



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

QUARTERLY STATEMENT

AS OF MARCH 31, 2015

OF THE CONDITION AND AFFAIRS OF THE

Ohio Mutual Insurance Company

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

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

Country of Domicile United States of America

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

Statutory Home Office 1725 Hopley Avenue, Bucyrus, OH, US 44820-0111

Main Administrative Office 1725 Hopley Avenue, Bucyrus, OH, US 44820-0111

Mail Address 1725 Hopley Avenue, Bucyrus, OH, US 44820-0111

Primary Location of Books and Records 1725 Hopley Avenue, Bucyrus, OH, US 44820-0111

Internet Website Address www.omig.com

Statutory Statement Contact Caroline Kay Metcalf Mrs., cmetcalf@omig.com

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

State of Ohio County of Crawford SS:

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

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? Yes [ X ] No [ ]
b. If no,
1. State the amendment number.....
2. Date filed .....
3. Number of pages attached.....

## STATEMENT AS OF MARCH 31, 2015 OF THE Ohio Mutual Insurance Company

**ASSETS**

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds .....	56,683,143		56,683,143	56,189,501
2. Stocks:				
2.1 Preferred stocks .....				
2.2 Common stocks .....	159,507,940	26,046	159,481,894	157,840,618
3. Mortgage loans on real estate:				
3.1 First liens .....				
3.2 Other than first liens.....				
4. Real estate:				
4.1 Properties occupied by the company (less \$ encumbrances) .....	4,443,685		4,443,685	4,503,927
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....				
4.3 Properties held for sale (less \$ ..... encumbrances) .....				
5. Cash (\$ .....4,713,996 ), cash equivalents (\$ ..... ) and short-term investments (\$ .....855,016 ) .....	5,569,012		5,569,012	5,601,608
6. Contract loans (including \$ ..... premium notes) .....				
7. Derivatives .....				
8. Other invested assets .....				
9. Receivables for securities .....				
10. Securities lending reinvested collateral assets .....				
11. Aggregate write-ins for invested assets .....				
12. Subtotals, cash and invested assets (Lines 1 to 11) .....	226,203,780	26,046	226,177,734	224,135,654
13. Title plants less \$ ..... charged off (for Title insurers only) .....				
14. Investment income due and accrued .....	505,042		505,042	475,926
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	732,797	75,480	657,317	739,567
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....	11,620,288		11,620,288	11,441,483
15.3 Accrued retrospective premiums .....				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	118,992		118,992	528,350
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 .....	1,862,176		1,862,176	1,723,044
19. Guaranty funds receivable or on deposit .....				
20. Electronic data processing equipment and software .....	409,045	409,045		
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....	25,569	25,569		
22. Net adjustment in assets and liabilities due to foreign exchange rates .....				
23. Receivables from parent, subsidiaries and affiliates .....	166,703		166,703	
24. Health care (\$ ..... ) and other amounts receivable .....				
25. Aggregate write-ins for other than invested assets .....	599,013		599,013	625,057
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	242,243,405	536,140	241,707,265	239,669,081
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....				
28. Total (Lines 26 and 27)	242,243,405	536,140	241,707,265	239,669,081
<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 through 1103 plus 1198)(Line 11 above)				
2501. Goodwill .....	599,013		599,013	625,057
2502. ....				
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....				
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	599,013		599,013	625,057

STATEMENT AS OF MARCH 31, 2015 OF THE Ohio Mutual Insurance Company  
**LIABILITIES, SURPLUS AND OTHER FUNDS**

	1 Current Statement Date	2 December 31, Prior Year
1. Losses (current accident year \$ .....7,426,454 ) .....	20,075,175	19,103,261
2. Reinsurance payable on paid losses and loss adjustment expenses .....		
3. Loss adjustment expenses .....	4,992,431	4,687,890
4. Commissions payable, contingent commissions and other similar charges .....	1,062,546	1,867,599
5. Other expenses (excluding taxes, licenses and fees) .....	43,999	43,238
6. Taxes, licenses and fees (excluding federal and foreign income taxes) .....	200,270	33,689
7.1 Current federal and foreign income taxes (including \$ .....23,292 on realized capital gains (losses)) .....	1,376,515	1,241,910
7.2 Net deferred tax liability .....		
8. Borrowed money \$ ..... and interest thereon \$ .....		
9. Unearned premiums (after deducting unearned premiums for ceded reinsurance of \$ .....64,312,256 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) .....	23,731,931	23,783,752
10. Advance premium .....	675,851	395,548
11. Dividends declared and unpaid:		
11.1 Stockholders .....		
11.2 Policyholders .....		
12. Ceded reinsurance premiums payable (net of ceding commissions) .....		42,687
13. Funds held by company under reinsurance treaties .....	107,295	109,075
14. Amounts withheld or retained by company for account of others .....	1,403	111
15. Remittances and items not allocated .....	1,555	2,749
16. Provision for reinsurance (including \$ ..... certified) .....		
17. Net adjustments in assets and liabilities due to foreign exchange rates .....		
18. Drafts outstanding .....		
19. Payable to parent, subsidiaries and affiliates .....		836,148
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) .....	52,268,971	52,164,559
27. Protected cell liabilities .....		
28. Total liabilities (Lines 26 and 27) .....	52,268,971	52,164,559
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) .....	189,438,294	187,504,522
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) .....	189,438,294	187,504,522
38. Totals (Page 2, Line 28, Col. 3)	241,707,265	239,669,081
<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 through 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 through 2903 plus 2998)(Line 29 above)		
3201. ....		
3202. ....		
3203. ....		
3298. Summary of remaining write-ins for Line 32 from overflow page .....		
3299. Totals (Lines 3201 through 3203 plus 3298)(Line 32 above)		

## STATEMENT AS OF MARCH 31, 2015 OF THE Ohio Mutual Insurance Company

**STATEMENT OF INCOME**

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
<b>UNDERWRITING INCOME</b>			
1. Premiums earned:			
1.1 Direct (written \$ 12,386,548 )	12,795,664	12,222,900	50,633,221
1.2 Assumed (written \$ 35,391,056 )	35,169,285	33,078,805	138,003,406
1.3 Ceded (written \$ 34,983,318 )	35,118,842	33,181,325	138,181,361
1.4 Net (written \$ 12,794,286 )	12,846,107	12,120,380	50,455,266
<b>DEDUCTIONS:</b>			
2. Losses incurred (current accident year \$ 10,815,340 ):			
2.1 Direct	7,656,336	8,152,845	29,795,510
2.2 Assumed	19,952,857	22,745,161	74,138,643
2.3 Ceded	20,154,946	22,555,299	75,977,657
2.4 Net	7,454,247	8,342,707	27,956,496
3. Loss adjustment expenses incurred	1,268,617	1,212,021	4,317,656
4. Other underwriting expenses incurred	4,358,192	3,977,908	16,947,965
5. Aggregate write-ins for underwriting deductions			
6. Total underwriting deductions (Lines 2 through 5)	13,081,056	13,532,636	49,222,117
7. Net income of protected cells			
8. Net underwriting gain or (loss) (Line 1 minus Line 6 + Line 7)	(234,949)	(1,412,256)	1,233,149
<b>INVESTMENT INCOME</b>			
9. Net investment income earned	325,332	310,181	1,289,552
10. Net realized capital gains (losses) less capital gains tax of \$ 23,292	46,606	79,265	77,635
11. Net investment gain (loss) (Lines 9 + 10)	371,938	389,446	1,367,187
<b>OTHER INCOME</b>			
12. Net gain or (loss) from agents' or premium balances charged off (amount recovered \$ 13,616 amount charged off \$ 64,884 )	(51,268)	(55,260)	(222,897)
13. Finance and service charges not included in premiums	207,970	235,950	915,100
14. Aggregate write-ins for miscellaneous income	62,374	80,894	323,723
15. Total other income (Lines 12 through 14)	219,076	261,584	1,015,926
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	356,065	(761,226)	3,616,262
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)	356,065	(761,226)	3,616,262
19. Federal and foreign income taxes incurred	111,652	(40,833)	1,178,264
20. Net income (Line 18 minus Line 19)(to Line 22)	244,413	(720,393)	2,437,998
<b>CAPITAL AND SURPLUS ACCOUNT</b>			
21. Surplus as regards policyholders, December 31 prior year	187,504,522	177,772,246	177,772,246
22. Net income (from Line 20)	244,413	(720,393)	2,437,998
23. Net transfers (to) from Protected Cell accounts			
24. Change in net unrealized capital gains (losses) less capital gains tax of \$ (42,008)	1,681,320	(665,397)	7,005,527
25. Change in net unrealized foreign exchange capital gain (loss)			
26. Change in net deferred income tax	97,124	173,952	177,306
27. Change in nonadmitted assets	(89,085)	(40,771)	109,891
28. Change in provision for reinsurance			1,554
29. Change in surplus notes			
30. Surplus (contributed to) withdrawn from protected cells			
31. Cumulative effect of changes in accounting principles			
32. Capital changes:			
32.1 Paid in			
32.2 Transferred from surplus (Stock Dividend)			
32.3 Transferred to surplus			
33. Surplus adjustments:			
33.1 Paid in			
33.2 Transferred to capital (Stock Dividend)			
33.3 Transferred from capital			
34. Net remittances from or (to) Home Office			
35. Dividends to stockholders			
36. Change in treasury stock			
37. Aggregate write-ins for gains and losses in surplus			
38. Change in surplus as regards policyholders (Lines 22 through 37)	1,933,772	(1,252,609)	9,732,276
39. Surplus as regards policyholders, as of statement date (Lines 21 plus 38)	189,438,294	176,519,636	187,504,522
<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 through 0503 plus 0598)(Line 5 above)			
1401. Rental and Related Services	81,522	81,521	326,083
1402. Other Income	(19,148)	(627)	(2,360)
1403. ....			
1498. Summary of remaining write-ins for Line 14 from overflow page			
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	62,374	80,894	323,723
3701. ....			
3702. ....			
3703. ....			
3798. Summary of remaining write-ins for Line 37 from overflow page			
3799. Totals (Lines 3701 through 3703 plus 3798)(Line 37 above)			

## STATEMENT AS OF MARCH 31, 2015 OF THE Ohio Mutual Insurance Company

**CASH FLOW**

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>Cash from Operations</b>			
1. Premiums collected net of reinsurance .....	12,940,960	12,468,198	51,389,843
2. Net investment income .....	482,369	450,794	1,988,222
3. Miscellaneous income .....	219,076	261,584	1,015,926
4. Total (Lines 1 to 3) .....	13,642,405	13,180,576	54,393,991
5. Benefit and loss related payments .....	6,072,975	7,779,285	28,708,651
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			
7. Commissions, expenses paid and aggregate write-ins for deductions .....	6,055,437	5,567,567	20,811,224
8. Dividends paid to policyholders .....			
9. Federal and foreign income taxes paid (recovered) net of \$ ..... 23,292 tax on capital gains (losses) .....	339	64	762,838
10. Total (Lines 5 through 9) .....	12,128,751	13,346,916	50,282,713
11. Net cash from operations (Line 4 minus Line 10) .....	1,513,654	(166,340)	4,111,278
<b>Cash from Investments</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds .....	1,434,163	721,335	9,401,440
12.2 Stocks .....	121,525	359,188	778,107
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 .....		280,850	16,902
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	1,555,688	1,361,373	10,196,449
13. Cost of investments acquired (long-term only):			
13.1 Bonds .....	2,021,590	2,082,126	14,533,179
13.2 Stocks .....	84,956	330,722	765,496
13.3 Mortgage loans .....			
13.4 Real estate .....			183,502
13.5 Other invested assets .....			
13.6 Miscellaneous applications .....	16,903		
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	2,123,449	2,412,848	15,482,177
14. Net increase (or decrease) in contract loans and premium notes .....			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14) .....	(567,761)	(1,051,475)	(5,285,728)
<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) .....	(978,489)	(196,790)	327,430
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) .....	(978,489)	(196,790)	327,430
<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) .....	(32,596)	(1,414,605)	(847,020)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year .....	5,601,608	6,448,628	6,448,628
19.2 End of period (Line 18 plus Line 19.1) .....	5,569,012	5,034,023	5,601,608

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

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## NOTES TO FINANCIAL STATEMENTS

### 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 and surplus between NAIC Statutory Accounting Practices and practices prescribed and permitted by the State of Ohio is shown below:

	State of Domicile	03/31/2015	12/31/2014
<u>NET INCOME</u>			
(1) Ohio Mutual Insurance Company state basis (Page 4, Line 20, Columns 1 & 3)	OH	\$ 244,413	\$ 2,437,998
(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	\$ 244,413	\$ 2,437,998
<u>SURPLUS</u>			
(5) Ohio Mutual Insurance Company state basis (Page 3, Line 37, Columns 1 & 2)	OH	\$ 189,438,294	\$ 187,504,522
(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	\$ 189,438,294	\$ 187,504,522

B. Use of Estimates in the Preparation of the Financial Statements – No Change

C. Accounting Policy – No Change

### 2. Accounting Changes and Corrections of Errors – No Change

### 3. Business Combinations and Goodwill – No Change

### 4. Discontinued Operations – No Change

### 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 quarter ended March 31, 2015

## NOTES TO FINANCIAL STATEMENTS

- (4) All temporarily impaired securities for which an other-than-temporary impairment has not been recognized in earnings as a realized loss in 2015 are as follows:

a. The aggregate amount of unrealized losses:		
	1. Less than 12 Months	\$ (9,766)
	2. 12 Months or Longer	<u>\$ (44,225)</u>
b. The aggregate related fair value of securities with unrealized losses:		
	1. Less than 12 Months	\$ 3,405,977
	2. 12 Months or Longer	<u>\$ 3,189,409</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 and/or securities lending transactions.  
 I. The Company has no Working Capital Finance Investments.  
 J. The Company has no Offsetting and Netting of Assets and Liabilities.

### 6. Joint Ventures, Partnerships and Limited Liability Companies – No Change

### 7. Investment Income – No Change

### 8. Derivative Instruments – No Change

### 9. Income Taxes – No Change

### 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 2015 the Company reimbursed its subsidiaries, United Ohio and Casco, \$2,605,279 and \$244,908, respectively, under the terms of the Reinsurance Pooling Agreement between the entities.
- D. As of March 31, 2015, the Company's subsidiary, United Ohio, owes the Company \$313,211 and the Company owes its subsidiary, Casco, \$230,526, under the terms of the Reinsurance Pooling Agreement. As of March 31, 2015, the Company's subsidiary, United Ohio, owes the Company \$84,018 under the terms of the Cost Sharing Agreement.
- E. The Company does provide a guarantee for its subsidiary United Ohio Insurance Company's line of credit with United Bank, N.A.
- 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 \$139,554,562.

Based on the Company's ownership percentage of United Ohio, the statutory statement value of United Ohio assets and liabilities as of March 31, 2015 were \$286,407,836 and \$146,853,274, respectively.

## NOTES TO FINANCIAL STATEMENTS

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 – No Change

### 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans – No Change

### 13. Capital and Surplus, Dividend Restrictions and Quasi-reorganizations – No Change

### 14. Liabilities, Contingencies and Assessments – No Change

### 15. Leases – No Change

### 16. Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk – No Change

### 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 – No Change

### 19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators – No Change

### 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	\$ 6,648,586	\$ -	\$ 326,098	\$ 6,974,684
Mutual Funds	1,453,575	-	-	1,453,575
Total Common Stock	<u>\$ 8,102,161</u>	<u>\$ -</u>	<u>\$ 326,098</u>	<u>\$ 8,428,259</u>
Derivative assets	-	-	-	-
Total Assets at Fair Value	<u>\$ 8,102,161</u>	<u>\$ -</u>	<u>\$ 326,098</u>	<u>\$ 8,428,259</u>
b. Liabilities at fair value				
Derivative liabilities	\$ -	\$ -	\$ -	\$ -
Total Liabilities at Fair Value	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>

#### (2) Fair Value Measurements in (Level 3) of the Fair Value Hierarchy

	Balance at 12/31/2014	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 and settlements	Balance at 03/31/2015
Common Stock - Ind & Misc.	\$ 326,098	\$ -	\$ -	\$ -	\$ -		\$ 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 March 31, 2015, 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.

C. The Aggregate Fair Value for all Financial Instruments and the Level within the Fair Value Hierarchy

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
Common Stocks	\$ 8,428,259	\$ 8,428,259	\$ 8,102,161	\$ -	\$ 326,098	\$ -

D. Not Practicable to Estimate Fair Value

## NOTES TO FINANCIAL STATEMENTS

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

**21. Other Items – No Change**

**22. Events Subsequent – None**

**23. Reinsurance – No Change**

**24. Retrospectively Rated Contracts and Contracts Subject to Redetermination – No Change**

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

The Company's portion of pooled loss reserves as of December 31, 2014 was \$23.8 million. On a pooled basis as of March 31, 2015, \$3.7 million has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Pooled reserves remaining for prior years are now \$15.9 million. There has been a \$4.3 million favorable prior-year development, on a pooled basis, from December 31, 2014 to March 31, 2015 as a result of re-estimation of unpaid claims and claim adjustment expenses principally on homeowners, farmowners, and personal auto liability lines of insurance. The decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims. The Company does not have any retrospectively rated policies which would be included in the favorable development.

**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:

	03/31/2015	12/31/2014
Premium earned assumed by Ohio Mutual from United Ohio and Casco	\$ 35,160,253	\$ 137,968,170
Premium earned ceded back to United Ohio and Casco	(34,732,067)	(136,416,091)
Change in premium earned due to pooling	<u>\$ 428,186</u>	<u>\$ 1,552,079</u>
Losses incurred assumed by Ohio Mutual from United Ohio and Casco	\$ 19,952,857	\$ 74,138,347
Losses incurred ceded back to United Ohio and Casco	(20,154,076)	(75,586,081)
Change in losses incurred due to pooling	<u>\$ (201,219)</u>	<u>\$ (1,447,734)</u>
Net loss adjustment expenses assumed by Ohio Mutual	\$ 931,304	\$ 3,428,570
Net other underwriting expenses assumed by Ohio Mutual	2,291,098	8,155,440
Change in expenses incurred due to pooling	<u>\$ 3,222,402</u>	<u>\$ 11,584,010</u>
Change in income before taxes due to pooling	<u>\$ (2,592,997)</u>	<u>\$ (8,584,197)</u>

**27. Structured Settlements – No Change**

**28. Health Care Receivables – No Change**

**29. Participating Policies – No Change**

**30. Premium Deficiency Reserves – No Change**

**31. High Deductibles – No Change**

**32. Discounting of Liabilities for Unpaid Losses or Unpaid Loss Adjustment Expenses – No Change**

**33. Asbestos/Environmental Reserves – No Change**

**34. Subscriber Savings Accounts – No Change**

**35. Multiple Peril Crop Insurance – No Change**

**36. Financial Guaranty Insurance – No Change**

STATEMENT AS OF MARCH 31, 2015 OF THE Ohio Mutual Insurance Company  
**GENERAL INTERROGATORIES**

**PART 1 - COMMON INTERROGATORIES**

**GENERAL**

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? ..... Yes [ ] No [ X ]
- 1.2 If yes, has the report been filed with the domiciliary state? ..... Yes [ ] No [ ]
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? ..... Yes [ ] No [ X ]
- 2.2 If yes, date of change: .....
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? ..... Yes [ X ] No [ ]  
 If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? ..... Yes [ ] No [ X ]
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? ..... Yes [ ] No [ X ]
- 4.2 If yes, provide the name of the entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? ..... Yes [ ] No [ X ] N/A [ ]  
 If yes, attach an explanation.
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. .... 12/31/2010
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. .... 12/31/2010
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). .... 07/26/2011
- 6.4 By what department or departments?  
 Ohio Department of Insurance
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? ..... Yes [ ] No [ ] N/A [ X ]
- 6.6 Have all of the recommendations within the latest financial examination report been complied with? ..... Yes [ X ] No [ ] N/A [ ]
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? ..... Yes [ ] No [ X ]
- 7.2 If yes, give full information:
- 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

**GENERAL INTERROGATORIES**

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? ..... 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.
- 9.11 If the response to 9.1 is No, please explain:
- 9.2 Has the code of ethics for senior managers been amended? ..... Yes [ ] No [ X ]
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers? ..... Yes [ ] No [ X ]
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

**FINANCIAL**

- 10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? ..... Yes [ X ] No [ ]
- 10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: ..... \$

**INVESTMENT**

- 11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) ..... Yes [ ] No [ X ]
- 11.2 If yes, give full and complete information relating thereto:
12. Amount of real estate and mortgages held in other invested assets in Schedule BA: ..... \$
13. Amount of real estate and mortgages held in short-term investments: ..... \$
- 14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? ..... Yes [ X ] No [ ]
- 14.2 If yes, please complete the following:
- |   | 1   | 2  |
|---|---|--|
|   | Prior Year-End<br>Book/Adjusted<br>Carrying Value | Current Quarter<br>Book/Adjusted<br>Carrying Value |
| 14.21 Bonds .....   | \$  | \$   |
| 14.22 Preferred Stock .....   | \$  | \$   |
| 14.23 Common Stock .....  | \$ 149,316,816                                    | \$ 151,079,682                                     |
| 14.24 Short-Term Investments .....  | \$  | \$   |
| 14.25 Mortgage Loans on Real Estate .....   | \$  | \$   |
| 14.26 All Other .....   | \$  | \$   |
| 14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) ..... | \$ 149,316,816                                    | \$ 151,079,682                                     |
| 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above .....                       | \$  | \$   |
- 15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? ..... Yes [ ] No [ X ]
- 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? ..... Yes [ ] No [ ]
- If no, attach a description with this statement.

STATEMENT AS OF MARCH 31, 2015 OF THE Ohio Mutual Insurance Company  
**GENERAL INTERROGATORIES**

16. For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 .....\$ .....
- 16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 .....\$ .....
- 16.3 Total payable for securities lending reported on the liability page .....\$ .....

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

1 Name of Custodian(s)	2 Custodian Address
Fifth Third Bank .....	38 Fountain Square Plaza, Cincinnati, OH 45263 .....

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

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

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? ..... Yes [ ] No [ X ]

- 17.4 If yes, give full information relating thereto:

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

- 17.5 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/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	2 Name(s)	3 Address
SEC File #801-22445 .....	Gen Re / New England Asset Management .....	74 Batterson Park Road, Farmington, CT 06032 .....

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed? ..... Yes [ X ] No [ ]

- 18.2 If no, list exceptions:

**GENERAL INTERROGATORIES**

**PART 2 - PROPERTY & CASUALTY INTERROGATORIES**

1. If the reporting entity is a member of a pooling arrangement, did the agreement or the reporting entity's participation change? ..... Yes [ ] No [ X ] N/A [ ]  
If yes, attach an explanation.

2. Has the reporting entity reinsured any risk with any other reporting entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on the risk, or portion thereof, reinsured? ..... Yes [ ] No [ X ]  
If yes, attach an explanation.

3.1 Have any of the reporting entity's primary reinsurance contracts been canceled? ..... Yes [ X ] No [ ]

3.2 If yes, give full and complete information thereto.  
In 2014, the Company made a change in it's CAT reinsurance broker, moving from General Re Intermediaries to JLT, Re.

4.1 Are any of the liabilities for unpaid losses and loss adjustment expenses other than certain workers' compensation tabular reserves (see Annual Statement Instructions pertaining to disclosure of discounting for definition of "tabular reserves") discounted at a rate of interest greater than zero? ..... Yes [ ] No [ X ]

4.2 If yes, complete the following schedule:

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

5. Operating Percentages:

5.1 A&H loss percent .....(6.975)%

5.2 A&H cost containment percent ..... %

5.3 A&H expense percent excluding cost containment expenses .....12.037 %

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

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

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

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



STATEMENT AS OF MARCH 31, 2015 OF THE Ohio Mutual Insurance Company  
**SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN**

Current Year to Date - Allocated by States and Territories

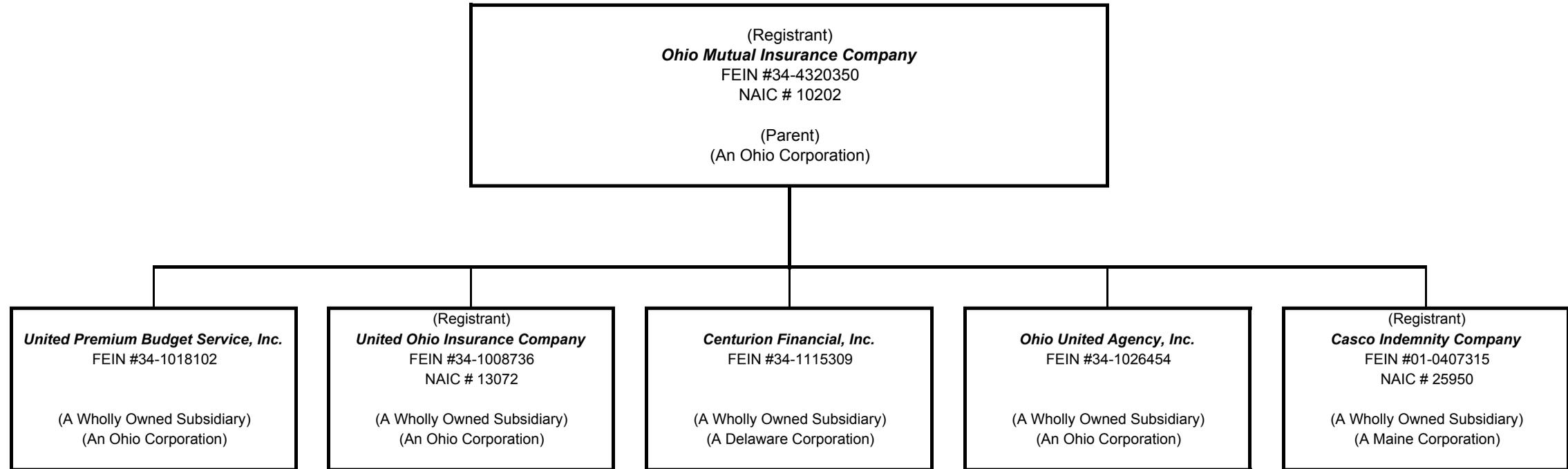
States, etc.	1 Active Status	Direct Premiums Written		Direct Losses Paid (Deducting Salvage)		Direct Losses Unpaid	
		2 Current Year To Date	3 Prior Year To Date	4 Current Year To Date	5 Prior Year To Date	6 Current Year To Date	7 Prior Year To Date
1. Alabama .....AL	N						
2. Alaska .....AK	N						
3. Arizona .....AZ	N						
4. Arkansas .....AR	N						
5. California .....CA	N						
6. Colorado .....CO	N						
7. Connecticut .....CT	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	12,386,548	11,977,637	7,239,585	8,161,756	17,699,100	18,978,435
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	12,386,548	11,977,637	7,239,585	8,161,756	17,699,100	18,978,435
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.

(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**



STATEMENT AS OF MARCH 31, 2015 OF THE Ohio Mutual Insurance Company

**SCHEDULE Y**

**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
0963	Ohio Mutual Insurance Group	10202	34-4320350				Ohio Mutual Insurance Company	OH		Ohio Mutual Insurance Company	Management			
0963	Ohio Mutual Insurance Group	13072	34-1008736				United Ohio Insurance Company	OH	DS	Ohio Mutual Insurance Company	Ownership	100.000	Ohio Mutual Insurance Company	
0963	Ohio Mutual Insurance Group		34-1018102				United Premium Budget Service, Inc.	OH	DS	Ohio Mutual Insurance Company	Ownership	100.000	Ohio Mutual Insurance Company	
0963	Ohio Mutual Insurance Group		34-1115309				Centurion Financial, Inc.	DE	DS	Ohio Mutual Insurance Company	Ownership	100.000	Ohio Mutual Insurance Company	
0963	Ohio Mutual Insurance Group		34-1026454				Ohio United Agency, Inc.	OH	DS	Ohio Mutual Insurance Company	Ownership	100.000	Ohio Mutual Insurance Company	
0963	Ohio Mutual Insurance Group	25950	01-0407315				Casco Indemnity Company	ME	DS	Ohio Mutual Insurance Company	Ownership	100.000	Ohio Mutual Insurance Company	

Asterisk	Explanation
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STATEMENT AS OF MARCH 31, 2015 OF THE Ohio Mutual Insurance Company

**PART 1 - LOSS EXPERIENCE**

Line of Business	Current Year to Date			4 Prior Year to Date Direct Loss Percentage
	1 Direct Premiums Earned	2 Direct Losses Incurred	3 Direct Loss Percentage	
1. Fire	747,719	565,992	75.7	72.6
2. Allied Lines				
3. Farmowners multiple peril	478,677	99,231	20.7	10.5
4. Homeowners multiple peril	2,309,969	655,712	28.4	82.4
5. Commercial multiple peril				
6. Mortgage guaranty				
8. Ocean marine				
9. Inland marine	4,015			
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				
15. Other accident and health				
16. Workers' compensation				
17.1 Other liability - occurrence	69,493	133,230	191.7	39.1
17.2 Other liability - claims-made				
17.3 Excess workers' compensation				
18.1 Products liability - occurrence				
18.2 Products liability - claims-made				
19.1,19.2 Private passenger auto liability	4,877,863	3,555,535	72.9	64.8
19.3,19.4 Commercial auto liability				
21. Auto physical damage	4,281,550	2,648,802	61.9	68.8
22. Aircraft (all perils)				
23. Fidelity				
24. Surety				
26. Burglary and theft	26,378	(2,166)	(8.2)	5.1
27. Boiler and machinery				
28. Credit				
29. International				
30. Warranty				
31. Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX	XXX
32. Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX	XXX
33. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business				
35. Totals	12,795,664	7,656,336	59.8	66.7
<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 through 3403 plus 3498)(Line 34 above)				

**PART 2 - DIRECT PREMIUMS WRITTEN**

Line of Business	1	2	3
	Current Quarter	Current Year to Date	Prior Year Year to Date
1. Fire	596,732	596,732	613,243
2. Allied Lines			
3. Farmowners multiple peril	518,097	518,097	552,452
4. Homeowners multiple peril	2,226,585	2,226,585	1,833,943
5. Commercial multiple peril			
6. Mortgage guaranty			
8. Ocean marine			
9. Inland marine	6,295	6,295	4,148
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			
15. Other accident and health			
16. Workers' compensation			
17.1 Other liability - occurrence	64,053	64,053	66,656
17.2 Other liability - claims-made			
17.3 Excess workers' compensation			
18.1 Products liability - occurrence			
18.2 Products liability - claims-made			
19.1,19.2 Private passenger auto liability	4,775,706	4,775,706	4,726,353
19.3,19.4 Commercial auto liability			
21. Auto physical damage	4,176,648	4,176,648	4,156,680
22. Aircraft (all perils)			
23. Fidelity			
24. Surety			
26. Burglary and theft	22,432	22,432	24,162
27. Boiler and machinery			
28. Credit			
29. International			
30. Warranty			
31. Reinsurance - Nonproportional Assumed Property	XXX	XXX	XXX
32. Reinsurance - Nonproportional Assumed Liability	XXX	XXX	XXX
33. Reinsurance - Nonproportional Assumed Financial Lines	XXX	XXX	XXX
34. Aggregate write-ins for other lines of business			
35. Totals	12,386,548	12,386,548	11,977,637
<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 through 3403 plus 3498)(Line 34 above)			

STATEMENT AS OF MARCH 31, 2015 OF THE Ohio Mutual Insurance Company

**PART 3 (000 omitted)**

LOSS AND LOSS ADJUSTMENT EXPENSE RESERVES SCHEDULE

	1	2	3	4	5	6	7	8	9	10	11	12	13
Years in Which Losses Occurred	Prior Year-End Known Case Loss and LAE Reserves	Prior Year-End IBNR Loss and LAE Reserves	Total Prior Year-End Loss and LAE Reserves (Cols. 1+2)	2015 Loss and LAE Payments on Claims Reported as of Prior Year-End	2015 Loss and LAE Payments on Claims Unreported as of Prior Year-End	Total 2015 Loss and LAE Payments (Cols. 4+5)	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported and Open as of Prior Year End	Q.S. Date Known Case Loss and LAE Reserves on Claims Reported or Reopened Subsequent to Prior Year End	Q.S. Date IBNR Loss and LAE Reserves	Total Q.S. Loss and LAE Reserves (Cols.7+8+9)	Prior Year-End Known Case Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols.4+7 minus Col. 1)	Prior Year-End IBNR Loss and LAE Reserves Developed (Savings)/ Deficiency (Cols. 5+8+9 minus Col. 2)	Prior Year-End Total Loss and LAE Reserve Developed (Savings)/ Deficiency (Cols. 11+12)
1. 2012 + Prior .....	2,553	2,254	4,807	661		661	2,158	1	1,335	3,494	266	(918)	(652)
2. 2013 .....	2,696	3,036	5,732	519	2	521	2,413		1,523	3,936	236	(1,511)	(1,275)
3. Subtotals 2013 + Prior .....	5,249	5,290	10,539	1,180	2	1,182	4,571	1	2,858	7,430	502	(2,429)	(1,927)
4. 2014 .....	6,484	6,768	13,252	2,426	46	2,472	5,059	41	3,327	8,427	1,001	(3,354)	(2,353)
5. Subtotals 2014 + Prior .....	11,733	12,058	23,791	3,606	48	3,654	9,630	42	6,185	15,857	1,503	(5,783)	(4,280)
6. 2015 .....	XXX	XXX	XXX	XXX	3,793	3,793	XXX	2,956	6,254	9,210	XXX	XXX	XXX
7. Totals .....	11,733	12,058	23,791	3,606	3,841	7,447	9,630	2,998	12,439	25,067	1,503	(5,783)	(4,280)
8. Prior Year-End Surplus As Regards Policyholders	187,505										Col. 11, Line 7 As % of Col. 1 Line 7	Col. 12, Line 7 As % of Col. 2 Line 7	Col. 13, Line 7 As % of Col. 3 Line 7
											1. 12.8	2. (48.0)	3. (18.0)
													Col. 13, Line 7 As a % of Col. 1 Line 8
													4. (2.3)

# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

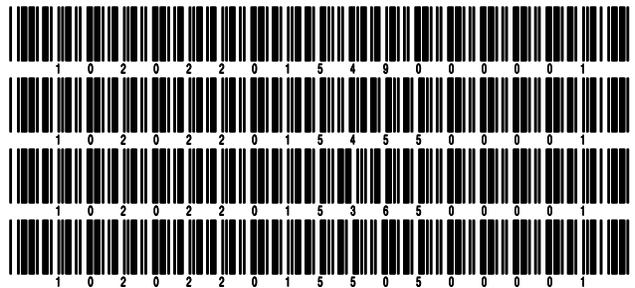
	Response
1. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC with this statement? .....	NO
2. Will Supplement A to Schedule T (Medical Professional Liability Supplement) be filed with this statement? .....	NO
3. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement? .....	NO
4. Will the Director and Officer Insurance Coverage Supplement be filed with the state of domicile and the NAIC with this statement? .....	NO

Explanations:

- 1.
- 2.
- 3.
- 4.

Bar Codes:

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



**NONE**

STATEMENT AS OF MARCH 31, 2015 OF THE Ohio Mutual Insurance Company

**SCHEDULE A - VERIFICATION**

Real Estate

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	4,503,927	4,615,157
2. Cost of acquired:		
2.1 Actual cost at time of acquisition .....		183,502
2.2 Additional investment made after acquisition .....		
3. Current year change in encumbrances .....		
4. Total gain (loss) on disposals .....		(54,233)
5. Deduct amounts received on disposals .....		
6. Total foreign exchange change in book/adjusted carrying value .....		
7. Deduct current year's other than temporary impairment recognized .....		
8. Deduct current year's depreciation .....	60,242	240,499
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8) .....	4,443,685	4,503,927
10. Deduct total nonadmitted amounts .....		
11. Statement value at end of current period (Line 9 minus Line 10) .....	4,443,685	4,503,927

**SCHEDULE B - VERIFICATION**

Mortgage Loans

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

NONE

**SCHEDULE BA - VERIFICATION**

Other Long-Term Invested Assets

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

NONE

**SCHEDULE D - VERIFICATION**

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	214,056,165	201,889,944
2. Cost of bonds and stocks acquired .....	2,106,546	15,298,675
3. Accrual of discount .....	2,876	10,186
4. Unrealized valuation increase (decrease) .....	1,639,311	7,334,135
5. Total gain (loss) on disposals .....	69,899	196,721
6. Deduct consideration for bonds and stocks disposed of .....	1,555,688	10,179,547
7. Deduct amortization of premium .....	128,026	493,949
8. Total foreign exchange change in book/adjusted carrying value .....		
9. Deduct current year's other than temporary impairment recognized .....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	216,191,083	214,056,165
11. Deduct total nonadmitted amounts .....	26,046	26,045
12. Statement value at end of current period (Line 10 minus Line 11) .....	216,165,037	214,030,120

STATEMENT AS OF MARCH 31, 2015 OF THE Ohio Mutual Insurance Company

**SCHEDULE D - PART 1B**

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
<b>BONDS</b>								
1. NAIC 1 (a) .....	56,121,685	3,768,998	3,425,210	69,605	56,535,078			56,121,685
2. NAIC 2 (a) .....	947,925	249,872		(194,716)	1,003,081			947,925
3. NAIC 3 (a) .....								
4. NAIC 4 (a) .....								
5. NAIC 5 (a) .....								
6. NAIC 6 (a) .....								
7. Total Bonds	57,069,610	4,018,870	3,425,210	(125,111)	57,538,159			57,069,610
<b>PREFERRED STOCK</b>								
8. NAIC 1 .....								
9. NAIC 2 .....								
10. NAIC 3 .....								
11. NAIC 4 .....								
12. NAIC 5 .....								
13. NAIC 6 .....								
14. Total Preferred Stock .....								
15. Total Bonds and Preferred Stock	57,069,610	4,018,870	3,425,210	(125,111)	57,538,159			57,069,610

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

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**SCHEDULE DA - PART 1**

## Short-Term Investments

	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year-to-Date	Paid for Accrued Interest Year-to-Date
9199999 Totals	855,016	XXX	855,016		

**SCHEDULE DA - VERIFICATION**

## Short-Term Investments

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	500,173	1,766,338
2. Cost of short-term investments acquired .....	1,997,280	10,271,298
3. Accrual of discount .....		
4. Unrealized valuation increase (decrease) .....		
5. Total gain (loss) on disposals .....		
6. Deduct consideration received on disposals .....	1,642,437	11,537,463
7. Deduct amortization of premium .....		
8. Total foreign exchange change in book/adjusted carrying value .....		
9. Deduct current year's other than temporary impairment recognized .....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	855,016	500,173
11. Deduct total nonadmitted amounts .....		
12. Statement value at end of current period (Line 10 minus Line 11)	855,016	500,173

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

**N O N E**

Schedule DB - Part B - Verification - Futures Contracts

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

**SCHEDULE E - VERIFICATION**

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year .....	.379,936	
2. Cost of cash equivalents acquired .....		.379,933
3. Accrual of discount .....	.38	.3
4. Unrealized valuation increase (decrease) .....		
5. Total gain (loss) on disposals .....	(1)	
6. Deduct consideration received on disposals .....	.379,973	
7. Deduct amortization of premium .....		
8. Total foreign exchange change in book/adjusted carrying value .....		
9. Deduct current year's other than temporary impairment recognized .....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....		.379,936
11. Deduct total nonadmitted amounts .....		
12. Statement value at end of current period (Line 10 minus Line 11)		379,936

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

**N O N E**

Schedule A - Part 3 - Real Estate Disposed

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

STATEMENT AS OF MARCH 31, 2015 OF THE Ohio Mutual Insurance Company

**SCHEDULE D - PART 3**

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

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Desig- nation or Market Indicator (a)
3132QL-6N-8	FEDERAL HOME LN MTG CORP #030876		.01/09/2015	BARCLAYS CAPITAL		525,234	500,000	632	1FE
3135G0-RT-2	FANNIE MAE		.02/23/2015	GOLDMAN SACHS		248,790	250,000	389	1FE
3135G0-ZB-2	FANNIE MAE		.03/19/2015	NOMURA SECURITIES INTL		250,331	250,000	781	1FE
<b>3199999. Subtotal - Bonds - U.S. Special Revenues</b>						<b>1,024,355</b>	<b>1,000,000</b>	<b>1,802</b>	<b>XXX</b>
06406H-CZ-0	BANK OF NY MELLON CORP		.02/19/2015	GOLDMAN SACHS		249,610	250,000		1FE
20826F-AB-2	CONOCOPHILLIPS COMPANY		.03/17/2015	WELLS FARGO FINANCIAL		247,998	250,000	693	1FE
40428H-PR-7	HSBC USA INC		.02/26/2015	HSBC SECURITIES USA INC.		249,755	250,000		1FE
845467-AJ-8	SOUTHWESTERN ENERGY CO		.01/20/2015	BANK OF AMERICA		249,872	250,000		2FE
<b>3899999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)</b>						<b>997,235</b>	<b>1,000,000</b>	<b>693</b>	<b>XXX</b>
<b>8399997. Total - Bonds - Part 3</b>						<b>2,021,590</b>	<b>2,000,000</b>	<b>2,495</b>	<b>XXX</b>
<b>8399998. Total - Bonds - Part 5</b>						<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>
<b>8399999. Total - Bonds</b>						<b>2,021,590</b>	<b>2,000,000</b>	<b>2,495</b>	<b>XXX</b>
<b>8999997. Total - Preferred Stocks - Part 3</b>							<b>XXX</b>		<b>XXX</b>
<b>8999998. Total - Preferred Stocks - Part 5</b>						<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>
<b>8999999. Total - Preferred Stocks</b>							<b>XXX</b>		<b>XXX</b>
22822V-10-1	CROWN CASTLE INTL CORP		.03/25/2015	CLSA CALYON SECURITIES	1,000,000	84,956			L
<b>9099999. Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated)</b>						<b>84,956</b>	<b>XXX</b>		<b>XXX</b>
<b>9799997. Total - Common Stocks - Part 3</b>						<b>84,956</b>	<b>XXX</b>		<b>XXX</b>
<b>9799998. Total - Common Stocks - Part 5</b>						<b>XXX</b>	<b>XXX</b>	<b>XXX</b>	<b>XXX</b>
<b>9799999. Total - Common Stocks</b>						<b>84,956</b>	<b>XXX</b>		<b>XXX</b>
<b>9899999. Total - Preferred and Common Stocks</b>						<b>84,956</b>	<b>XXX</b>		<b>XXX</b>
<b>9999999 - Totals</b>						<b>2,106,546</b>	<b>XXX</b>	<b>2,495</b>	<b>XXX</b>

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues .....

STATEMENT AS OF MARCH 31, 2015 OF THE Ohio Mutual Insurance Company

**SCHEDULE D - PART 4**

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

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/(Decrease)	Current Year's (Amortization)/Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in Book/Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation or Market Indicator (a)
3620AU-TE-4	GOVERNMENT NATL MTG ASSOC #740449		03/01/2015	PAYDOWN		1,653	1,653	1,719	1,653						1,653				11	11/15/2040	IFE
3620AW-TA-8	GOVERNMENT NATL MTG ASSOC #742245		03/01/2015	PAYDOWN		1,870	1,870	1,871	1,870						1,870				13	01/15/2041	IFE
3620C6-YU-3	GOVERNMENT NATL MTG ASSOC #750523		03/01/2015	PAYDOWN		6,269	6,269	6,522	6,270		(2)		(2)		6,269				59	11/15/2040	IFE
38373Q-GX-3	GOVERNMENT NATIONAL MORTGAGE A 03-34 PM		03/01/2015	PAYDOWN		3,465	3,465	3,576	3,467		(2)		(2)		3,465				20	04/20/2033	IFE
38373V-7A-2	GOVERNMENT NATL MTG ASSOC 02 75 LA		03/01/2015	PAYDOWN		3,906	3,906	4,038	3,910		(4)		(4)		3,906				29	10/20/2032	IFE
38374T-LA-0	GOVERNMENT NATIONAL MORTGAGE A 09-15 NK		03/01/2015	PAYDOWN		2,769	2,769	2,845	2,772		(3)		(3)		2,769				20	12/20/2038	IFE
38376F-LH-3	GOVERNMENT NATIONAL MORTGAGE A 09-66 EJ		03/01/2015	PAYDOWN		3,217	3,217	3,355	3,220		(3)		(3)		3,217				20	07/16/2039	IFE
38376G-DN-7	GOVERNMENT NATIONAL MORTGAGE A 10-18 C		03/01/2015	PAYDOWN		995	995	1,044	996						995				5	03/16/2051	IFE
38376T-BF-8	GOVERNMENT NATIONAL MORTGAGE A 10-12 DA		03/01/2015	PAYDOWN		4,371	4,371	4,522	4,375		(4)		(4)		4,371				32	01/16/2040	IFE
38377V-2M-7	GOVERNMENT NATIONAL MORTGAGE A 11-71 OE		03/01/2015	PAYDOWN		13,353	13,353	13,978	13,366		(15)		(15)		13,353				82	09/16/2040	IFE
<b>0599999. Subtotal - Bonds - U.S. Governments</b>						41,868	41,868	43,470	41,901		(33)		(33)		41,868				291	XXX	XXX
341426-05-6	FLORIDA ST BRD OF EDU		01/01/2015	PREREFUNDED		10,100	10,000	11,175	10,000						10,100				250	01/01/2016	IFE
341426-07-2	FLORIDA ST BRD OF EDU		01/01/2015	PREREFUNDED		242,400	240,000	268,198	240,000		2,400		2,400		242,400				6,000	01/01/2016	IFE
<b>1799999. Subtotal - Bonds - U.S. States, Territories and Possessions</b>						252,500	250,000	279,373	250,000		2,500		2,500		252,500				6,250	XXX	XXX
313033-CB-1	CALIFORNIA ST HSG FIN AGY RSDL		03/01/2015	SINK FUND PAYMENT		5,593	5,593	5,572	5,593						5,593				26	02/01/2042	IFE
3128LY-C3-2	FEDERAL HOME LOAN MTG CORP #G01890		03/01/2015	PAYDOWN		7,928	7,928	8,306	7,935		(8)		(8)		7,928				61	10/01/2035	IFE
3128MJ-RJ-1	FEDERAL HOME LOAN MTG CORP #G08488		03/01/2015	PAYDOWN		11,271	11,271	11,521	11,273		(2)		(2)		11,271				68	04/01/2042	IFE
3128MI-AS-2	FEDERAL HOME LOAN MTG CORP #G18016		03/01/2015	PAYDOWN		2,941	2,941	2,998	2,942		(1)		(1)		2,941				22	10/01/2019	IFE
3128MI-LD-3	FEDERAL HOME LOAN MTG CORP #G18323		03/01/2015	PAYDOWN		3,803	3,803	3,915	3,805		(2)		(2)		3,803				30	09/01/2024	IFE
31292S-AN-0	FEDERAL HOME LN MTG CORP #C09013		03/01/2015	PAYDOWN		23,472	23,472	24,521	23,482		(10)		(10)		23,472				118	09/01/2042	IFE
31294K-YB-5	FEDERAL HOME LOAN MTG CORP #E01606		03/01/2015	PAYDOWN		6,631	6,631	6,737	6,633		(2)		(2)		6,631				47	04/01/2019	IFE
31306X-2A-0	FEDERAL HOME LN MTG CORP #J20769		03/01/2015	PAYDOWN		53,071	53,071	55,674	53,113		(43)		(43)		53,071				241	10/01/2027	IFE
3132GS-GM-5	FEDERAL HOME LOAN MTG CORP #007104		03/01/2015	PAYDOWN		34,932	34,932	35,707	34,949		(17)		(17)		34,932				268	04/01/2042	IFE
3132GS-K8-1	FEDERAL HOME LOAN MTG CORP #007219		03/01/2015	PAYDOWN		9,109	9,109	9,311	9,109		(1)		(1)		9,109				71	04/01/2042	IFE
3132MA-NN-7	FEDERAL HOME LN MTG CORP #029697		03/01/2015	PAYDOWN		4,455	4,455	4,628	4,456		(1)		(1)		4,455				25	11/01/2044	IFE
3132QL-6N-8	FEDERAL HOME LN MTG CORP #Q30876		03/01/2015	PAYDOWN		1,671	1,671	1,756	1,671						1,671				7	01/01/2045	IFE
3136A7-GW-6	FANNIE MAE 12-67 KA		03/01/2015	PAYDOWN		8,582	8,582	9,038	8,590		(8)		(8)		8,582				50	05/25/2041	IFE
3136AD-EF-2	FANNIE MAE 13-36 AG		03/01/2015	PAYDOWN		3,617	3,617	3,692	3,618		(1)		(1)		3,617				19	12/25/2036	IFE
3136AJ-BB-7	FANNIE MAE 14-27 NV		03/01/2015	PAYDOWN		3,999	3,999	4,136	4,001		(2)		(2)		3,999				20	06/25/2027	IFE
3136AK-DG-5	FANNIE MAE 14-36 QB		03/01/2015	PAYDOWN		6,803	6,803	6,961	6,805		(3)		(3)		6,803				37	09/25/2033	IFE
3136AK-P4-9	FANNIE MAE 14-54 PN		03/01/2015	PAYDOWN		6,530	6,530	6,802	6,535		(4)		(4)		6,530				38	08/25/2043	IFE
3136AL-NX-6	FANNIE MAE 14-73 PJ		03/01/2015	PAYDOWN		8,834	8,834	9,125	8,839		(5)		(5)		8,834				44	12/25/2043	IFE
31376K-GX-8	FEDERAL NATIONAL MTG ASSOC #357614		03/01/2015	PAYDOWN		4,073	4,073	4,149	4,075		(2)		(2)		4,073				37	09/01/2019	IFE
31376K-LZ-7	FEDERAL NATIONAL MTG ASSOC #357744		03/01/2015	PAYDOWN		5,058	5,058	4,991	5,056		1		1		5,058				35	04/01/2020	IFE
313769-BZ-7	FHLMC MULTIFAMILY STRUCTURED P -KF03 A		03/25/2015	PAYDOWN		15,588	15,588	15,588	15,588						15,588				11	01/25/2021	IFE
31378C-R6-7	FREDDIE MAC -4374 CE		03/01/2015	PAYDOWN		7,626	7,626	7,971	7,632		(5)		(5)		7,626				44	12/15/2043	IFE
31378D-ZX-7	FHR 4387 KG		03/01/2015	PAYDOWN		40,878	40,878	43,165	40,998		(120)		(120)		40,878				348	02/15/2039	IFE
3138EN-2N-8	FEDERAL NATIONAL MTG ASSOC #AL6180		03/01/2015	PAYDOWN		5,260	5,260	5,647	5,266		(5)		(5)		5,260				35	12/01/2044	IFE
3138M9-PE-5	FEDERAL NATIONAL MTG ASSOC #AP5820		03/01/2015	PAYDOWN		2,794	2,794	2,942	2,795		(1)		(1)		2,794				16	11/01/2042	IFE
3138W1-GD-3	FEDERAL NATIONAL MTG ASSOC #AR3795		03/01/2015	PAYDOWN		2,961	2,961	3,049	2,962						2,961				15	02/01/2043	IFE
3138W4-M2-4	FEDERAL NATIONAL MTG ASSOC #AR6676		03/01/2015	PAYDOWN		7,591	7,591	7,871	7,592		(2)		(2)		7,591				38	02/01/2043	IFE
31393C-SR-0	FANNIE MAE 03-66 MB		03/01/2015	PAYDOWN		2,975	2,975	3,043	2,977		(3)		(3)		2,975				17	05/25/2023	IFE
31393R-TE-0	FREDDIE MAC -2631 DA		03/01/2015	PAYDOWN		2,667	2,667	2,644	2,667		1		1		2,667				16	06/15/2033	IFE
31394B-VF-8	FANNIE MAE 04-90 GA		03/01/2015	PAYDOWN		3,150	3,150	3,258	3,154		(4)		(4)		3,150				23	03/25/2034	IFE
31394R-Y6-0	FREDDIE MAC -2761 QB		03/01/2015	PAYDOWN		4,136	4,136	4,234	4,139		(3)		(3)		4,136				28	12/15/2033	IFE
31396Y-SH-6	FANNIE MAE 08-17 DP		03/01/2015	PAYDOWN		3,402	3,402	3,554	3,405		(3)		(3)		3,402				26	02/25/2038	IFE
31398C-D4-7	FREDDIE MAC -3527 DA		03/01/2015	PAYDOWN		2,202	2,202	2,284	2,204		(2)		(2)		2,202				13	04/15/2029	IFE
31398J-AX-1	FREDDIE MAC -3558 JA		03/01/2015	PAYDOWN		2,912	2,912	2,985	2,915		(3)		(3)		2,912				18	12/15/2023	IFE
31398M-FS-0	FNR 2010-17 CA		03/01/2015	PAYDOWN		3,697	3,697	3,843	3,705		(8)		(8)		3,697				24	11/25/2023	IFE
31398M-O9-0	FANNIE MAE 10-36 CA		03/01/2015	PAYDOWN		4,324	4,324	4,428	4,328		(4)		(4)		4,324				28	02/25/2028	IFE
31398P-RF-8	FANNIE MAE 10-40 DM		03/01/2015	PAYDOWN		4,673	4,673	4,776	4,677		(4)		(4)		4,673				30	03/25/2028	IFE
31398S-CH-4	FANNIE MAE 10-122 AC		03/01/2015	PAYDOWN		6,407	6,407	6,706	6,412		(6)		(6)		6,407				37	08/25/2028	IFE
31398V-XU-5	FHR-3653 EL		03/01/2015	PAYDOWN		2,958	2,958	3,021	2,961		(3)		(3)		2,958				18	07/15/2024	IFE
31398V-YJ-9	FHR-3653 KN		03/01/2015	PAYDOWN		4,268	4,268	4,381	4,273		(5)		(5)		4,268				29	08/15/2038	IFE
31402C-V7-4	FEDERAL NATIONAL MTG ASSOC #725238		03/01/2015	PAYDOWN		2,833	2,833	2,654	2,830		3		3		2,833				23	03/01/2034	IFE
31402W-VS-4	FEDERAL NATIONAL MTG ASSOC #740525		03/01/2015	PAYDOWN		3,367	3,367	3,443	3,368		(1)		(1)		3,367				28	10/01/2018	IFE
31417S-AP-5	FEDERAL NATIONAL MTG ASSOC #AC5413		03/01/2015	PAYDOWN		10,718	10,718	11,095	10,725												

STATEMENT AS OF MARCH 31, 2015 OF THE Ohio Mutual Insurance Company

**SCHEDULE D - PART 4**

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

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21	22	
										11	12	13	14	15								
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase/(Decrease)	Current Year's (Amortization)/Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in Book/Adjusted Carrying Value (11 + 12 - 13)	Total Foreign Exchange Change in Book /Adjusted Carrying Value	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation or Market Indicator (a)	
31418N-QV-5	FEDERAL NATIONAL MTG ASSOC #AD1367		03/01/2015	PAYDOWN		7,780	7,780	8,118	7,786		(6)		(6)		7,780				58	03/01/2025	1FE	
31418P-6M-2	FEDERAL NATIONAL MTG ASSOC #AD2675		03/01/2015	PAYDOWN		57,155	57,155	59,637	57,198		(43)		(43)		57,155				427	03/01/2025	1FE	
31418P-K7-9	FEDERAL NATIONAL MTG ASSOC #AD2117		03/01/2015	PAYDOWN		7,827	7,827	8,166	7,830		(3)		(3)		7,827				39	03/01/2025	1FE	
60416Q-GB-4	MINNESOTA ST HSG FIN AGY HOME		03/01/2015	SINK FUND PAYMENT		1,074	1,074	1,074	1,074						1,075				5	11/01/2044	1FE	
613349-2F-5	MONTGOMERY CNTY MD HSG OPPORTU		02/17/2015	SINK FUND PAYMENT		25,000	25,000	26,864	25,014		(12)		(12)		25,000				515	01/01/2031	1FE	
682001-BA-9	OMAHA NE PUBLIC PIIR DIST		02/01/2015	PREREFUNDED SECURITY CALLED BY ISSUER at 100.000		163,000	163,000	174,142	163,129		(128)		(128)		163,000				4,075	02/01/2018	1FE	
682001-BG-6	OMAHA NE PUBLIC PIIR DIST		02/01/2015	ISSUER at 100.000		87,000	87,000	92,946	87,069		(68)		(68)		87,000				2,175	02/01/2018	1FE	
3199999	Subtotal - Bonds - U.S. Special Revenues					708,596	708,596	743,069	707,482		(558)		(558)		708,596				9,503	XXX	XXX	
05947U-M2-1	BANC OF AMERICA COMM MTG 05 2 A5		02/01/2015	PAYDOWN		130,587	130,587	128,128	130,363		224		224		130,587				962	07/10/2043	1FM	
07388N-AE-6	BEAR STEARNS COMMERCIAL MORTGA 06-T24 A4		03/01/2015	PAYDOWN		1,112	1,112	1,220	1,116		(4)		(4)		1,112				11	10/12/2041	1FM	
12513X-AE-2	CITIGROUP/DEUTSCHE BK COMM MTG 06 CD2 A4		03/01/2015	PAYDOWN		9,030	9,030	8,774	9,027		4		4		9,030				78	01/15/2046	1FM	
191216-AM-2	COCA-COLA CO		03/30/2015	ISSUER at 112.795		281,987	250,000	251,330	250,659		(35)		(35)		250,624		31,363	31,363	6,602	03/15/2019	1FE	
466157-AC-8	JG WENTWORTH REC V LLC 01 AA A2		03/15/2015	PAYDOWN		8,483	8,483	8,464	8,461		21		21		8,482				87	08/15/2026	1FE	
79548K-UV-8	SALOMON BROS MTG SECS VII 97 HUD1 B3		03/01/2015	PAYDOWN		1,392	1,392												18	12/25/2030	1FM	
3899999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					431,199	400,604	397,916	399,626		210		210		399,835		31,363	31,363	7,758	XXX	XXX	
8399997	Total - Bonds - Part 4					1,434,163	1,401,068	1,463,828	1,399,009		2,119		2,119		1,402,799		31,363	31,363	23,802	XXX	XXX	
8399998	Total - Bonds - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8399999	Total - Bonds					1,434,163	1,401,068	1,463,828	1,399,009		2,119		2,119		1,402,799		31,363	31,363	23,802	XXX	XXX	
8999997	Total - Preferred Stocks - Part 4						XXX													XXX	XXX	
8999998	Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
8999999	Total - Preferred Stocks						XXX													XXX	XXX	
125896-10-0	OMIS ENERGY CORP		03/25/2015	CLSA CALYON SECURITIES		2,300,000	79,612	53,585	79,925	(26,340)			(26,340)		53,585		26,027	26,027	667			
458140-10-0	INTEL CORP		03/25/2015	CLSA CALYON SECURITIES		1,400,000	41,890	29,383	50,807	(21,424)			(21,424)		29,383		12,509	12,509	336			
69007J-10-6	OUTFRONT MEDIA INC		01/06/2015	CASH IN LIEU FRACTIONAL SHARES		0.871	23	23	23						23							
9099999	Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated)					121,525	XXX	82,991	130,755	(47,764)			(47,764)		82,991		38,536	38,536	1,003	XXX	XXX	
9799997	Total - Common Stocks - Part 4					121,525	XXX	82,991	130,755	(47,764)			(47,764)		82,991		38,536	38,536	1,003	XXX	XXX	
9799998	Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
9799999	Total - Common Stocks					121,525	XXX	82,991	130,755	(47,764)			(47,764)		82,991		38,536	38,536	1,003	XXX	XXX	
9899999	Total - Preferred and Common Stocks					121,525	XXX	82,991	130,755	(47,764)			(47,764)		82,991		38,536	38,536	1,003	XXX	XXX	
9999999	Totals					1,555,688	XXX	1,546,819	1,529,764	(47,764)	2,119		(45,645)		1,485,790		69,899	69,899	24,805	XXX	XXX	

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues.....

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

**N O N E**

Schedule DB - Part B - Section 1 - Futures Contracts Open

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

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

**N O N E**

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

**N O N E**

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

**N O N E**



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

**N O N E**