



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

## QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2025  
OF THE CONDITION AND AFFAIRS OF THE

### HARLEYSVILLE PREFERRED INSURANCE COMPANY

NAIC Group Code 0140 0140 NAIC Company Code 35696 Employer's ID Number 23-2384978

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

Country of Domicile United States of America

Incorporated/Organized 10/30/1985 Commenced Business 10/30/1985

Statutory Home Office ONE WEST NATIONWIDE BLVD., COLUMBUS, OH, US 43215-2220  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office ONE WEST NATIONWIDE BLVD., COLUMBUS, OH, US 43215-2220  
(Street and Number) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records ONE WEST NATIONWIDE BLVD., 1-14-301, COLUMBUS, OH, US 43215-2220  
(Street and Number) (City or Town, State, Country and Zip Code)

Internet Website Address WWW.NATIONWIDE.COM

Statutory Statement Contact ANDREA D. IACOBONI, 614-249-1545  
(Name) (Area Code) (Telephone Number)  
FINRPT@NATIONWIDE.COM, 866-315-1430  
(E-mail Address) (FAX Number)

#### OFFICERS

PRESIDENT & COO MARK ALLEN BERVEN VP & TREASURER KELLY SUTHERLAND BERRY #  
SVP & SECRETARY DENISE LYNN SKINGLE

#### OTHER

KEVIN PAUL SCHEIDERER, VP-CHIEF TAX OFFC

**DIRECTORS OR TRUSTEES**  
MARK ALLEN BERVEN OSCAR GUERRERO CASEY ELLEN KEMPTON  
DAVID NEIL NELSON # GEORGE MIDDLETON WILLIAMS III

State of OHIO County of FRANLINV SS:

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

Mark Allen Berven

MARK ALLEN BERVEN  
PRESIDENT & COO

DENISE LYNN SKINGLE  
SVP & SECRETARY

KELLY SUTHERLAND BERRY  
VP & TREASURER

Subscribed and sworn to before me this  
23 day of October 2025  
Lauren Garverick

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



Lauren Garverick  
Notary Public, State of Ohio  
Commission #: 2025-RE-891568  
My Commission Expires 06-16-30



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AS OF SEPTEMBER 30, 2025

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### HARLEYSVILLE PREFERRED INSURANCE COMPANY

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(Name) (Area Code) (Telephone Number)  
FINRPT@NATIONWIDE.COM 866-315-1430  
(E-mail Address) (FAX Number)

#### OFFICERS

PRESIDENT & COO	<u>MARK ALLEN BERVEN</u>	VP & TREASURER	<u>KELLY SUTHERLAND BERRY #</u>
SVP & SECRETARY	<u>DENISE LYNN SKINGLE</u>		

#### OTHER

<u>KEVIN PAUL SCHEIDERER, VP-CHIEF TAX OFFC</u>	<u>MARK ALLEN BERVEN</u>	<u>DIRECTORS OR TRUSTEES</u>	<u>CASEY ELLEN KEMPTON</u>
	<u>DAVID NEIL NELSON #</u>	<u>OSCAR GUERRERO</u>	
		<u>GEORGE MIDDLETON WILLIAMS III</u>	

State of OHIO County of FRANKLIN SS: SS

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

DS

MARK ALLEN BERVEN  
PRESIDENT & COO

DENISE LYNN SKINGLE  
SVP & SECRETARY

KELLY SUTHERLAND BERRY  
VP & TREASURER

Subscribed and sworn to before me this  
8 day of October 2025  
Nicole Sours

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.....



Nicole Sours  
Notary Public, State of Ohio  
My Commission Expires 11-26-2027



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

## QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2025  
OF THE CONDITION AND AFFAIRS OF THE

## HARLEYSVILLE PREFERRED INSURANCE COMPANY

NAIC Group Code 0140 (Current) 0140 (Prior) NAIC Company Code 35696 Employer's ID Number 23-2384978Organized under the Laws of Ohio, State of Domicile or Port of Entry OHCountry of Domicile United States of AmericaIncorporated/Organized 10/30/1985 Commenced Business 10/30/1985Statutory Home Office ONE WEST NATIONWIDE BLVD. (Street and Number) COLUMBUS, OH, US 43215-2220 (City or Town, State, Country and Zip Code)Main Administrative Office ONE WEST NATIONWIDE BLVD. (Street and Number) COLUMBUS, OH, US 43215-2220 (City or Town, State, Country and Zip Code) 614-249-1545 (Area Code) (Telephone Number)Mail Address ONE WEST NATIONWIDE BLVD., 1-14-301 (Street and Number or P.O. Box) COLUMBUS, OH, US 43215-2220 (City or Town, State, Country and Zip Code)Primary Location of Books and Records ONE WEST NATIONWIDE BLVD., 1-14-301 (Street and Number) COLUMBUS, OH, US 43215-2220 (City or Town, State, Country and Zip Code) 614-249-1545 (Area Code) (Telephone Number)Internet Website Address WWW.NATIONWIDE.COMStatutory Statement Contact ANDREA D. IACOBONI (Name) 614-249-1545 (Area Code) (Telephone Number)  
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## OFFICERS

PRESIDENT & COO MARK ALLEN BERVEN VP & TREASURER KELLY SUTHERLAND BERRY #  
SVP & SECRETARY DENISE LYNN SKINGLE

## OTHER

KEVIN PAUL SCHEIDERER, VP-CHIEF TAX OFFC

DIRECTORS OR TRUSTEES  
MARK ALLEN BERVEN OSCAR GUERRERO CASEY ELLEN KEMPTON  
DAVID NEIL NELSON # GEORGE MIDDLETON WILLIAMS IIIState of Ohio SS:  
County of Franklin

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MARK ALLEN BERVEN  
PRESIDENT & COODENISE LYNN SKINGLE  
SVP & SECRETARYKELLY SUTHERLAND BERRY  
VP & TREASURER

Subscribed and sworn to before me this  
15 day of OCTOBER 2025

Lauren Garverick

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.....



Lauren Garverick  
Notary Public, State of Ohio  
Commission #: 2025-RE-891568  
My Commission Expires 06-16-30