



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

## ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2014  
OF THE CONDITION AND AFFAIRS OF THE

## Ohio Mutual Insurance Company

NAIC Group Code 0963 NAIC Company Code 10202 Employer's ID Number 34-4320350

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

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

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

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

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

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

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

Internet Website Address \_\_\_\_\_ [www.ormg.com](http://www.ormg.com)

Statutory Statement Contact Caroline Kay Metcalf Mrs., 419-563-0816  
(Name) (Area Code) (Telephone Number)  
cmetcalf@omig.com, 419-562-0995  
(E-mail Address) (FAX Number)

## OFFICERS

President James Joseph Kennedy, Mr. Secretary Albert Michael Heister, Mr.  
Treasurer David Gary Hendrix, Mr.

## OTHER

Todd Emery Albert, Mr. Vice President Information Systems      Michael Alexander Brogan, Mr. Vice President Claims      David Alan Grove, Mr. Vice President Product Management  
Michael Robert Horvath, Mr. Vice President Human Resources      Randy Thomas O'Conner, Mr. Executive Vice President

## **DIRECTORS OR TRUSTEES**

Robert Bruce Albro, Mr.	Albert Michael Heister, Mr.	James Joseph Kennedy, Mr.
Susan Porter, Mrs.	John Redon Purse, Mr.	David Anthony Siebenburgen, Mr.
Randy Lee Walker, Mr.	Thomas Eugene Woolley, Mr.	

State of Ohio SS: \_\_\_\_\_  
County of Crawford \_\_\_\_\_

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

James Joseph Kennedy  
President and CEO

David Gary Hendrix  
Treasurer and CFO

Michael Alexander Brogan  
Assistant Secretary

Subscribed and sworn to before me this  
\_\_\_\_\_ day of \_\_\_\_\_

- a. Is this an original filing? .....
- b. If no,

Yes [ X ] No [ ]

## ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company

## ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D) .....	.56,189,501		.56,189,501	.51,447,266
2. Stocks (Schedule D):				
2.1 Preferred stocks .....				
2.2 Common stocks .....	157,866,663	.26,045	.157,840,618	.150,416,635
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens .....				
3.2 Other than first liens .....				
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances) .....	4,503,927		.4,503,927	.4,615,158
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....				
4.3 Properties held for sale (less \$ ..... encumbrances) .....				
5. Cash (\$ .....4,721,499 , Schedule E - Part 1), cash equivalents (\$ .....379,936 , Schedule E - Part 2) and short-term investments (\$ .....500,173 , Schedule DA) .....	5,601,608		.5,601,608	.6,448,628
6. Contract loans (including \$ ..... premium notes) .....				
7. Derivatives (Schedule DB) .....				
8. Other invested assets (Schedule BA) .....				
9. Receivable for securities .....				
10. Securities lending reinvested collateral assets (Schedule DL) .....				
11. Aggregate write-ins for invested assets .....				
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	.224,161,699	.26,045	.224,135,654	.212,927,687
13. Title plants less \$ ..... charged off (for Title insurers only) .....				
14. Investment income due and accrued .....	.475,926		.475,926	.448,495
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	820,660	.81,093	.739,567	.752,492
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....	11,441,483		11,441,483	10,693,858
15.3 Accrued retrospective premiums .....				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	.528,350		.528,350	.8,056
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 .....	1,723,044		1,723,044	1,874,346
19. Guaranty funds receivable or on deposit .....				
20. Electronic data processing equipment and software .....	.311,444	.311,444		
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....	28,473	.28,473		
22. Net adjustment in assets and liabilities due to foreign exchange rates .....				
23. Receivables from parent, subsidiaries and affiliates .....				
24. Health care (\$ ..... ) and other amounts receivable .....				
25. Aggregate write-ins for other than invested assets .....	.625,057		.625,057	.729,233
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	.240,116,136	.447,055	.239,669,081	.227,434,167
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....				
28. Total (Lines 26 and 27) .....	.240,116,136	.447,055	.239,669,081	.227,434,167
<b>DETAILS OF WRITE-INS</b>				
1101. .....				
1102. .....				
1103. .....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....				
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....				
2501. Goodwill .....	.625,057		.625,057	.729,233
2502. .....				
2503. .....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....				
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....	.625,057		.625,057	.729,233

**ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company**  
**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8) .....	19,103,261	19,335,122
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6) .....		
3. Loss adjustment expenses (Part 2A, Line 35, Column 9) .....	4,687,890	4,487,007
4. Commissions payable, contingent commissions and other similar charges .....	1,867,599	1,726,519
5. Other expenses (excluding taxes, licenses and fees) .....	43,238	41,400
6. Taxes, licenses and fees (excluding federal and foreign income taxes) .....	33,689	27,174
7.1 Current federal and foreign income taxes (including \$ 64,853 on realized capital gains (losses)) .....	1,241,910	761,631
7.2 Net deferred tax liability .....		
8. Borrowed money \$ ..... and interest thereon \$ .....		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ 64,447,779 and including warranty reserves of \$ ..... and accrued accident and health experience rating refunds including \$ ..... for medical loss ratio rebate per the Public Health Service Act) .....	23,783,752	22,300,260
10. Advance premium .....	395,548	346,507
11. Dividends declared and unpaid:		
11.1 Stockholders .....		
11.2 Policyholders .....		
12. Ceded reinsurance premiums payable (net of ceding commissions) .....	42,687	(90,082)
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19) .....	109,075	101,621
14. Amounts withheld or retained by company for account of others .....	111	7,111
15. Remittances and items not allocated .....	2,749	
16. Provision for reinsurance (including \$ ..... certified) (Schedule F, Part 8) .....		1,554
17. Net adjustments in assets and liabilities due to foreign exchange rates .....		
18. Drafts outstanding .....		
19. Payable to parent, subsidiaries and affiliates .....	836,148	616,097
20. Derivatives .....		
21. Payable for securities .....	16,902	
22. Payable for securities lending .....		
23. Liability for amounts held under uninsured plans .....		
24. Capital notes \$ ..... and interest thereon \$ .....		
25. Aggregate write-ins for liabilities .....		
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25) .....	52,164,559	49,661,921
27. Protected cell liabilities .....		
28. Total liabilities (Lines 26 and 27) .....	52,164,559	49,661,921
29. Aggregate write-ins for special surplus funds .....		
30. Common capital stock .....		
31. Preferred capital stock .....		
32. Aggregate write-ins for other than special surplus funds .....		
33. Surplus notes .....		
34. Gross paid in and contributed surplus .....		
35. Unassigned funds (surplus) .....	187,504,522	177,772,246
36. Less treasury stock, at cost:		
36.1 ..... shares common (value included in Line 30 \$ ..... ) .....		
36.2 ..... shares preferred (value included in Line 31 \$ ..... ) .....		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39) .....	187,504,522	177,772,246
38. TOTALS (Page 2, Line 28, Col. 3)	239,669,081	227,434,167
<b>DETAILS OF WRITE-INS</b>		
2501. ....		
2502. ....		
2503. ....		
2598. Summary of remaining write-ins for Line 25 from overflow page .....		
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)		
2901. ....		
2902. ....		
2903. ....		
2998. Summary of remaining write-ins for Line 29 from overflow page .....		
2999. Totals (Lines 2901 thru 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 thru 3203 plus 3298)(Line 32 above)		

**ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company**  
**STATEMENT OF INCOME**

	1 Current Year	2 Prior Year
<b>UNDERWRITING INCOME</b>		
1. Premiums earned (Part 1, Line 35, Column 4).....	50,455,266	47,356,454
<b>DEDUCTIONS:</b>		
2. Losses incurred (Part 2, Line 35, Column 7).....	27,956,496	27,043,264
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....	4,317,656	4,105,285
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2).....	16,947,965	16,141,596
5. Aggregate write-ins for underwriting deductions.....		
6. Total underwriting deductions (Lines 2 through 5).....	49,222,117	47,290,145
7. Net income of protected cells.....		
8. Net underwriting gain or (loss) (Line 1 minus Line 6 plus Line 7).....	1,233,149	66,309
<b>INVESTMENT INCOME</b>		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17).....	1,289,552	1,355,522
10. Net realized capital gains or (losses) less capital gains tax of \$ 64,853 (Exhibit of Capital Gains (Losses) ).....	77,635	215,791
11. Net investment gain (loss) (Lines 9 + 10).....	1,367,187	1,571,313
<b>OTHER INCOME</b>		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ 44,022 amount charged off \$ 266,919 ).....	(222,897)	(186,451)
13. Finance and service charges not included in premiums.....	915,100	855,704
14. Aggregate write-ins for miscellaneous income.....	323,723	329,058
15. Total other income (Lines 12 through 14).....	1,015,926	998,311
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	3,616,262	2,635,933
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).....	3,616,262	2,635,933
19. Federal and foreign income taxes incurred.....	1,178,264	811,007
20. Net income (Line 18 minus Line 19)(to Line 22).....	2,437,998	1,824,926
<b>CAPITAL AND SURPLUS ACCOUNT</b>		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....	177,772,246	165,227,264
22. Net income (from Line 20).....	2,437,998	1,824,926
23. Net transfers (to) from Protected Cell accounts.....		
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ 328,608.....	7,005,527	10,574,538
25. Change in net unrealized foreign exchange capital gain (loss).....		
26. Change in net deferred income tax.....	177,306	116,332
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3).....	109,891	33,139
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1).....	1,554	68,704
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 (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1).....		
37. Aggregate write-ins for gains and losses in surplus.....		(72,657)
38. Change in surplus as regards policyholders for the year (Lines 22 through 37).....	9,732,276	12,544,982
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....	187,504,522	177,772,246
<b>DETAILS OF WRITE-INS</b>		
0501. ....		
0502. ....		
0503. ....		
0598. Summary of remaining write-ins for Line 5 from overflow page.....		
0599. Totals (Lines 0501 thru 0503 plus 0598)(Line 5 above).....		
1401. Rental and Related Services.....	326,083	326,083
1402. Other Income/Expense.....	(2,360)	2,975
1403. ....		
1498. Summary of remaining write-ins for Line 14 from overflow page.....		
1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above).....	323,723	329,058
3701. Correction of prior period error.....		(72,657)
3702. ....		
3703. ....		
3798. Summary of remaining write-ins for Line 37 from overflow page.....		
3799. Totals (Lines 3701 thru 3703 plus 3798)(Line 37 above).....		(72,657)

**ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company**  
**CASH FLOW**

	1 Current Year	2 Prior Year
<b>Cash from Operations</b>		
1. Premiums collected net of reinsurance .....	51,389,843	47,982,445
2. Net investment income .....	1,988,222	2,087,179
3. Miscellaneous income .....	1,015,926	998,311
4. Total (Lines 1 through 3) .....	54,393,991	51,067,935
5. Benefit and loss related payments .....	28,708,651	25,849,333
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....		
7. Commissions, expenses paid and aggregate write-ins for deductions .....	20,811,224	19,395,330
8. Dividends paid to policyholders .....		
9. Federal and foreign income taxes paid (recovered) net of \$ .....	64,853	762,838
10. Total (Lines 5 through 9) .....	50,282,713	45,620,280
11. Net cash from operations (Line 4 minus Line 10) .....	4,111,278	5,447,655
<b>Cash from Investments</b>		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds .....	9,401,440	11,785,363
12.2 Stocks .....	778,107	1,165,148
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 .....	16,902	
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	10,196,449	12,950,511
13. Cost of investments acquired (long-term only):		
13.1 Bonds .....	14,533,179	10,871,960
13.2 Stocks .....	765,496	3,181,349
13.3 Mortgage loans .....		
13.4 Real estate .....	183,502	80,270
13.5 Other invested assets .....		
13.6 Miscellaneous applications .....		
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	15,482,177	14,133,579
14. Net increase (decrease) in contract loans and premium notes .....		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) .....	(5,285,728)	(1,183,068)
<b>Cash from Financing and Miscellaneous Sources</b>		
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) .....	327,430	(7,754,496)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....	327,430	(7,754,496)
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	(847,020)	(3,489,909)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year .....	6,448,628	9,938,537
19.2 End of period (Line 18 plus Line 19.1) .....	5,601,608	6,448,628

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

## ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company

**UNDERWRITING AND INVESTMENT EXHIBIT**

## PART 1 - PREMIUMS EARNED

Line of Business	1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums Dec. 31 Prior Year - per Col. 3, Last Year's Part 1	3 Unearned Premiums Dec. 31 Current Year - per Col. 5 Part 1A	4 Premiums Earned During Year (Cols. 1 + 2 - 3)
1. Fire .....	4,658,341	2,435,184	2,596,337	4,497,188
2. Allied lines .....	30,752	13,330	15,234	28,848
3. Farmowners multiple peril .....	5,147,482	2,527,513	2,696,389	4,978,606
4. Homeowners multiple peril .....	8,736,165	4,776,341	4,854,880	8,657,626
5. Commercial multiple peril .....	6,032,115	2,774,320	2,994,399	5,812,035
6. Mortgage guaranty .....				
8. Ocean marine .....				
9. Inland marine .....	206,810	80,723	105,260	182,273
10. Financial guaranty .....				
11.1 Medical professional liability - occurrence .....				
11.2 Medical professional liability - claims-made .....				
12. Earthquake .....				
13. Group accident and health .....				
14. Credit accident and health (group and individual) .....				
15. Other accident and health .....	1,746	1,046	799	1,993
16. Workers' compensation .....				
17.1 Other liability - occurrence .....	1,091,227	557,915	589,873	1,059,269
17.2 Other liability - claims-made .....				
17.3 Excess workers' compensation .....				
18.1 Products liability - occurrence .....	57,891	25,226	26,514	56,602
18.2 Products liability - claims-made .....				
19.1, 19.2 Private passenger auto liability .....	11,378,061	3,637,100	3,934,511	11,080,650
19.3, 19.4 Commercial auto liability .....	4,255,964	1,830,175	2,020,406	4,065,734
21. Auto physical damage .....	10,052,215	3,469,928	3,779,468	9,742,675
22. Aircraft (all perils) .....				
23. Fidelity .....				
24. Surety .....				
26. Burglary and theft .....	289,989	171,459	169,681	291,767
27. Boiler and machinery .....				
28. Credit .....				
29. International .....				
30. Warranty .....				
31. Reinsurance - nonproportional assumed property .....				
32. Reinsurance - nonproportional assumed liability .....				
33. Reinsurance - nonproportional assumed financial lines .....				
34. Aggregate write-ins for other lines of business .....				
35. TOTALS .....	51,938,758	22,300,260	23,783,752	50,455,266
<b>DETAILS OF WRITE-INS</b>				
3401. .....				
3402. .....				
3403. .....				
3498. Summary of remaining write-ins for Line 34 from overflow page .....				
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)				

## ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company

**UNDERWRITING AND INVESTMENT EXHIBIT**

## PART 1A - RECAPITULATION OF ALL PREMIUMS

Line of Business	1 Amount Unearned (Running One Year or Less from Date of Policy) (a)	2 Amount Unearned (Running More Than One Year from Date of Policy) (a)	3 Earned But Unbilled Premium	4 Reserve for Rate Credits and Retrospective Adjustments Based on Experience	5 Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4
1. Fire .....	2,596,337				2,596,337
2. Allied lines .....	15,234				15,234
3. Farmowners multiple peril .....	2,696,389				2,696,389
4. Homeowners multiple peril .....	.4,854,880				4,854,880
5. Commercial multiple peril .....	2,994,399				2,994,399
6. Mortgage guaranty .....					
8. Ocean marine .....					
9. Inland marine .....	105,260				105,260
10. Financial guaranty .....					
11.1 Medical professional liability - occurrence .....					
11.2 Medical professional liability - claims-made .....					
12. Earthquake .....					
13. Group accident and health .....					
14. Credit accident and health (group and individual) .....					
15. Other accident and health .....	799				799
16. Workers' compensation .....					
17.1 Other liability - occurrence .....	589,873				589,873
17.2 Other liability - claims-made .....					
17.3 Excess workers' compensation .....					
18.1 Products liability - occurrence .....	26,514				26,514
18.2 Products liability - claims-made .....					
19.1, 19.2 Private passenger auto liability .....	3,934,511				3,934,511
19.3, 19.4 Commercial auto liability .....	2,020,406				2,020,406
21. Auto physical damage .....	3,779,468				3,779,468
22. Aircraft (all perils) .....					
23. Fidelity .....					
24. Surety .....					
26. Burglary and theft .....	169,681				169,681
27. Boiler and machinery .....					
28. Credit .....					
29. International .....					
30. Warranty .....					
31. Reinsurance - nonproportional assumed property .....					
32. Reinsurance - nonproportional assumed liability .....					
33. Reinsurance - nonproportional assumed financial lines .....					
34. Aggregate write-ins for other lines of business .....					
35. TOTALS .....	23,783,752				23,783,752
36. Accrued retrospective premiums based on experience .....					
37. Earned but unbilled premiums .....					
38. Balance (Sum of Line 35 through 37) .....					23,783,752
<b>DETAILS OF WRITE-INS</b>					
3401. .....					
3402. .....					
3403. .....					
3498. Summary of remaining write-ins for Line 34 from overflow page .....					
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) .....					

(a) State here basis of computation used in each case

Property premiums are determined by location covered. Casualty premiums are determined by insured address. ....

**ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company**  
**UNDERWRITING AND INVESTMENT EXHIBIT**

PART 1B - PREMIUMS WRITTEN

Line of Business	1 Direct Business (a)	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1+2+3+4-5
		2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1. Fire .....	3,081,804	14,422,649	5,805	12,594,774	257,143	4,658,341
2. Allied lines .....		113,895		.83,143		30,752
3. Farmowners multiple peril .....	1,951,359	17,345,093	3,205	13,917,265	234,909	5,147,482
4. Homeowners multiple peril .....	9,219,766	23,752,210	12,724	23,620,002	628,533	8,736,165
5. Commercial multiple peril .....		22,341,165		16,309,050		6,032,115
6. Mortgage guaranty .....						
8. Ocean marine .....						
9. Inland marine .....	15,248	751,734	.25	559,153	.1,045	206,810
10. Financial guaranty .....						
11.1 Medical professional liability - occurrence .....						
11.2 Medical professional liability - claims-made .....						
12. Earthquake .....						
13. Group accident and health .....						
14. Credit accident and health (group and individual) .....						
15. Other accident and health .....		.6,468		4,722		1,746
16. Workers' compensation .....						
17.1 Other liability - occurrence .....	284,578	3,757,926		2,950,355	.922	1,091,227
17.2 Other liability - claims-made .....						
17.3 Excess workers' compensation .....						
18.1 Products liability - occurrence .....		214,410		156,520		57,891
18.2 Products liability - claims-made .....						
19.1, 19.2 Private passenger auto liability .....	19,877,310	22,368,392		30,762,907	104,734	11,378,061
19.3, 19.4 Commercial auto liability .....		15,762,831		11,506,867		4,255,964
21. Auto physical damage .....	17,509,905	20,256,381	13,478	27,178,211	549,338	10,052,215
22. Aircraft (all perils) .....						
23. Fidelity .....						
24. Surety .....						
26. Burglary and theft .....	107,804	966,230		784,045		289,989
27. Boiler and machinery .....						
28. Credit .....						
29. International .....						
30. Warranty .....						
31. Reinsurance - nonproportional assumed property .....	XXX					
32. Reinsurance - nonproportional assumed liability .....	XXX					
33. Reinsurance - nonproportional assumed financial lines .....	XXX					
34. Aggregate write-ins for other lines of business .....						
35. TOTALS .....	52,047,774	142,059,383	35,237	140,427,012	1,776,624	51,938,758
<b>DETAILS OF WRITE-INS</b>						
3401. ....						
3402. ....						
3403. ....						
3498. Summary of remaining write-ins for Line 34 from overflow page .....						
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) .....						

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [ ] No [ X ]

If yes: 1. The amount of such installment premiums \$ .....

2. Amount at which such installment premiums would have been reported had they been reported on an annualized basis \$ .....

## ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company

**UNDERWRITING AND INVESTMENT EXHIBIT**

## PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5	6	7	8 Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)				
1. Fire .....	1,220,155	6,663,706	5,755,286	2,128,575	438,453	526,280	2,040,748	45.4
2. Allied lines .....		15,099	11,023	4,077	3,143	631	6,589	22.8
3. Farmowners multiple peril .....	453,813	8,205,966	6,321,698	2,338,082	877,472	1,204,756	2,010,797	40.4
4. Homeowners multiple peril .....	4,089,925	13,556,849	12,883,314	4,763,460	1,180,379	1,761,488	4,182,351	48.3
5. Commercial multiple peril .....		9,602,580	7,009,884	2,592,697	2,825,368	2,470,187	2,947,878	50.7
6. Mortgage guaranty .....								
8. Ocean marine .....								
9. Inland marine .....		201,799	147,314	54,486	2,588	3,857	53,217	29.2
10. Financial guaranty .....								
11.1 Medical professional liability - occurrence .....								
11.2 Medical professional liability - claims-made .....								
12. Earthquake .....								
13. Group accident and health .....								
14. Credit accident and health (group and individual) .....		10,900	7,957	2,943	1,107	98	3,952	198.2
15. Other accident and health .....								
16. Workers' compensation .....								
17.1 Other liability - occurrence .....	34,231	862,854	654,872	242,213	865,768	815,867	292,114	27.6
17.2 Other liability - claims-made .....								
17.3 Excess workers' compensation .....								
18.1 Products liability - occurrence .....		2,477	1,808	669	13,651	13,832	488	0.9
18.2 Products liability - claims-made .....								
19.1, 19.2 Private passenger auto liability .....	14,798,127	13,124,959	20,524,606	7,398,480	8,758,666	9,293,218	6,863,927	61.9
19.3, 19.4 Commercial auto liability .....		7,275,924	5,311,425	1,964,499	3,287,974	2,531,044	2,721,430	66.9
21. Auto physical damage .....	10,880,738	13,398,467	17,728,792	6,550,413	823,361	682,062	6,691,711	68.7
22. Aircraft (all perils) .....								
23. Fidelity .....								
24. Surety .....								
26. Burglary and theft .....	23,517	523,760	399,512	147,765	25,331	31,802	141,294	48.4
27. Boiler and machinery .....								
28. Credit .....								
29. International .....								
30. Warranty .....								
31. Reinsurance - nonproportional assumed property .....	XXX							
32. Reinsurance - nonproportional assumed liability .....	XXX							
33. Reinsurance - nonproportional assumed financial lines .....	XXX							
34. Aggregate write-ins for other lines of business .....								
35. TOTALS .....	31,500,506	73,445,340	76,757,489	28,188,357	19,103,261	19,335,122	27,956,496	55.4
<b>DETAILS OF WRITE-INS</b>								
3401. ....								
3402. ....								
3403. ....								
3498. Summary of remaining write-ins for Line 34 from overflow page .....								
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above) .....								

## ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company

## UNDERWRITING AND INVESTMENT EXHIBIT

## PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8	9
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire .....	91,751	538,032	459,741	170,041	26,305	967,812	725,705	438,453	61,001
2. Allied lines .....		5,500	4,015	1,485		6,141	4,483	3,143	709
3. Farmowners multiple peril .....	162,419	935,847	801,734	296,532	76,809	2,074,820	1,570,689	877,472	163,280
4. Homeowners multiple peril .....	320,952	2,503,094	2,061,554	762,492	454,088	1,093,640	1,129,841	1,180,379	182,631
5. Commercial multiple peril .....		5,924,106	4,324,598	1,599,509		4,540,219	3,314,360	2,825,368	1,274,949
6. Mortgage guaranty .....									
8. Ocean marine .....									
9. Inland marine .....		8,000	5,840	2,160		1,587	1,159	2,588	293
10. Financial guaranty .....									
11.1 Medical professional liability - occurrence .....									
11.2 Medical professional liability - claims-made .....									
12. Earthquake .....									
13. Group accident and health .....								(a)	
14. Credit accident and health (group and individual) .....								(a)	1,107
15. Other accident and health .....		1,112	812	300		2,988	2,181	(a)	105
16. Workers' compensation .....									
17.1 Other liability - occurrence .....	62,002	1,865,808	1,407,302	520,509	58,243	1,220,495	933,479	865,768	393,058
17.2 Other liability - claims-made .....									
17.3 Excess workers' compensation .....									
18.1 Products liability - occurrence .....		32,500	23,725	8,775		18,061	13,185	13,651	11,590
18.2 Products liability - claims-made .....									
19.1, 19.2 Private passenger auto liability .....	10,115,373	12,360,686	16,407,523	6,068,536	4,633,733	5,329,711	7,273,314	8,758,666	1,538,218
19.3, 19.4 Commercial auto liability .....		6,769,912	4,942,036	1,827,876		5,407,769	3,947,672	3,287,974	970,493
21. Auto physical damage .....	772,098	912,249	1,229,573	454,774	503,566	861,571	996,550	823,361	89,554
22. Aircraft (all perils) .....									
23. Fidelity .....									
24. Surety .....									
26. Burglary and theft .....	3,500	68,086	52,258	19,328	1,511	20,720	16,229	25,331	2,009
27. Boiler and machinery .....									
28. Credit .....									
29. International .....									
30. Warranty .....									
31. Reinsurance - nonproportional assumed property .....	XXX				XXX				
32. Reinsurance - nonproportional assumed liability .....	XXX				XXX				
33. Reinsurance - nonproportional assumed financial lines .....	XXX				XXX				
34. Aggregate write-ins for other lines of business .....									
35. TOTALS .....	11,528,094	31,924,932	31,720,709	11,732,317	5,754,255	21,545,535	19,928,847	19,103,261	4,687,890
<b>DETAILS OF WRITE-INS</b>									
3401. ....									
3402. ....									
3403. ....									
3498. Summary of remaining write-ins for Line 34 from overflow page									
3499. Totals (Lines 3401 thru 3403 plus 3498)(Line 34 above)									

(a) Including \$ ..... for present value of life indemnity claims.

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company  
**UNDERWRITING AND INVESTMENT EXHIBIT**

PART 3 - EXPENSES

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
1. Claim adjustment services:				
1.1 Direct .....	1,519,248			1,519,248
1.2 Reinsurance assumed .....				
1.3 Reinsurance ceded .....	30,383			30,383
1.4 Net claim adjustment service (1.1 + 1.2 - 1.3) .....	1,488,865			1,488,865
2. Commission and brokerage:				
2.1 Direct excluding contingent .....		8,382,988		8,382,988
2.2 Reinsurance assumed, excluding contingent .....		4,689		4,689
2.3 Reinsurance ceded, excluding contingent .....		471,148		471,148
2.4 Contingent - direct .....		1,212,918		1,212,918
2.5 Contingent - reinsurance assumed .....				
2.6 Contingent - reinsurance ceded .....		27,827		27,827
2.7 Policy and membership fees .....				
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7) .....		9,101,620		9,101,620
3. Allowances to managers and agents .....				
4. Advertising .....	65,726	175,735		241,461
5. Boards, bureaus and associations .....	100,786	227,269		328,055
6. Surveys and underwriting reports .....	184,686	494,306		678,992
7. Audit of assureds' records .....				
8. Salary and related items:				
8.1 Salaries .....	1,225,654	3,333,202		4,558,856
8.2 Payroll taxes .....	80,974	267,718		348,693
9. Employee relations and welfare .....	287,598	744,047		1,031,645
10. Insurance .....	21,519	57,595		79,114
11. Directors' fees .....	14,837	122,721		137,558
12. Travel and travel items .....	54,658	137,494		192,153
13. Rent and rent items .....	49,921	133,613		183,534
14. Equipment .....	191,934	513,705		705,640
15. Cost or depreciation of EDP equipment and software .....	31,421	84,098		115,519
16. Printing and stationery .....	1,234	95,716		96,951
17. Postage, telephone and telegraph, exchange and express .....	105,619	278,742		384,361
18. Legal and auditing .....	127,393	418,685	280,421	826,499
19. Totals (Lines 3 to 18) .....	2,543,961	7,084,647	280,421	9,909,030
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$ .....	257,055	687,999		945,054
20.2 Insurance department licenses and fees .....	21,442	56,917		78,359
20.3 Gross guaranty association assessments .....	(3)	(176)		(179)
20.4 All other (excluding federal and foreign income and real estate) .....				
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4) .....	278,494	744,740		1,023,233
21. Real estate expenses .....				
22. Real estate taxes .....	6,336	16,958		23,293
23. Reimbursements by uninsured plans .....				
24. Aggregate write-ins for miscellaneous expenses .....				
25. Total expenses incurred .....	4,317,656	16,947,965	280,421	(a) 21,546,041
26. Less unpaid expenses - current year .....	4,687,890	1,901,288	43,238	6,632,416
27. Add unpaid expenses - prior year .....	4,487,007	1,753,692	41,400	6,282,100
28. Amounts receivable relating to uninsured plans, prior year .....				
29. Amounts receivable relating to uninsured plans, current year .....				
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29) .....	4,116,773	16,800,369	278,583	21,195,725
<b>DETAILS OF WRITE-INS</b>				
2401. .....				
2402. .....				
2403. .....				
2498. Summary of remaining write-ins for Line 24 from overflow page .....				
2499. Totals (Lines 2401 thru 2403 plus 2498)(Line 24 above) .....				

(a) Includes management fees of \$ ..... to affiliates and \$ ..... 280,421 to non-affiliates.

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company  
**EXHIBIT OF NET INVESTMENT INCOME**

		1 Collected During Year	2 Earned During Year
1. U.S. Government bonds .....		(a) .....	73,101
1.1 Bonds exempt from U.S. tax .....		(a) .....	.774,816
1.2 Other bonds (unaffiliated) .....		(a) .....	.657,636
1.3 Bonds of affiliates .....		(a) .....	
2.1 Preferred stocks (unaffiliated) .....		(b) .....	
2.11 Preferred stocks of affiliates .....		(b) .....	
2.2 Common stocks (unaffiliated) .....		277,945	277,374
2.21 Common stocks of affiliates .....			
3. Mortgage loans .....		(c) .....	
4. Real estate .....		(d) .....	22,960
5. Contract loans .....			22,960
6. Cash, cash equivalents and short-term investments .....		(e) .....	4,586
7. Derivative instruments .....		(f) .....	
8. Other invested assets .....			
9. Aggregate write-ins for investment income .....			
10. Total gross investment income .....		1,783,042	1,810,473
11. Investment expenses .....		(g) .....	280,421
12. Investment taxes, licenses and fees, excluding federal income taxes .....		(g) .....	
13. Interest expense .....		(h) .....	
14. Depreciation on real estate and other invested assets .....		(i) .....	240,500
15. Aggregate write-ins for deductions from investment income .....			
16. Total deductions (Lines 11 through 15) .....			520,921
17. Net investment income (Line 10 minus Line 16) .....			1,289,552
<b>DETAILS OF WRITE-INS</b>			
0901. .....			
0902. .....			
0903. .....			
0998. Summary of remaining write-ins for Line 9 from overflow page .....			
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....			
1501. .....			
1502. .....			
1503. .....			
1598. Summary of remaining write-ins for Line 15 from overflow page .....			
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above) .....			

(a) Includes \$ 10,186 accrual of discount less \$ 493,949 amortization of premium and less \$ 16,013 paid for accrued interest on purchases.

(b) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued dividends on purchases.

(c) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.

(d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.

(e) Includes \$ .3 accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.

(f) Includes \$ accrual of discount less \$ amortization of premium.

(g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.

(h) Includes \$ interest on surplus notes and \$ interest on capital notes.

(i) Includes \$ depreciation on real estate and \$ depreciation on other invested assets.

**EXHIBIT OF CAPITAL GAINS (LOSSES)**

	1 Realized Gain (Loss) On Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds .....					
1.1 Bonds exempt from U.S. tax .....	23,945		23,945		
1.2 Other bonds (unaffiliated) .....	70,315		70,315		
1.3 Bonds of affiliates .....					
2.1 Preferred stocks (unaffiliated) .....					
2.11 Preferred stocks of affiliates .....					
2.2 Common stocks (unaffiliated) .....	102,461		102,461	.966,493	
2.21 Common stocks of affiliates .....				6,367,642	
3. Mortgage loans .....					
4. Real estate .....	(54,233)		(54,233)		
5. Contract loans .....					
6. Cash, cash equivalents and short-term investments .....					
7. Derivative instruments .....					
8. Other invested assets .....					
9. Aggregate write-ins for capital gains (losses) .....					
10. Total capital gains (losses) .....	142,488		142,488	7,334,135	
<b>DETAILS OF WRITE-INS</b>					
0901. .....					
0902. .....					
0903. .....					
0998. Summary of remaining write-ins for Line 9 from overflow page .....					
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above) .....					

**ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company**  
**EXHIBIT OF NON-ADMITTED ASSETS**

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D) .....			
2. Stocks (Schedule D):			
2.1 Preferred stocks .....			
2.2 Common stocks .....	26,045	26,043	(2)
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens .....			
3.2 Other than first liens .....			
4. Real estate (Schedule A):			
4.1 Properties occupied by the company .....			
4.2 Properties held for the production of income .....			
4.3 Properties held for sale .....			
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA) .....			
6. Contract loans .....			
7. Derivatives (Schedule DB) .....			
8. Other invested assets (Schedule BA) .....			
9. Receivables for securities .....			
10. Securities lending reinvested collateral assets (Schedule DL) .....			
11. Aggregate write-ins for invested assets .....			
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	26,045	26,043	(2)
13. Title plants (for Title insurers only) .....			
14. Investment income due and accrued .....			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection .....	81,093	85,068	3,975
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due .....			
15.3 Accrued retrospective premiums .....			
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers .....			
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 .....			
19. Guaranty funds receivable or on deposit .....			
20. Electronic data processing equipment and software .....	311,444	401,566	-90,122
21. Furniture and equipment, including health care delivery assets .....	28,473	44,269	-15,796
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			
23. Receivables from parent, subsidiaries and affiliates .....			
24. Health care 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) .....	447,055	556,946	-109,891
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			
28. Total (Lines 26 and 27) .....	447,055	556,946	-109,891
<b>DETAILS OF WRITE-INS</b>			
1101. .....			
1102. .....			
1103. .....			
1198. Summary of remaining write-ins for Line 11 from overflow page .....			
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....			
2501. Company Automobiles .....			
2502. .....			
2503. .....			
2598. Summary of remaining write-ins for Line 25 from overflow page .....			
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above) .....			

## NOTES TO FINANCIAL STATEMENTS

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### 1. Summary of Significant Accounting Policies

#### A. Accounting Practices

The financial statements of Ohio Mutual Insurance Company are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance (ODI).

The ODI recognizes only statutory accounting practices prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company. The National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures Manual* has been adopted as a component of prescribed or permitted accounting practices by the State of Ohio.

A reconciliation of the Company's net income and capital surplus between NAIC Statutory Accounting Practices and practices prescribed and permitted by the State of Ohio is shown below:

	State of Domicile	2014	2013
<b><u>NET INCOME</u></b>			
(1) Ohio Mutual Insurance Company state basis (Page 4, Line 20, Columns 1 & 2)	OH	\$ 2,437,998	\$ 1,824,926
(2) State Prescribed Practices that increase/(decrease) NAIC SAP: e.g. Depreciation of fixed assets	_____	_____	_____
(3) State Permitted Practices that increase/(decrease) NAIC SAP: e.g. Depreciation, home office property	_____	_____	_____
(4) NAIC SAP (1-2-3=4)	OH	\$ 2,437,998	\$ 1,824,926
<b><u>SURPLUS</u></b>			
(5) Ohio Mutual Insurance Company state basis (Page 3, Line 37, Columns 1 & 2)	OH	\$ 187,504,522	\$ 177,772,246
(6) State Prescribed Practices that increase/(decrease) NAIC SAP: e.g. Goodwill, net e.g. Fixed Assets, net	_____	_____	_____
(7) State Permitted Practices that increase/(decrease) NAIC SAP: e.g. Home Office Property	_____	_____	_____
(8) NAIC SAP (5-6-7=8)	OH	\$ 187,504,522	\$ 177,772,246

#### B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with the Annual Statement Instructions and the *Accounting Practices and Procedures Manual* requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

#### C. Accounting Policy

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for direct business.

Expenses incurred in connection with acquiring new insurance business, including such acquisition costs as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

In addition, the Company uses the following accounting policies:

- (1) All short-term investments are stated at amortized cost.
- (2) Bonds not backed by other loans are stated at either amortized cost, using the scientific interest method or the lower of amortized cost or fair market value.
- (3) Unaffiliated common stocks are stated at fair market value. Common stocks of uncombined subsidiaries and affiliates in which the company has an interest of 20% or more are carried on the equity basis.
- (4) The Company had no preferred stock at December 31, 2014 or 2013.
- (5) The Company has no mortgage loans on real estate.
- (6) Loan-backed securities are stated at either amortized cost, using the interest method or the lower of amortized cost or fair market value. The retrospective adjustment method is used to value all securities except for interest only securities, EITF 99-20 eligible securities or securities where the yield has become negative are valued using the prospective method.
- (7) The Company's non-insurance subsidiaries are Centurion Financial, Inc., Ohio United Agency, Inc. and United Premium Budget Service Inc. They are carried at equity value.
- (8) The Company has no ownership interest in any significant joint ventures.
- (9) The Company owns no derivative instruments.
- (10) The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 53, Property-Casualty Contracts-Premiums.

## NOTES TO FINANCIAL STATEMENTS

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- (11) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.
- (12) The Company has not modified its capitalization policy from the prior period.
- (13) The Company has no pharmaceutical rebate receivables.

### 2. Accounting Changes and Corrections of Errors

There were no significant accounting changes or corrections of errors during 2014 or 2013.

### 3. Business Combinations and Goodwill

The Company had Goodwill Amortization in the amount of \$104,176 each year for both 2014 and 2013.

### 4. Discontinued Operations

The Company has no discontinued operations to report.

### 5. Investments

- A. The Company has no mortgage loans.
- B. The Company has no debt restructuring.
- C. The Company has no reverse mortgages.
- D. Loan-Backed Securities

- (1) Prepayment assumptions for Mortgage-backed securities, Collateralized Mortgage Obligations and Other Structured Securities were generated using a purchased prepayment model. The prepayment model uses a number of factors to estimate prepayment activity including the time of year (seasonality), current levels of interest rates (refinancing incentive), economic activity (including housing turnover) and term and age of the underlying collateral (burnout, seasoning). On an ongoing basis, we monitor the rate of prepayment and calibrate the model to reflect actual experience, market factors, and viewpoint.
- (2)
  - a. The Company had no securities it intended to sell for which it recognized other-than-temporary impairment losses.
  - b. The Company had no securities for which it lacked the ability or intent to retain an investment in for a period of time sufficient to recover the amortized cost basis.
- (3) The Company had no other-than-temporary impairments for the year ended December 31, 2014.
- (4) All temporarily impaired securities for which an other-than-temporary impairment has not been recognized in earnings as a realized loss in 2014 are as follows:

a. The aggregate amount of unrealized losses:

	1. Less than 12 Months	\$ (8,193)
	2. 12 Months or Longer	<u>\$ (104,964)</u>

b. The aggregate related fair value of securities with unrealized losses:

	1. Less than 12 Months	\$ 3,557,880
	2. 12 Months or Longer	<u>\$ 4,932,097</u>

- (5) Management regularly reviews the value of the Company's investments. If the value of any investment falls below its cost basis, the decline is analyzed to determine whether it is an other-than-temporary decline in value. To make this determination for each security, the following is considered:

- The length of time and the extent to which the fair value has been below cost;
- The financial condition and near-term prospects of the issuer of the security, including any specific events that may affect its operations or earnings potential;
- Management's intent and ability to hold the security long enough for it to recover its value;

Management concluded that the remaining investments held with unrealized losses were not other-than-temporarily impaired on the basis that the Company had the ability and intent to hold the investments for a period of time sufficient for a forecasted market price recovery up to or beyond the cost of the investment. Also, in management's opinion, evidence indicating the cost of the investment was recoverable within a reasonable period of time outweighed evidence to the contrary in considering the severity and duration of the impairment in relation to the forecasted market price recovery.

E. The Company has no repurchase agreements or securities lending transactions.

F. Real Estate

- (1) The Company has no impaired real estate.

## NOTES TO FINANCIAL STATEMENTS

- (2) The Company has not sold or classified real estate investments as held for sale.
- (3) The Company has no planned sales of real estate investments.
- (4) The Company does not engage in retail land sales operations.
- (5) The Company holds no real estate investments with participating mortgage loan features.

G. The Company has no real estate investments that qualify for low-income housing tax credits (LIHTC).

H. Restricted Assets

- (1) Restricted Assets (Including Pledged)

Restricted Asset Category	Gross Restricted					Percentage				
	Current Year					6	7	8	9	10
	1	2	3	4	5					
	Total General Account (G/A)	G/A Supporting Protected Cell Account Activity (a)	Total Protected Cell Account 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 Restricted to Total Assets	Admitted Restricted to Total Admitted Assets
a. Subject to contractual obligation for which liability is not shown	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	0.00%	0.00%
b. Collateral held under security lending agreements	-	-	-	-	-	-	-	-	0.00%	0.00%
c. Subject to repurchase agreements	-	-	-	-	-	-	-	-	0.00%	0.00%
d. Subject to reverse repurchase agreements	-	-	-	-	-	-	-	-	0.00%	0.00%
e. Subject to dollar repurchase agreements	-	-	-	-	-	-	-	-	0.00%	0.00%
f. Subject to dollar reverse repurchase agreements	-	-	-	-	-	-	-	-	0.00%	0.00%
g. Placed under option contracts	-	-	-	-	-	-	-	-	0.00%	0.00%
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock	-	-	-	-	-	-	-	-	0.00%	0.00%
i. FHLB capital stock	-	-	-	-	-	-	-	-	0.00%	0.00%
j. On deposit with states	2,260,165	-	-	-	2,260,165	1,989,566	270,599	2,260,165	0.94%	0.94%
k. On deposit with other regulatory bodies	-	-	-	-	-	-	-	-	0.00%	0.00%
l. Pledged as collateral to FHLB (including assets backing funding agreements)	-	-	-	-	-	-	-	-	0.00%	0.00%
m. Pledged as collateral not captured in other categories	-	-	-	-	-	-	-	-	0.00%	0.00%
n. Other restricted assets	-	-	-	-	-	-	-	-	0.00%	0.00%
o. Total Restricted Assets	<u>\$ 2,260,165</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 2,260,165</u>	<u>\$ 1,989,566</u>	<u>\$ 270,599</u>	<u>\$ 2,260,165</u>	<u>0.94%</u>	<u>0.94%</u>

(a) Subset of column 1

(b) Subset of column 3

(2) The Company has no Assets Pledged as Collateral Not Captured in Other Categories.

(3) The Company has no Other Restricted Assets or Contracts that Share Similar Characteristics, such as Reinsurance and Derivatives.

I. The Company has no Working Capital Finance Investments.

J. The Company has no Offsetting and Netting of Assets and Liabilities.

K. The Company has no Structured Notes.

**6. Joint Ventures, Partnerships and Limited Liability Companies.**

The Company has no investments in Joint Ventures, Partnerships and Limited Liability Companies.

**7. Investment Income**

The Company has no due and accrued income excluded from surplus.

**8. Derivative Instruments**

The Company owns no derivative instruments.

## NOTES TO FINANCIAL STATEMENTS

### 9. Income Taxes

A. The components of the Net Deferred Tax Asset/(Liability) at December 31 are as follows:

1.	12/31/2014			12/31/2013			Change		
	(1) Ordinary	(2) Capital	(3) (Col 1+2) Total	(4) Ordinary	(5) Capital	(6) (Col 4+5) Total	(7) (Col 1-4) Ordinary	(8) (Col 2-5) Capital	(9) (Col 7+8) Total
(a) Gross Deferred Tax Assets	2,606,400	6,590	2,612,990	2,429,575	8,226	2,437,801	176,825	(1,636)	175,189
(b) Statutory Valuation Allowance Adjustments	-	-	-	-	-	-	-	-	-
(c) Adjusted Gross Deferred Tax Assets (1a-1b)	2,606,400	6,590	2,612,990	2,429,575	8,226	2,437,801	176,825	(1,636)	175,189
(d) Deferred Tax Assets Nonadmitted	-	-	-	-	-	-	-	-	-
(e) Subtotal Net Admitted Deferred Tax Asset (1c-1d)	2,606,400	6,590	2,612,990	2,429,575	8,226	2,437,801	176,825	(1,636)	175,189
(f) Deferred Tax Liabilities	10,839	879,107	889,946	8,921	554,534	563,455	1,918	324,573	326,491
(g) Net Admitted Deferred Tax Asset/ (Net Deferred Tax Liability) (1e-1f)	<u>2,595,561</u>	<u>(872,517)</u>	<u>1,723,044</u>	<u>2,420,654</u>	<u>(546,308)</u>	<u>1,874,346</u>	<u>174,907</u>	<u>(326,209)</u>	<u>(151,302)</u>

2.	12/31/2014			12/31/2013			Change		
	(1) Ordinary	(2) Capital	(3) (Col 1+2) Total	(4) Ordinary	(5) Capital	(6) (Col 4+5) Total	(7) (Col 1-4) Ordinary	(8) (Col 2-5) Capital	(9) (Col 7+8) Total

Admission Calculation Components SSAP No.101

(a) Federal Income Taxes Paid In Prior Years Recoverable Through Loss Carrybacks	1,979,435	-	1,979,435	1,039,744	-	1,039,744	939,691	-	939,691
(b) Adjusted Gross Deferred Tax Assets Expected To Be Realized (Excluding The Amount Of Deferred Tax Assets From 2(a) above) After Application Of The Threshold Limitation (The Lesser of 2(b)1 and 2(b)2 Below)	432,537	-	432,537	1,226,555	-	1,226,555	(794,018)	-	(794,018)
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following The Balance Sheet Date	432,537	-	432,537	1,226,555	-	1,226,555	(794,018)	-	(794,018)
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX	27,773,463	XXX	XXX	26,275,300	XXX	XXX	1,498,163
(c) Adjusted Gross Deferred Tax Assets (Excluding The Amount Of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities	194,428	6,590	201,018	163,276	8,226	171,502	31,152	(1,636)	29,516
(d) Deferred Tax Assets Admitted As The Result Of Application of SSAP No. 101 Total (2(a)+2(b)+2(c))	<u>2,606,400</u>	<u>6,590</u>	<u>2,612,990</u>	<u>2,429,575</u>	<u>8,226</u>	<u>2,437,801</u>	<u>176,825</u>	<u>(1,636)</u>	<u>175,189</u>

3.	2014		2013		
	(a) Ratio Percentage Used to Determine Recovery Period And Threshold Limitation Amount			1306%	2026%
(b) Amount of Adjusted Capital And Surplus Used To Determine Recovery Period And Threshold Limitation In 2(b)2 Above				185,781,478	175,897,900

4.	As of End of Current Period		12/31/2014		Change	
	(1) Ordinary	(2) Capital	(3) Ordinary	(4) Capital	(5) (Col 1-3) Ordinary	(6) (Col 2-4) Capital

#### Impact of Tax Planning Strategies:

(a) Determination Of Adjusted Gross Deferred Tax Assets And Net Admitted Deferred Tax Assets, By Tax Character As A Percentage.

1. Adjusted Gross DTAs Amount From Note 9A1(c)	2,606,400	6,590	2,429,575	8,226	176,825	(1,636)
2. Percentage Of Adjusted Gross DTAs By Tax Character Attributable To The Impact Of Tax Planning Strategies						
3. Net Admitted Adjusted Gross DTAs Amount From Note 9A1(e)	2,606,400	6,590	2,429,575	8,226	176,825	(1,636)
4. Percentage Of Net Admitted Adjusted Gross DTAs By Tax Character Admitted Because Of The Impact Of Tax Planning Strategies						

(b) Does the Company's tax-planning strategies include the use of reinsurance?

Yes \_\_\_\_\_

No  X

#### B. Unrecognized Deferred Tax Liabilities

There are no deferred tax liabilities that have not been recognized in the current period.

## NOTES TO FINANCIAL STATEMENTS

C. Current income taxes incurred consist of the following major components:

	12/31/2014	12/31/2013	(Col 1-2) Change
1. Current Income Tax			
(a) Federal	1,177,057	801,260	375,797
(b) Foreign	1,339	972	367
(c) Subtotal	1,178,396	802,232	376,164
(d) Federal income tax on net capital gains	64,853	105,276	(40,423)
(e) SSAP 3 (included in surplus)	-	(37,429)	37,429
(f) Other	(132)	7,803	(7,935)
(g) Federal and foreign income taxes incurred	1,243,117	877,882	365,235
2. Deferred Tax Assets:			
(a) Ordinary			
(1) Discounting of unpaid losses	331,675	382,434	(50,759)
(2) Unearned premium reserve	1,644,192	1,539,980	104,212
(3) Policyholder reserves	-	-	-
(4) Investments	-	-	-
(5) Deferred acquisition costs	-	-	-
(6) Policyholder dividends accrual	-	-	-
(7) Fixed assets	156,349	120,336	36,013
(8) Compensation and benefits accrual	283,662	174,902	108,760
(9) Pension accrual	-	-	-
(10) Salvage and subrogation	139,626	155,129	(15,503)
(11) Net operating loss carry-forward	23,324	27,871	(4,547)
(12) Tax credit carry-forward	-	-	-
(13) Other (including items <5% of total ordinary tax assets)	27,572	28,923	(1,351)
(99) Subtotal	2,606,400	2,429,575	176,825
(b) Statutory valuation allowance adjustment	-	-	-
(c) Nonadmitted	-	-	-
(d) Admitted ordinary deferred tax assets (2a99-2b-2c)	2,606,400	2,429,575	176,825
(e) Capital			
(1) Investments	6,590	8,226	(1,636)
(2) Net capital loss carry-forward	-	-	-
(3) Real estate	-	-	-
(4) Other (including items <5% of total capital tax assets)	-	-	-
(99) Subtotal	6,590	8,226	(1,636)
(f) Statutory valuation allowance adjustment	-	-	-
(g) Nonadmitted	-	-	-
(h) Admitted capital deferred tax assets (2e99-2f-2g)	6,590	8,226	(1,636)
(i) Admitted deferred tax assets (2d+2h)	2,612,990	2,437,801	175,189
3. Deferred Tax Liabilities			
(a) Ordinary			
(1) Investments	10,839	8,921	1,918
(2) Fixed assets	-	-	-
(3) Deferred and uncollected premium	-	-	-
(4) Policyholder reserves	-	-	-
(5) Other (including items <5% of total ordinary tax liabilities)	-	-	-
(99) Subtotal	10,839	8,921	1,918
(b) Capital			
(1) Investments	879,107	554,534	324,573
(2) Real estate	-	-	-
(3) Other (including items <5% of total capital tax liabilities)	-	-	-
(99) Subtotal	879,107	554,534	324,573
(c) Deferred tax liabilities (3a99+3b99)	889,946	563,455	326,491
4. Net deferred tax assets/liabilities (2i - 3c)	1,723,044	1,874,346	(151,302)

## NOTES TO FINANCIAL STATEMENTS

The change in net deferred income taxes is comprised of the following (this analysis is exclusive of nonadmitted assets as the Change in Nonadmitted Assets is reported separately from the Change in Net Deferred Income Taxes in the surplus section of the Annual Statement):

	12/31/2014	12/31/2013	Change
Total deferred tax assets	2,612,990	2,437,801	175,189
Total deferred tax liabilities	889,946	563,455	326,491
Net deferred tax asset	1,723,044	1,874,346	(151,302)
Tax effect of unrealized gains (losses)			328,608
Change in net deferred income tax			<u>177,306</u>

**D. Among the more significant book to tax adjustments were the following:**

The provision for federal income taxes incurred is different from that which would be obtained by applying the statutory Federal income tax rate to income before income taxes. The significant items causing this difference are as follows:

Description	Amount	Tax Effect at 34%	Effective Tax Rate
Income before Federal income tax	3,681,117	1,251,580	34.00%
Tax exempt investment income	(774,816)	(263,437)	-7.16%
Dividends received deduction	(191,341)	(65,056)	-1.77%
Proration of tax exempt investment income	144,924	49,274	1.34%
Goodwill amortization	104,176	35,420	0.96%
Lobbying	8,927	3,035	0.08%
Disallowable meals and entertainment	46,736	15,890	0.43%
Country club dues	3,081	1,048	0.03%
Change in non admitted assets	109,893	37,364	1.02%
Other	2,039	693	0.02%
<b>Total</b>	<b>3,134,736</b>	<b>1,065,811</b>	<b>28.95%</b>
 Federal and foreign ordinary income taxes incurred		1,178,264	32.01%
Capital gains tax incurred		64,853	1.76%
Change in net deferred income tax		<u>(177,306)</u>	-4.82%
<b>Total statutory income taxes</b>		<b>1,065,811</b>	<b>28.95%</b>

**E. Operating Loss and Tax Credit Carryforwards**

1. Carryforwards, recoverable taxes, and IRC 6603 deposits

	12/31/2014	12/31/2013
The Company had net operating losses of:	68,600	81,975
The Company had capital loss carryforwards of:	-	-
The Company had AMT credit carryforwards of:	-	-
<b>Total</b>	<b>68,600</b>	<b>81,975</b>

The AMT credit carryforwards do not expire.

2. The following is income tax expense for 2013, 2012, and 2011 that is available for recoupment in the event of future net losses:

Year	Ordinary	Capital	Total
2012	122,094	98,872	220,966
2013	763,831	105,276	869,107
2014	1,177,057	64,853	1,241,910
	<b>2,062,982</b>	<b>269,001</b>	<b>2,331,983</b>

3. Deposits admitted under IRC § 6603

None

**F. Consolidated Federal Income Tax Return**

A. The Company's federal income tax return is consolidated with the following entities:

United Ohio Insurance Company  
Casco Indemnity Company  
Ohio United Agency, Inc.  
United Premium Budget Services, Inc.  
Centurion Financial, Inc.

## NOTES TO FINANCIAL STATEMENTS

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B. The method of allocation between the companies is subject to written agreement, approved by the Board of Directors. Allocation is based upon separate return calculations with current credit for net losses. Intercompany balances are settled annually in the final quarter.

### 10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. The Company is the parent company within the Ohio Mutual Insurance Group. The Company is the sole shareholder and owner of United Ohio Insurance Company (United Ohio), Casco Indemnity Company (Casco), United Premium Budget Service Inc., Centurion Financial Inc., and Ohio United Agency Inc.

B. The Company, United Ohio and Casco have entered into a reinsurance pooling agreement through which underwriting activities and operating expenses are proportionately allocated. See footnote #26 for additional information on the pooling agreement.

C. In 2014 the Company reimbursed its subsidiaries, United Ohio and Casco, \$5,560,668 and \$1,071,436, respectively, under the terms of the Reinsurance Pooling Agreement between the entities.

D. As of December 31, 2014, the Company owes its subsidiaries, United Ohio and Casco, \$816,220 and \$20,539, respectively, under the terms of the Reinsurance Pooling Agreement. As of December 31, 2014 the Company's subsidiary, United Ohio, owes the Company \$611 under the terms of the Cost Sharing Agreement.

E. The Company has no guarantees or undertakings at December 31, 2014.

F. The Company and its subsidiaries, United Ohio and Casco, entered into a Cost Sharing Agreement effective, January 1, 2011, through which certain common costs are shared proportionally between the entities.

G. All outstanding shares of its subsidiaries, United Ohio, Casco, United Premium Budget Services Inc., Ohio United Agency Inc. and Centurion Financial Inc. are owned by the Parent Company, Ohio Mutual Insurance Company, an insurance company domiciled in the State of Ohio.

H. None of the Company's capital stock is owned by downstream subsidiaries.

I. The Company owns a 100% interest in United Ohio whose carrying value is equal to or exceeds 10% of the admitted assets of the Company. The Company carries United Ohio at its statutory statement value of \$137,876,295.

Based on the Company's ownership percentage of United Ohio, the statutory statement value of United Ohio assets and liabilities as of December 31, 2014 were \$284,293,104 and \$146,416,809, respectively.

J. The Company did not recognize any impairment write down for its investments in Subsidiary, Controlled or Affiliated Companies during the statement period.

K. Not Applicable

L. Not Applicable

### 11. Debt

The Company had no outstanding debt obligations at December 31, 2014.

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

The Company has no retirement plans, deferred compensation, postemployment benefits or compensated absences or other postretirement benefit plans. All such plans are included in the Company's wholly owned subsidiary, United Ohio.

### 13. Capital and Surplus, Dividend Restrictions and Quasi-reorganizations.

- (1) The Company has no shares of capital stock outstanding.
- (2) The Company has no shares of preferred stock outstanding.
- (3) Unless prior approval is received by the ODI, Ohio law limits the amount of dividends that can be paid by an insurance company to the greater of: (a) 10 percent of statutory surplus as of December 31 of the year preceding the dividend payment or (b) 100 percent of statutory net income for the year ended December 31 preceding the dividend payment.
- (4) There were no ordinary or extraordinary dividends paid in either 2014 or 2013.
- (5) The portion of the Company's 2014 and 2013 surplus that may be paid as ordinary dividends in the subsequent year are \$18,750,452 and \$17,777,224 respectively.
- (6) There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.
- (7) The total amount of advances to surplus not repaid is \$0.
- (8) There is no stock held by the Company, including stock of affiliated companies, for special purposes.
- (9) The Company has not experienced any changes in balances of special surplus funds.
- (10) The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is \$121,023,446
- (11) The Company has no surplus debentures or similar obligations.
- (12) The Company has no restatement due to quasi-reorganizations.
- (13) There are no quasi-reorganizations to report.

## NOTES TO FINANCIAL STATEMENTS

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### 14. Liabilities, Contingencies and Assessments

- A. The Company has no commitment or contingent commitment to any other entity, Joint Venture, Partnership, or Limited Liability Company.
- B. The Company has received notification of the insolvency of several companies. It is expected that the insolvency will result in a guaranty fund assessment against the Company at some future date. At this time the Company is unable to estimate the possible amounts, if any, of such assessments. Accordingly, the Company is unable to determine the impact, if any, such assessments may have on the Company's financial position or results of operations.
- C. The Company has no commitment or gain contingencies to any other entity, joint venture, partnership, or limited liability company.
- D. The Company paid the following amounts in the reporting period to settle claims related extra contractual obligations or bad faith claims stemming from lawsuits.

Claims related ECO and bad faith losses paid during the reporting period	<u>Direct</u> \$0
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.	

<u>(a)</u> <u>0-25 Claims</u>	<u>(b)</u> <u>26-50 Claims</u>	<u>(c)</u> <u>51-100 Claims</u>	<u>(d)</u> <u>101-500 Claims</u>	<u>(e)</u> <u>More than 500 Claims</u>
X				

Indicate whether claim count information is disclosed per claim or per claimant.

(f) Per Claim [  ]      (g) Per Claimant [  ]

- E. The Company has no liability for product warranties.
- F. The Company has no joint or several liabilities.
- G. The Company has no other contingencies not already stated above.

### 15. Leases

#### A. Leasing Arrangements

- (1) The Company leases computer related equipment under various operating lease arrangements that expire through December 2019. Additionally, the Company leases automobiles under various operating leases with no commitments exceeding December 31, 2014. The rental expenses for these leases for 2014 and 2013 were approximately \$212,932 and \$193,741, respectively.
- (2) At December 31, 2014, the minimum aggregate rental commitments are as follows:

	<u>Year Ending December 31</u>	<u>Operating Leases</u>
1.	2015	\$993,337
2.	2016	667,737
3.	2017	377,813
4.	2018	251,289
5.	2019	0
6.	Total	<hr/> \$2,290,176

- (3) The Company is not involved in sales - leaseback transactions.

- B. Leasing is not a significant part of the company's business activities.

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

The Company has no Financial Instruments with off-balance sheet risks.

### 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

The Company has no sale, transfer and servicing of financial assets or extinguishments of liabilities.

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

The Company has no gain or loss to report from Uninsured Plans or the Uninsured Portion of Partially Insured Plans.

## NOTES TO FINANCIAL STATEMENTS

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

The Company has no direct written premium produced by managing general agents or third party administrators.

### 20. Fair Value Measurements

A. Fixed maturity securities that are carried at amortized cost are not included in the table below:

(1) Fair Value Measurements at Reporting Date

Description	(Level 1)	(Level 2)	(Level 3)	Total
a. Assets at fair value				
Common Stock				
Industrial and Misc	\$ 6,782,609	\$ -	\$ 326,098	\$ 7,108,707
Mutual Funds	1,441,140	-	-	1,441,140
Total Common Stocks	<u>\$ 8,223,749</u>	<u>\$ -</u>	<u>\$ 326,098</u>	<u>\$ 8,549,847</u>
Derivative assets	-	-	-	-
Total assets at fair value	<u>\$ 8,223,749</u>	<u>\$ -</u>	<u>\$ 326,098</u>	<u>\$ 8,549,847</u>

(2) Fair Value Measurement in (Level 3) of the Fair Value Hierarchy

Description	Beginning Balance at 01/01/2014	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 at 12/31/2014
a. Assets: Common Stock - Industrial & Misc.	\$ 285,218			\$ 40,880						\$ 326,098

(3) Transfers between levels are recognized on the actual date of the event or change in circumstances that caused the transfer.

(4) As of December 31, 2014, the reporting entity's investments in Level 3, NAIC rated A, represents one security that is not traded in a public market and was valued based on a valuation provided by the NAIC Securities Valuation Office.

(5) The Company has no Derivative Assets or Liabilities

B. Fair Value Measurements are used for financial instruments unless specifically required by another method.

C. The Aggregate Fair Value for all Financial Instruments and the Level within the Fair Value Hierarchy are illustrated as follows:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
Common Stocks	\$ 8,549,847	\$ 8,549,847	\$ 8,223,749	\$ -	\$ 326,098	\$ -

D. Not Practicable to Estimate Fair Value

The Company's Financial Instruments are valued at Fair Value unless otherwise specified.

### 21. Other Items

- A. The Company has no Extraordinary Items.
- B. The Company has no Troubled Debt Restructuring Debtors.
- C. Assets in the amount of \$2,260,165 and \$1,989,566 at December 31, 2014 and 2013, respectively, were on deposit with government authorities or trustees as required by law.
- D. The Company has no Business Interruption Insurance Recoveries.
- E. The Company has no State Transferrable Tax Credits
- F. Subprime Mortgage Related Risk Exposure

(1) The Company does not engage in direct subprime residential lending. The Company's exposure to subprime is limited to investments within the fixed income investment portfolio which contains securities collateralized by mortgages that have characteristics of subprime lending. Such characteristics include an interest rate above prime to borrowers who do not qualify for prime rate loans, borrowers with low credit ratings (FICO scores), unconventionally high initial loan-to-value ratios and borrowers with less than conventional documentation of their income and/or net assets.

The Company minimizes risk exposure by holding securities that carry higher credit ratings and by monitoring the underlying collateral performance on an ongoing basis.

(2) The Company does not engage in direct subprime residential lending.

(3) Direct exposure through other investments

## NOTES TO FINANCIAL STATEMENTS

The chart below summarizes the Actual Cost, Book Adjusted Carrying Value, Fair Value, and the Other than Temporary Impairment Losses Recognized of subprime mortgage related risk exposure by investment category:

	Actual Cost	Book/Adjusted Carrying Value (excluding interest)	Fair Value	Other than Temporary Impairment Losses Recognized
a. Residential mortgage-backed securities	\$ 15,484	\$ -	\$ 1,944	\$ -
b. Commercial mortgage-backed securities	-	-	-	-
c. Collateralized debt obligations	-	-	-	-
d. Structured securities	-	-	-	-
e. Equity investment in SCAs	-	-	-	-
f. Other assets	-	-	-	-
g. Total	<u>\$ 15,484</u>	<u>\$ -</u>	<u>\$ 1,944</u>	<u>\$ -</u>

The Company recorded no impairments in 2014 or 2013 and no realized gains on sales and pay downs of investments with subprime exposure for either year.

(4) The Company has no subprime mortgage risk exposure through Mortgage Guaranty or Financial Guaranty Insurance coverage.

### 22. Events Subsequent

Type II – Nonrecognized Subsequent Events:

	Current Year	Prior Year
A. ACA fee assessment payable	-	-
B. ACA fee assessment paid	-	-
C. Premium written subject to ACA 9010 assessment	-	-
D. Total Adjusted Capital before surplus adjustment	187,504,522	
E. Authorized Control Level before surplus adjustment	14,221,011	
F. Total Adjusted Capital after surplus adjustment	187,504,522	
G. Authorized Control Level before surplus adjustment	14,221,011	
H. Would reporting the ACA assessment as of Dec. 31, 2014 have triggered an RBC action level (YES/NO)?		NO

### 23. Reinsurance

#### A. Unsecured Reinsurance Recoverables

The Company does not have any unsecured aggregate recoverable for losses, paid and unpaid including IBNR, loss adjustment expenses and unearned premium with any individual reinsurers, authorized or unauthorized, that exceeds 3% of the Company's policyholder surplus.

#### B. Reinsurance Recoverable in Dispute

The Company has no reinsurance recoverable in dispute.

#### C. Reinsurance Assumed and Ceded

(1) The following table summarizes assumed and ceded unearned premiums and the related commission equity at December 31, 2014:

	Assumed Reinsurance		Ceded Reinsurance		Net	
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a. Affiliates	\$ 67,043,508	\$ 11,748,539	\$ 64,304,218	\$ 11,268,513	\$ 2,739,290	\$ 480,026
b. All Other	-	143,561	206,485	(143,561)	(206,485)	-
c. TOTAL	<u>\$ 67,043,508</u>	<u>\$ 11,748,539</u>	<u>\$ 64,447,779</u>	<u>\$ 11,474,998</u>	<u>\$ 2,595,729</u>	<u>\$ 273,541</u>
d. Direct Unearned Premium Reserve:					<u>\$ 21,188,023</u>	

(2) The additional or return commission, predicated on loss experience or on any other form of profit sharing arrangements in this annual statement as a result of existing contractual arrangements is accrued as follows:

	Direct	Assumed	Ceded	Net
a. Contingent Commission	\$ -	\$ -	\$ -	\$ -
b. Sliding Scale Adjustments	-	-	-	-
c. Other Profit Commission Arrangements	23,714	-	-	23,714
d. TOTAL	<u>\$ 23,714</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 23,714</u>

(3) Not Applicable

#### D. Uncollectible Reinsurance

The Company has no uncollectible reinsurance.

## NOTES TO FINANCIAL STATEMENTS

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### E. Commutation of Ceded Reinsurance

The Company has not entered into an agreement to commute any reinsurance treaties.

### F. Retroactive Reinsurance

The Company has no retroactive reinsurance.

### G. Reinsurance Accounted for as a Deposit

The Company has no reinsurance that should be accounted for as a deposit.

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

The Company has no disclosures for the Transfers of Property and Casualty Run-off Agreements.

### I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation

The Company had no certified reinsurer's rating downgraded or status subject to revocation.

## **24. Retrospectively Rated Contracts and Contracts Subject to Redetermination**

The Company has no retrospectively rated contracts.

## **25. Change in Incurred Losses and Loss Adjustment Expenses**

The following table provides a reconciliation of the beginning and ending reserve balances for losses and loss adjustment expenses, net of reinsurance recoverables, for 2014 and 2013:

	<u>2014</u>	<u>2013</u>
	<i>(In Thousands)</i>	
Balance at January 1, net of reinsurance	\$ 23,823	\$ 22,534
<b>Incurred related to:</b>		
Current year	35,151	34,521
Prior years	<u>(2,877)</u>	<u>(3,373)</u>
Total incurred	<u>\$ 32,274</u>	<u>\$ 31,148</u>
<b>Paid related to:</b>		
Current year	\$ 21,908	\$ 21,199
Prior years	<u>10,398</u>	<u>8,660</u>
Total paid	<u>\$ 32,306</u>	<u>\$ 29,859</u>
Balance as of December 31, net of reinsurance	<u><u>\$ 23,791</u></u>	<u><u>\$ 23,823</u></u>

The Company's liabilities for unpaid losses and loss adjustment expenses, net of related reinsurance recoverables, at December 31, 2013 and 2012, were decreased in the subsequent year by \$2,877,000 and \$3,373,000, respectively. The favorable development experienced in 2014 for years 2013 and prior is due to favorable development within the Company's auto liability and homeowners lines of business and was primarily within the accident years of 2010 to 2013. The favorable development experienced in 2013 for years 2012 and prior is due to favorable development within the Company's auto liability and commercial multi-peril lines of business and was primarily within the accident years of 2011 and 2012. Initial loss estimates for these years developed better than expected for these lines of business. Reserves previously established for these lines and years were reduced in the current year.

Because of the nature of the business written over the years, management believes that the Company has limited exposure to environmental claim liabilities.

## **26. Intercompany Pooling Arrangements**

Effective January 1, 2011, the Company requested and received permission from the ODI to pool the underwriting results of the Company with those of its wholly owned subsidiaries, United Ohio and Casco. Through the Pooling Agreement, the Company, NAIC #10202, retains 27% of the group's pooled underwriting results and cedes 65% to United Ohio, NAIC #13072 and 8% to Casco, NAIC #25950. The following underwriting results were assumed/ceded between the Companies in 2014 and 2013:

	<u>2014</u>	<u>2013</u>
Premium earned assumed by Ohio Mutual from United Ohio and Casco Indemnity	\$ 137,968,170	\$ 127,200,248
Premium earned ceded back to United Ohio and Casco Indemnity	<u>(136,416,091)</u>	<u>(128,037,821)</u>
Change in premium earned due to pooling	<u>\$ 1,552,079</u>	<u>\$ (837,573)</u>
Losses incurred assumed by Ohio Mutual from United Ohio and Casco Indemnity	\$ 74,138,347	\$ 72,000,171
Losses incurred ceded back to United Ohio and Casco Indemnity	<u>(75,586,081)</u>	<u>(73,116,973)</u>
Change in losses incurred due to pooling	<u>\$ (1,447,734)</u>	<u>\$ (1,116,802)</u>
Net loss adjustment expenses assumed by Ohio Mutual	\$ 3,428,570	\$ 3,519,616
Net other underwriting expenses assumed by Ohio Mutual	<u>8,155,440</u>	<u>7,840,153</u>
Change in expenses incurred due to pooling	<u>\$ 11,584,010</u>	<u>\$ 11,359,769</u>
Change in income before taxes due to pooling	<u><u>\$ (8,584,197)</u></u>	<u><u>\$ (11,080,540)</u></u>

## NOTES TO FINANCIAL STATEMENTS

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**27. Structured Settlements**

The Company has some structured settlements and they are assigned.

**28. Health Care Receivables**

The Company has no health care receivables.

**29. Participating Policies**

The Company does not issue participating policies.

**30. Premium Deficiency Reserves**

1. Liability carried for premium deficiency reserves	\$ <u>0</u>
2. Date of most recent evaluation of this liability	<u>1/20/2015</u>
3. Was anticipated investment income utilized in the calculations?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

**31. High Deductibles**

The Company has not recorded any high deductibles.

**32. Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses**

The Company does not discount loss or loss adjustment expense reserves.

**33. Asbestos/Environmental Reserves**

A. Does the Company have on the books, or has it ever written an insured for which you have identified a potential for the existence of, a liability due to asbestos losses?

Yes ( ) No (X)

The Company estimates the full impact of asbestos exposures by establishing full case bases reserves on all known losses.

The Company held no asbestos related reserves for each of the last five most recent year ends. There have been no losses or LAE paid related to asbestos risks during the last five years.

B. There are no ending reserves for Bulk + IBNR included in A (Loss and LAE)

C. There are no ending reserves for loss adjustment expenses included in A (Case, Bulk + IBNR)

D. Does the Company have on the books, or has it ever written an insured for which you have identified a potential for the existence of, a liability due to environmental losses?

Yes ( ) No (X)

The Company held no environmental related reserves for each of the last five most recent year ends. There have been no losses or LAE paid related to environmental risks during the last five years.

E. There are no ending reserves for Bulk + IBNR included in D (Loss & LAE)

F. There are no ending reserves for loss adjustment expenses included in D (Case, Bulk + IBNR)

**34. Subscriber Savings Accounts**

The Company is not a reciprocal insurer.

**35. Multiple Peril Crop Insurance**

The Company does not offer multiple peril crop insurance.

**36. Financial Guaranty Insurance**

The Company does not offer Financial Guaranty Insurance.

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company  
**GENERAL INTERROGATORIES**

**PART 1 - COMMON INTERROGATORIES  
 GENERAL**

1.1 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? ..... Yes [  ] No [  ]  
 If yes, complete Schedule Y, Parts 1, 1A and 2

1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? ..... Yes [  ] No [  ] N/A [  ]

1.3 State Regulating? ..... Ohio

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 [  ]

2.2 If yes, date of change: \_\_\_\_\_

3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. ..... 12/31/2010

3.2 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. ..... 12/31/2010

3.3 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). ..... 07/26/2011

3.4 By what department or departments?  
 Ohio Department of Insurance .....

3.5 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 [  ]

3.6 Have all of the recommendations within the latest financial examination report been complied with? ..... Yes [  ] No [  ] N/A [  ]

4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  
 4.11 sales of new business? ..... Yes [  ] No [  ]  
 4.12 renewals? ..... Yes [  ] No [  ]

4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:  
 4.21 sales of new business? ..... Yes [  ] No [  ]  
 4.22 renewals? ..... Yes [  ] No [  ]

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? ..... Yes [  ] No [  ]

5.2 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
---------------------	------------------------	------------------------

6.1 Has the 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 [  ]

6.2 If yes, give full information:  
 \_\_\_\_\_

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? ..... Yes [  ] No [  ]

7.2 If yes,  
 7.21 State the percentage of foreign control; ..... %  
 7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact; and identify the type of entity(s) (e.g., individual, corporation or government, manager or attorney in fact).

1 Nationality	2 Type of Entity
------------------	---------------------

**ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company**  
**GENERAL INTERROGATORIES**

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

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
 Ernst & Young, LLP  
 1100 Huntington Center  
 41 South High Street  
 Columbus, OH 43215

10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? ..... Yes [ ] No [ X ]  
 10.2 If the response to 10.1 is yes, provide information related to this exemption: ....

10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 17A of the Model Regulation, or substantially similar state law or regulation? ..... Yes [ ] No [ X ]  
 10.4 If the response to 10.3 is yes, provide information related to this exemption: ....

10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? ..... Yes [ X ] No [ ] N/A [ ]  
 10.6 If the response to 10.5 is no or n/a, please explain: ....

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?  
 Thomas P. Conway  
 Ernst & Young, LLP  
 Willis Tower  
 233 South Wacker Drive  
 Chicago, IL 60606-6301 .....

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? ..... Yes [ ] No [ X ]  
 12.11 Name of real estate holding company .....  
 12.12 Number of parcels involved .....  
 12.13 Total book/adjusted carrying value ..... \$ .....

12.2 If, yes provide explanation: ....

13. **FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:**

13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity? ....

13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? ..... Yes [ ] No [ ]  
 13.3 Have there been any changes made to any of the trust indentures during the year? ..... Yes [ ] No [ ]  
 13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? ..... Yes [ ] No [ ] N/A [ ]  
 14.1 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? ..... Yes [ X ] No [ ]  
 (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.  
 14.11 If the response to 14.1 is No, please explain: ....

14.2 Has the code of ethics for senior managers been amended? ..... Yes [ ] No [ X ]  
 14.21 If the response to 14.2 is yes, provide information related to amendment(s). ....

14.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes [ ] No [ X ]  
 14.31 If the response to 14.3 is yes, provide the nature of any waiver(s). ....

**ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company**  
**GENERAL INTERROGATORIES**

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? ..... Yes [ ] No [ X ]

15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount

**BOARD OF DIRECTORS**

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? ..... Yes [ X ] No [ ]

17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? ..... Yes [ X ] No [ ]

18. Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict with the official duties of such person? ..... Yes [ X ] No [ ]

**FINANCIAL**

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? ..... Yes [ ] No [ X ]

20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11	To directors or other officers.....	\$ .....
20.12	To stockholders not officers.....	\$ .....
20.13	Trustees, supreme or grand (Fraternal Only) .....	\$ .....

20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21	To directors or other officers.....	\$ .....
20.22	To stockholders not officers.....	\$ .....
20.23	Trustees, supreme or grand (Fraternal Only) .....	\$ .....

21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? ..... Yes [ ] No [ X ]

21.2 If yes, state the amount thereof at December 31 of the current year:

21.21	Rented from others.....	\$ .....
21.22	Borrowed from others.....	\$ .....
21.23	Leased from others .....	\$ .....
21.24	Other .....	\$ .....

22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? ..... Yes [ ] No [ X ]

22.2 If answer is yes:

22.21	Amount paid as losses or risk adjustment \$ .....	
22.22	Amount paid as expenses .....	\$ .....
22.23	Other amounts paid .....	\$ .....

23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... Yes [ ] No [ X ]

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

**INVESTMENT**

24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 24.03)..... Yes [ X ] No [ ]

24.02 If no, give full and complete information relating thereto

24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)

24.04 Does the Company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? ..... Yes [ ] No [ ] N/A [ X ]

24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs. .... \$ .....

24.06 If answer to 24.04 is no, report amount of collateral for other programs. .... \$ .....

24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? ..... Yes [ ] No [ ] N/A [ X ]

24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? ..... Yes [ ] No [ ] N/A [ X ]

24.09 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? ..... Yes [ ] No [ ] N/A [ X ]

**ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company**  
**GENERAL INTERROGATORIES**

24.10 For the reporting entity's security lending program state the amount of the following as December 31 of the current year:

24.101 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 .....	\$ .....
24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 .....	\$ .....
24.103 Total payable for securities lending reported on the liability page. ....	\$ .....

25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03). ....  Yes [ X ]  No [ ]

25.2 If yes, state the amount thereof at December 31 of the current year:

25.21 Subject to repurchase agreements .....	\$ .....
25.22 Subject to reverse repurchase agreements .....	\$ .....
25.23 Subject to dollar repurchase agreements .....	\$ .....
25.24 Subject to reverse dollar repurchase agreements .....	\$ .....
25.25 Placed under option agreements .....	\$ .....
25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock .....	\$ .....
25.27 FHLB Capital Stock .....	\$ .....
25.28 On deposit with states .....	\$ .....
25.29 On deposit with other regulatory bodies .....	\$ .....
25.30 Pledged as collateral - excluding collateral pledged to an FHLB .....	\$ .....
25.31 Pledged as collateral to FHLB - including assets backing funding agreements .....	\$ .....
25.32 Other .....	\$ .....

25.3 For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
.....	.....	.....

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB? .....  Yes [ ]  No [ X ]

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

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? .....  Yes [ ]  No [ X ]

27.2 If yes, state the amount thereof at December 31 of the current year. .... \$ .....

28. 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 [ ]

28.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
.....	.....

28.02 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)
.....	.....	.....

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year? .....  Yes [ ]  No [ X ]

28.04 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
.....	.....	.....	.....

28.05 Identify all investment advisors, brokers/dealers or individuals acting on behalf of brokers/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository Number(s)	2 Name	3 Address
.....	.....	.....

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company  
**GENERAL INTERROGATORIES**

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])? Yes [  ] No [  ]  
 29.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
922908-76-9	Vanguard US Total Stock Market ETF	1,303,800
464286-67-3	IShares MSCI Singapore	137,340
29.2999 - Total		1,441,140

29.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
Vanguard US Total Stock Market ETF	Apple Inc.	37,158	12/31/2014
Vanguard US Total Stock Market ETF	Exxon Mobil Corp.	22,425	12/31/2014
Vanguard US Total Stock Market ETF	Microsoft Corp.	19,818	12/31/2014
Vanguard US Total Stock Market ETF	Johnson & Johnson	16,819	12/31/2014
Vanguard US Total Stock Market ETF	Wells Fargo & Co.	16,298	12/31/2014
IShares MSCI Singapore	DBS Group Holdings LTD	17,950	12/31/2014
IShares MSCI Singapore	United Overseas Bank LTD	16,659	12/31/2014
IShares MSCI Singapore	Singapore Telecommunications LTD	16,371	12/31/2014
IShares MSCI Singapore	Oversea-Chinese Banking Corp	16,316	12/31/2014
IShares MSCI Singapore	Keppel Corp Ltd	6,304	12/31/2014

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds	57,069,610	58,444,484	1,374,874
30.2 Preferred stocks			
30.3 Totals	57,069,610	58,444,484	1,374,874

30.4 Describe the sources or methods utilized in determining the fair values:

Fair values are based on values either published by the NAIC's Security Valuation Office (SVO) or from an independent pricing service vendor such as BofA Merrill Lynch indices, Interactive Data Corp, Reuters, S&P, Bloomberg or Markit iBoxx. Under certain circumstances, if neither an SVO price or vendor price is available, a price may be obtained from a broker. Short term securities and cash equivalents are valued at amortized cost.

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [  ] No [  ]  
 31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [  ] No [  ]  
 31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:  
 NOT APPLICABLE

32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed? Yes [  ] No [  ]  
 32.2 If no, list exceptions:

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company  
**GENERAL INTERROGATORIES**

**OTHER**

33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? .....\$ .....112,638

33.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
American Association of Insurance Services .....	28,305
AIPSO/AIP .....	33,041

34.1 Amount of payments for legal expenses, if any? .....\$ .....18,539

34.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
Brickler & Eckler LLP .....	15,974

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? .....\$ .....

35.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid
.....	.....

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company  
**GENERAL INTERROGATORIES**

**PART 2 - PROPERTY AND CASUALTY INTERROGATORIES**

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force? .....	Yes [ ] No [ X ]
1.2	If yes, indicate premium earned on U. S. business only. ....	\$ .....
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? .....	\$ .....
1.31	Reason for excluding .....	
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. ....	\$ .....
1.5	Indicate total incurred claims on all Medicare Supplement Insurance. ....	\$ .....
1.6	Individual policies:	Most current three years: 1.61 Total premium earned ..... \$ ..... 1.62 Total incurred claims ..... \$ ..... 1.63 Number of covered lives .....
		All years prior to most current three years 1.64 Total premium earned ..... \$ ..... 1.65 Total incurred claims ..... \$ ..... 1.66 Number of covered lives .....
1.7	Group policies:	Most current three years: 1.71 Total premium earned ..... \$ ..... 1.72 Total incurred claims ..... \$ ..... 1.73 Number of covered lives .....
		All years prior to most current three years 1.74 Total premium earned ..... \$ ..... 1.75 Total incurred claims ..... \$ ..... 1.76 Number of covered lives .....
2.	Health Test:	1 Current Year 2 Prior Year
2.1	Premium Numerator .....	
2.2	Premium Denominator ..... 50,455,266	..... 47,356,454
2.3	Premium Ratio (2.1/2.2) ..... 0.000	..... 0.000
2.4	Reserve Numerator ..... 2,011	..... 1,154
2.5	Reserve Denominator ..... 47,574,903	..... 46,122,390
2.6	Reserve Ratio (2.4/2.5) ..... 0.000	..... 0.000
3.1	Does the reporting entity issue both participating and non-participating policies? .....	Yes [ ] No [ X ]
3.2	If yes, state the amount of calendar year premiums written on: 3.21 Participating policies ..... \$ .....	
	3.22 Non-participating policies ..... \$ .....	
4.	For mutual reporting Entities and Reciprocal Exchanges Only:	
4.1	Does the reporting entity issue assessable policies? .....	Yes [ ] No [ X ]
4.2	Does the reporting entity issue non-assessable policies? .....	Yes [ X ] No [ ]
4.3	If assessable policies are issued, what is the extent of the contingent liability of the policyholders? .....	% .....
4.4	Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums. ....	\$ .....
5.	For Reciprocal Exchanges Only:	
5.1	Does the Exchange appoint local agents? .....	Yes [ ] No [ ]
5.2	If yes, is the commission paid: 5.21 Out of Attorney's-in-fact compensation..... Yes [ ] No [ ] N/A [ ] 5.22 As a direct expense of the exchange..... Yes [ ] No [ ] N/A [ ]	
5.3	What expenses of the Exchange are not paid out of the compensation of the Attorney-in-fact? ....	
5.4	Has any Attorney-in-fact compensation, contingent on fulfillment of certain conditions, been deferred? .....	Yes [ ] No [ ]
5.5	If yes, give full information ....	

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company  
**GENERAL INTERROGATORIES**

**PART 2 - PROPERTY AND CASUALTY INTERROGATORIES**

6.1 What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?  
 The Company does not write workers' compensation insurance. ....

6.2 Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process.  
 The Company's probable maximum loss is determined by JLT Re using both the AIR model and RMS model .....

6.3 What provision has this reporting entity made (such as a catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?  
 The Company's primary protection from an excessive loss arising from a concentration of risk is a comprehensive catastrophe reinsurance program with top quality reinsurers. In addition, the Company has an internal concentration of risk metrics that it should not exceed in a given area. The Company has also implemented predictive software to better access the potential risk before and after an event. ....

6.4 Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence? ....

6.5 If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss.  
 ....

7.1 Has this reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss ratio cap, an aggregate limit or any similar provisions)?.....

7.2 If yes, indicate the number of reinsurance contracts containing such provisions: .....

7.3 If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?.....

7.4 If yes, indicate the number of reinsurance contracts containing such provisions: .....

8.1 Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured? .....

8.2 If yes, give full information  
 ....

9.1 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:  
 (a) A contract term longer than two years and the contract is noncancelable by the reporting entity during the contract term;  
 (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;  
 (c) Aggregate stop loss reinsurance coverage;  
 (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;  
 (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or  
 (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity. ....

9.2 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where:  
 (a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or  
 (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract. ....

9.3 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:  
 (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;  
 (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and  
 (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.

9.4 Except for transactions meeting the requirements of paragraph 32 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:  
 (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or  
 (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP? ....

9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.

9.6 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:  
 (a) The entity does not utilize reinsurance; or, ....

9.7 The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or .....

9.8 The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement. ....

10. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurance a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done? .... Yes [ X ] No [ ] N/A [ ]

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company  
**GENERAL INTERROGATORIES**

**PART 2 - PROPERTY AND CASUALTY INTERROGATORIES**

11.1 Has the reporting entity guaranteed policies issued by any other entity and now in force? ..... Yes [ ] No [ X ]

11.2 If yes, give full information  
.....

12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:  
12.11 Unpaid losses ..... \$ .....  
12.12 Unpaid underwriting expenses (including loss adjustment expenses) ..... \$ .....

12.2 Of the amount on Line 15.3, Page 2, state the amount which is secured by letters of credit, collateral, and other funds ..... \$ .....

12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses? ..... Yes [ ] No [ ] N/A [ X ]

12.4 If yes, provide the range of interest rates charged under such notes during the period covered by this statement:  
12.41 From ..... % .....  
12.42 To ..... % .....

12.5 Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies? ..... Yes [ ] No [ X ]

12.6 If yes, state the amount thereof at December 31 of the current year:  
12.61 Letters of credit ..... \$ .....  
12.62 Collateral and other funds ..... \$ .....

13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation): ..... \$ 500,000

13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision? ..... Yes [ ] No [ X ]

13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount. ..... 1

14.1 Is the company a cedant in a multiple cedant reinsurance contract? ..... Yes [ X ] No [ ]

14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:  
The Company and its affiliates cede reinsurance independently under a group reinsurance agreement.

14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts? ..... Yes [ X ] No [ ]

14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements? ..... Yes [ ] No [ ]

14.5 If the answer to 14.4 is no, please explain:  
.....

15.1 Has the reporting entity guaranteed any financed premium accounts? ..... Yes [ ] No [ X ]

15.2 If yes, give full information  
.....

16.1 Does the reporting entity write any warranty business? ..... Yes [ ] No [ ]  
If yes, disclose the following information for each of the following types of warranty coverage:

	1 Direct Losses Incurred	2 Direct Losses Unpaid	3 Direct Written Premium	4 Direct Premium Unearned	5 Direct Premium Earned
16.11 Home .....					
16.12 Products .....					
16.13 Automobile .....					
16.14 Other*					

\* Disclose type of coverage:  
.....

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company  
**GENERAL INTERROGATORIES**

**PART 2 - PROPERTY AND CASUALTY INTERROGATORIES**

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F - Part 3 that it excludes from Schedule F - Part 5? ..... Yes [ ] No [ X ]

Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from inclusion in Schedule F - Part 5. Provide the following information for this exemption:

17.11 Gross amount of unauthorized reinsurance in Schedule F - Part 3 excluded from Schedule F - Part 5 .....	\$ .....
17.12 Unfunded portion of Interrogatory 17.11 .....	\$ .....
17.13 Paid losses and loss adjustment expenses portion of Interrogatory 17.11 .....	\$ .....
17.14 Case reserves portion of Interrogatory 17.11 .....	\$ .....
17.15 Incurred but not reported portion of Interrogatory 17.11 .....	\$ .....
17.16 Unearned premium portion of Interrogatory 17.11 .....	\$ .....
17.17 Contingent commission portion of Interrogatory 17.11 .....	\$ .....

Provide the following information for all other amounts included in Schedule F - Part 3 and excluded from Schedule F - Part 5, not included above.

17.18 Gross amount of unauthorized reinsurance in Schedule F - Part 3 excluded from Schedule F - Part 5 .....	\$ .....
17.19 Unfunded portion of Interrogatory 17.18 .....	\$ .....
17.20 Paid losses and loss adjustment expenses portion of Interrogatory 17.18 .....	\$ .....
17.21 Case reserves portion of Interrogatory 17.18 .....	\$ .....
17.22 Incurred but not reported portion of Interrogatory 17.18 .....	\$ .....
17.23 Unearned premium portion of Interrogatory 17.18 .....	\$ .....
17.24 Contingent commission portion of Interrogatory 17.18 .....	\$ .....

18.1 Do you act as a custodian for health savings accounts? ..... Yes [ ] No [ X ]

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

18.3 Do you act as an administrator for health savings accounts? ..... Yes [ ] No [ X ]

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

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company

**FIVE-YEAR HISTORICAL DATA**

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

	1 2014	2 2013	3 2012	4 2011	5 2010
<b>Gross Premiums Written (Page 8, Part 1B Cols. 1, 2 &amp; 3)</b>					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	62,265,447	58,574,062	56,200,496	58,772,347	56,140,903
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	57,244,958	54,365,260	51,915,408	52,987,514	47,404,597
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	74,625,522	71,465,068	61,638,313	58,995,178	59,536,838
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	6,468	7,910	8,368	8,457	8,987
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
6. Total (Line 35)	194,142,394	184,412,300	169,762,584	170,763,496	163,091,324
<b>Net Premiums Written (Page 8, Part 1B, Col. 6)</b>					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	16,783,144	15,794,120	15,143,832	15,836,631	13,262,179
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)	15,238,107	14,499,390	13,787,516	14,165,442	11,496,236
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	19,915,761	19,111,725	16,368,754	15,729,059	13,840,622
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	1,746	2,136	2,259	2,283	2,247
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
12. Total (Line 35)	51,938,758	49,407,370	45,302,362	45,733,416	38,601,284
<b>Statement of Income (Page 4)</b>					
13. Net underwriting gain (loss) (Line 8)	1,233,149	66,309	(226,771)	(2,337,853)	350,338
14. Net investment gain or (loss) (Line 11)	1,367,187	1,571,313	1,542,366	1,579,325	8,690,031
15. Total other income (Line 15)	1,015,926	998,311	933,156	869,618	907,967
16. Dividends to policyholders (Line 17)					
17. Federal and foreign income taxes incurred (Line 19)	1,178,264	811,007	118,084	113,880	673,016
18. Net income (Line 20)	2,437,998	1,824,926	2,130,667	(2,790)	9,275,320
<b>Balance Sheet Lines (Pages 2 and 3)</b>					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	239,669,081	227,434,167	222,711,419	209,649,916	193,946,105
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)	739,567	752,492	494,688	585,248	378,486
20.2 Deferred and not yet due (Line 15.2)	11,441,483	10,693,858	9,798,811	9,634,281	7,858,794
20.3 Accrued retrospective premiums (Line 15.3)					
21. Total liabilities excluding protected cell business (Page 3, Line 26)	52,164,559	49,661,921	57,484,155	55,436,281	40,523,800
22. Losses (Page 3, Line 1)	19,103,261	19,335,122	18,181,288	17,526,020	14,657,146
23. Loss adjustment expenses (Page 3, Line 3)	4,687,890	4,487,007	4,352,880	3,955,725	3,118,933
24. Unearned premiums (Page 3, Line 9)	23,783,752	22,300,260	20,249,344	19,689,266	16,072,536
25. Capital paid up (Page 3, Lines 30 & 31)					
26. Surplus as regards policyholders (Page 3, Line 37)	187,504,522	177,772,246	165,227,264	154,213,635	153,422,305
<b>Cash Flow (Page 5)</b>					
27. Net cash from operations (Line 11)	4,111,278	5,447,655	5,579,766	3,636,016	11,984,891
<b>Risk-Based Capital Analysis</b>					
28. Total adjusted capital	187,504,522	177,772,246	165,227,264	154,213,635	153,422,305
29. Authorized control level risk-based capital	14,221,011	8,680,057	7,731,167	7,204,365	6,027,856
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Line divided by Page 2, Line 12, Col. 3) x100.0</b>					
30. Bonds (Line 1)	25.1	24.2	25.8	28.3	28.3
31. Stocks (Lines 2.1 & 2.2)	70.4	70.6	67.1	65.8	63.2
32. Mortgage loans on real estate (Lines 3.1 and 3.2)					
33. Real estate (Lines 4.1, 4.2 & 4.3)	2.0	2.2	2.3	2.5	1.9
34. Cash, cash equivalents and short-term investments (Line 5)	2.5	3.0	4.9	3.3	6.5
35. Contract loans (Line 6)					
36. Derivatives (Line 7)					
37. Other invested assets (Line 8)					
38. Receivables for securities (Line 9)					
39. Securities lending reinvested collateral assets (Line 10)					
40. Aggregate write-ins for invested assets (Line 11)					
41. Cash, cash equivalents and invested assets (Line 12)	100.0	100.0	100.0	100.0	100.0
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
42. Affiliated bonds (Schedule D, Summary, Line 12, Col. 1)					
43. Affiliated preferred stocks (Schedule D, Summary, Line 18, Col. 1)					
44. Affiliated common stocks (Schedule D, Summary, Line 24, Col. 1)	149,316,816	142,949,174	131,032,760	121,949,430	114,884,803
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10)					
46. Affiliated mortgage loans on real estate					
47. All other affiliated					
48. Total of above Lines 42 to 47	149,316,816	142,949,174	131,032,760	121,949,430	114,884,803
49. Total Investment in Parent included in Lines 42 to 47 above					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)	79.6	80.4	79.3	79.1	74.9

## ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company

**FIVE-YEAR HISTORICAL DATA**

(Continued)

	1 2014	2 2013	3 2012	4 2011	5 2010
<b>Capital and Surplus Accounts (Page 4)</b>					
51. Net unrealized capital gains (losses) (Line 24)	7,005,527	10,574,538	11,191,746	(2,126,420)	3,700,376
52. Dividends to stockholders (Line 35)					
53. Change in surplus as regards policyholders for the year (Line 38)	9,732,276	12,544,982	11,013,628	791,330	10,926,699
<b>Gross Losses Paid (Page 9, Part 2, Cols. 1 &amp; 2)</b>					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	36,098,571	28,759,057	28,963,790	33,579,867	28,855,086
55. Property lines (Lines 1, 2, 9, 12, 21 & 26)	32,927,241	31,211,028	32,684,056	37,138,136	28,758,801
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	35,909,134	36,172,555	37,747,703	41,476,779	27,562,925
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	10,900	4,696	14,453	16,632	15,477
58. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
59. Total (Line 35)	104,945,846	96,147,336	99,410,002	112,211,413	85,192,290
<b>Net Losses Paid (Page 9, Part 2, Col. 4)</b>					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	9,605,861	7,764,945	7,820,223	9,066,564	6,797,685
61. Property lines (Lines 1, 2, 9, 12, 21 & 26)	8,885,315	8,409,539	8,060,605	9,776,445	7,160,092
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	9,694,238	9,713,678	9,176,304	10,647,737	6,682,524
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	2,943	1,268	3,902	4,491	3,869
64. Nonproportional reinsurance lines (Lines 31, 32 & 33)					
65. Total (Line 35)	28,188,357	25,889,430	25,061,035	29,495,236	20,644,170
<b>Operating Percentages (Page 4) (Line divided by Page 4, Line 1) x 100.0</b>					
66. Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2)	55.4	57.1	57.5	64.5	59.5
68. Loss expenses incurred (Line 3)	8.6	8.7	10.2	9.1	7.2
69. Other underwriting expenses incurred (Line 4)	33.6	34.1	32.9	31.6	32.4
70. Net underwriting gain (loss) (Line 8)	2.4	0.1	(0.5)	(5.1)	0.9
<b>Other Percentages</b>					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	30.7	30.6	30.4	29.5	29.2
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	64.0	65.8	67.7	73.5	66.7
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)	27.7	27.8	27.4	29.7	25.2
<b>One Year Loss Development (000 omitted)</b>					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P - Part 2 - Summary, Line 12, Col. 11)	(2,580)	(3,027)	(2,913)	(2,848)	(2,466)
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0)	(1.5)	(1.8)	(1.9)	(1.9)	(1.7)
<b>Two Year Loss Development (000 omitted)</b>					
76. Development in estimated losses and loss expenses incurred two years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)	(4,847)	(4,684)	(4,013)	(4,111)	(4,701)
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0)	(2.9)	(3.0)	(2.6)	(2.9)	(3.8)

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors? \_\_\_\_\_

Yes  No 

If no, please explain: \_\_\_\_\_

**SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES****SCHEDULE P - PART 1 - SUMMARY**

(\$000 OMITTED)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid Cols (4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior.	XXX	XXX	XXX	(7)		2				7	(5)	XXX	
2. 2005	38,559	4,128	34,431	17,678	1,879	499	.41	2,011	.21	.916	18,247	XXX	
3. 2006	37,928	3,108	34,820	18,351	1,323	581	.43	2,224	.28	.977	19,762	XXX	
4. 2007	39,655	3,154	36,501	22,368	1,596	704	.39	2,281	.28	1,159	23,690	XXX	
5. 2008	43,797	3,464	40,333	28,850	5,389	1,127	202	2,273	.29	1,193	26,630	XXX	
6. 2009	45,851	4,030	41,821	27,583	3,767	910	.51	2,391	.34	1,400	27,032	XXX	
7. 2010	47,697	3,250	44,447	27,442	1,124	1,143	.28	2,586	.16	1,498	30,003	XXX	
8. 2011	48,457	3,054	45,403	32,114	3,962	1,237	.153	2,673		1,251	31,909	XXX	
9. 2012	48,818	4,076	44,742	34,970	9,928	1,234	.473	2,930		.1,064	28,733	XXX	
10. 2013	51,017	3,661	47,356	25,664	1,202	552	.16	2,790		.1,027	27,788	XXX	
11. 2014	54,691	4,235	50,456	19,983	729	309	.3	2,339		674	21,899	XXX	
12. Totals	XXX	XXX	XXX	254,996	30,899	8,298	1,049	24,498	156	11,166	255,688	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR									
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	21 Direct and Assumed	22 Ceded						
1. Prior.	42	1											41	XXX		
2. 2005														XXX		
3. 2006	47	15	3						1	1			35	XXX		
4. 2007	4	1								2			5	XXX		
5. 2008	105		58	2				40		3			204	XXX		
6. 2009	157	22	65	11				21	2	8			216	XXX		
7. 2010	293	.8	190	11				137	2	17			616	XXX		
8. 2011	643	.4	322					260		32			1,253	XXX		
9. 2012	1,337	25	632	11				421		80			2,434	XXX		
10. 2013	3,233	537	1,788	105				1,080		274			5,733	XXX		
11. 2014	6,695	211	4,832	379				1,250		1,066			13,253	XXX		
12. Totals	12,556	824	7,890	519				3,210	5	1,482			23,790	XXX		

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred /Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves After Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense		Losses Unpaid	Loss Expenses Unpaid
1. Prior.	XXX	XXX	XXX	XXX	XXX	XXX			XXX	41	
2. 2005	20,188	1,941	18,247	.52.4	47.0	.53.0			27.0		
3. 2006	21,207	1,410	19,797	.55.9	45.4	.56.9			27.0	35	
4. 2007	25,359	1,664	23,695	.63.9	52.8	.64.9			27.0	3	2
5. 2008	32,456	5,622	26,834	.74.1	162.3	.66.5			27.0	.161	.43
6. 2009	31,135	3,887	27,248	.67.9	96.5	.65.2			27.0	.189	.27
7. 2010	31,808	1,189	30,619	.66.7	36.6	.68.9			27.0	.464	.152
8. 2011	37,281	4,119	33,162	.76.9	134.9	.73.0			27.0	.961	.292
9. 2012	.41,604	10,437	31,167	.85.2	256.1	.69.7			27.0	1,933	.501
10. 2013	.35,381	1,860	33,521	.69.4	50.8	.70.8			27.0	.4,379	.1,354
11. 2014	36,474	1,322	35,152	.66.7	31.2	.69.7			27.0	10,937	2,316
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX			XXX	19,103	4,687

Note: Parts 2 and 4 are gross of all discounting, including tabular discounting. Part 1 is gross of only nontabular discounting, which is reported in Columns 32 and 33 of Part 1. The tabular discount, if any, is reported in the Notes to Financial Statements which will reconcile Part 1 with Parts 2 and 4.

ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company  
**SCHEDULE P - PART 2 - SUMMARY**

Years in Which Losses Were Incurred	INCURRED NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										DEVELOPMENT	
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014	11 One Year	12 Two Year
1. Prior	8,715	6,769	5,776	5,092	4,828	4,636	4,629	4,602	4,583	4,573	(10)	(29)
2. 2005	20,812	18,466	17,303	16,664	16,445	16,341	16,309	16,267	16,252	16,257	5	(10)
3. 2006	XXX	21,202	19,593	18,371	17,984	17,702	17,642	17,606	17,606	17,601	(5)	(5)
4. 2007	XXX	XXX	25,470	23,369	22,118	21,987	21,664	21,488	21,478	21,440	(38)	(48)
5. 2008	XXX	XXX	XXX	27,354	25,326	25,088	24,622	24,571	24,516	24,587	71	16
6. 2009	XXX	XXX	XXX	XXX	27,795	26,079	25,519	25,286	24,936	24,883	(53)	(403)
7. 2010	XXX	XXX	XXX	XXX	XXX	31,030	29,630	29,030	28,514	28,032	(482)	(998)
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	33,544	31,796	30,990	30,457	(533)	(1,339)
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	30,188	28,932	28,157	(775)	(2,031)
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	31,217	30,457	(760)	XXX
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	31,747	XXX	XXX
										12. Totals	(2,580)	(4,847)

**SCHEDULE P - PART 3 - SUMMARY**

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014		
1. Prior	000	2,609	3,867	4,327	4,435	4,511	4,544	4,546	4,537	4,532	XXX	XXX
2. 2005	11,279	14,439	15,510	15,897	16,046	16,133	16,186	16,237	16,252	16,257	XXX	XXX
3. 2006	XXX	12,163	15,487	16,398	17,113	17,415	17,539	17,566	17,568	17,566	XXX	XXX
4. 2007	XXX	XXX	14,776	18,975	20,386	21,034	21,286	21,383	21,400	21,437	XXX	XXX
5. 2008	XXX	XXX	XXX	16,994	21,232	22,699	23,847	24,210	24,314	24,386	XXX	XXX
6. 2009	XXX	XXX	XXX	XXX	17,359	21,943	23,330	24,161	24,476	24,675	XXX	XXX
7. 2010	XXX	XXX	XXX	XXX	XXX	18,894	24,164	25,983	27,024	27,433	XXX	XXX
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	22,388	26,639	28,284	29,236	XXX	XXX
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	18,847	23,823	25,803	XXX	XXX	XXX
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	18,886	24,998	XXX	XXX	XXX
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	19,560	XXX	XXX	XXX

**SCHEDULE P - PART 4 - SUMMARY**

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2005	2 2006	3 2007	4 2008	5 2009	6 2010	7 2011	8 2012	9 2013	10 2014		
1. Prior	3,893	1,932	1,026	428	206	31	22	5	5	5		
2. 2005	5,456	2,325	950	419	198	82	45	10				
3. 2006	XXX	4,759	2,466	897	329	92	51	13	4	3		
4. 2007	XXX	XXX	5,310	2,270	808	479	138	41	20			
5. 2008	XXX	XXX	XXX	5,164	1,941	988	313	164	96	96		
6. 2009	XXX	XXX	XXX	XXX	4,780	1,803	928	407	172	73		
7. 2010	XXX	XXX	XXX	XXX	XXX	5,790	2,771	1,598	894	314		
8. 2011	XXX	XXX	XXX	XXX	XXX	XXX	5,583	2,664	1,135	582		
9. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,263	2,174	1,042		
10. 2013	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,601	2,763		
11. 2014	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,703		

## ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company

**SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

Allocated by States and Territories

States, Etc.	1 Active Status	Gross Premiums, Including Policy and Membership Fees, Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges Not Included in Premiums	9 Direct Premiums Written for Federal Purchasing Groups (Included in Column 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
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	L							
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	L							
16. Iowa .....	IA	L							
17. Kansas .....	KS	L							
18. Kentucky .....	KY	N							
19. Louisiana .....	LA	N							
20. Maine .....	ME	L							
21. Maryland .....	MD	N							
22. Massachusetts .....	MA	N							
23. Michigan .....	MI	N							
24. Minnesota .....	MN	L							
25. Mississippi .....	MS	N							
26. Missouri .....	MO	N							
27. Montana .....	MT	N							
28. Nebraska .....	NE	L							
29. Nevada .....	NV	N							
30. New Hampshire .....	NH	L							
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	52,047,774	50,633,221		31,500,506	29,795,510	17,282,349	915,100
37. Oklahoma .....	OK	N							
38. Oregon .....	OR	L							
39. Pennsylvania .....	PA	N							
40. Rhode Island .....	RI	L							
41. South Carolina .....	SC	N							
42. South Dakota .....	SD	N							
43. Tennessee .....	TN	L							
44. Texas .....	TX	N							
45. Utah .....	UT	N							
46. Vermont .....	VT	L							
47. Virginia .....	VA	L							
48. Washington .....	WA	N							
49. West Virginia .....	WV	N							
50. Wisconsin .....	WI	L							
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	(a)	15	52,047,774	50,633,221		31,500,506	29,795,510	17,282,349	915,100
DETAILS OF WRITE-INS									
58001.		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							

(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

Explanation of basis of allocation of premiums by states, etc.

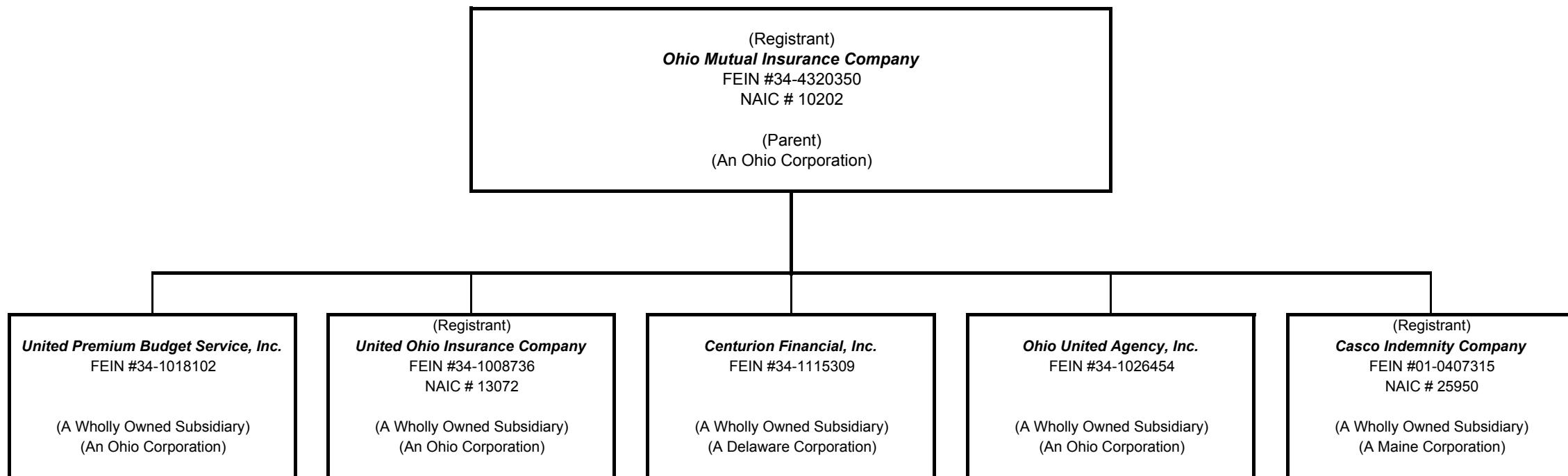
Property premiums are determined by location covered.

Casualty premiums are determined by insured address.

(a) Insert the number of L responses except for Canada and Other Alien.

**SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP**  
**PART 1 - ORGANIZATIONAL CHART**

**Ohio Mutual Insurance Group**



ANNUAL STATEMENT FOR THE YEAR 2014 OF THE Ohio Mutual Insurance Company  
**OVERFLOW PAGE FOR WRITE-INS**

**NONE**

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