

ANNUAL STATEMENT

For the Year Ended

December 31, 2015

OF THE CONDITION AND AFFAIRS OF THE

SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION

ORGANIZED UNDER THE LAWS OF THE STATE OF OHIO

Made to the

INSURANCE COMMISSIONER OF THE STATE OF OHIO

Pursuant to the Laws thereof

NAIC Company Code	10272		
Home Office	13439 WOODWORTH RD	NEW SPRINGFIELD 44443	OH
	Street and Number	City	Zip Code
Mail Address	13439 WOODWORTH RD	NEW SPRINGFIELD 44443	OH
	Street and Number	City	Zip Code
Main Administrative Office	330-549-2880		
	Telephone Number		
Organized	JANUARY 1, 1892	Commenced Business	SEPTEMBER 1, 1852
Annual Statement Contact Person	MARLENE WENTZ	Telephone Number	330-549-2880
Contact Person Email Address	mwentz@zoominternet.net		

OFFICERS

President	J DANIEL SIMON	Vice President	LEE F KOHLER
Secretary	MARLENE M WENTZ	Treasurer	MARLENE M WENTZ

DIRECTORS

(ALL DIRECTORS MUST BE SHOWN)

J DANIEL SIMON	LEE F KOHLER	DONALD H SNYDER JR	JACK G MASSENGILL
MARLENE M WENTZ			

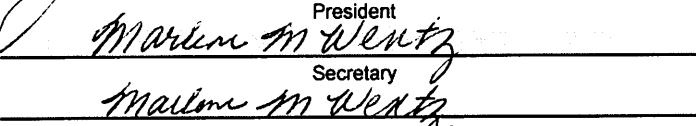
State of Ohio
County of
MAHONING

J DANIEL SIMON President and MARLENE M WENTZ Secretary of the
SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION, being duly sworn each for himself/herself deposes and says, that they are the
above described officers of said reporting entity, and that on the reporting period stated above all the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or
claims thereon, except as herein stated, and that this statement, with the schedules and explanations herein contained, annexed or referred to, is a full and correct statement of all the assets and liabilities and of the
condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, according to the best of their information, knowledge and belief,
respectively.

Subscribed and sworn to before me, this 5

day of February 20 16


Brenda L. Folkenroth
Notary Public, State of Ohio
My commission expires 6/9/20


Daniel Simon
President

Marlene M. Wentz
Secretary
Signature of Person Preparing Statement

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

2015

ASSETS

		Assets Current Year	Nonadmitted Assets Current Year	Net Admitted Assets Current Year	Net Admitted Assets Prior Year
1	Bonds (Schedule D - Part 1)	0.00	0.00	0.00	
2	Preferred stocks, common stocks and mutual funds (Schedule D - Part 2)	221,027.35	0.00	221,027.35	211,073.74
3	Real estate (less liens, encumbrances) (Schedule A)	83,157.37	0.00	83,157.37	92,881.37
4	Cash (Schedule E)	2,487,469.98	0.00	2,487,469.98	2,266,232.20
5	Short-term investments		0.00	0.00	
6	Aggregate write-ins for invested assets		0.00	0.00	
7	Subtotals, cash and invested assets	2,791,654.70	0.00	2,791,654.70	2,570,187.31
8	Investment income due and accrued	3,947.51	0.00	3,947.51	6,130.30
9.1	Assessments or premiums in the course of collection (including agents balances)		0.00	0.00	
9.2	Deferred premiums, agents' balances and installments booked but deferred and not yet due		0.00	0.00	
9.3	Earned but unbilled premiums (post assessment)		0.00	0.00	
10.1	Amounts recoverable from reinsurers	46,156.00	0.00	46,156.00	52,975.00
10.2	Funds held by or deposited with reinsured companies		0.00	0.00	
11.1	Current federal income tax recoverable and interest thereon		0.00	0.00	
11.2	Net deferred tax asset		0.00	0.00	
12	Electronic data processing equipment and software		0.00	0.00	
13	Furniture and equipment		0.00	0.00	
14	Receivables from parent, subsidiaries and affiliates		0.00	0.00	
15	Aggregate write-ins for other than invested assets	0.00	0.00	0.00	0.00
16	Total Assets	2,841,758.21	0.00	2,841,758.21	2,629,292.61
	Details of Write-Ins for Assets:				
1501				0.00	
1502				0.00	
1503				0.00	
1598	Summary or remaining write-ins from overflow page	0.00	0.00	0.00	0.00
1599	Total aggregate write-ins	0.00	0.00	0.00	0.00

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

2015

LIABILITIES, SURPLUS AND OTHER FUNDS

		Current Year	Prior Year
1	Unpaid Losses (Underwriting Exhibit - Part 2A)	29,507.00	47,133.00
2	Unpaid loss adjustment expenses (Underwriting Exhibit - Part 2A)	2,000.00	2,500.00
3	Commissions due and payable to agents	25,129.86	26,210.67
4	Other expenses (excluding taxes, licenses and fees)	1,963.94	2,051.42
5	Taxes, licenses and fees (excluding federal income taxes)	991.46	871.43
6	Current federal income taxes (including \$0 on realized capital gains (losses))	40,000.00	194.00
7	Net deferred tax liability		
8	Borrowed money and interest thereon		
9	Unearned assessment/premium reserve	659,522.75	645,522.75
10	Advance premium		
11	Ceded reinsurance premiums payable	63,497.00	61,963.00
12	Funds held by company under reinsurance treaties		
13	Amounts withheld or retained by company for account of others		
14	Provision for unauthorized reinsurance		
15	Payable to parent, subsidiaries and affiliates		
16	Aggregate write-ins for liabilities	0.00	0.00
17	Total liabilities	822,612.01	786,446.27
18	Surplus as regards policyholders	2,019,146.20	1,842,846.34
19	Total liabilities and surplus	2,841,758.21	2,629,292.61
	Details of Write-Ins for Liabilities:		
1601			
1602			
1603			
1698	Summary or remaining write-ins from overflow page	0.00	0.00
1699	Total aggregate write-ins	0.00	0.00

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

2015

		Current Year	Prior Year
UNDERWRITING INCOME			
1.1	Gross Assessments/Premiums earned	2,202,760.00	2,135,692.61
1.2	Less: Return Assessments/Premiums earned	32,596.60	38,588.50
1.3	Direct Assessments/Premiums earned	2,170,163.40	2,097,104.11
1.4	Deduct premiums for reinsurance ceded (Reinsurance Schedule)	1,222,165.42	1,172,161.68
1.5	Add premiums received for reinsurance assumed (Reinsurance Schedule)	0.00	
1.6	Net Assessments/Premiums earned	947,997.98	924,942.43
DEDUCTIONS			
2	Losses incurred (Underwriting Exhibit - Part 2)	350,984.56	314,866.48
3	Loss expenses incurred (Expense Exhibit)	55,485.84	69,930.22
4	Other underwriting expenses incurred (Expense Exhibit)	666,021.12	716,069.19
5	Aggregate write-ins for underwriting deductions	0.00	0.00
6	Total underwriting deductions	1,072,491.52	1,100,865.89
7	Net underwriting gain (loss)	-124,493.54	-175,923.46
INVESTMENT INCOME			
8	Net investment income earned	22,480.00	21,548.17
9	Net realized capital gains (losses) less capital gains tax	0.00	
10	Net investment gain (loss)	22,480.00	21,548.17
OTHER INCOME			
11	Net gain (loss) from agents' or premium balances charged off	0.00	
12	Finance and service charges not included in premiums	38,294.72	36,759.90
13	Aggregate write-ins for miscellaneous income	283,939.07	244,688.52
14	Total other income	322,233.79	281,448.42
15	Net income, after capital gains tax and before federal income taxes	220,220.25	127,073.13
16	Federal income taxes incurred	53,874.00	103,299.00
17	Net income	166,346.25	23,774.13
SURPLUS ACCOUNT			
18	Surplus as regards policyholders, December 31 prior year	1,842,846.34	1,797,693.16
19	Net income	166,346.25	23,774.13
20	Change in net unrealized capital gains or (losses) less capital gains tax	9,953.61	21,379.05
21	Change in net deferred income tax	0.00	
22	Change in nonadmitted assets (Exhibit of Nonadmitted Assets)	0.00	
23	Change in provision for reinsurance	0.00	
24	Aggregate write-ins for gains and losses in surplus	0.00	0.00
25	Change in surplus as regards policyholders for the year	176,299.86	45,153.18
26	Surplus as regards policyholders, December 31 current year	2,019,146.20	1,842,846.34
DETAILS OF WRITE-INS			
0501		0.00	
0502		0.00	
0503		0.00	
0599	Total Aggregate write-ins for underwriting deductions	0.00	0.00
1301	misc income	68,628.12	64,992.29
1302	mine sub;uo payments	12,393.99	4,156.79
1303	reins commission	211,824.75	203,685.25
1304	accrued income	-8,907.79	-28,145.81
1399	Total Aggregate write-ins for miscellaneous income	283,939.07	244,688.52
2401		0.00	
2402		0.00	
2499	Total Aggregate write-ins for gains and losses in surplus	0.00	0.00

ANNUAL STATEMENT FOR THE YEAR

2015

SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION

CASH FLOW STATEMENT

		Current Year	Prior Year
Cash from Operations			
1	Premiums/Assessments collected net of reinsurance	1,192,419.33	1,167,216.18
2	Net investment income	22,480.00	21,548.17
3	Miscellaneous income	72,248.75	69,221.86
4	Total	1,287,148.08	1,257,986.21
5	Benefit and loss related payments	406,470.40	384,796.70
6	Commissions, expenses paid and aggregate write-ins for deductions	675,878.70	699,577.71
7	Federal and foreign income taxes paid (recovered)	53,874.00	103,299.00
8	Total	1,136,223.10	1,187,673.41
9	Net cash from operations	150,924.98	70,312.80
Cash from Investments			
10	Proceeds from investments sold, matured or repaid:		
10.1	Bonds		
10.2	Stocks		
10.3	Real estate		
10.4	Net gains (losses) on cash, cash equivalents and short- term investments		
10.5	Miscellaneous proceeds		
10.6	Total investment proceeds	0.00	0.00
11	Cost of investments acquired (long-term only):		
11.1	Bonds		
11.2	Stocks		
11.3	Real estate		
11.4	Miscellaneous applications		
11.5	Total investments acquired	0.00	0.00
11.6	Net cash from investments	0.00	0.00
Cash from Financing and Miscellaneous Sources			
12.1	Borrowed funds (cash provided/applied)		
12.2	Other cash provided (applied)		
13	Net cash from financing and miscellaneous sources	0.00	0.00
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT- TERM INVESTMENTS			
14	Net change in cash, cash equivalents and short-term investments	150,924.98	70,312.80
15.1	Beginning of year (cash, cash equivalents and short-term investments)	2,336,545.00	2,266,232.20
15.2	End of year (cash, cash equivalents and short-term investments)	2,487,469.98	2,336,545.00

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

2015

EXPENSE EXHIBIT

		Current Year
	Claim Adjusting:	
1.1	Direct	0.00
1.2	Reinsurance assumed	0.00
1.3	Reinsurance ceded excluding contingent (commission and brokerage)	0.00
1.4	Net claim adjusting	0.00
	Commission and Brokerage:	
2.1	Direct commission and brokerage	347,946.82
2.2	Reinsurance assumed excluding contingent	0.00
2.3	Reinsurance ceded excluding contingent (commission and brokerage)	0.00
2.4	Contingent - direct (commission and brokerage)	0.00
2.5	Contingent - reinsurance assumed (commission and brokerage)	0.00
2.6	Contingent - reinsurance ceded (commission and brokerage)	0.00
2.7	Policy and membership fees (commission and brokerage)	
2.8	Net commission and brokerage	347,946.82
3	Allowances to managers and agents	0.00
4	Advertising	1,731.21
5	Boards, bureaus and associations	751.72
6	Surveys and underwriting reports	0.00
7	Audit of assureds' records	0.00
	Salary and related items:	
8.1	Salaries	137,820.18
8.2	Payroll taxes	11,149.65
9	Employee relations and welfare	0.00
10	Insurance	0.00
11	Directors' fees	27,000.00
12	Travel and travel items	1,543.30
13	Rent and rent items	0.00
14	Equipment	0.00
15	Cost or depreciation of EDP equipment and software	8,042.81
16	Printing and stationery	11,140.63
17	Postage, telephone, exchange and express	13,706.20
18	Legal and auditing	4,760.44
19	Loss adjustment expenses	55,485.84
18	Investment expenses	0.00
19	Totals	273,131.98
	Taxes, licenses and fees:	
20.1	State and local insurance taxes	250.00
20.2	Insurance department licenses and fees	4,326.00
20.3	All other (excluding federal income and real estate)	0.00
20.4	Total taxes, licenses and fees	4,576.00
21	Real estate expenses	3,963.00
22	Real estate taxes	2,889.02
23	Aggregate write-ins for miscellaneous expenses	89,000.14
24	Total expenses incurred (a)	721,506.96
25	Less unpaid expenses - current year	0.00
26	Add unpaid expenses - prior year	0.00
27	Total expenses paid	721,506.96
	Details of Write-Ins:	
2301	utilities,security,trash,clean serv,lawnserv	11,719.79
2302	E&O, dues/fees,bond,edu	14,257.85
2303	bk fee,reliafund,dep exp,loss corr	26,856.76
2304	accrued expense	36,165.74
2305		
2399	Total Write-ins	89,000.14

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

ANNUAL STATEMENT FOR THE YEAR 2015
SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION

INSURANCE IN FORCE

		Amount (dollars)	Number
1	In force December 31 of previous year (to equal prior year's statement)	338,059,371	3,880
2	Written during the year	58,508,675	603
3	Total	396,568,046	4,483
4	Deduct those expired and cancelled	59,824,375	696
5	In force December 31 of current year	336,743,671	3,787
6	Deduct amount reinsured	198,758,844	XXX
7	Net amount in force	137,984,827	XXX

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

2015

**UNDERWRITING EXHIBIT - PART 2
LOSSES INCURRED**

1 Lines of Business	2 Direct Losses Incurred	3 Losses Incurred on Reinsurance Assumed	4 Deduct: Reinsurance Recovered on Incurred Losses	5 Deduct: Salvage and Subrogation Converted To Cash	6 * Net Losses Incurred Columns 2 and 3 minus Columns 4 and 5
PHYSICAL DAMAGE TO PROPERTY	691,586.48		340,601.92		350,984.56
OVERFLOW AMOUNTS					-
Totals	\$ 691,586.48	\$ -	\$ 340,601.92	\$ -	\$ 350,984.56

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

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

1 Lines of Business	2 Direct Unpaid Losses	3 Unpaid Losses on Reinsurance Assumed	4 Deduct: Reinsurance Recoverable on Unpaid Losses	5 ** Unpaid Loss Adjustment Expenses	6 *** Net Unpaid Losses Columns 2 and 3 minus Column 4
PHYSICAL DAMAGE TO PROPERTY	55,663.00		46,156.00	2,000.00	9,507.00
IBNR	20,000.00				20,000.00
OVERFLOW AMOUNTS					-
Totals	\$ 75,663.00	\$ -	\$ 46,156.00	\$ 2,000.00	\$ 29,507.00

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

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

SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION

EXHIBIT OF NONADMITTED ASSETS

		Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets
1	Bonds			0.00
2	Preferred and common stocks and mutual funds			0.00
3	Real estate (less liens, encumbrances)			0.00
4	Cash			0.00
5	Short-term investments			0.00
6	Aggregate write-ins for invested assets			0.00
7	Subtotals, cash and invested assets	0.00	0.00	0.00
8	Investment income due and accrued			0.00
9.1	Assessments or premiums in the course of collection (including agents balances)			0.00
9.2	Premium receivable for advance pay			0.00
9.3	Earned but unbilled premiums (post assessment)			0.00
10.1	Amounts recoverable from reinsurers			0.00
10.2	Funds held by or deposited with reinsured companies			0.00
11.1	Current federal income tax recoverable and interest thereon			0.00
11.2	Net deferred tax asset			0.00
12	Electronic data processing equipment and software			0.00
13	Furniture and equipment			0.00
14	Receivables from parent, subsidiaries and affiliates			0.00
15	Aggregate write-ins for other than invested assets	0.00	0.00	0.00
16	Total Assets	0.00	0.00	0.00
	Details of Write-Ins for Assets:			
1501		0.00	0.00	0.00
1502		0.00	0.00	0.00
1503		0.00	0.00	0.00
1598	Summary or remaining write-ins from overflow page	0.00	0.00	0.00
1599	Total aggregate write-ins	0.00	0.00	0.00

SCHEDULE A

Showing All Real Estate OWNED December 31 of Current Year

1 Description of Property	2 Date Acquired	3 Name of Vendor	4 Actual Cost	5 Current Year Acquisitions or Permanent Improvements	6 Accumulated Depreciation	7 Amount of Encumbrances	8 Book Value End of Current Year (Col. 4+5-6-7) *	9 Gross Income Current Year (Real Estate)	10 Gross Expenses Current Year (Real Estate)
HOME OFFICE	2/1/1991	SPRINGFIELD TWP MUT	311,263.37		228,106.00		83,157.37		2,111.00
							-		
							-		
							-		
OVERFLOW AMOUNTS									
Totals	XXX	XXX	\$ 311,263.37	\$ -	\$ 228,106.00	\$ -	\$ 83,157.37	\$ -	\$ 2,111.00

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

FURNITURE, FIXTURES and AUTOMOBILES

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

1 Description	2 Date Acquired	3 Name of Vendor	4 Actual Cost	5 Current Year Acquisitions or Permanent Improvements	6 Accumulated Depreciation	7 Amount of Encumbrances	8 Book Value End of Current Year (Col. 4+5-6-7)
OFFICE EQUIPMENT	2/1/1999	SPRINGFIELD TWP MUT	25,736.23		25,736.23		-
							-
							-
							-
							-
							-
							-
							-
							-
OVERFLOW AMOUNTS							-
Totals	XXX	XXX	\$ 25,736.23	\$ -	\$ 25,736.23	\$ -	\$ -

SCHEDULE D - PART 1

Showing all BONDS Owned on December 31 of Current Year

* Annual Statement Value

SCHEDULE D - PART 2

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

1	2 Description	3	4	5	6	7	8 Rate Per Share Used To Obtain Market Value	9 Market Value/ Fair Value December 31 of Current Year	10	Dividends		13	14
										11 Received During Year	12 Dividends Amount Due and Accrued Dec. 31		
Cusip #	Give complete and accurate description of all stocks and mutual funds owned.	From Whom Acquired	Date Acquired	No. of Shares	Par Value Per Share (Preferred Stocks)	Book Value			Actual Cost			Increase, by Adjustment, in Book Value During Year	Decrease, by Adjustment in Book Value During Year
62989*105	NAMICO			60.00		17,287.14		288.12	3,000.00			705.90	
	SPRINGFIELD TWP MUTUAL INSURANCE AGENCY	SAME		100.00		203,740.21		203,740.21				9,247.71	
	OVERFLOW AMOUNTS FROM PAGE 19	XXX	XXX	XXX	XXX	XXX							
XXX	Totals	XXX	XXX	XXX	XXX	\$ 221,027.35	XXX	\$ 204,028.33	\$ 3,000.00	\$ -	\$ -	\$ -	\$ 9,953.61

SCHEDULE D - PART 3

Showing all Bonds and Preferred & Common Stocks ACQUIRED During the Current Year

Bonds, preferred stocks, common stocks and mutual funds to be grouped separately.

1 CUSIP #	2 Description Give complete and accurate description of each bond and stock. If bonds are serial issues give amounts maturing each year.	3 * Date Acquired	4 Name of Vendor	5 No. of Shares of Stock	6 Cost to Company (Excluding Accrued Interest on Bonds)	7 Par Value of Bonds	8 Paid for Accrued Interest and Dividends
	NONE						
** You can insert additional rows in yellow above if needed!							
XXX	Totals	XXX	XXX	XXX	\$ - - - -	\$ - - - -	\$ - - - -

*The items with reference to each issue of bonds or stocks acquired at public offerings may be totaled in one line and the word "various" inserted in Columns 2 and 3.

SCHEDULE D - PART 4

Showing all Bonds and Preferred & Common Stocks SOLD, REDEEMED OR Otherwise DISPOSED OF During the Current Year

Bonds, preferred stocks, common stocks and mutual funds to be grouped separately.

REINSURANCE SCHEDULE
Reinsurance Ceded and Reinsurance Assumed

1 Reinsurer or Reinsured	2 Ceded or Assumed	3 Location of Company	4 Total Amount Reinsured	5 Total Premiums Ceded *	6 Total Premiums Assumed **	7 Largest Risk Ceded or Assumed	8 Remarks
AM AG INS CO	4.75	ILLINOIS	9,441,045	58,052.88			
ALLIED WORLD INS CO	18	NEW YORK	35,778,592	219,989.78			
HANNOVER	7	NEW YORK	13,913,119	85,551.57			
TOE RE INS CO OF AM	15.5	DELAWARE	30,807,621	189,435.64			
TRANSALTANTIC RE	4.75	NEW YORK	9,441,045	58,052.88			
AM AG/BERKLEY INS CO	26	CT	51,677,300	317,763.00			
EMPLOYERS MUT	15.25	IOWA	30,310,723	188,380.23			
FARMERS MUT HAIL	8.75	IOWA	17,391,399	106,939.48			
OVERFLOW AMOUNTS							
Totals		XXX	XXX	\$ 198,758,844	\$ 1,222,165.42	\$ -	XXX

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

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

COMPENSATION SCHEDULE

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

1 Name of Payee	2 Title	3 Salaries	4 Commissions	5 Claim Adjustment Expenses	6 Directors Fees & Expenses	7 Travel & Travel Items	8 All Other	9 Total
Officers/Employees:								
1) J DANIEL SIMON	PRES/DIR/AGENT		18,432.33		6,300.00	438.35		\$ 25,170.68
2) LEE F KOHLER	VICE PRES/DIR				5,400.00			\$ 5,400.00
3) MARLENE M WENTZ	SECRETARY/TREAS/DIR	55,780.16			5,100.00	106.15		\$ 60,966.31
4) CHRISTINE A SEIFERT	ASST SEC/TREAS/JW	46,130.02				184.80		\$ 46,314.82
5) CASEY L HARTLEY	CSR	35,930.00						\$ 35,930.00
Directors:								\$ -
DONALD J SNYDER JR				5,100.00				\$ 5,100.00
JACK G MASSENGILL			16,508.02		5,100.00	814.00		\$ 22,420.02
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
Totals	XXXX	\$ 137,820.18	\$ 34,938.35	\$ -	\$ 27,000.00	\$ 1,543.30	\$ -	\$ 201,301.83

GENERAL INTERROGATORIES

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

1. Company's retention: Fire \$30,000 Wind \$30,000 Other \$30,000

1a. Retention before reinsurance applies for: Catastrophe Reinsurance \$30,000 Aggregate excess of loss

2. What is the largest risk assumed and retained: \$30,000

3. What kind of perils are being covered? FIRE & EXTENDED COVERAGE

4. Have the by-laws been amended during the current year? NO If so, were such amendments filed with the Ohio Department of Insurance?

5. In what counties does the Company operate: STATE OF OHIO

6. Name of Principal Officer and amount of bond. MARLENE M WENTZ \$100,000

7. Are all of the persons who handle funds of the Company bonded? Yes X No
State the name and amount of each bond on each, except person named in Item 6 above.
CASEY L HARTLEY \$100,000 CHRISTINE A SEIFERT \$100,000

8. Does the Company have an annual audit conducted by an independent CPA? No

9. State the number of members holding policies in the Company. 3787

10. Was an annual report of the Company made available to each policyholder? YES If so, did such report agree with the annual statement filed with the Ohio Department of Insurance? Yes

11. State as of what date the latest examination of the Company was made by the Ohio Department of Insurance. NOV 30 2011

12. How many assessments were made during the year? Date of last assessment MONTHLY BILL

13. Did the assessment provide for all losses, expenses and all other liabilities prior to the date of assessment? YES

14. Rate of policy fee 0

15. State the amount of borrowed money since date of last assessment 0 interest thereon 0

16. Does any person, firm, corporation or association have any claim, contingent or otherwise, against this Company which is NOT included in the liabilities on page 2 of this statement? Yes No X
If yes, give the amount, terms for payment and reasons why such were not recorded as a liability on page 2 of this statement.

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

2015

SCHEDULE E - CASH or CASH EQUIVALENTS

Showing All Balances (according to Company's Records) Carried in Each Bank or Savings and Loan

All Columns Must Be Completed for Each Deposit, CD, Checking Account, etc.

1 DEPOSITORY Give Full Name and Location	2 Interest Rate	3 Amount of Interest Received During Year	4 Amount of Interest Accrued Dec. 31 of Current Year	5 Book Balance Dec. 31 of Current Year *
OPEN DEPOSITORYES:				
#1072-HOME SAVINGS & LOAN-CLOSED	0.000%	55.40		0.00
#1077-KEY BANK	0.249%	250.03		100,000.00
#1012-HOME SAVINGS & LOAN MM	0.500%	307.91		200,497.09
#1014-CORTLAND BANK MM	0.650%	653.45	55.69	100,885.16
#1000-HUNTINGTON CHECKING ACCOUNT				564,703.37
STIFEL CD'S				
#1030-BARCLAYS BK DE	1.050%	31.41	11.04	6,000.00
#1040-DISCOVER BK	0.800%	536.00	161.54	67,000.00
#1044-CIT BANK	0.900%	1,062.00	136.75	118,000.00
#1047-IBERIABANK	1.000%	500.00	38.36	50,000.00
#1050-GOLDMAN SACHS BK	3.000%	3,120.00	906.08	104,000.00
#1051-ALLY BANK	1.050%	168.00	6.44	16,000.00
#1052-BARCLAYS BK	1.050%	924.09	36.68	85,000.00
#1053-MIDLAND STATES BK	0.850%	1,275.60	38.19	164,000.00
#1054-EVERBANK	0.450%		310.69	75,000.00
#1055-ALLY BANK	1.250%	270.96	173.77	43,000.00
#1056-DISCOVER	0.850%	434.69	201.91	102,000.00
#1057-GOLDMAN SACHS	0.350%		121.78	50,000.00
#1058-WELLS FARGO BK	1.500%	756.16	172.60	100,000.00
#1059-ALLY BANK	1.300%	586.60	22.44	89,910.00
#1060-COMPASS BK	1.500%		5.18	90,000.00
#1061-COMPASS BK	1.050%	676.85	29.59	90,000.00
#1062-GOLDMAN SACHS BK	1.000%	137.12	4.52	55,000.00
#1086-JP MORGAN CHASE	3.000%	1,560.00	538.52	52,000.00
#1088-SN MONEY MKT	0.900%	2.29		4,474.36
#1094-GE MONEY BK	2.600%	2,808.00	869.32	108,000.00
#1098-GOLDMAN SACHS	0.900%	468.00	106.42	52,000.00
#1031-GOLDMAN SACHS-CLOSED		1,419.00		
#1041-GOLDMAN SACHS-CLOSED		325.89		
#1042-DISCOVER-CLOSED		486.33		
#1043-COLE-CLOSED		1,537.53		
#1078-SYNCHRONY BK-CLOSED		812.27		
#1079-BARCLAYS-CLOSED		579.08		
#1083-ALLY BK-CLOSED		173.52		
#1095-GOLDMAN SACHS-CLOSED		124.66		
#1099-ALLY BANK		437.16		
OVERFLOW AMOUNTS	xxxx	0.00	0.00	0.00
Total	xxxx	\$ 22,480.00	\$ 3,947.51	\$ 2,487,469.98

*Total to agree with Page 2, Line 4, Current Year.

ANNUAL STATEMENT FOR THE YEAR
SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION

2015

ORGANIZATIONAL CHART

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

SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION
PARENT
OHIO CORPORATION - INSURER

SPRINGFIELD TOWNSHIP MUTUAL INSURANCE AGENCY
SUBSIDIARY
OHIO CORPORATION - NON-INSURER