294 | | | | Ohio Casualty Corporation | OH | NIA | Liberty Mutual Fire Insurance Company | Ownership, Board and Management | 6.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 24082 | 31-0541777 | | | | Ohio Security Insurance Company | NH | IA | The Ohio Casualty Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 92-3955867 | | | | OIC Structured Equity LMI Fund L.P. | DE | NIA | Liberty Mutual Opportunistic Investments LLC | Ownership | 99.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 99-3311288 | | | | Omelette Borrower LLC | DE | NIA | Omelette Topco LLC | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 99-3148662 | | | | Omelette Topco LLC | DE | NIA | Liberty Mutual Insurance Company | Ownership | 45.000 | Liberty Mutual Holding Company Inc. | NO | |
| | Liberty Mutual Insurance Company and its Affiliated Insurers | 00000 | 99-3148662 | | | | Omelette Topco LLC | DE | NIA | Peerless Insurance Company | Ownership | 25.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 99-3148662 | | | | Omelette Topco LLC | DE | NIA | Employers Insurance Company of Wausau | Ownership | 10.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 99-3148662 | | | | Omelette Topco LLC | DE | NIA | Liberty Mutual Fire Insurance Company | Ownership | 10.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 99-3148662 | | | | Omelette Topco LLC | DE | NIA | The Ohio Casualty Insurance Company | Ownership | 10.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 99-4936605 | | | | Omelette Underlying Trust | DE | NIA | Omelette Borrower LLC | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | Liberty Mutual Insurance Company and its Affiliated Insurers | 00000 | 26-0258241 | | | | Open Seas Solutions, Inc. | WA | NIA | Safeco Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 23922 | 93-0241650 | | | | Oregon Automobile Insurance Company | OR | IA | Liberty Northwest Insurance Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 82-4306959 | | | | PAGUS Holdings LLC | DE | NIA | LMAT Holdings LLC | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 14923 | 06-0487440 | | | | Patrons Mutual Insurance Company of Connecticut | MA | IA | State Automobile Mutual Insurance Company | Board, Management | 0.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 18333 | 13-2919779 | | | | Peerless Indemnity Insurance Company | IL | IA | Liberty-USA Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | Liberty Mutual Insurance Company and its Affiliated Insurers | 24198 | 02-0177030 | | | | Peerless Insurance Company | NH | IA | Liberty Mutual Agency Corporation | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | Liberty Mutual Insurance Company and its Affiliated Insurers | 30945 | 58-1140651 | | | | Plaza Insurance Company | IA | IA | Rockhill Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 46-2678004 | | | | Post-Closing LSG, LLC | FL | IA | Ironshore Surety Holdings Inc. | Ownership | 20.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | | | | | PT Independence Energy Holdings LLC | DE | NIA | Liberty Energy Holdings, LLC | Ownership | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 26-0800397 | | | | Rianco Research Corporation | WA | NIA | Open Seas Solutions, Inc. | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 25-1923260 | | | | Rockhill Holding Company | DE | NIA | State Automobile Mutual Insurance Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | YES | |
| | Liberty Mutual Insurance Company and its Affiliated Insurers | 28053 | 06-1149847 | | | | Rockhill Insurance Company | AZ | IA | Rockhill Holding Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 20-8406742 | | | | Rockhill Insurance Services LLC | CA | NIA | Rockhill Holding Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 01-0712531 | | | | Rockhill Underwriting Management, LLC | MO | NIA | Rockhill Holding Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 41-1440870 | | | | RTW, Inc | MN | NIA | Rockhill Holding Company | Ownership, Board and Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |
| | | 00000 | 31-1425223 | | | | SA Software Shelf, Inc | OH | NIA | State Auto Financial Corporation | Ownership, Board, Management | 100.000 | Liberty Mutual Holding Company Inc. | NO | |

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13 If Control is Owner- ship Provide Percen- tage | 14 | 15 | 16 |
|---------------|---|-------------------------|---------------|-----------------|-----|--|---|-----------------------------------|---|---|---|---|---|--|-------|
| Group Code | Group Name | NAIC Company Code | ID Number | Federal RSSD | CIK | Name of Securities Exchange if Publicly Traded (U.S. or International) | Names of Parent, Subsidiaries Or Affiliates | Domi- ciliary Loca- tion | Rela- tion- ship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | | | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Re- quired? (Yes/No) | * |
| | | 00000 | 91-0742146 .. | | | | Safeco Corporation | .. WA..... | NIA..... | Liberty Mutual Agency Corporation | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | 75-2865575 .. | | | | Safeco General Agency, Inc. | .. TX..... | IA..... | General Insurance Company of America | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 24740 | 91-0742148 .. | | | | Safeco Insurance Company of America | .. NH..... | IA..... | Safeco Corporation | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 39012 | 91-1115311 .. | | | | Safeco Insurance Company of Illinois | .. IL..... | IA..... | Safeco Insurance Company of America | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 11215 | 23-2640501 .. | | | | Safeco Insurance Company of Indiana | .. IN..... | IA..... | General Insurance Company of America | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 11071 | 93-1300233 .. | | | | Safeco Insurance Company of Oregon | .. OR..... | IA..... | Safeco Insurance Company of America | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 11070 | 91-6258394 .. | | | | Safeco Lloyds Insurance Company | .. TX..... | IA..... | General America Corporation of Texas | Management and Attorney-in-Fact | 0.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 24759 | 91-0885519 .. | | | | Safeco National Insurance Company | .. NH..... | IA..... | Safeco Insurance Company of America | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | 91-1273246 .. | | | | Safeco Properties, Inc. | .. WA..... | NIA..... | Safeco Corporation | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 11100 | 91-1231536 .. | | | | Safeco Surplus Lines Insurance Company | .. NH..... | IA..... | Safeco Insurance Company of America | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 10837 | 33-0763208 .. | | | | San Diego Insurance Company | .. CA..... | IA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | | | | | Santa Marta Floresta Brasil Ltda. | .. BRA..... | NIA..... | TECA Santa Marta Holdings, S.L. | Ownership..... | 99.900 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | | | | | Santa Marta Floresta Brasil Ltda. | .. BRA..... | NIA..... | TECA SM LLC | Ownership..... | 0.010 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | | | | | Santa Rita Arbol Holdings S.L. | .. ESP..... | NIA..... | LMAT Natural Resources International S.L. | Ownership..... | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | | | | | Santa Rita Madeira e Floresta Ltda. | .. BRA..... | NIA..... | Santa Rita Arbol Holdings, S.L. | Ownership..... | 99.900 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | | | | | Santa Rita Madeira e Floresta Ltda. | .. BRA..... | NIA..... | TECA SR LLC | Ownership..... | 0.010 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | 82-4345429 .. | | | | Shandon Valley Vineyards LLC | .. DE..... | NIA..... | PAGUS Holdings LLC | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | | | | | Solaria Labs Singapore Pte. Ltd | .. SGP..... | NIA..... | Liberty UK and Europe Holdings Limited | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | 81-2854330 .. | | | | Solaria Labs, LLC | .. DE..... | NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | 84-1695835 .. | | | | St. James/Arlington LLC | .. MA..... | NIA..... | Employers Insurance Company of Wausau | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | 01-0854295 .. | | | | St. James/Arlington Management LLC | .. MA..... | NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | 84-1695837 .. | | | | St. James/Arlington Real Estate Limited | .. MA..... | NIA..... | St. James/Arlington LLC | Ownership, Board and Management | 3.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | 84-1695837 .. | | | | St. James/Arlington Real Estate Limited | .. MA..... | NIA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 92.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | 84-1695837 .. | | | | St. James/Arlington Real Estate Limited | .. MA..... | NIA..... | Liberty Mutual Fire Insurance Company | Ownership, Board and Management | 5.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | 31-1324304 .. | | | | State Auto Financial Corporation | .. OH..... | UDP..... | State Automobile Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | YES..... | ..... |
| | | 00000 | | | | | State Auto Foundation | .. OH..... | NIA..... | Liberty Mutual Insurance Company | Board, Management | 0.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | 20-8756040 .. | | | | State Auto Holdings, Inc. | .. OH..... | NIA..... | State Automobile Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | YES..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 11017 | 31-1651026 .. | | | | State Auto Insurance Company of Ohio | .. OH..... | ..... | State Auto Financial Corporation | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 31755 | 39-1211058 .. | | | | State Auto Insurance Company of Wisconsin ... | .. WI..... | IA..... | State Automobile Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | 82-2704976 .. | | | | State Auto Labs Corp. | .. OH..... | NIA..... | State Automobile Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | YES..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 25127 | 57-6010814 .. | | | | State Auto Property & Casualty Insurance Company | .. IA..... | IA..... | State Auto Financial Corporation | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 25135 | 31-4316080 .. | | | | State Automobile Mutual Insurance Company ... | .. OH..... | UIP..... | Liberty Mutual Group Inc. | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | 31-0676465 .. | | | | Stateco Financial Services, Inc. | .. OH..... | NIA..... | State Auto Financial Corporation | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | | | | | Summit Asia Investments Holdings Pte. Ltd. | .. SGP..... | NIA..... | LLC | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | 04-3545985 .. | | | | Tara Energy Investments, LLC | .. DE..... | NIA..... | Liberty Energy Holdings, LLC | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| | | 00000 | | | | | TECA Santa Marta Holdings S.L. | .. ESP..... | NIA..... | LMAT Natural Resources International S.L. | Ownership..... | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

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 | Domi-ciliary Loca-tion | Relation-ship to Reporting Entity | Directly Controlled by (Name of Entity/Person) | Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | If Control is Owner-ship Provide Percen-tage | Ultimate Controlling Entity(ies)/Person(s) | Is an SCA Filing Re-quired? (Yes/No) | * |
| ..... | ..... | ..... 00000 | 82-4167330 .. | ..... | ..... | ..... | TECA SM LLC | .. DE..... | NIA..... | Teca Santa Marta Holdings S.L. | Ownership..... | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| ..... | ..... | ..... 00000 | 82-4159428 .. | ..... | ..... | ..... | TECA SR LLC | .. DE..... | NIA..... | Santa Rita Arbol Holdings S.L. | Ownership..... | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 33588 | 04-3058503 .. | ..... | ..... | ..... | The First Liberty Insurance Corporation | .. IL..... | IA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 23515 | 31-0978280 .. | ..... | ..... | ..... | The Midwestern Indemnity Company | .. NH..... | IA..... | Peerless Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| ..... | ..... | ..... 00000 | 35-1283740 .. | ..... | ..... | ..... | The National Corporation | .. IN..... | NIA..... | Liberty-USA Corporation | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 24171 | 02-0342937 .. | ..... | ..... | ..... | The Netherlands Insurance Company | .. NH..... | IA..... | Peerless Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 24074 | 31-0396250 .. | ..... | ..... | ..... | The Ohio Casualty Insurance Company | .. NH..... | IA..... | Ohio Casualty Corporation | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| ..... | ..... | ..... 00000 ..... | ..... | ..... | ..... | ..... | Vitoria Floresta Brasil Ltda. | .. BRA..... | NIA..... | LMAT Natural Resources International S.L. | Ownership..... | 99.990 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| ..... | ..... | ..... 00000 ..... | ..... | ..... | ..... | ..... | Vitoria Floresta Brasil Ltda. | .. BRA..... | NIA..... | LMAT Arbol Holdings LLC | Ownership..... | 0.010 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 26069 | 36-3522250 .. | ..... | ..... | ..... | Wausau Business Insurance Company | .. WI..... | IA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 26425 | 36-2753986 .. | ..... | ..... | ..... | Wausau General Insurance Company | .. WI..... | IA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| ..... | ..... | ..... 00000 ..... | ..... | ..... | ..... | ..... | Wausau Insurance Company (U.K.) Limited | .. GBR..... | IA..... | Liberty International Netherlands V.O.F. . | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 26042 | 39-1341459 .. | ..... | ..... | ..... | Wausau Underwriters Insurance Company | .. WI..... | IA..... | Liberty Mutual Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| . 0111 ... | Liberty Mutual Insurance Company and its Affiliated Insurers | 44393 | 31-0624491 .. | ..... | ..... | ..... | West American Insurance Company | .. IN..... | IA..... | The Ohio Casualty Insurance Company | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| ..... | ..... | ..... 00000 ..... | ..... | ..... | ..... | ..... | WGN Holdings LLC | .. DE..... | NIA..... | Employers Insurance Company of Wausau | Ownership, Management | 0.250 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| ..... | ..... | ..... 00000 ..... | ..... | ..... | ..... | ..... | WGN Holdings LLC | .. DE..... | NIA..... | Liberty Mutual Fire Insurance Company | Ownership, Management | 0.250 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| ..... | ..... | ..... 00000 ..... | ..... | ..... | ..... | ..... | WGN Holdings LLC | .. DE..... | NIA..... | The Ohio Casualty Insurance Company | Ownership, Management | 0.250 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| ..... | ..... | ..... 00000 ..... | ..... | ..... | ..... | ..... | WGN Holdings LLC | .. DE..... | NIA..... | Safeco Insurance Company of America | Ownership, Management | 0.250 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| ..... | ..... | ..... 00000 | 45-2396108 .. | ..... | ..... | ..... | Wildcat Field Services, LLC | .. TX..... | NIA..... | Wildcat Midstream Holdings II LLC | Ownership..... | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| ..... | ..... | ..... 00000 | 46-1637784 .. | ..... | ..... | ..... | Wildcat Midstream Holdings II LLC | .. TX..... | NIA..... | Kellen Holdings, LLC | Ownership..... | 95.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |
| ..... | ..... | ..... 00000 | 35-2604562 .. | ..... | ..... | ..... | Workgrid Software, Inc. | .. DE..... | NIA..... | Liberty Mutual Technology Group, Inc. | Ownership, Board and Management | 100.000 ... | Liberty Mutual Holding Company Inc. ... | NO..... | ..... |

| Asterisk | Explanation |
|----------|-------------|
| | |

PART 1 - LOSS EXPERIENCE

| Line of Business | | Current Year to Date | | | 4 Prior Year to Date Direct Loss Percentage |
|----------------------|---|--------------------------------|--------------------------------|--------------------------------|--|
| | | 1 Direct Premiums Earned | 2 Direct Losses Incurred | 3 Direct Loss Percentage | |
| 1. | Fire | | | | 7.0 |
| 2.1 | Allied Lines | | (10,581) | | (12.6) |
| 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 | 1,505 | (54,240) | (3,604.0) | 47.3 |
| 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 | 1,788 | 141 | 7.9 | 7.0 |
| 9.2 | Pet insurance | | | | |
| 10. | Financial guaranty | | | | |
| 11.1 | Medical professional liability - occurrence | | | | |
| 11.2 | Medical professional liability - claims-made | | | | |
| 12. | Earthquake | | | | |
| 13.1 | Comprehensive (hospital and medical) individual | | | | |
| 13.2 | Comprehensive (hospital and medical) group | | | | |
| 14. | Credit accident and health | | | | |
| 15.1 | Vision only | | | | |
| 15.2 | Dental only | | | | |
| 15.3 | Disability income | | | | |
| 15.4 | Medicare supplement | | | | |
| 15.5 | Medicaid Title XIX | | | | |
| 15.6 | Medicare Title XVIII | | | | |
| 15.7 | Long-term care | | | | |
| 15.8 | Federal employees health benefits plan | | | | |
| 15.9 | Other health | | | | |
| 16. | Workers' compensation | | | | |
| 17.1 | Other liability - occurrence | 149 | 110 | 73.8 | 69.5 |
| 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 | | | | 84.0 |
| 19.3 | Commercial auto no-fault (personal injury protection) | | | | |
| 19.4 | Other commercial auto liability | | | | |
| 21.1 | Private passenger auto physical damage | | (4,687) | | 49.1 |
| 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. | Reinsurance - Nonproportional Assumed Property | XXX | XXX | XXX | XXX |
| 32. | Reinsurance - Nonproportional Assumed Liability | XXX | XXX | XXX | XXX |
| 33. | Reinsurance - Nonproportional Assumed Financial Lines | XXX | XXX | XXX | XXX |
| 34. | Aggregate write-ins for other lines of business | | | | |
| 35. | Totals | 3,442 | (69,257) | (2,012.1) | 52.4 |
| 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) | | | | |

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

PART 2 - DIRECT PREMIUMS WRITTEN

| Line of Business | | 1 Current Quarter | 2 Current Year to Date | 3 Prior Year Year to Date |
|----------------------|---|----------------------|------------------------------|---------------------------------|
| 1. | Fire | | | (6,408) |
| 2.1 | Allied Lines | | | (7,667) |
| 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 | | | (109,769) |
| 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 | | | (336) |
| 9.2 | Pet insurance | | | |
| 10. | Financial guaranty | | | |
| 11.1 | Medical professional liability - occurrence | | | |
| 11.2 | Medical professional liability - claims-made | | | |
| 12. | Earthquake | | | (1,348) |
| 13.1 | Comprehensive (hospital and medical) individual | | | |
| 13.2 | Comprehensive (hospital and medical) group | | | |
| 14. | Credit accident and health | | | |
| 15.1 | Vision only | | | |
| 15.2 | Dental only | | | |
| 15.3 | Disability income | | | |
| 15.4 | Medicare supplement | | | |
| 15.5 | Medicaid Title XIX | | | |
| 15.6 | Medicare Title XVIII | | | |
| 15.7 | Long-term care | | | |
| 15.8 | Federal employees health benefits plan | | | |
| 15.9 | Other health | | | |
| 16. | Workers' compensation | | | |
| 17.1 | Other liability - occurrence | (66) | (66) | (7,207) |
| 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 | | | (47,226) |
| 19.3 | Commercial auto no-fault (personal injury protection) | | | |
| 19.4 | Other commercial auto liability | | | |
| 21.1 | Private passenger auto physical damage | | | (32,940) |
| 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. | Reinsurance - Nonproportional Assumed Property | XXX | XXX | XXX |
| 32. | Reinsurance - Nonproportional Assumed Liability | XXX | XXX | XXX |
| 33. | Reinsurance - Nonproportional Assumed Financial Lines | XXX | XXX | XXX |
| 34. | Aggregate write-ins for other lines of business | | | |
| 35. | Totals | (66) | (66) | (212,901) |
| 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) | | | |

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

PART 3 (\$000 OMITTED)

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 |
|--|---|---|--|--|--|--|---|--|--------------------------------------|---|---|--|---|
| Years in Which Losses Occurred | Prior Year-End Known Case Loss and LAE Reserves | Prior Year-End IBNR Loss and LAE Reserves | Total Prior Year-End Loss and LAE Reserves (Cols. 1+2) | 2025 Loss and LAE Payments on Claims Reported as of Prior Year-End | 2025 Loss and LAE Payments on Claims Unreported as of Prior Year-End | Total 2025 Loss and LAE Payments (Cols. 4+5) | Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End | Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End | Q.S. Date IBNR Loss and LAE Reserves | Total Q.S. Loss and LAE Reserves (Cols.7+8+9) | Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols.4+7 minus Col. 1) | Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5+8+9 minus Col. 2) | Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11+12) |
| 1. 2022 + Prior ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 2. 2023 ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 3. Subtotals 2023 + Prior ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 4. 2024 ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 5. Subtotals 2024 + Prior ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 6. 2025 |XXX..... |XXX..... |XXX..... |XXX..... | ..... | ..... | .....XXX..... | ..... | ..... | ..... | .....XXX..... |XXX..... |XXX..... |
| 7. Totals ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... | ..... |
| 8. Prior Year-End Surplus As Regards Policyholders | 7,682 | | | | | | | | | | Col. 11, Line 7 As % of Col. 1 Line 7 | Col. 12, Line 7 As % of Col. 2 Line 7 | Col. 13, Line 7 As % of Col. 3 Line 7 |
| | | | | | | | | | | | 1. | 2. | 3. |
| | | | | | | | | | | | Col. 13, Line 7 As a % of Col. 1 Line 8 | | |
| | | | | | | | | | | | 4. | | |

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. 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.

| | Response |
|--|----------|
| 1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement? | NO |
| 2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement? | NO |
| 3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement? | NO |
| 4. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement? | NO |
| AUGUST FILING | |
| 5. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter. | YES |

Explanations:

1. The Trusteed Surplus Statement is not required as the Company is a U.S. insurer.
2. Supplement A to Schedule T is not required as the Company does not provide medical professional liability coverage for physicians, hospitals, other health care professionals and other health care facilities.
3. Medicare Part D Coverage Supplement is not required as the Company does not provide prescription drug coverage.
4. Director and Officer Supplement is not required as the Company does not provide director and officer (D&O) liability coverage.

Bar Codes:

| | |
|--|--|
| 1. Trusteed Surplus Statement [Document Identifier 490] |  |
| 2. Supplement A to Schedule T [Document Identifier 455] |  |
| 3. Medicare Part D Coverage Supplement [Document Identifier 365] |  |
| 4. Director and Officer Supplement [Document Identifier 505] |  |

NONE

SCHEDULE A - VERIFICATION

Real Estate

| | 1 | 2 |
|--|--------------|---------------------------------|
| | Year to Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year | | |
| 2. Cost of acquired: | | |
| 2.1 Actual cost at time of acquisition | | |
| 2.2 Additional investment made after acquisition | | |
| 3. Current year change in encumbrances | | |
| 4. Total gain (loss) on disposals | | |
| 5. Deduct amounts received on disposals | | |
| 6. Total foreign exchange change in book/adjusted carrying value | | |
| 7. Deduct current year's other than temporary impairment recognized | | |
| 8. Deduct current year's depreciation | | |
| 9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8) | | |
| 10. Deduct total nonadmitted amounts | | |
| 11. Statement value at end of current period (Line 9 minus Line 10) | | |

SCHEDULE B - VERIFICATION

Mortgage Loans

| | 1 | 2 |
|---|--------------|---------------------------------|
| | Year to Date | Prior Year Ended December 31 |
| 1. Book value/recorded investment excluding accrued interest, December 31 of prior year | | |
| 2. Cost of acquired: | | |
| 2.1 Actual cost at time of acquisition | | |
| 2.2 Additional investment made after acquisition | | |
| 3. Capitalized deferred interest and other | | |
| 4. Accrual of discount | | |
| 5. Unrealized valuation increase/(decrease) | | |
| 6. Total gain (loss) on disposals | | |
| 7. Deduct amounts received on disposals | | |
| 8. Deduct amortization of premium and mortgage interest paid and commitment fees | | |
| 9. Total foreign exchange change in book value/recorded investment excluding accrued interest | | |
| 10. Deduct current year's other than temporary impairment recognized | | |
| 11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) | | |
| 12. Total valuation allowance | | |
| 13. Subtotal (Line 11 plus Line 12) | | |
| 14. Deduct total nonadmitted amounts | | |
| 15. Statement value at end of current period (Line 13 minus Line 14) | | |

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

| | 1 | 2 |
|--|--------------|---------------------------------|
| | Year to Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year | | |
| 2. Cost of acquired: | | |
| 2.1 Actual cost at time of acquisition | | |
| 2.2 Additional investment made after acquisition | | |
| 3. Capitalized deferred interest and other | | |
| 4. Accrual of discount | | |
| 5. Unrealized valuation increase/(decrease) | | |
| 6. Total gain (loss) on disposals | | |
| 7. Deduct amounts received on disposals | | |
| 8. Deduct amortization of premium, depreciation and proportional amortization | | |
| 9. Total foreign exchange change in book/adjusted carrying value | | |
| 10. Deduct current year's other than temporary impairment recognized | | |
| 11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10) | | |
| 12. Deduct total nonadmitted amounts | | |
| 13. Statement value at end of current period (Line 11 minus Line 12) | | |

SCHEDULE D - VERIFICATION

Bonds and Stocks

| | 1 | 2 |
|---|--------------|---------------------------------|
| | Year to Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year | 7,798,632 | 7,073,165 |
| 2. Cost of bonds and stocks acquired | 1,771,316 | 2,057,948 |
| 3. Accrual of discount | 7,970 | 16,091 |
| 4. Unrealized valuation increase/(decrease) | (89) | |
| 5. Total gain (loss) on disposals | (23,398) | |
| 6. Deduct consideration for bonds and stocks disposed of | 1,650,700 | 1,340,881 |
| 7. Deduct amortization of premium | 3,177 | 7,690 |
| 8. Total foreign exchange change in book/adjusted carrying value | | |
| 9. Deduct current year's other than temporary impairment recognized | | |
| 10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees | | |
| 11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) | 7,900,555 | 7,798,632 |
| 12. Deduct total nonadmitted amounts | | |
| 13. Statement value at end of current period (Line 11 minus Line 12) | 7,900,555 | 7,798,632 |

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

| NAIC Designation | 1 Book/Adjusted Carrying Value Beginning of Current Quarter | 2 Acquisitions During Current Quarter | 3 Dispositions During Current Quarter | 4 Non-Trading Activity During Current Quarter | 5 Book/Adjusted Carrying Value End of First Quarter | 6 Book/Adjusted Carrying Value End of Second Quarter | 7 Book/Adjusted Carrying Value End of Third Quarter | 8 Book/Adjusted Carrying Value December 31 Prior Year |
|--------------------------------------|---|--|--|--|---|--|---|---|
| ISSUER CREDIT OBLIGATIONS (ICO) | | | | | | | | |
| 1. NAIC 1 (a) | 7,002,354 | 1,771,316 | 1,172,190 | 1,864 | 7,002,354 | 7,603,344 | | 7,499,517 |
| 2. NAIC 2 (a) | | | | | | | | |
| 3. NAIC 3 (a) | | | | | | | | |
| 4. NAIC 4 (a) | | | | | | | | |
| 5. NAIC 5 (a) | | | | | | | | |
| 6. NAIC 6 (a) | | | | | | | | |
| 7. Total ICO | 7,002,354 | 1,771,316 | 1,172,190 | 1,864 | 7,002,354 | 7,603,344 | | 7,499,517 |
| ASSET-BACKED SECURITIES (ABS) | | | | | | | | |
| 8. NAIC 1 | 297,211 | | | | 297,211 | 297,211 | | 299,119 |
| 9. NAIC 2 | | | | | | | | |
| 10. NAIC 3 | | | | | | | | |
| 11. NAIC 4 | | | | | | | | |
| 12. NAIC 5 | | | | | | | | |
| 13. NAIC 6 | | | | | | | | |
| 14. Total ABS | 297,211 | | | | 297,211 | 297,211 | | 299,119 |
| PREFERRED STOCK | | | | | | | | |
| 15. NAIC 1 | | | | | | | | |
| 16. NAIC 2 | | | | | | | | |
| 17. NAIC 3 | | | | | | | | |
| 18. NAIC 4 | | | | | | | | |
| 19. NAIC 5 | | | | | | | | |
| 20. NAIC 6 | | | | | | | | |
| 21. Total Preferred Stock | | | | | | | | |
| 22. Total ICO, ABS & Preferred Stock | 7,299,565 | 1,771,316 | 1,172,190 | 1,864 | 7,299,565 | 7,900,554 | | 7,798,636 |

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:
NAIC 1 \$; NAIC 2 \$; NAIC 3 \$ NAIC 4 \$; NAIC 5 \$; NAIC 6 \$

SCHEDULE DA - PART 1

Short-Term Investments

| | 1 | 2 | 3 | 4 | 5 |
|-------------------|---------------------------------|---------------------|-------------|------------------------------------|--|
| | Book/Adjusted Carrying Value | Prior Year Value | Actual Cost | Interest Collected Year-to-Date | Paid for Accrued Interest Year-to-Date |
| 7709999999 Totals | | XX | | | |

NONE

SCHEDULE DA - VERIFICATION

Short-Term Investments

| | 1 | 2 |
|---|--------------|---------------------------------|
| | Year To Date | Prior Year Ended December 31 |
| 1. Book/adjusted carrying value, December 31 of prior year | | 493,777 |
| 2. Cost of short-term investments acquired | | |
| 3. Accrual of discount | | 6,223 |
| 4. Unrealized valuation increase/(decrease) | | |
| 5. Total gain (loss) on disposals | | |
| 6. Deduct consideration received on disposals | | 500,000 |
| 7. Deduct amortization of premium | | |
| 8. Total foreign exchange change in book/adjusted carrying value | | |
| 9. Deduct current year's other than temporary impairment recognized | | |
| 10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) | | |
| 11. Deduct total nonadmitted amounts | | |
| 12. Statement value at end of current period (Line 10 minus Line 11) | | |

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

N O N E

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

N O N E

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of
Derivatives

N O N E

Schedule E - Part 2 - Verification - Cash Equivalents

N O N E

Schedule A - Part 2 - Real Estate Acquired and Additions Made

N O N E

Schedule A - Part 3 - Real Estate Disposed

N O N E

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

N O N E

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

N O N E

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

N O N E

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

N O N E

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

SCHEDULE D - PART 3

Show All Long-Term Bonds and Stock Acquired During the Current Quarter

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
|--|---------------------|-----------------------|--|---------------------------------|--------------------|--------------------|---|--|
| CUSIP Identification | Description | Date Acquired | Name of Vendor | Number of Shares of Stock | Actual Cost | Par Value | Paid for Accrued Interest and Dividends | NAIC Designation, NAIC Designation Modifier and SVO Admini- strative Symbol |
| 91282C-JX-0 | TREASURY NOTE |05/23/2025 |MITSUBISHI UFJ SECURITIES (USA) ..... | ..... | .....556,216 |560,000 |7,178 | 1.A |
| 91282C-LW-9 | TREASURY NOTE |04/07/2025 |CITADEL SECURITIES LLC ..... | ..... | .....619,036 |615,000 |10,397 | 1.A |
| 91282C-MZ-1 | TREASURY NOTE |05/23/2025 |BANK OF AMERICA ..... | ..... | .....596,065 |600,000 |1,706 | 1.A |
| 0019999999. Subtotal - Issuer Credit Obligations - U.S. Government Obligations (Exempt from RBC) | | | | | 1,771,316 | 1,775,000 | 19,281 | XXX |
| 0489999999. Total - Issuer Credit Obligations (Unaffiliated) | | | | | 1,771,316 | 1,775,000 | 19,281 | XXX |
| 0499999999. Total - Issuer Credit Obligations (Affiliated) | | | | | | | | XXX |
| 0509999997. Total - Issuer Credit Obligations - Part 3 | | | | | 1,771,316 | 1,775,000 | 19,281 | XXX |
| 0509999998. Total - Issuer Credit Obligations - Part 5 | | | | | XXX | XXX | XXX | XXX |
| 0509999999. Total - Issuer Credit Obligations | | | | | 1,771,316 | 1,775,000 | 19,281 | XXX |
| 1889999999. Total - Asset-Backed Securities (Unaffiliated) | | | | | | | | XXX |
| 1899999999. Total - Asset-Backed Securities (Affiliated) | | | | | | | | XXX |
| 1909999997. Total - Asset-Backed Securities - Part 3 | | | | | | | | XXX |
| 1909999998. Total - Asset-Backed Securities - Part 5 | | | | | XXX | XXX | XXX | XXX |
| 1909999999. Total - Asset-Backed Securities | | | | | | | | XXX |
| 2009999999. Total - Issuer Credit Obligations and Asset-Backed Securities | | | | | 1,771,316 | 1,775,000 | 19,281 | XXX |
| 4509999997. Total - Preferred Stocks - Part 3 | | | | | | XXX | | XXX |
| 4509999998. Total - Preferred Stocks - Part 5 | | | | | XXX | XXX | XXX | XXX |
| 4509999999. Total - Preferred Stocks | | | | | | XXX | | XXX |
| 5989999997. Total - Common Stocks - Part 3 | | | | | | XXX | | XXX |
| 5989999998. Total - Common Stocks - Part 5 | | | | | XXX | XXX | XXX | XXX |
| 5989999999. Total - Common Stocks | | | | | | XXX | | XXX |
| 5999999999. Total - Preferred and Common Stocks | | | | | | XXX | | XXX |
| 6009999999 - Totals | | | | | 1,771,316 | XXX | 19,281 | XXX |

STATEMENT AS OF JUNE 30, 2025 OF THE STATE AUTO INSURANCE COMPANY OF OHIO

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

| 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | Change In Book/Adjusted Carrying Value | | | | | 15 | 16 | 17 | 18 | 19 | 20 | 21 |
|--|-------------------|----------------|--------------------------------|---------------------------|-----------------|-----------------|-----------------|--|---|---|--|--|--|--|--|----------------------------------|-------------------------------|---|-----------------------------------|---|
| | | | | | | | | | 10 | 11 | 12 | 13 | 14 | | | | | | | |
| CUSIP Ident-ification | Description | Disposal Date | Name of Purchaser | Number of Shares of Stock | Consid-eration | Par Value | Actual Cost | Prior Year Book/ Adjusted Carrying Value | Unrealized Valuation Increase/ (Decrease) | Current Year's (Amor-tization)/ Accretion | Current Year's Other Than Temporary Impairment Recog-nized | Total Change in Book/ Adjusted Carrying Value (10 + 11 - 12) | Total Foreign Exchange Change in Book /Adjusted Carrying Value | Book/ Adjusted Carrying Value at Disposal Date | Foreign Exchange Gain (Loss) on Disposal | Realized Gain (Loss) on Disposal | Total Gain (Loss) on Disposal | Bond Interest/ Stock Dividends Received During Year | Stated Con-tractual Maturity Date | 21 NAIC Desig-nation, NAIC Desig-nation Modifier and SVO Admini-strative Symbol |
| ..91282C-BC-4 | WI TREASURY | . 05/23/2025 . | INTERNATIONAL ECSTONE FINANCIA | | 1,148,792 | 1,175,000 | 1,153,703 | 1,170,379 | ..... | ..... 1,811 | ..... | ..... 1,811 | ..... | ..... 1,172,190 | ..... | ..... (23,398) | (23,398) | 1,789 | 12/31/2025 | 1.A |
| 0019999999. Subtotal - Issuer Credit Obligations - U.S. Government Obligations (Exempt from RBC) | | | | | 1,148,792 | 1,175,000 | 1,153,703 | 1,170,379 | | 1,811 | | 1,811 | | 1,172,190 | | (23,398) | (23,398) | 1,789 | XXX | XXX |
| 0489999999. Total - Issuer Credit Obligations (Unaffiliated) | | | | | 1,148,792 | 1,175,000 | 1,153,703 | 1,170,379 | | 1,811 | | 1,811 | | 1,172,190 | | (23,398) | (23,398) | 1,789 | XXX | XXX |
| 0499999999. Total - Issuer Credit Obligations (Affiliated) | | | | | | | | | | | | | | | | | | | XXX | XXX |
| 0509999997. Total - Issuer Credit Obligations - Part 4 | | | | | 1,148,792 | 1,175,000 | 1,153,703 | 1,170,379 | | 1,811 | | 1,811 | | 1,172,190 | | (23,398) | (23,398) | 1,789 | XXX | XXX |
| 0509999998. Total - Issuer Credit Obligations - Part 5 | | | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 0509999999. Total - Issuer Credit Obligations | | | | | 1,148,792 | 1,175,000 | 1,153,703 | 1,170,379 | | 1,811 | | 1,811 | | 1,172,190 | | (23,398) | (23,398) | 1,789 | XXX | XXX |
| 1889999999. Total - Asset-Backed Securities (Unaffiliated) | | | | | | | | | | | | | | | | | | | XXX | XXX |
| 1899999999. Total - Asset-Backed Securities (Affiliated) | | | | | | | | | | | | | | | | | | | XXX | XXX |
| 1909999997. Total - Asset-Backed Securities - Part 4 | | | | | | | | | | | | | | | | | | | XXX | XXX |
| 1909999998. Total - Asset-Backed Securities - Part 5 | | | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 1909999999. Total - Asset-Backed Securities | | | | | | | | | | | | | | | | | | | XXX | XXX |
| 2009999999. Total - Issuer Credit Obligations and Asset-Backed Securities | | | | | 1,148,792 | 1,175,000 | 1,153,703 | 1,170,379 | | 1,811 | | 1,811 | | 1,172,190 | | (23,398) | (23,398) | 1,789 | XXX | XXX |
| 4509999997. Total - Preferred Stocks - Part 4 | | | | | | XXX | | | | | | | | | | | | | XXX | XXX |
| 4509999998. Total - Preferred Stocks - Part 5 | | | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 4509999999. Total - Preferred Stocks | | | | | | XXX | | | | | | | | | | | | | XXX | XXX |
| 5989999997. Total - Common Stocks - Part 4 | | | | | | XXX | | | | | | | | | | | | | XXX | XXX |
| 5989999998. Total - Common Stocks - Part 5 | | | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 5989999999. Total - Common Stocks | | | | | | XXX | | | | | | | | | | | | | XXX | XXX |
| 5999999999. Total - Preferred and Common Stocks | | | | | | XXX | | | | | | | | | | | | | XXX | XXX |
| 6009999999 - Totals | | | | | 1,148,792 | XXX | 1,153,703 | 1,170,379 | | 1,811 | | 1,811 | | 1,172,190 | | (23,398) | (23,398) | 1,789 | XXX | XXX |

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open
N O N E

Schedule DB - Part B - Section 1 - Futures Contracts Open
N O N E

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made
N O N E

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open
N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By
N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To
N O N E

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees
N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned
N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned
N O N E

SCHEDULE E - PART 1 - CASH

[illegible]

Schedule E - Part 2 - Cash Equivalents - Investments Owned End of Current Quarter

N O N E