

# ANNUAL STATEMENT

For the Year Ended

December 31, 2012

OF THE CONDITION AND AFFAIRS OF THE

## SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION

ORGANIZED UNDER THE LAWS OF THE STATE OF OHIO

Made to the

### INSURANCE COMMISSIONER OF THE STATE OF OHIO

Pursuant to the Laws thereof

NAIC Company Code

10272

Home Office

13439 WOODWORTH RD

NEW SPRINGFIELD 44443

OH

Street and Number

City

Zip Code

Mail Address

13439 WOODWORTH RD

NEW SPRINGFIELD 44443

OH

Street and Number

City

Zip Code

Main Administrative Office

330-549-2880

Telephone Number

Organized

JANUARY 1, 1892

Commenced Business

SEPTEMBER 1, 1852

Annual Statement Contact Person

MARLENE WENTZ

Telephone Number

330-549-2880

Contact Person Email Address

mwentz@zoominternet.net

President

J DANIEL SIMON

Vice President

LEE F KOHLER

Secretary

MARLENE M WENTZ

Treasurer

MARLENE M WENTZ

J DANIEL SIMON

LEE F KOHLER

DONALD H SNYDER JR

JACK G MASSENGILL

MARLENE M WENTZ

State of Ohio

County of

MAHONING

J DANIEL SIMON

President and

MARLENE M WENTZ

Secretary of the

SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION

being duly sworn each for himself/herself deposes and says, that they are the above described officers of said reporting entity, and that on the reporting period stated above all 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, with the schedules and explanations herein contained, annexed or referred to, is a full and correct 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, according to the best of their information, knowledge and belief, respectively.

Subscribed and sworn to before me, this

20  
day of February 20, 13



Notary Public

Kimberly Welsh Koch  
Notary Public  
State of Ohio  
My Commission Expires  
July 27, 2016



President



Secretary



Signature of Person Preparing Statement

**ANNUAL STATEMENT FOR THE YEAR  
SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION**

2012

**ASSETS**

	Assets Current Year	Nonadmitted Assets Current Year	Net Admitted Assets Current Year	Net Admitted Assets Prior Year
1	Bonds (Schedule D - Part 1)	0.00	0.00	
2	Preferred stocks, common stocks and mutual funds (Schedule D - Part 2)	147,710.88	0.00	110,564.13
3	Real estate (less liens, encumbrances) (Schedule A)	105,253.37	0.00	114,544.37
4	Cash (Schedule E)	1,989,042.71	0.00	2,143,233.68
5	Short-term investments		0.00	0.00
6	Aggregate write-ins for invested assets		0.00	0.00
7	Subtotals, cash and invested assets	2,242,006.96	0.00	2,368,342.18
8	Investment income due and accrued	5,486.04	0.00	7,571.31
9.1	Assessments or premiums in the course of collection (including agents balances)		0.00	0.00
9.2	Deferred premiums, agents' balances and installments booked but deferred and not yet due		0.00	0.00
9.3	Earned but unbilled premiums (post assessment)		0.00	0.00
10.1	Amounts recoverable from reinsurers	171,694.00	0.00	26,110.54
10.2	Funds held by or deposited with reinsured companies	0.00	0.00	0.00
11.1	Current federal income tax recoverable and interest thereon	11,900.00	0.00	0.00
11.2	Net deferred tax asset		0.00	0.00
12	Electronic data processing equipment and software		0.00	0.00
13	Furniture and equipment	1,281.52	1,281.52	0.00
14	Receivables from parent, subsidiaries and affiliates		0.00	0.00
15	Aggregate write-ins for other than invested assets	0.00	0.00	0.00
16	Total Assets	2,432,368.52	1,281.52	2,402,024.03
	Details of Write-Ins for Assets:			
1501			0.00	0.00
1502			0.00	0.00
1503			0.00	0.00
1598	Summary or remaining write-ins from overflow page	0.00	0.00	0.00
1599	Total aggregate write-ins	0.00	0.00	0.00

**ANNUAL STATEMENT FOR THE YEAR  
SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION**

**2012**

**LIABILITIES, SURPLUS AND OTHER FUNDS**

		Current Year	Prior Year
1	Unpaid Losses (Underwriting Exhibit - Part 2A)	52,739.00	41,653.90
2	Unpaid loss adjustment expenses (Underwriting Exhibit - Part 2A)	2,000.00	2,000.00
3	Commissions due and payable to agents	20,994.34	20,024.55
4	Other expenses (excluding taxes, licenses and fees)	1,912.49	1,933.38
5	Taxes, licenses and fees (excluding federal income taxes)	581.46	614.46
6	Current federal income taxes (including \$0 on realized capital gains (losses))		
7	Net deferred tax liability		
8	Borrowed money and interest thereon		
9	Unearned assessment/premium reserve	517,856.25	474,007.50
10	Advance premium		
11	Ceded reinsurance premiums payable	47,471.50	44,262.75
12	Funds held by company under reinsurance treaties		
13	Amounts withheld or retained by company for account of others		
14	Provision for unauthorized reinsurance		
15	Payable to parent, subsidiaries and affiliates		
16	Aggregate write-ins for liabilities	0.00	0.00
17	Total liabilities	643,555.04	584,496.54
18	Surplus as regards policyholders	1,787,531.96	1,817,527.49
19	Total liabilities and surplus	2,431,087.00	2,402,024.03
	Details of Write-Ins for Liabilities:		
1601			
1602			
1603			
1698	Summary or remaining write-ins from overflow page	0.00	0.00
1699	Total aggregate write-ins	0.00	0.00

**ANNUAL STATEMENT FOR THE YEAR  
SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION  
STATEMENT OF INCOME**

**2012**

	Current Year	Prior Year
<b>UNDERWRITING INCOME</b>		
1.1	1,734,677.25	1,601,140.63
1.2	25,562.00	25,843.00
1.3	1,709,115.25	1,575,297.63
1.4	931,645.58	809,742.35
1.5	0.00	
1.6	777,469.67	765,555.28
<b>DEDUCTIONS</b>		
2	513,112.75	375,385.29
3	131,510.36	70,786.91
4	601,721.68	503,654.03
5	0.00	0.00
6	1,246,344.79	949,826.23
7	-468,875.12	-184,270.95
<b>INVESTMENT INCOME</b>		
8	31,283.30	35,903.40
9		
10	31,283.30	35,903.40
<b>OTHER INCOME</b>		
11		
12	30,096.83	27,766.92
13	363,347.71	132,653.87
14	393,444.54	160,420.79
15	-44,147.28	12,053.24
16	24,278.00	-5,751.00
17	-68,425.28	17,804.24
<b>SURPLUS ACCOUNT</b>		
18	1,817,527.49	1,763,241.04
19	-68,425.28	17,804.24
20	37,146.75	
21		
22	1,283.00	5,130.00
23		
24	0.00	31,352.21
25	-29,995.53	54,286.45
26	1,787,531.96	1,817,527.49
<b>DETAILS OF WRITE-INS</b>		
0501		
0502		
0503		
0599	0.00	0.00
1301	56,804.20	48,573.88
1302	6,946.07	6,779.25
1303	156,086.25	136,289.10
1304	143,511.19	-58,988.36
1399	363,347.71	132,653.87
2401		35,199.21
2402		-3,847.00
2499	0.00	31,352.21

**ANNUAL STATEMENT FOR THE YEAR  
SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION  
CASH FLOW STATEMENT**

**2012**

	Current Year	Prior Year
<b>Cash from Operations</b>		
1	959,117.92	901,844.38
2	31,283.30	35,903.40
3	65,208.44	149,542.30
4	1,055,609.66	1,087,290.08
5		
6	1,185,522.63	935,373.48
7	24,278.00	-5,751.00
8	1,209,800.63	929,622.48
9	-154,190.97	157,667.60
<b>Cash from Investments</b>		
10		
10.1		
10.2		
10.3		
10.4		
10.5		
10.6	0.00	0.00
11		
11.1		
11.2		
11.3		
11.4		
11.5	0.00	0.00
11.6	0.00	0.00
<b>Cash from Financing and Miscellaneous Sources</b>		
12.1		
12.2		
13	0.00	0.00
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>		
14	-154,190.97	157,667.60
15.1	2,143,233.68	1,985,566.08
15.2	1,989,042.71	2,143,233.68

**ANNUAL STATEMENT FOR THE YEAR  
SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION**

**2012**

**EXPENSE EXHIBIT**

		Current Year
1.1	<b>Claim Adjusting:</b>	
	Direct	0.00
1.2	Reinsurance assumed	0.00
1.3	Reinsurance ceded excluding contingent (commission and brokerage)	0.00
1.4	Net claim adjusting	0.00
2.1	<b>Commission and Brokerage:</b>	
	Direct commission and brokerage	273,284.73
2.2	Reinsurance assumed excluding contingent	0.00
2.3	Reinsurance ceded excluding contingent (commission and brokerage)	0.00
2.4	Contingent - direct (commission and brokerage)	0.00
2.5	Contingent - reinsurance assumed (commission and brokerage)	0.00
2.6	Contingent - reinsurance ceded (commission and brokerage)	0.00
2.7	Policy and membership fees (commission and brokerage)	0.00
2.8	Net commission and brokerage	273,284.73
3	Allowances to managers and agents	0.00
4	Advertising	1,903.77
5	Boards, bureaus and associations	1,479.88
6	Surveys and underwriting reports	0.00
7	Audit of assureds' records	0.00
8.1	<b>Salary and related items:</b>	
	Salaries	121,344.00
8.2	Payroll taxes	9,839.79
9	Employee relations and welfare	0.00
10	Insurance	0.00
11	Directors' fees	27,000.00
12	Travel and travel items	1,438.00
13	Rent and rent items	0.00
14	Equipment	0.00
15	Cost or depreciation of EDP equipment and software	4,119.56
16	Printing and stationery	11,356.88
17	Postage, telephone, exchange and express	13,351.38
18	Legal and auditing	5,841.75
19	Loss adjustment expenses	131,510.36
18	Investment expenses	0.00
19	Totals	329,185.37
	<b>Taxes, licenses and fees:</b>	
20.1	State and local insurance taxes	250.00
20.2	Insurance department licenses and fees	3,617.00
20.3	All other (excluding federal income and real estate)	0.00
20.4	Total taxes, licenses and fees	3,867.00
21	Real estate expenses	3,790.34
22	Real estate taxes	2,725.08
23	Aggregate write-ins for miscellaneous expenses	120,379.52
24	<b>Total expenses incurred (a)</b>	733,232.04
25	Less unpaid expenses - current year	0.00
26	Add unpaid expenses - prior year	0.00
27	Total expenses paid	733,232.04
	Details of Write-Ins:	
2301	utilities, security;trash;clean serv;lawn serv	9,787.50
2302	E&O;dues;bonds;educ	16,151.95
2303	misc exp;bk fee;dep exp;ref; loss corr	35,381.57
2304	accrued expense	59,058.50
2305		
2399	Total Write-ins	120,379.52

(a) Includes management fees of \$0 to affiliates and \$0 to non-affiliates

**ANNUAL STATEMENT FOR THE YEAR 2012**  
**SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION**

**INSURANCE IN FORCE**

	Amount (dollars)	Number
1 In force December 31 of previous year (to equal prior year's statement)	277,607,535	3,492
2 Written during the year	75,870,965	801
3 Total	353,478,500	4,293
4 Deduct those expired and cancelled	52,745,129	628
5 In force December 31 of current year	300,733,371	3,665
6 Deduct amount reinsured	167,815,145	XXX
7 Net amount in force	132,918,226	XXX

**UNDERWRITING EXHIBIT - PART 2  
 LOSSES INCURRED**

1	2	3	4	5	6
Lines of Business	Direct Losses Incurred	Losses Incurred on Reinsurance Assumed	Deduct: Reinsurance Recovered on Incurred Losses	Deduct: Salvage and Subrogation Converted To Cash	Net Losses Incurred Columns 2 and 3 minus Columns 4 and 5
PHYSICAL DAMAGE TO PROPERTY	1,286,793.16		765,544.04	8,136.37	513,112.75
OVERFLOW AMOUNTS					
<b>Totals</b>	\$ 1,286,793.16	\$ -	\$ 765,544.04	\$ 8,136.37	\$ 513,112.75

\* Total should equal Line 2, Page 4, Current Year.

**UNDERWRITING EXHIBIT - PART 2A  
 UNPAID LOSSES and LOSS ADJUSTMENT EXPENSES**

1	2	3	4	5	6
Lines of Business	Direct Unpaid Losses	Unpaid Losses on Reinsurance Assumed	Deduct: Reinsurance Recoverable on Unpaid Losses	Unpaid Loss Adjustment Expenses	Net Unpaid Losses Columns 2 and 3 minus Column 4
PHYSICAL DAMAGE TO PROPERTY	204,433.00		171,694.00	2,000.00	32,739.00
IBNR	20,000.00				20,000.00
OVERFLOW AMOUNTS					
<b>Totals</b>	\$ 224,433.00	\$ -	\$ 171,694.00	\$ 2,000.00	\$ 52,739.00

\*\* Total should equal Line 2, Page 3, Current Year.

\*\*\* Total should equal Line 1, Page 3, Current Year.

EXHIBIT OF NONADMITTED ASSETS

	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets
1			0.00
2			0.00
3			0.00
4			0.00
5			0.00
6			0.00
7	0.00	0.00	0.00
8			0.00
9.1			0.00
9.2			0.00
9.3			0.00
10.1			0.00
10.2			0.00
11.1			0.00
11.2			0.00
12			0.00
13	1,281.52	2,564.52	1,283.00
14			0.00
15	0.00	0.00	0.00
16	1,281.52	2,564.52	1,283.00
Details of Write-Ins for Assets:			
1501	0.00	0.00	0.00
1502	0.00	0.00	0.00
1503	0.00	0.00	0.00
1598	0.00	0.00	0.00
1599	0.00	0.00	0.00

**2012 ANNUAL STATEMENT OF SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION**

**SCHEDULE A**

Showing All Real Estate OWNED December 31 of Current Year

1	2	3	4	5	6	7	8	9	10
Description of Property	Date Acquired	Name of Vendor	Actual Cost	Current Year Acquisitions or Permanent Improvements	Accumulated Depreciation	Amount of Encumbrances	Book Value End of Current Year (Col. 4+5-6-7) *	Gross Income Current Year (Real Estate)	Gross Expenses Current Year (Real Estate)
HOME OFFICE	2/1/1991	SPRINGFIELD TWP MUT	304,763.37		199,510.00		105,253.37		2,246.34
OVERFLOW AMOUNTS									
<b>Totals</b>	XXX	XXX	\$ 304,763.37	\$ -	\$ 199,510.00	\$ -	\$ 105,253.37	\$ -	\$ 2,246.34

\*Total to agree with Page 2, Line 3, Current Year.

**FURNITURE, FIXTURES and AUTOMOBILES**

Showing All Furniture, Fixtures and Automobiles OWNED December 31 of Current Year

1	2	3	4	5	6	7	8
Description	Date Acquired	Name of Vendor	Actual Cost	Current Year Acquisitions or Permanent Improvements	Accumulated Depreciation	Amount of Encumbrances	Book Value End of Current Year (Col. 4+5-6-7)
OFFICE FURNITURE & EQUIP	2/1/1991	SPRINGFIELD TWP MUT	25,736.23		24,454.71		1,281.52
OVERFLOW AMOUNTS							
<b>Totals</b>	XXX	XXX	\$ 25,736.23	\$ -	\$ 24,454.71	\$ -	\$ 1,281.52









REINSURANCE SCHEDULE  
Reinsurance Ceded and Reinsurance Assumed

1	2	3	4	5	6	7	8
Reinsurer or Reinsured	Ceded or Assumed	Location of Company	Total Amount Reinsured	Total Premiums Ceded *	Total Premiums Assumed **	Largest Risk Ceded or Assumed	Remarks
AMERICAN AG INS CO	11.30%		18,963,112	105,275.95			
HANNOVER RUCKVERSICH	5.00%	NEW YORK	8,390,757	46,582.27			
LLOYDS NO2987 BRIT	14%	NEW YORK	23,494,120	130,430.40			
QBE REINS CORP	25%	PENNA	41,953,786	232,911.40			
TOA REINS CO OF AM	15%	DELAWARE	25,172,272	139,746.83			
EMPLOYERS MUT	16.20%	IOWA	27,186,054	150,926.58			
MORTORIST MUT	7.20%	OHIO	12,082,690	67,078.48			
FARMERS MUT HAIL	6.30%	IOWA	10,572,354	58,693.67			
OVERFLOW AMOUNTS							
<b>Totals</b>	XXX	XXX	\$ 167,815,145	\$ 931,645.58	\$ -	XXX	XXX

\*Total to agree with Page 4, Line 1.4, Current Year.

\*\*Total to agree with Page 4, Line 1.5, Current Year.

COMPENSATION SCHEDULE

Show all salaries, commissions, claim adjustment expenses, directors fees and expenses, and travel items paid in the current year for the top 5 officers/employees and all directors, travel or car allowances, if paid, are to be included.

1	2	3	4	5	6	7	8	9
Name of Payee	Title	Salaries	Commissions	Claim Adjustment Expenses	Directors Fees & Expenses	Travel & Travel Items	All Other	Total
<b>Officers/Employees:</b>								
1) J DANIEL SIMON	PRES/DIR/AGENT		15,212.33		6,300.00	434.00		\$ 21,946.33
2) LEE F KOHLER	VICE PRES/DIR				5,400.00			\$ 5,400.00
3) MARLENE M WENTZ	SEC-TREAS/DIRECTOR	52,680.00			5,100.00	190.00		\$ 57,970.00
4) CHRISTINE A SEIFERT	UNDERWRITER	39,804.00						\$ 39,804.00
5) CASEY L HARTLEY	CSR	28,860.00						\$ 28,860.00
<b>Directors:</b>								
DONALD H SNYDER JR	DIRECTOR		15,182.44		5,100.00	814.00		\$ 21,096.44
JACK G MASSENGILL	DIRECTOR/AGENT							\$ -
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
<b>Totals</b>	XXXX	\$ 121,344.00	\$ 30,394.77	\$ -	\$ 27,000.00	\$ 1,438.00	\$ -	\$ 180,176.77

GENERAL INTERROGATORIES

(Answer all questions and attach additional sheets if necessary.)

1. Company's retention:  
 1a. Retention before reinsurance applies for: Fire \$30,000 Wind \$30,000 Other \$30,000  
 Catastrophe Reinsurance \$30,000 Aggregate excess of loss  
 2. What is the largest risk assumed and retained: FIRE & EXTENDED COVERAGE  
 3. What kind of perils are being covered?  
 4. Have the by-laws been amended during the current year? NO If so, were such amendments filed with the Ohio Department of Insurance?  
 5. In what counties does the Company operate: STATE OF OHIO  
 6. Name of Principal Officer and amount of bond: MARLENE M WENTZ \$100,000  
 7. Are all of the persons who handle funds of the Company bonded? Yes X No  
 State the name and amount of each bond on each, except person named in Item 6 above. CHRISTINE A SEIFERT \$100,000  
 CASEY L HARTLEY \$100,000  
 8. Does the Company have an annual audit conducted by an independent CPA? No  
 9. State the number of members holding policies in the Company. 3665  
 10. Was an annual report of the Company made available to each policyholder? Yes YES If so, did such report agree with the annual statement filed with the Ohio Department of Insurance? Yes  
 11. State as of what date the latest examination of the Company was made by the Ohio Department of Insurance. 30-Nov-11  
 12. How many assessments were made during the year? Date of last assessment MONTHLY BILL  
 13. Did the assessment provide for all losses, expenses and all other liabilities prior to the date of assessment? YES  
 14. Rate of policy fee 0  
 15. State the amount of borrowed money since date of last assessment 0 interest thereon  
 16. Does any person, firm, corporation or association have any claim, contingent or otherwise, against this Company which is NOT included in the liabilities on page 2 of this statement? No X  
 If yes, give the amount, terms for payment and reasons why such were not recorded as a liability on page 2 of this statement.

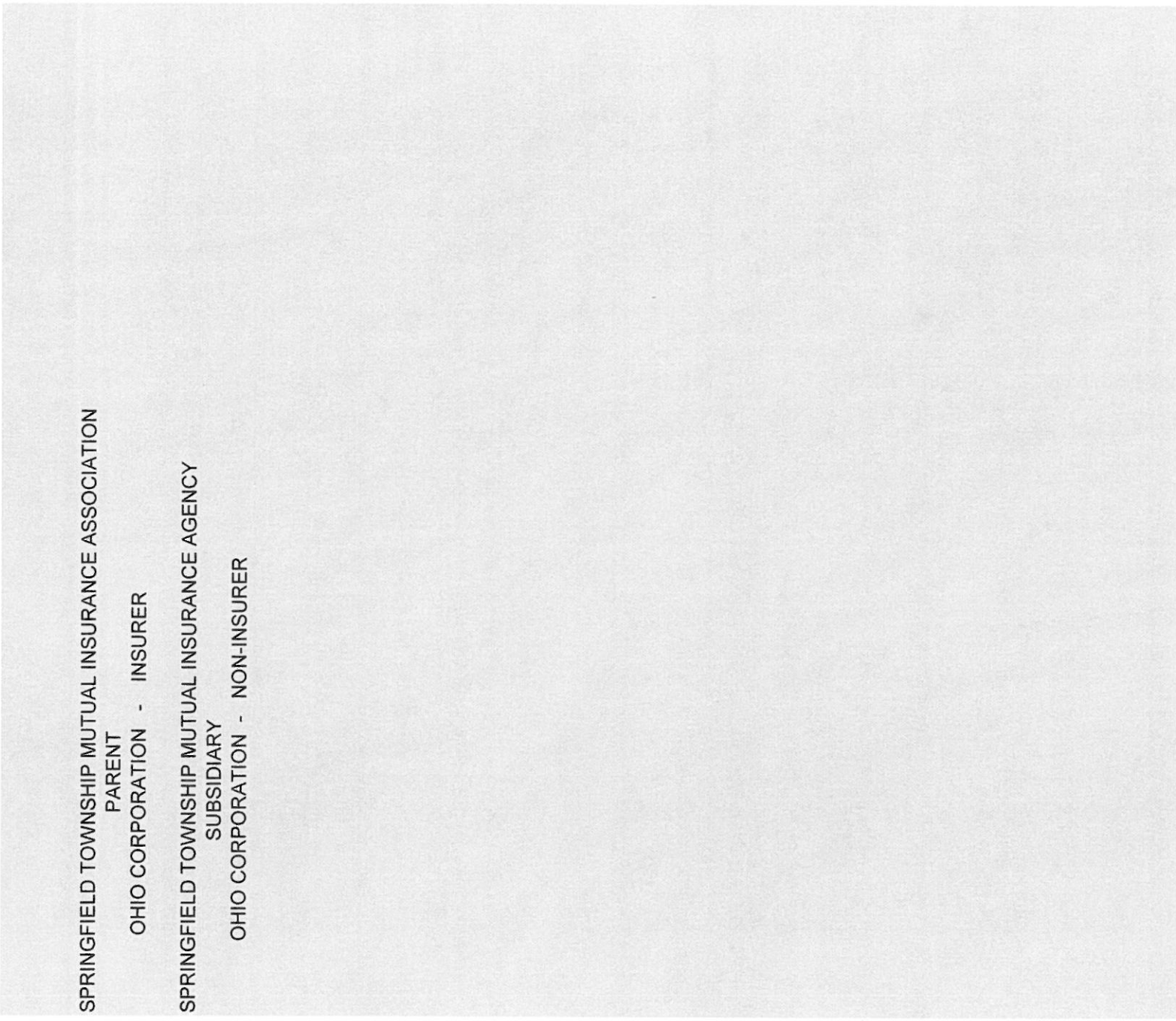


ANNUAL STATEMENT FOR THE YEAR  
SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION

2012

ORGANIZATIONAL CHART

LIST ALL ENTITIES THAT ARE MEMBERS OF AN INSURANCE COMPANY HOLDING SYSTEM AS  
DEFINED IN ORC 3901.32



SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION  
PARENT

OHIO CORPORATION - INSURER

SPRINGFIELD TOWNSHIP MUTUAL INSURANCE AGENCY  
SUBSIDIARY

OHIO CORPORATION - NON-INSURER



Overflow Page for Investments Owned

SCHEDULE D - PART 1

Showing all BONDS Owned on December 31 of Current Year

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Cusip #	Give complete and accurate description of all bonds owned.	From Whom Acquired	Date Acquired	Par Value	Actual Cost	Book Value / Amortized Value*	Market Value of December 31 of Current Year	Rate (%)	Amount Due and Accrued Dec. 31 of Current Year on bonds not in default	Gross Am't Received During Year	Increase by Adjustment, in Book Value During Year	Decrease by Adjustment, in Book Value During Year	Amount of Interest due and accrued Dec. 31. Current year, on bonds in default as to principal or interest	Maturity Date	NAIC Designation
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
* Annual Statement Value															
XXX	** You can insert additional rows in yellow above if needed!														
Totals to Page 11	XXX	XXX	XXX	\$ -	\$ -	\$ -	XXX	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	XXX	XXX

SCHEDULE D - PART 2

Showing all Preferred & Common Stocks and Mutual Funds Owned December 31 of Current Year

1	2	3	4	5	6	7	8	9	10	11	12	13	14
Cusip #	Give complete and accurate description of all stocks and mutual funds owned.	From Whom Acquired	Date Acquired	No. of Shares	Par Value (Preferred Stocks)	Book Value	Per Share Rate Used To Obtain Market Value	Market Value / Fair Value of December 31 of Current Year	Actual Cost	Received During Year	Dividends and Accrued Amount Due Dec. 31	Increase, by Adjustment, in Book Value During Year	Decrease, by Adjustment, in Book Value During Year
1	2	3	4	5	6	7	8	9	10	11	12	13	14
19													
XXX	** You can insert additional rows in yellow above if needed!												
Totals to Page 12	XXX	XXX	XXX	XXX	XXX	\$ -	XXX	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

