



ANNUAL STATEMENT

For the Year Ended December 31, 2015
of the Condition and Affairs of the

WAYNE MUTUAL INSURANCE COMPANY

NAIC Group Code.....4678, 4678 (Current Period) (Prior Period)	NAIC Company Code..... 16799	Employer's ID Number..... 34-0606100
Organized under the Laws of OHIO	State of Domicile or Port of Entry OHIO	Country of Domicile US
Incorporated/Organized..... January 10, 1910	Commenced Business..... March 1, 1910	
Statutory Home Office	3873 CLEVELAND ROAD..... WOOSTER OH US 44691 (Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	3873 CLEVELAND ROAD..... WOOSTER OH US..... 44691 (Street and Number) (City or Town, State, Country and Zip Code)	330-345-8100 (Area Code) (Telephone Number)
Mail Address	3873 CLEVELAND ROAD..... WOOSTER OH US 44691 (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	3873 CLEVELAND ROAD..... WOOSTER OH US 44691 (Street and Number) (City or Town, State, Country and Zip Code)	330-345-8100 (Area Code) (Telephone Number)
Internet Web Site Address		
Statutory Statement Contact	TOD JAMES CARMONY (Name) TOD_CARMONY@WAYNEINSGROUP.COM (E-Mail Address)	330-345-8100-324 (Area Code) (Telephone Number) (Extension) 330-345-1321 (Fax Number)

OFFICERS

Name	Title	Name	Title
1. TOD JAMES CARMONY	PRESIDENT	2. DAVID EDWARD TSCHANTZ	TREASURER
3. MORRIS STUTZMAN	SECRETARY	4.	
OTHER			
TIMOTHY JOHN SUPPES	VICE PRESIDENT	DAVID EDWARD TSCHANTZ	VICE PRESIDENT
NORMAN HERBERT LEWIS	VICE PRESIDENT		

DIRECTORS OR TRUSTEES

SCOTT LEE PREISING	MORRIS STUTZMAN	GREGORY TODD BUEHLER	TOD JAMES CARMONY
DONALD ALVIN RAMSEYER	DAVID EDWARD TSCHANTZ		

State of..... OHIO
County of..... WAYNE

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.

(Signature) TOD JAMES CARMONY	(Signature) DAVID EDWARD TSCHANTZ	(Signature) MORRIS STUTZMAN
1. (Printed Name) PRESIDENT	2. (Printed Name) TREASURER	3. (Printed Name) SECRETARY
(Title)	(Title)	(Title)
Subscribed and sworn to before me	a. Is this an original filing?	Yes [X] No []
This _____ day of _____ 2016	b. If no	1. State the amendment number _____
		2. Date filed _____
		3. Number of pages attached _____

ASSETS

	Current Year			Prior Year
	1	2	3	4
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Net Admitted Assets
1. Bonds (Schedule D).....	37,965,665		37,965,665	32,211,541
2. Stocks (Schedule D):				
2.1 Preferred stocks.....	141,135		141,135	188,096
2.2 Common stocks.....	8,604,172	500	8,603,672	8,306,932
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....	26,566		26,566	36,330
3.2 Other than first liens.....			0	
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....	491,994		491,994	513,777
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$.....5,013,747, Schedule E-Part 1), cash equivalents (\$.....0, Schedule E-Part 2) and short-term investments (\$.....583,597, Schedule DA).....	5,597,344		5,597,344	5,091,164
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives (Schedule DB).....			0	
8. Other invested assets (Schedule BA).....			0	
9. Receivables for securities.....			0	
10. Securities lending reinvested collateral assets (Schedule DL).....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	52,826,876	500	52,826,376	46,347,840
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	294,791		294,791	243,208
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	505,527		505,527	454,968
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....	10,032,245		10,032,245	8,978,668
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	39,782		39,782	51,755
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	
18.2 Net deferred tax asset.....	1,124,717		1,124,717	817,126
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....	10,339		10,339	17,231
21. Furniture and equipment, including health care delivery assets (\$.....0).....	114,050	114,050	0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....	597,165		597,165	824,448
24. Health care (\$.....0) and other amounts receivable.....	4,584	4,584	0	
25. Aggregate write-ins for other than invested assets.....	500	0	500	500
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	65,550,576	119,134	65,431,442	57,735,744
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. TOTALS (Lines 26 and 27).....	65,550,576	119,134	65,431,442	57,735,744
DETAILS OF WRITE-INS				
1101.....			0	
1102.....			0	
1103.....			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. DEPOSIT-OTHERS.....	500		500	500
2502.....			0	
2503.....			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	500	0	500	500

WAYNE MUTUAL INSURANCE COMPANY

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8).....	7,558,965	7,533,390
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6).....		
3. Loss adjustment expenses (Part 2A, Line 35, Column 9).....	670,000	540,000
4. Commissions payable, contingent commissions and other similar charges.....	1,484,617	1,045,678
5. Other expenses (excluding taxes, licenses and fees).....	1,226,414	900,427
6. Taxes, licenses and fees (excluding federal and foreign income taxes).....	465,475	380,404
7.1 Current federal and foreign income taxes (including \$.....0 on realized capital gains (losses)).....	292,303	198,194
7.2 Net deferred tax liability.....		
8. Borrowed money \$.....0 and interest thereon \$.....0.....		
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$.....0 and including warranty reserves of \$.....0 and accrued accident and health experience rating refunds including \$.....0 for medical loss ratio rebate per the Public Health Service Act).....	21,220,014	19,273,000
10. Advance premium.....	112,277	126,497
11. Dividends declared and unpaid:		
11.1 Stockholders.....		
11.2 Policyholders.....		
12. Ceded reinsurance premiums payable (net of ceding commissions).....	202,278	156,423
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19).....	28,076	1,076
14. Amounts withheld or retained by company for account of others.....	(33,166)	(13,440)
15. Remittances and items not allocated.....		
16. Provision for reinsurance (including \$.....0 certified) (Schedule F, Part 8).....		
17. Net adjustments in assets and liabilities due to foreign exchange rates.....		
18. Drafts outstanding.....		
19. Payable to parent, subsidiaries and affiliates.....		
20. Derivatives.....		
21. Payable for securities.....		
22. Payable for securities lending.....		
23. Liability for amounts held under uninsured plans.....		
24. Capital notes \$.....0 and interest thereon \$.....0.....		
25. Aggregate write-ins for liabilities.....	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25).....	33,227,253	30,141,649
27. Protected cell liabilities.....		
28. Total liabilities (Lines 26 and 27).....	33,227,253	30,141,649
29. Aggregate write-ins for special surplus funds.....	0	0
30. Common capital stock.....		
31. Preferred capital stock.....		
32. Aggregate write-ins for other than special surplus funds.....	0	0
33. Surplus notes.....		
34. Gross paid in and contributed surplus.....		
35. Unassigned funds (surplus).....	32,204,189	27,594,095
36. Less treasury stock, at cost:		
36.1 .....0.000 shares common (value included in Line 30 \$.....0).....		
36.2 .....0.000 shares preferred (value included in Line 31 \$.....0).....		
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39).....	32,204,189	27,594,095
38. TOTALS (Page 2, Line 28, Col. 3).....	65,431,442	57,735,744

DETAILS OF WRITE-INS

2501.		
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0
2901.		
2902.		
2903.		
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0
3201.		
3202.		
3203.		
3298. Summary of remaining write-ins for Line 32 from overflow page.....	0	0
3299. Totals (Lines 3201 thru 3203 plus 3298) (Line 32 above).....	0	0

WAYNE MUTUAL INSURANCE COMPANY
STATEMENT OF INCOME

UNDERWRITING INCOME		1	2
		Current Year	Prior Year
1.	Premiums earned (Part 1, Line 35, Column 4).....	41,021,595	37,634,719
DEDUCTIONS			
2.	Losses incurred (Part 2, Line 35, Column 7).....	17,238,401	16,369,810
3.	Loss adjustment expenses incurred (Part 3, Line 25, Column 1).....	3,206,219	2,588,806
4.	Other underwriting expenses incurred (Part 3, Line 25, Column 2).....	14,634,582	12,748,317
5.	Aggregate write-ins for underwriting deductions.....	0	0
6.	Total underwriting deductions (Lines 2 through 5).....	35,079,202	31,706,933
7.	Net income of protected cells.....		
8.	Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7).....	5,942,393	5,927,786
INVESTMENT INCOME			
9.	Net investment income earned (Exhibit of Net Investment Income, Line 17).....	827,779	717,427
10.	Net realized capital gains (losses) less capital gains tax of \$50,935 (Exhibit of Capital Gains (Losses)).....	98,873	226,388
11.	Net investment gain (loss) (Lines 9 + 10).....	926,652	943,815
OTHER INCOME			
12.	Net gain (loss) from agents' or premium balances charged off (amount recovered \$.....0 amount charged off \$.....0).....	0	
13.	Finance and service charges not included in premiums.....	540,789	530,869
14.	Aggregate write-ins for miscellaneous income.....	80,117	54,842
15.	Total other income (Lines 12 through 14).....	620,906	585,711
16.	Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15).....	7,489,951	7,457,312
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).....	7,489,951	7,457,312
19.	Federal and foreign income taxes incurred.....	2,715,237	2,446,141
20.	Net income (Line 18 minus Line 19) (to Line 22).....	4,774,714	5,011,171
CAPITAL AND SURPLUS ACCOUNT			
21.	Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2).....	27,594,095	22,279,986
22.	Net income (from Line 20).....	4,774,714	5,011,171
23.	Net transfers (to) from Protected Cell accounts.....		
24.	Change in net unrealized capital gains or (losses) less capital gains tax of \$(173,284).....	(336,375)	196,660
25.	Change in net unrealized foreign exchange capital gain (loss).....		
26.	Change in net deferred income tax.....	134,307	46,896
27.	Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Column 3).....	37,448	59,382
28.	Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1).....		
29.	Change in surplus notes.....		
30.	Surplus (contributed to) withdrawn from protected cells.....		
31.	Cumulative effect of changes in accounting principles.....		
32.	Capital changes:		
32.1	Paid in.....		
32.2	Transferred from surplus (Stock Dividend).....		
32.3	Transferred to surplus.....		
33.	Surplus adjustments:		
33.1	Paid in.....		
33.2	Transferred to capital (Stock Dividend).....		
33.3.	Transferred from capital.....		
34.	Net remittances from or (to) Home Office.....		
35.	Dividends to stockholders.....		
36.	Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1).....		
37.	Aggregate write-ins for gains and losses in surplus.....	0	0
38.	Change in surplus as regards policyholders for the year (Lines 22 through 37).....	4,610,094	5,314,109
39.	Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37).....	32,204,189	27,594,095
DETAILS OF WRITE-INS			
0501.	.....	
0502.	.....	
0503.	.....	
0598.	Summary of remaining write-ins for Line 5 from overflow page.....	0	0
0599.	Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	0	0
1401.	N.A.M.I.C.O. & OTHER INCOME.....	80,117	54,842
1402.	.....	
1403.	.....	
1498.	Summary of remaining write-ins for Line 14 from overflow page.....	0	0
1499.	Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	80,117	54,842
3701.	.....	
3702.	.....	
3703.	.....	
3798.	Summary of remaining write-ins for Line 37 from overflow page.....	0	0
3799.	Totals (Lines 3701 thru 3703 plus 3798) (Line 37 above).....	0	0

WAYNE MUTUAL INSURANCE COMPANY
CASH FLOW

	1 Current Year	2 Prior Year
CASH FROM OPERATIONS		
1. Premiums collected net of reinsurance.....	41,896,108	38,163,467
2. Net investment income.....	820,110	743,199
3. Miscellaneous income.....	620,906	585,711
4. Total (Lines 1 through 3).....	43,337,124	39,492,377
5. Benefit and loss related payments.....	17,200,853	15,721,790
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....		
7. Commissions, expenses paid and aggregate write-ins for deductions.....	16,861,946	14,704,577
8. Dividends paid to policyholders.....		
9. Federal and foreign income taxes paid (recovered) net of \$0 tax on capital gains (losses).....	2,672,063	2,435,601
10. Total (Lines 5 through 9).....	36,734,862	32,861,968
11. Net cash from operations (Line 4 minus Line 10).....	6,602,262	6,630,409
CASH FROM INVESTMENTS		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	7,564,473	8,702,191
12.2 Stocks.....	1,455,213	1,407,231
12.3 Mortgage loans.....	9,764	9,452
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.....		
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	9,029,450	10,118,874
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....	13,307,451	13,521,823
13.2 Stocks.....	2,096,978	1,869,373
13.3 Mortgage loans.....		
13.4 Real estate.....		
13.5 Other invested assets.....		
13.6 Miscellaneous applications.....		
13.7 Total investments acquired (Lines 13.1 to 13.6).....	15,404,429	15,391,196
14. Net increase (decrease) in contract loans and premium notes.....		
15. Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	(6,374,979)	(5,272,322)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
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).....	278,897	(88,365)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	278,897	(88,365)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	506,180	1,269,722
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	5,091,164	3,821,442
19.2 End of year (Line 18 plus Line 19.1).....	5,597,344	5,091,164

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

20.0001		
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WAYNE MUTUAL INSURANCE COMPANY
UNDERWRITING AND INVESTMENT EXHIBIT
PART 1 - PREMIUMS EARNED

Line of Business		1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums December 31 Prior Year- per Col. 3, Last Year's Part 1	3 Unearned Premiums December 31 Current Year- per Col. 5, Part 1A	4 Premiums Earned During Year (Cols. 1 + 2 - 3)
1.	Fire.....	12,062,204	6,163,874	6,520,145	11,705,933
2.	Allied lines.....	38,771	22,506	20,354	40,923
3.	Farmowners multiple peril.....	3,079,793	1,517,293	1,662,166	2,934,920
4.	Homeowners multiple peril.....	9,670,899	5,003,442	5,370,873	9,303,468
5.	Commercial multiple peril.....	4,228,810	2,038,122	2,306,230	3,960,702
6.	Mortgage guaranty.....				0
8.	Ocean marine.....				0
9.	Inland marine.....	30,359	15,376	15,302	30,433
10.	Financial guaranty.....				0
11.1	Medical professional liability - occurrence.....				0
11.2	Medical professional liability - claims-made.....				0
12.	Earthquake.....				0
13.	Group accident and health.....				0
14.	Credit accident and health (group and individual).....				0
15.	Other accident and health.....				0
16.	Workers' compensation.....				0
17.1	Other liability - occurrence.....	1,811,564	519,793	548,169	1,783,188
17.2	Other liability - claims-made.....				0
17.3	Excess workers' compensation.....				0
18.1	Products liability - occurrence.....				0
18.2	Products liability - claims-made.....				0
19.1, 19.2	Private passenger auto liability.....	6,007,116	1,987,384	2,288,098	5,706,402
19.3, 19.4	Commercial auto liability.....	626,494	241,026	311,183	556,337
21.	Auto physical damage.....	5,401,986	1,759,004	2,172,625	4,988,365
22.	Aircraft (all perils).....				0
23.	Fidelity.....				0
24.	Surety.....				0
26.	Burglary and theft.....	10,613	5,180	4,869	10,924
27.	Boiler and machinery.....				0
28.	Credit.....				0
29.	International.....				0
30.	Warranty.....				0
31.	Reinsurance - nonproportional assumed property.....				0
32.	Reinsurance - nonproportional assumed liability.....				0
33.	Reinsurance - nonproportional assumed financial lines.....				0
34.	Aggregate write-ins for other lines of business.....	0	0	0	0
35.	TOTALS.....	42,968,609	19,273,000	21,220,014	41,021,595

DETAILS OF WRITE-INS

3401.	.....				0
3402.	.....				0
3403.	.....				0
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0

WAYNE MUTUAL INSURANCE COMPANY
UNDERWRITING AND INVESTMENT EXHIBIT
PART 1A - RECAPITULATION OF ALL PREMIUMS

Line of Business		1	2	3	4	5
		Amount Unearned (Running One Year or Less from Date of Policy) (a)	Amount Unearned (Running More Than One Year from Date of Policy) (a)	Earned But Unbilled Premium	Reserve for Rate Credits and Retrospective Adjustments Based on Experience	Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4
1.	Fire.....	6,520,145				6,520,145
2.	Allied lines.....	20,354				20,354
3.	Farmowners multiple peril.....	1,662,166				1,662,166
4.	Homeowners multiple peril.....	5,370,873				5,370,873
5.	Commercial multiple peril.....	2,306,230				2,306,230
6.	Mortgage guaranty.....					0
8.	Ocean marine.....					0
9.	Inland marine.....	15,302				15,302
10.	Financial guaranty.....					0
11.1	Medical professional liability - occurrence.....					0
11.2	Medical professional liability - claims-made.....					0
12.	Earthquake.....					0
13.	Group accident and health.....					0
14.	Credit accident and health (group and individual).....					0
15.	Other accident and health.....					0
16.	Workers' compensation.....					0
17.1	Other liability - occurrence.....	548,169				548,169
17.2	Other liability - claims-made.....					0
17.3	Excess workers' compensation.....					0
18.1	Products liability - occurrence.....					0
18.2	Products liability - claims-made.....					0
19.1, 19.2	Private passenger auto liability.....	2,288,098				2,288,098
19.3, 19.4	Commercial auto liability.....	311,183				311,183
21.	Auto physical damage.....	2,172,625				2,172,625
22.	Aircraft (all perils).....					0
23.	Fidelity.....					0
24.	Surety.....					0
26.	Burglary and theft.....	4,869				4,869
27.	Boiler and machinery.....					0
28.	Credit.....					0
29.	International.....					0
30.	Warranty.....					0
31.	Reinsurance - nonproportional assumed property.....					0
32.	Reinsurance - nonproportional assumed liability.....					0
33.	Reinsurance - nonproportional assumed financial lines.....					0
34.	Aggregate write-ins for other lines of business.....	0	0	0	0	0
35.	TOTALS.....	21,220,014	0	0	0	21,220,014
36.	Accrued retrospective premiums based on experience.....					
37.	Earned but unbilled premiums.....					0
38.	Balance (sum of Lines 35 through 37).....					21,220,014

DETAILS OF WRITE-INS					
3401.	.....				0
3402.	.....				0
3403.	.....				0
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0

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

WAYNE MUTUAL INSURANCE COMPANY
UNDERWRITING AND INVESTMENT EXHIBIT
PART 1B - PREMIUMS WRITTEN

Line of Business		1 Direct Business (a)	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written (Cols. 1 + 2 + 3 - 4 - 5)
			2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1.	Fire.....	634,461	11,494,487			66,744	12,062,204
2.	Allied lines.....	43,336				4,565	38,771
3.	Farmowners multiple peril.....	3,454,539		1,837		376,583	3,079,793
4.	Homeowners multiple peril.....	10,456,311		11,123		796,535	9,670,899
5.	Commercial multiple peril.....	4,599,098		13,824		384,112	4,228,810
6.	Mortgage guaranty.....						0
8.	Ocean marine.....						0
9.	Inland marine.....	33,991				3,632	30,359
10.	Financial guaranty.....						0
11.1	Medical professional liability - occurrence.....						0
11.2	Medical professional liability - claims-made.....						0
12.	Earthquake.....						0
13.	Group accident and health.....						0
14.	Credit accident and health (group and individual).....						0
15.	Other accident and health.....						0
16.	Workers' compensation.....						0
17.1	Other liability - occurrence.....	2,092,448		19,623		300,507	1,811,564
17.2	Other liability - claims-made.....						0
17.3	Excess workers' compensation.....						0
18.1	Products liability - occurrence.....						0
18.2	Products liability - claims-made.....						0
19.1, 19.2	Private passenger auto liability.....	6,114,844		65,070		172,798	6,007,116
19.3, 19.4	Commercial auto liability.....	637,729		6,786		18,021	626,494
21.	Auto physical damage.....	5,674,276		38,814		311,104	5,401,986
22.	Aircraft (all perils).....						0
23.	Fidelity.....						0
24.	Surety.....						0
26.	Burglary and theft.....	10,849				236	10,613
27.	Boiler and machinery.....						0
28.	Credit.....						0
29.	International.....						0
30.	Warranty.....						0
31.	Reinsurance - nonproportional assumed property.....	XXX					0
32.	Reinsurance - nonproportional assumed liability.....	XXX					0
33.	Reinsurance - nonproportional assumed financial lines.....	XXX					0
34.	Aggregate write-ins for other lines of business.....	0	0	0	0	0	0
35.	TOTALS.....	33,751,882	11,494,487	157,077	0	2,434,837	42,968,609

DETAILS OF WRITE-INS						
3401.	.....					0
3402.	.....					0
3403.	.....					0
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0	0

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [] No [X]
If yes: 1. The amount of such installment premiums \$.....0.
2. Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$.....0.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

		Losses Paid Less Salvage				5	6	7	8
		1	2	3	4				
Line of Business		Direct Business	Reinsurance Assumed	Reinsurance Recovered	Net Payments (Cols. 1 + 2 - 3)	Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
1.	Fire.....	239,775	3,767,568		4,007,343	816,912	1,012,220	3,812,035	32.6
2.	Allied lines.....				0	2,000	2,000	0	0.0
3.	Farmowners multiple peril.....	1,344,671		1,320	1,343,351	554,292	570,645	1,326,998	45.2
4.	Homeowners multiple peril.....	3,925,142		246,625	3,678,517	1,355,658	1,151,960	3,882,215	41.7
5.	Commercial multiple peril.....	1,492,804			1,492,804	697,118	389,979	1,799,943	45.4
6.	Mortgage guaranty.....				0			0	0.0
8.	Ocean marine.....				0			0	0.0
9.	Inland marine.....	3,030			3,030	500	500	3,030	10.0
10.	Financial guaranty.....				0			0	0.0
11.1	Medical professional liability - occurrence.....				0			0	0.0
11.2	Medical professional liability - claims-made.....				0			0	0.0
12.	Earthquake.....				0			0	0.0
13.	Group accident and health.....				0			0	0.0
14.	Credit accident and health (group and individual).....				0			0	0.0
15.	Other accident and health.....				0			0	0.0
16.	Workers' compensation.....				0			0	0.0
17.1	Other liability - occurrence.....	1,338,356		800,000	538,356	916,589	1,408,346	46,599	2.6
17.2	Other liability - claims-made.....				0			0	0.0
17.3	Excess workers' compensation.....				0			0	0.0
18.1	Products liability - occurrence.....				0			0	0.0
18.2	Products liability - claims-made.....				0			0	0.0
19.1, 19.2	Private passenger auto liability.....	3,240,770		86,244	3,154,526	2,949,585	2,856,175	3,247,936	56.9
19.3, 19.4	Commercial auto liability.....	41,244			41,244	124,232	98,517	66,959	12.0
21.	Auto physical damage.....	2,953,655			2,953,655	141,579	42,548	3,052,686	61.2
22.	Aircraft (all perils).....				0			0	0.0
23.	Fidelity.....				0			0	0.0
24.	Surety.....				0			0	0.0
26.	Burglary and theft.....				0	500	500	0	0.0
27.	Boiler and machinery.....				0			0	0.0
28.	Credit.....				0			0	0.0
29.	International.....				0			0	0.0
30.	Warranty.....				0			0	0.0
31.	Reinsurance - nonproportional assumed property.....	XXX			0			0	0.0
32.	Reinsurance - nonproportional assumed liability.....	XXX			0			0	0.0
33.	Reinsurance - nonproportional assumed financial lines.....	XXX			0			0	0.0
34.	Aggregate write-ins for other lines of business.....	0	0	0	0	0	0	0	0.0
35.	TOTALS.....	14,579,447	3,767,568	1,134,189	17,212,826	7,558,965	7,533,390	17,238,401	42.0
DETAILS OF WRITE-INS									
3401.	.....				0			0	0.0
3402.	.....				0			0	0.0
3403.	.....				0			0	0.0
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0	0	0	XXX
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	0	0	0	0	0.0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

		Reported Losses				Incurred But Not Reported			8	9
		1	2	3	4	5	6	7		
Line of Business		Direct	Reinsurance Assumed	Deduct Reinsurance Recoverable	Net Losses Excluding Incurred but not Reported (Cols. 1 + 2 - 3)	Direct	Reinsurance Assumed	Reinsurance Ceded	Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	Net Unpaid Loss Adjustment Expenses
1.	Fire.....	30,501	580,411		610,912	206,000			816,912	23,411
2.	Allied lines.....				.0	2,000			2,000	
3.	Farmowners multiple peril.....	348,292			348,292	226,000		20,000	554,292	37,391
4.	Homeowners multiple peril.....	1,393,096		448,438	944,658	451,000		40,000	1,355,658	149,556
5.	Commercial multiple peril.....	373,118			373,118	335,000		11,000	697,118	68,142
6.	Mortgage guaranty.....				.0				.0	
8.	Ocean marine.....				.0				.0	
9.	Inland marine.....				.0	500			500	
10.	Financial guaranty.....				.0				.0	
11.1	Medical professional liability - occurrence.....				.0				.0	
11.2	Medical professional liability - claims-made.....				.0				.0	
12.	Earthquake.....				.0				.0	
13.	Group accident and health.....				.0				(a).....0	
14.	Credit accident and health (group and individual).....				.0				.0	
15.	Other accident and health.....				.0				(a).....0	
16.	Workers' compensation.....				.0				.0	
17.1	Other liability - occurrence.....	248,589			248,589	683,000		15,000	916,589	89,343
17.2	Other liability - claims-made.....				.0				.0	
17.3	Excess workers' compensation.....				.0				.0	
18.1	Products liability - occurrence.....				.0				.0	
18.2	Products liability - claims-made.....				.0				.0	
19.1, 19.2	Private passenger auto liability.....	1,980,585		27,000	1,953,585	1,066,000		70,000	2,949,585	288,318
19.3, 19.4	Commercial auto liability.....	38,232			38,232	86,000			124,232	
21.	Auto physical damage.....	253,579			253,579	(112,000)			141,579	13,839
22.	Aircraft (all perils).....				.0				.0	
23.	Fidelity.....				.0				.0	
24.	Surety.....				.0				.0	
26.	Burglary and theft.....				.0	500			500	
27.	Boiler and machinery.....				.0				.0	
28.	Credit.....				.0				.0	
29.	International.....				.0				.0	
30.	Warranty.....				.0				.0	
31.	Reinsurance - nonproportional assumed property.....	XXX			.0	XXX			.0	
32.	Reinsurance - nonproportional assumed liability.....	XXX			.0	XXX			.0	
33.	Reinsurance - nonproportional assumed financial lines.....	XXX			.0	XXX			.0	
34.	Aggregate write-ins for other lines of business.....	0	0	0	.0	.0	.0	.0	.0	.0
35.	TOTALS.....	4,665,992	580,411	475,438	4,770,965	2,944,000	.0	156,000	7,558,965	670,000
DETAILS OF WRITE-INS										
3401.	.....				.0				.0	
3402.	.....				.0				.0	
3403.	.....				.0				.0	
3498.	Summary of remaining write-ins for Line 34 from overflow page.....	0	0	0	.0	.0	.0	.0	.0	.0
3499.	Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0	0	.0	.0	.0	.0	.0	.0

(a) Including \$.0 for present value of life indemnity claims.

WAYNE MUTUAL INSURANCE COMPANY
UNDERWRITING AND INVESTMENT EXHIBIT
PART 3 - EXPENSES

	1	2	3	4
	Loss Adjustment Expenses	Other Underwriting Expenses	Investment Expenses	Total
1. Claim adjustment services:				
1.1 Direct.....	393,851			393,851
1.2 Reinsurance assumed.....	115,798			115,798
1.3 Reinsurance ceded.....				0
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3).....	509,649	0	0	509,649
2. Commission and brokerage:				
2.1 Direct, excluding contingent.....		5,196,410		5,196,410
2.2 Reinsurance assumed, excluding contingent.....		3,309,837		3,309,837
2.3 Reinsurance ceded, excluding contingent.....		92,183		92,183
2.4 Contingent - direct.....		1,124,985		1,124,985
2.5 Contingent - reinsurance assumed.....				0
2.6 Contingent - reinsurance ceded.....				0
2.7 Policy and membership fees.....				0
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7).....	0	9,539,049	0	9,539,049
3. Allowances to manager and agents.....	25,603	90,027		115,630
4. Advertising.....		78,163		78,163
5. Boards, bureaus and associations.....	23,378	259,617	1,124	284,119
6. Surveys and underwriting reports.....	376,185	1,266,961		1,643,146
7. Audit of assureds' records.....				0
8. Salary and related items:				
8.1 Salaries.....	1,699,299	1,853,961	403,035	3,956,295
8.2 Payroll taxes.....	123,241	141,487	30,758	295,486
9. Employee relations and welfare.....	209,964	248,863	34,286	493,113
10. Insurance.....	13,650	111,131	693	125,474
11. Directors' fees.....		34,550		34,550
12. Travel and travel items.....	51,379	20,554		71,933
13. Rent and rent items.....	58,704	60,000	46,141	164,845
14. Equipment.....		74,956		74,956
15. Cost or depreciation of EDP equipment and software.....				0
16. Printing and stationery.....	40,881	174,286	23,707	238,874
17. Postage, telephone and telegraph, exchange and express.....	47,321	141,265	3,622	192,208
18. Legal and auditing.....	26,965	24,268	3,408	54,641
19. Totals (Lines 3 to 18).....	2,696,570	4,580,089	546,774	7,823,433
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$.....0.....		430,653		430,653
20.2 Insurance department licenses and fees.....		30,085		30,085
20.3 Gross guaranty association assessments.....				0
20.4 All other (excluding federal and foreign income and real estate).....				0
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4).....	0	460,738	0	460,738
21. Real estate expenses.....			20,315	20,315
22. Real estate taxes.....			33,565	33,565
23. Reimbursements by uninsured plans.....				0
24. Aggregate write-ins for miscellaneous expenses.....	0	54,706	0	54,706
25. Total expenses incurred.....	3,206,219	14,634,582	600,654	(a).....18,441,455
26. Less unpaid expenses - current year.....	670,000	2,677,466	33,565	3,381,031
27. Add unpaid expenses - prior year.....	540,000	1,913,682	32,423	2,486,105
28. Amounts receivable relating to uninsured plans, prior year.....				0
29. Amounts receivable relating to uninsured plans, current year.....				0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29).....	3,076,219	13,870,798	599,512	17,546,529

DETAILS OF WRITE-INS				
2401. OFFICE UTILITIES AND MISC.....		54,706		54,706
2402.				0
2403.				0
2498. Summary of remaining write-ins for Line 24 from overflow page.....	0	0	0	0
2499. Totals (Lines 2401 thru 2403 plus 2498) (Line 24 above).....	0	54,706	0	54,706

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

WAYNE MUTUAL INSURANCE COMPANY
EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. government bonds.....	(a).....	.....
1.1 Bonds exempt from U.S. tax.....	(a).....304,689	.....315,093
1.2 Other bonds (unaffiliated).....	(a).....702,160	.....743,248
1.3 Bonds of affiliates.....	(a).....	.....
2.1 Preferred stocks (unaffiliated).....	(b).....11,678	.....11,678
2.11 Preferred stocks of affiliates.....	(b).....	.....
2.2 Common stocks (unaffiliated).....	.....244,106	.....244,106
2.21 Common stocks of affiliates.....	.....	.....
3. Mortgage loans.....	(c).....1,036	.....1,036
4. Real estate.....	(d).....134,400	.....134,400
5. Contract loans.....	.....	.....
6. Cash, cash equivalents and short-term investments.....	(e).....36	.....36
7. Derivative instruments.....	(f).....	.....
8. Other invested assets.....	.....	.....
9. Aggregate write-ins for investment income.....	.....619	.....619
10. Total gross investment income.....	1,398,724	1,450,216
11. Investment expenses.....		(g).....600,654
12. Investment taxes, licenses and fees, excluding federal income taxes.....		(g).....
13. Interest expense.....		(h).....
14. Depreciation on real estate and other invested assets.....		(i).....21,783
15. Aggregate write-ins for deductions from investment income.....		.....0
16. Total deductions (Lines 11 through 15).....		622,437
17. Net investment income (Line 10 minus Line 16).....		827,779

DETAILS OF WRITE-INS

0901. INTEREST ON AGENCY LOANS.....	.....619	.....619
0902. ....	.....	.....
0903. ....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	619	619
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow page.....		.....0
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15 above).....		.....0
(a) Includes \$.....35,690 accrual of discount less \$.....56,682 amortization of premium and less \$.....49,495 paid for accrued interest on purchases.		
(b) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.		
(c) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.		
(d) Includes \$.....120,000 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.		
(e) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.		
(f) Includes \$.....0 accrual of discount less \$.....0 amortization of premium.		
(g) Includes \$.....0 investment expenses and \$.....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to Segregated and Separate Accounts.		
(h) Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.		
(i) Includes \$.....21,783 depreciation on real estate and \$.....0 depreciation on other invested assets.		

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) on Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. government bonds.....	.....	.....	.....0	.....	.....
1.1 Bonds exempt from U.S. tax.....	.....14,362	.....	.....14,362	.....	.....
1.2 Other bonds (unaffiliated).....	.....17,776	.....	.....17,776	.....	.....
1.3 Bonds of affiliates.....	.....	.....	.....0	.....	.....
2.1 Preferred stocks (unaffiliated).....	.....3,039	.....	.....3,039	.....	.....
2.11 Preferred stocks of affiliates.....	.....	.....	.....0	.....	.....
2.2 Common stocks (unaffiliated).....	.....114,630	.....	.....114,630	.....(509,659)	.....
2.21 Common stocks of affiliates.....	.....	.....	.....0	.....	.....
3. Mortgage loans.....	.....	.....	.....0	.....	.....
4. Real estate.....	.....	.....	.....0	.....	.....
5. Contract loans.....	.....	.....	.....0	.....	.....
6. Cash, cash equivalents and short-term investments.....	.....	.....	.....0	.....	.....
7. Derivative instruments.....	.....	.....	.....0	.....	.....
8. Other invested assets.....	.....	.....	.....0	.....	.....
9. Aggregate write-ins for capital gains (losses).....	.....0	.....0	.....0	.....0	.....0
10. Total capital gains (losses).....	149,807	.....0	149,807	(509,659)	.....0

DETAILS OF WRITE-INS

0901. ....	.....	.....	.....0	.....	.....
0902. ....	.....	.....	.....0	.....	.....
0903. ....	.....	.....	.....0	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0	.....0	.....0	.....0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	.....0	.....0	.....0	.....0	.....0

WAYNE MUTUAL INSURANCE COMPANY
EXHIBIT OF NONADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....			.....0
2. Stocks (Schedule D):			
2.1 Preferred stocks.....			.....0
2.2 Common stocks.....	.....500	.....500	.....0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....			.....0
3.2 Other than first liens.....			.....0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....			.....0
4.2 Properties held for the production of income.....			.....0
4.3 Properties held for sale.....			.....0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....			.....0
6. Contract loans.....			.....0
7. Derivatives (Schedule DB).....			.....0
8. Other invested assets (Schedule BA).....			.....0
9. Receivables for securities.....			.....0
10. Securities lending reinvested collateral assets (Schedule DL).....			.....0
11. Aggregate write-ins for invested assets.....	.....0	.....0	.....0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	.....500	.....500	.....0
13. Title plants (for Title insurers only).....			.....0
14. Investment income due and accrued.....			.....0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....			.....0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....			.....0
15.3 Accrued retrospective premiums and contracts subject to redetermination.....			.....0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers.....			.....0
16.2 Funds held by or deposited with reinsured companies.....			.....0
16.3 Other amounts receivable under reinsurance contracts.....			.....0
17. Amounts receivable relating to uninsured plans.....			.....0
18.1 Current federal and foreign income tax recoverable and interest thereon.....			.....0
18.2 Net deferred tax asset.....			.....0
19. Guaranty funds receivable or on deposit.....			.....0
20. Electronic data processing equipment and software.....			.....0
21. Furniture and equipment, including health care delivery assets.....	.....114,050	.....139,358	.....25,308
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			.....0
23. Receivables from parent, subsidiaries and affiliates.....			.....0
24. Health care and other amounts receivable.....	.....4,584	.....16,724	.....12,140
25. Aggregate write-ins for other than invested assets.....	.....0	.....0	.....0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	.....119,134	.....156,582	.....37,448
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			.....0
28. TOTALS (Lines 26 and 27).....	.....119,134	.....156,582	.....37,448

DETAILS OF WRITE-INS

1101. ....			.....0
1102. ....			.....0
1103. ....			.....0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	.....0	.....0	.....0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	.....0	.....0	.....0
2501. ....			.....0
2502. ....			.....0
2503. ....			.....0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	.....0	.....0	.....0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	.....0	.....0	.....0

STATEMENT AS OF DECEMBER 31, 2015 OF THE WAYNE MUTUAL INSURANCE COMPANY

NOTES TO FINANCIAL STATEMENTS

Note 1 -Summary of Accounting Policies

A. Accounting Practices

The Statement was prepared with accounting practices & prescribed or permitted by the Ohio Department of Insurance. The Ohio Department of Insurance 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, for determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners' NAIC Accounting Practices and Procedures manual, version effective January 1, 2001, (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the State of Ohio.

	State of Domicile	2015	2014
NET INCOME			
(1) WAYNE MUTUAL INSURANCE COMPANY state basis (Page 4, Line 20, Columns 1 & 3)	OH	4,774,714	5,011,171
(2) State Prescribed Practices that increase/decrease NAIC SAP			
(3) State Permitted Practices that increase/decrease NAIC SAP			
(4) NAIC SAP (1 – 2 – 3 = 4)	OH	4,774,714	5,011,171
SURPLUS			
(5) WAYNE MUTUAL INSURANCE COMPANY state basis (Page 3, line 37, Columns 1 & 2)	OH	32,204,189	27,594,095
(6) State Prescribed Practices that increase/decrease NAIC SAP			
(7) State Permitted Practices that increase/decrease NAIC SAP			
(8) NAIC SAP (5 – 6 – 7 = 8)	OH	32,204,189	27,594,095

B. Use of Estimates

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

C. Accounting Policies

Premiums are earned over the terms of the related insurance policies and reinsurance contracts. Unearned premium reserves are established to cover the unexpired portion of premiums written. Such reserves are computed by pro rata methods for direct business and are based on reports received from ceding companies for reinsurance. Expenses incurred in connection with acquiring new insurance business, including such acquisition cost as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

In addition, the Company uses the following accounting policies:

- Short-term investments are stated at amortized value using the interest method. Non-investment grade short-term investments are stated at the lower of amortized value or fair value.
- Investment grade bonds not backed by other loans are stated at amortized value using the interest method. Non-investment grade bonds with NAIC designations of 3 through 6 are stated at the lower of amortized value or fair value.
- Common stocks, other than investments in stocks of subsidiaries and affiliates, are stated at fair value.
- Investment grade redeemable preferred stocks are stated at amortized value. Investment grade perpetual preferred stocks are stated at fair value. Non-investment grade preferred stocks are stated at the lower amortized value or fair value.
- Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amounts are adequate, the ultimate liabilities may be in excess of or less than the amount provided. The methods of making such estimates and for establishing the resulting liabilities are continually reviewed and any adjustments are reflected in the period determined.
- The Company has a written capitalization policy for prepaid expenses and purchases of items such as electronic data processing equipment, software, furniture, vehicles, other equipment and leasehold improvements.

Note 2 - Accounting Changes and Corrections of Errors

A. Not applicable

Note 3 - Business Combinations and Goodwill

A. Statutory Purchase Method

Not applicable

B. Statutory Mergers

Not applicable

C. Write downs for Impairment of Investments in Affiliates

Not applicable

Note 4 - Discontinued Operations

A. Not applicable

Note 5 – Investments

- A. Mortgage Loans
1. The lending rate for commercial mortgage loans originated in 2010 are 3.25%

2. The Company did not reduce interest rates on any outstanding loans during the current year.

3. The maximum percentage of any one loan to value of collateral at the time of the loan was 67%

4. The Company did not hold mortgages with interest 180 days or more past due.

5. There were no taxes, assessments or any amounts advanced and not included in the mortgage loan.

6. -12. There were no impaired mortgage loans.
- B. Troubled Debt Restructuring
- Not applicable
- C. Reverse Mortgages
- Not applicable
- D. Loan-Backed Securities
- Not applicable
- E. Repurchase Agreements
- Not applicable
- F. Write downs for Impairments of Real Estate and Retail Land Sales
- Not applicable
- G. Low Income Housing Tax Credits
- Not applicable
- H. Restricted Assets
- Federal Home Loan Bank Capital stock \$74,600
- I. Working Capital Finance Investments
- Not applicable
- J. Offsetting and Netting of Assets and Liabilities
- Not applicable
- K. Structured Notes
- Not applicable

Note 6 - Joint Ventures, Partnership and Limited Liability Companies

- A. Detail for Those Greater than 10% of Admitted Assets
- Not applicable
- B. Write downs for Impairment of Joint Ventures, Partnerships and LLCs
- Not applicable

Note 7 - Investment Income

- A. Accrued Investment Income
- The Company does not admit investment income due and accrued if amounts are over 90 days past due (180 days for mortgage loans).
- B. Amounts Nonadmitted
- Not applicable

Note 8 - Derivative Instruments

- A. Not applicable

Note 9 - Income Tax

A. Deferred Tax Asset/(Liability)
1. Components of Net Deferred Tax Asset/(Liability)

	December 31, 2015			December 31, 2014			Change		
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
(a) Gross deferred tax assets	\$1,736,313	\$0	\$1,736,313	\$1,613,669	\$0	\$1,613,669	\$122,644	\$0	\$122,644
(b) Statutory valuation allowance adjustments	0	0	0	0	0	0	0	0	0
(c) Adjusted gross deferred tax assets (1a - 1b)	1,736,313	0	1,736,313	1,613,669	0	1,613,669	122,644	0	122,644
(d) Deferred Tax Assets Nonadmitted	0	0	0	0	0	0	0	0	0
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	1,736,313	0	1,736,313	1,613,669	0	1,613,669	122,644	0	122,644
(f) Deferred Tax Liabilities	(28,723)	640,319	611,596	(17,060)	813,603	796,543	(11,663)	(173,284)	(184,947)
(g) Net admitted deferred tax asset/(Net Deferred Tax Liability) (1e - 1f)	\$1,765,036	(\$640,319)	\$1,124,717	\$1,630,729	(\$813,603)	\$817,126	\$134,307	\$173,284	\$307,591

2. Admission Calculation Components

	2015			2014			Change		
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
SSAP 101, paragraphs 11.a., 11.b., and 11.c.:									
(a) Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks	\$1,931,975	\$0	\$1,931,975	\$1,432,576	\$0	\$1,432,576	\$499,399	\$0	\$499,399
(b) Adjusted Gross Deferred Tax Assets Expected to be Realized (Excluding The Amount of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	(323,848)	0	(323,848)	56,609	0	56,609	(380,457)	0	(380,457)
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	(323,848)	0	(323,848)	56,609	0	56,609	(380,457)	0	(380,457)
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX	4,412,515	XXX	XXX	3,809,713	XXX	XXX	602,802
(c) Adjusted Gross Deferred Tax Assets (Excluding the Amount of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities	128,186	0	128,186	124,484	0	124,484	3,702	0	3,702
(d) Deferred Tax Assets Admitted as the Result of Application of SSAP No. 101 Total 2(a) + 2(b) + 2(c)	1,736,313	0	1,736,313	1,613,669	0	1,613,669	122,644	0	122,644

3. Other Admissibility Criteria

		2015	2014
		Percentage	Percentage
(a)	Ratio Percentage Used to Determine Recovery Period and Threshold Limitation Amount	892%	918%
(b)	Amount of Adjusted Capital and Surplus Used to Determine Recovery Period and Threshold Limitation in 2(b)2 Above	29,416,768	25,398,085

4. Impact of Tax Planning Strategies

	December 31, 2015			December 31, 2014			Change		
	Ordinary	Capital	Total %	Ordinary	Capital	Total	Ordinary	Capital	Total
Impact of Tax Planning Strategies									
(a) Adjusted Gross DTAs (% of Total Adjusted Gross DTAs)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
(b) Net Admitted Adjusted Gross DTAs (% of Total Net Admitted Adjusted Gross DTAs)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

(c) The Company's tax-planning strategies did not include the use of reinsurance-related tax planning strategies.

B. Deferred Tax Liabilities Not Recognized

Not applicable

C. Current Tax and Change in Deferred Tax

1. Current income tax:

	2015	2014	Change
(a) Federal	2,543,174	2,446,141	97,033
(b) Foreign			
(c) Subtotal	2,543,174	2,446,141	97,033
(d) Federal income tax on net capital gains	50,935	116,624	(65,689)
(e) Utilization of capital loss carryforward	0	0	0
(f) Other	172,063	0	172,063
Federal and foreign income taxes incurred	2,766,172	2,562,765	203,407

2. Deferred tax assets:

	2015	2014	Change
(a) Ordinary:			
(1) Discounting of unpaid losses	118,758	122,639	(3,881)
(2) Unearned premium reserve	1,450,596	1,319,167	131,429
(3) Policyholder reserves	0	0	0
(4) Investments	0	0	0
(5) Deferred acquisition costs	0	0	0
(6) Policyholder dividends accrual	0	0	0
(7) Fixed assets	0	0	0
(8) Compensation and benefits accrual	0	0	0
(9) Pension accrual	0	0	0
(10) Receivables - nonadmitted	0	0	0
(11) Net operating loss carry-forward	0	0	0
(12) Tax credit carry-forward	0	0	0
(13) Other (including items <5% of total ordinary tax assets)	128,182	124,481	3,701
(14) Other assets – nonadmitted	38,777	47,382	(8,605)
(99) Subtotal	1,736,313	1,613,669	122,644
(b) Statutory valuation allowance adjustment	0	0	0
(c) Nonadmitted	0	0	0
(d) Admitted ordinary deferred tax assets (2a99-2b-2c)	1,736,313	1,613,669	122,644
(e) Capital			
(1) Investments	0	0	0
(2) Net capital loss carry-forward			0
(3) Real estate	0	0	0
(4) Other (including items <5% of total capital tax assets)	0	0	0
(99) Subtotal	0	0	0
(f) Statutory valuation allowance adjustment	0	0	0
(g) Nonadmitted	0	0	0
(h) Admitted capital deferred tax assets (2e99-2f-2g)	0	0	0
(i) Admitted deferred tax assets (2d+2h)	1,736,313	1,613,669	122,644

3. Deferred tax liabilities:

	2015	2014	Change
(a) Ordinary:			
(1) Investments	0	0	0
(2) Fixed assets	(32,548)	(24,910)	(7,638)
(3) Deferred and uncollected premiums	0	0	0
(4) Policyholder reserves	0	0	0
(5) Other (including items <5% of total ordinary tax assets)	0	0	0
(6) Additional acquisition costs-installment premiums	0	0	0
(7) Discount of accrued salvage and subrogation	3,825	7,850	(4,025)
(8) Guaranty funds receivable	0	0	0
(99) Subtotal	(28,723)	(17,060)	(11,663)
(b) Capital			
(1) Investments	640,319	813,603	(173,284)
(2) Real estate	0	0	0
(3) Other (including items <5% of total capital tax assets)	0	0	0
(99) Subtotal	640,319	813,603	(173,284)
(c) Deferred tax liabilities (3a99+3b99)	611,596	796,543	(184,947)

4. Net deferred tax assets/liabilities (2i-3c) 1,124,717 817,126 307,591

D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate

The significant items causing a difference between the statutory federal income tax rate and Company's effective income tax rate are as follows:

	December 31, 2015	Effective Tax Rate
Provision computed at statutory rate	\$2,563,902	34.0%
Net reserves	(3,881)	-0.1%
Tax exempt income deduction	(145,658)	-1.9%
Dividends received deduction	(66,184)	-0.9%
Capital loss	0	0.0%
Contributions	0	0.0%
Proration of tax exempt investment income	48,653	0.6%
Nondeductible Expenses	3,264	0.0%
Disallowed travel and entertainment	10,529	0.1%
Net operating loss	0	0.0%
Change in premium adjustments	131,428	1.7%
Other	(65,193)	-0.9%
Totals	\$2,476,860	32.6%
Federal and foreign income taxes incurred	\$2,425,925	32.2%
Realized capital gains (losses) tax	50,935	0.7%
Change in net deferred income taxes	(134,309)	-1.8%
	\$2,342,551	31.1%

E. Operating Loss and Tax Credit Carryforwards

1. At December 31, 2015, the Company did not have any unused operating loss carryforwards available to offset against future taxable income.
2. The following is income tax expense for 2015 and 2014 that is available for recoupment in the event of future net losses:

2015	\$2,476,860
2014	\$2,509,933

3. The Company did not have any protective tax deposits under Section 6603 of the Internal Revenue Code.

F. Consolidated Federal Income Tax Return

Not applicable

G. Federal or Foreign Federal Income Tax Loss Contingencies

The Company does not have any tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

Note 10 – Information Concerning Parent, Subsidiaries, Affiliates

A. Nature of Relationships

Effective on January 1, 2013 Wayne Mutual Insurance Company affiliated with Marion Mutual Insurance Association of Maria Stein, Ohio. The terms and conditions of that affiliation are contained in Form A and its exhibits, filed with the Ohio Department of Insurance on October 16, 2012, and the order of the Superintendent of the Ohio Department of Insurance dated December 18, 2012.

On July 1, 2009 Wayne Mutual Insurance Company affiliated with Washington Mutual Insurance Association of Lakeville, Ohio. The terms and conditions of that affiliation are contained in Form A and its exhibits, filed with the Ohio Department of Insurance on April 22, 2009, and the order of the Superintendent of the Ohio Department of Insurance dated July 1, 2009.

The Company pays commission to, and has other transactions with, its wholly-owned subsidiary, Wayne Insurance Agency, Inc. a non-insurance company. All transactions are deemed to be immaterial.

B. Detail of Transactions Greater than 1/2% of Admitted Assets

The Company assumed net earned premiums of \$8,196,055, net losses of \$2,358,043, assumed adjusting expenses of \$71,016, unearned premiums of \$4,525,295 and paid ceding commission of \$2,435,720 from the above agreement with Washington Mutual Insurance Association in 2015. The Company assumed net earned premiums of \$7,703,247, net losses of \$2,571,827, assumed adjusting expenses of \$38,645, unearned premiums of \$4,296,825 and paid ceding commission of \$2,283,880 from above agreement with Washington Mutual Insurance Association in 2014.

The Company assumed net earned premiums of \$2,903,401, net losses of \$1,190,760, and adjusting expenses of \$44,782, unearned premiums of \$1,681,558 and paid ceding commission of \$874,117 from the above agreement with Marion Mutual Insurance Association in 2015 The Company assumed net earned premiums of \$2,507,522, net losses of \$947,782, and adjusting expenses of \$25,417, unearned premiums of \$1,514,960 and paid ceding commission of \$860,794 from the above agreement with Marion Mutual Insurance Association in 2014

C. Change in Terms of Intercompany Arrangements

Not applicable

D. Amounts Due to or from Related Parties

The Company reported \$408,994 due in 2015 and \$577,813 due in 2014 from affiliate Washington Mutual Insurance Association in the current year. The Company also reported \$188,171 due in 2015 and \$246,635 due in 2014 from affiliate Marion Mutual Insurance Association in the current year. These arrangements are subject to written agreements which require that the balances be settled within 45 days

E. Guarantees or Undertakings for Related Parties

Not applicable (see Note 14A)

F. Management, Service Contracts, Cost Sharing Arrangements

The Company has agreed to provide certain management services to its wholly-owned subsidiary.

G. Nature of Relationships that Could Affect Operations

Not applicable

H. Amount Deducted for Investment in Upstream Company

Not applicable

I. Detail of Investments in Affiliates Greater than 10% of Admitted Assets

Not applicable

J. Writedowns for Impairment of Investments in Affiliates

Not applicable

K. Foreign Subsidiary Valued Using CARVM

Not applicable

L. Downstream Holding Company Valued Using Look-Through Method

Not applicable

M. Non-insurance subsidiary, controlled and affiliated (SCA) entity valuations

Not applicable

N. Insurance SCA Entities Utilizing Prescribed or Permitted Practices

Not applicable

Note 11 – Debt

A. Debt consists of the following obligations as of the end of the current year

Not applicable

B. Funding Agreements with Federal Home Loan Bank (FHLB)

Federal Home Loan Bank Capital Stock- Membership stock with a value of \$74,600

Note 12 - Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plans

Not applicable

B.-D. Description of Investment Policies, Fair Value of Plan Assets, Rate of Return Assumptions

Not applicable

E. Defined Contribution Plans

The Company has a voluntary 401k Plan covering substantially all employees. The Company paid administrative expenses and made a contribution of a percentage of employee wages to the plan of 0% at December 31, 2015 and 0% at December 31, 2014. The plan had a total of \$126,860 and \$91,150 in employer contributions for December 31, 2015 and December 31, 2014.

F. Multiemployer Plans

Not applicable

G. Consolidated / Holding Company Plans

Not applicable

H. Postemployment Benefits and Compensated Absences

Not applicable

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

Not applicable

Note 13 - Capital & Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

- A.

Outstanding Shares

Not applicable
- B.

Dividend Rate of Preferred Stock

Not applicable
- C, D and E.

Dividend Restrictions

Not applicable
- F.

Restrictions on Unassigned Funds

Not applicable
- G.

Mutual Surplus Advances

Not applicable
- H.

Company Stock Held for Special Purposes

Not applicable
- I.

Changes in Special Surplus Funds

Not applicable
- J.

Changes in Unassigned Funds

Not applicable
- K.

Surplus Notes

Not applicable
- L and M.

Quasi Reorganizations

Not applicable

Note 14 – Contingencies

- A.

Contingent Commitments

Not applicable
- B.

Guaranty Fund and Other Assessments

The Company is subject to guaranty fund and other assessments by the states in which it writes business. Most assessments are recorded at the time the assessment are levied.
- C.

Gain Contingencies

Not applicable
- D.

Extra Contractual Obligation and Bad Faith Losses

Not applicable
- E.

Product Warranties

Not applicable
- F.

Joint and Several Liabilities

Not applicable
- G.

Other Contingencies

Various lawsuits against the Company have arisen in the course of the Company's business. Contingent liabilities arising from litigation, income taxes and other matters are not considered material in relation to the financial position of the Company.

Note 15 – Leases

- A.

Lessee Leasing Arrangements

Not applicable
- B.

Lessor Leasing Arrangements

Not applicable

Note 16 - Information About Financial Instruments with Off-Balance Sheet Risk and with Concentrations of Credit Risk

- A.

Face or Contract Amounts

Not applicable
- B.

Nature and Terms

Not applicable

C. Exposure to Credit-Related Losses

Not applicable

D. Collateral Policy

Not applicable

Note 17 - Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

A. Transfers of Receivables Reported Sale

Not applicable

B. Transfers and Servicing of Financial Assets

Not applicable

C. Wash Sales

Not applicable

Note 18 - Gain or Loss from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. Administrative Services Only (ASO) Plans

Not applicable

B. Administrative Services Contract (ASO) Plans

Not applicable

C. Medicare or Other Similarly Structured Cost Based Reimbursement Contracts

Not applicable

Note 19 - Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

A. Not applicable

Note 20 Fair Value Measurements

A. Inputs Used for Assets and Liabilities Measured at Fair Value

1. Fair Value Measurements by Level 1, 2, and 3

The Company has categorized its assets and liabilities that are measured at fair value into the three-level fair value hierarchy as reflected in the table below. The three-level value hierarchy is based on the degree of subjectivity inherent in the valuation method by which fair value was determined. The three levels are defined as follows.

Level 1- Quoted Prices in Active Markets for Identical Assets and Liabilities: This category, for items measured at fair value on a recurring basis, including exchange-traded preferred and common stocks. It also includes derivative liabilities for written call options on common stock which are also exchanged traded. The estimated fair value of the equity securities and derivatives within this category are based on quoted prices in active markets and are thus classified as Level 1.

Level 2- Significant Other Observable Inputs: This category for items measured at fair value on a recurring basis includes bonds, preferred stocks and common stocks which are not exchange-traded. The estimated fair values of some of these items were determined by independent pricing services using observable inputs. Other were based on quotes from markets which were not considered actively traded.

Level 3 – Significant Unobservable Inputs: The Company has no assets or liabilities measured at fair value in this category.

The following table provides information as of December 31, 2015 about the Company's financial assets measured at fair value on a recurring basis:

	Quoted prices in Active Markets for Identical Assets (Level I)	Significant Other Observable Inputs (Level II)	Significant Unobservable Inputs (Level III)	Total at December 31, 2015
Bonds	\$	\$	\$	\$
Common stocks	8,471,448	132,224		8,603,672
Preferred stocks	141,135			141,135
Total	<u>\$ 8,612,583</u>	<u>\$ 132,224</u>	<u>\$</u>	<u>\$ 8,744,807</u>

At the end of each reporting period, the Company evaluates whether or not any event has occurred or circumstances have changed that would cause an instrument to be transferred between Levels 1 and 2. This policy also applies to transfers into or out of Level 3 as stated in paragraph 3 below.

2. Rollforward of Level 3 Items

The Company has no assets or liabilities measured at fair value in the Level 3 category.

3. Policy on Transfers Into and Out of Level 3

At the end of each reporting period, the Company evaluates whether or not any event has occurred or circumstances have changed that would cause an instrument to be transferred into or out of Level 3. During the current year, no transfers into or out of Level 3 were required.

4. Inputs and Techniques Used for Level 2 and Level 3 Fair Values

The Company has no assets or liabilities measured at fair value in the Level 3 category.

Common stock carried at fair value categorized as Level 2 were valued using a market approach. These valuations were determined to be Level 2 valuations because quoted market prices for identical instruments trading in an inactive market were utilized. When an equity instrument is illiquid due to limited trading activity, the use of quoted markets for identical instruments was determined by the Company to be the most reliable method to determine fair value.

5. Derivative Fair Values

Not applicable

B Other Fair Value Disclosure

Not applicable

C. Fair Values for All Financial Instruments by Levels 1, 2, and 3

The table below reflects the fair value and admitted values of all admitted assets and liabilities that are financial instruments excluding those accounted for under the equity method (subsidiaries, joint ventures and ventures). The fair values are also categorized into the three-level fair value hierarchy as described above in Note 20A. This was not practicable for mortgage loans as described below in Note 20D.

Type of Financial Instrument	Fair Value in Investment Schedule	Admitted Value in Investment Schedule	Level 1	Level 2	Level 3
Financial instruments - assets					
Bonds	38,088,916	37,965,665	38,088,916		
Preferred Stocks	173,870	141,135	173,870		
Common Stock	8,603,672	8,603,672	8,471,448	132,224	
Cash	5,013,747	5,013,747	5,013,747		
Short-term investments	583,597	583,597	583,597		
Mortgage Loan		26,566			
Total Assets	52,463,802	52,334,382	52,331,578	132,224	

D. Items for which Not Practicable to Estimate Fair Values

It's not practical to determine the fair value of mortgage loans for the purpose of the above disclosure of Note 20C due to the fact that these items are not traded and therefore quoted market prices are not available. Also, the cost of obtaining estimates of fair values from other sources is considered excessive given the immateriality of the mortgage loans.

Note 21 - Other items

A. Unusual or infrequent Items

Not applicable

B. Troubled Debt Restructuring for Debtors

Not applicable

C. Other Disclosures

Not applicable

D. Business Interruption Insurance Recoveries

Not applicable

E. State Transferable and Non-transferable Tax Credits

Not applicable

F. Subprime Mortgage Related Risk Exposure

The Company invests in several asset classes that could potentially be adversely affected by subprime mortgage exposure. These investments include bond, mortgage loans, mortgage-backed securities and equity investments in financial institutions. The company believes that its greatest exposure is to unrealized losses from declines in asset values versus realized losses resulting from defaults or foreclosures. Conservative lending and investment practices limit the company's exposure to such losses.

G. Proceeds from Issuance of Insurance-linked Securities

Not applicable

Note 22 - Events Subsequent

A. Subsequent events have been considered through February 15, 2016 for these statutory financial statements which are to be issued February 25, 2016. There are no events occurring subsequent to the end of the period that merited recognition or disclosure in these statements.

Note 23 - Reinsurance

A. Unsecured Reinsurance Recoverables

Not applicable

B. Reinsurance Recoverables in Dispute

Not applicable

C. Reinsurance Assumed and Ceded and Protected Cells

	ASSUMED REINSURANCE		CEDED REINSURANCE NET			
	(1)	(2)	(3)	(4)	(5)	(6)
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
C.1.a. Affiliates	6,206,853	3,309,837				
C.1. b. All Other						
C.1.c. Total	6,206,853	3,309,837				
C.1.d. Direct Unearned Premium reserve			15,013,161			

D. Uncollectible Reinsurance

Not applicable

E. Commutation of Ceded Reinsurance

Not applicable

F. Retroactive Reinsurance

Not applicable

G. Reinsurance Accounted for as a Deposit

Not applicable

H. Run-off Agreements

Not applicable

I. Certified Reinsurer Downgraded or Status Subject to Revocation

Not applicable

J. Reinsurance Agreements Qualifying for Reinsurer Aggregation

Not applicable

Note 24 - Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. Method Used to Estimate

Not applicable

B. Method Used to Record

Not applicable

C. Amount and Percent of Net Retrospective Premiums

Not applicable

D. Medical Loss Ratio Rebates

Not applicable

E. Calculation on Nonadmitted Accrued Retrospective Premiums

Not applicable

F. Risk Sharing Provisions of the Affordable Care Act

Not applicable

Note 25 - Change in Incurred Losses and Loss Adjustment Expenses

6. Activity in the liability for unpaid claims and claim adjustment expenses is summarized as follows as of:

	<u>December 31, 2015</u>	<u>December 31, 2014</u>
Total net loss and loss adjustment expenses at beginning of year	<u>\$ 8,073,390</u>	<u>\$ 7,363,167</u>
Amount incurred in current year:		
On current year losses	21,467,000	19,556,000
On prior years losses	<u>(1,022,380)</u>	<u>(597,384)</u>
Total incurred	<u>20,444,620</u>	<u>18,958,616</u>
Amount paid in current year:		
On current year losses	(15,710,000)	(14,109,000)
On prior years losses	<u>(4,579,045)</u>	<u>(4,139,393)</u>
Total paid	<u>(20,289,045)</u>	<u>(18,248,393)</u>
Total net loss and loss adjustment expenses at end of year	<u>\$ 8,228,965</u>	<u>\$ 8,073,390</u>
	=====	=====

Reserves for incurred loss and loss adjustment expenses attributable to insured events of prior years has decreased by \$1,022,380 from December 31, 2014 to December 31, 2015 as a result of re-estimation of unpaid losses and loss adjustment expenses. The change is generally the result of ongoing analysis of recent loss development trends. The Company has also increased it's over all IBNR by \$230,000 for 2015 and \$750,000 for 2014. Original estimates are increased or decreased as additional information becomes known regarding individual losses.

Note 26 - Intercompany Pooling Arrangements

A. Not applicable

Note 27 - Structured Settlements

A. Reserves Released due to Purchase of Annuities

Not applicable

B. Annuity Insurers with Balances due Greater than 1% of Policyholders' Surplus

Not applicable

Note 28 - Health Care Receivables

A. and B. Not applicable

Note 29 - Participating Accident and Health Policies

A. Not applicable

Note 30 - Premium Deficiency Reserves

A. The Company evaluated the need to record a premium deficiency reserve as of the end of the current year. This evaluation was completed on February 10, 2016. No reserve has been recorded for the current year. The Company does not anticipate investment income when evaluating the need for premium deficiency reserves.

Note 31 - High Deductibles

A. Not applicable

Note 32 - Discounting of Liabilities for Unpaid Loss and Unpaid Loss Adjustment Expenses

A. Tabular Discounts

Not applicable

B. Non-Tabular Discounts

Not applicable

C. Changes in Discount Assumptions

Not applicable

Note 33 – Asbestos and Environmental Reserves

A. Five-Year Rollforward of Asbestos Reserves, Gross and Net

Not applicable

B. Asbestos IBNR and Bulk Reserve, Direct, Assumed and Net

Not applicable

C. Asbestos LAE Reserve, Direct, Assumed and Net

Not applicable

D. Five-Year Rollforward of Environmental Reserves, Gross and Net

Not applicable

E. Environmental IBNR and Bulk Reserve, Direct, Assumed and Net:

Not applicable

F. Environmental LAE Reserves, Direct, Assumed and Net

Not applicable

Note 34 - Subscriber Savings Accounts

A. Not applicable

Note 35 - Multiple Peril Crop Insurance

A. Not applicable

Note 36 – Financial Guaranty Insurance

A. and B. Not applicable

WAYNE MUTUAL INSURANCE COMPANY
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?
If yes, complete Schedule Y, Parts 1, 1A and 2.

Yes [X] No []

1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?

Yes [X] No [] N/A []

1.3

State regulating? OHIO

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes [] No [X]

2.2

If yes, date of change:

3.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2011

3.2

State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity.
This date should be the date of the examined balance sheet and not the date the report was completed or released.

12/31/2011

3.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

08/10/2012

3.4

By what department or departments?
Ohio Department of Insurance Office of Financial Regulation Services

3.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with departments?

Yes [X] No [] N/A []

3.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes [X] No [] N/A []

4.1

During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.11

sales of new business?

Yes [] No [X]

4.12

renewals?

Yes [] No [X]

4.2

During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.21

sales of new business?

Yes [] No [X]

4.22

renewals?

Yes [] No [X]

5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes [] No [X]

5.2

If yes, provide name of 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	2 NAIC Company Code	3 State of Domicile
Name of Entity		

6.1

Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes [] No [X]

6.2

If yes, give full information:

7.1

Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?

Yes [] No [X]

7.2

If yes,

7.21

State the percentage of foreign control

7.22

State the nationality(ies) of the foreign person(s) or entity(ies); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(ies) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity

8.1

Is the company a subsidiary of a bank holding company regulated with 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 the response to 8.3 is yes, please provide below the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
Buffamante, Whipple, Buttafaro, P.C. 130 South Union Street Olean, NY 14760

10.1

Has the insurer been granted an exemptions to the prohibited non-audit services provided by the certified independent public account requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?

Yes [] No [X]

10.2

If the response to 10.1 is yes, provide information related to this exemption:

10.3

Has the insurer been granted any exemptions related to other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?

Yes [] No [X]

10.4

If the response to 10.3 is yes, provide information related to this exemption:

10.5

Has the reporting entity established an Audit Committee in complied with the domiciliary state insurance laws?

Yes [X] No [] N/A []

10.6

If the response to 10.5 is no or n/a, please explain:

11.

What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
Joseph L. Petrelli Demotech, Inc. 2715 Tuller Parkway Dublin, OH 43017

WAYNE MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

12.1

Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?

Yes ☐ No ☒

12.11

Name of real estate holding company

12.12

Number of parcels involved

0

12.13

Total book/adjusted carrying value

\$0

12.2

If yes, provide explanation

13.

FOR UNITED STATES BRANCES OF ALIEN REPORTING ENTITIES ONLY:

13.1

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

13.2

Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?

Yes ☐ No ☒

13.3

Have there been any changes made to any of the trust indentures during the year?

Yes ☐ No ☒

13.4

If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?

Yes ☐ No ☐ N/A ☒

14.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?

Yes ☒ No ☐

(a)

Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

(b)

Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

(c)

Compliance with applicable governmental laws, rules and regulations;

(d)

The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

(e)

Accountability for adherence to the code.

14.11

If the response to 14.1 is no, please explain:

14.2

Has the code of ethics for senior managers been amended?

Yes ☐ No ☒

14.21

If the response to 14.2 is yes, provide information related to amendment(s).

14.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes ☐ No ☒

14.31

If the response to 14.3 is yes, provide the nature of any waiver(s).

15.1

Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?

Yes ☐ No ☒

15.2

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

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

BOARD OF DIRECTORS

16.

Is the purchase or sale of all investments of the reporting entity passed upon either by the Board of Directors or a subordinator committee thereof?

Yes ☒ No ☐

17.

Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors an all subordinator committees thereof?

Yes ☒ No ☐

18.

Has the reporting entity an established procedure for disclosure to its Board of Directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person?

Yes ☒ No ☐

FINANCIAL

19.

Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?

Yes ☐ No ☒

20.1

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

20.11

To directors or other officers

\$0

20.12

To stockholders not officers

\$0

20.13

Trustees, supreme or grand (Fraternal only)

\$0

20.2

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

20.21

To directors or other officers

\$0

20.22

To stockholders not officers

\$0

20.23

Trustees, supreme or grand (Fraternal only)

\$0

21.1

Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reporting in the statement?

Yes ☐ No ☒

21.2

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

21.21

Rented from others

\$0

21.22

Borrowed from others

\$0

21.23

Leased from others

\$0

21.24

Other

\$0

22.1

Does this statement include payments for assessments as described in the *Annual Statement Instructions* other than guaranty fund or guaranty association assessments?

Yes ☐ No ☒

22.2

If answer is yes:

22.21

Amount paid as losses or risk adjustment

\$0

22.22

Amount paid as expenses

\$0

22.23

Other amounts paid

\$0

23.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes ☐ No ☒

23.2

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

\$0

INVESTMENT

24.01

Were all of the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date (other than securities lending programs addressed in 24.03)?

Yes ☒ No ☐

24.02

If no, give full and complete information, relating thereto:

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

24.03

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

24.04

Does the company's security lending program meet the requirements for a conforming program as outlined in the *Risk-Based Capital Instructions*?

Yes [☐] No [☐] N/A [☒]

24.05

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

\$ 0

24.06

If answer to 24.04 is no, report amount of collateral for other programs

\$ 0

24.07

Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract?

Yes [☐] No [☐] N/A [☒]

24.08

Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?

Yes [☐] No [☐] N/A [☒]

24.09.

Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending?

Yes [☐] No [☐] N/A [☒]

24.10

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

24.101

Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:

\$ 0

24.102

Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:

\$ 0

24.103

Total payable for securities lending reported on the liability page:

\$ 0

25.1

Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is current in force? (Exclude securities subject to Interrogatory 21.1 and 24.03.)

Yes [☒] No [☐]

25.2

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

25.21

Subject to repurchase agreements

\$ 0

25.22

Subject to reverse repurchase agreements

\$ 0

25.23

Subject to dollar repurchase agreements

\$ 0

25.24

Subject to reverse dollar repurchase agreements

\$ 0

25.25

Placed under option agreements

\$ 0

25.26

Letter stock or securities restricted as sale – excluding FHLB Capital Stock

\$ 0

25.27

FHLB Capital Stock

\$ 74,600

25.28

On deposit with states

\$ 0

25.29

On deposit with other regulatory bodies

\$ 0

25.30

Pledged as collateral – excluding collateral pledged to an FHLB

\$ 0

25.31

Pledged as collateral to FHLB – including assets backing funding agreements

\$ 0

25.32

Other

\$ 0

25.3

For category (25.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount
		\$

26.1

Does the reporting entity have any hedging transactions reported on Schedule DB?

Yes [☐] No [☒]

26.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?
If no, attach a description with this statement.

Yes [☐] No [☐] N/A [☒]

27.1

Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?

Yes [☒] No [☐]

27.2

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

\$ 40,853

28.

Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*?

Yes [☐] No [☒]

28.01

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

28.02

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

1 Name(s)	2 Location(s)	3 Complete Explanation(s)
WELLS FARGO ADVISORS	495 METRO PL S STE 330, DUBLIN, OH 43017	BROKERAGE FIRM INSURED BY SPIC
WELLS FARGO ADVISORS	201 EAST LIBERTY ST, WOOSTER, OH 44691	BROKERAGE FIRM INSURED BY SPIC
FIRST EMPIRE SECURITIES INC	100 MOTOR PARKWAY, HAUPPAUGE, NY 11788	BROKERAGE FIRM INSURED BY SPIC

28.03

Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?

Yes [☐] No [☒]

28.04

If yes, give full and complete information relating thereto:

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

28.05

Identify all investment advisors, broker/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
WELLS FARGO ADVISORS	JAMES ROWLETTE	495 METRO PL S STE 330, DUBLIN, OH 43017
WELLS FARGO ADVISORS	THOMAS HILT	201 EAST LIBERTY ST, WOOSTER, OH 44691
FIRST EMPIRE SECURITIES INC	JACK DENNY	100 MOTOR PARKWAY, HAUPPAUGE, NY 11788

29.1

Does the reporting entity have any diversified mutual funds reported in Schedule D-Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?

Yes [☐] No [☐]

WAYNE MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

29.2 If yes, complete the following schedule:

1 CUSIP	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
19248M 10 3	COHEN & STEERS GLOBAL	44,462
354723 62 9	FRANKLIN OHIO INSD TAX	141,249
38145C 66 1	GOLDMAN SACHS STRATEGIC INC	474,954
416646 19 8	HARTFORD MUT FDS - SHORT DURATION	194,913
416648 55 8	HARTFORD MUTUAL FDS - FLOATING RATE	414,715
416646 15 6	HARTFORD MUTUAL FUNDS INC	157,718
29.2999	TOTAL	1,428,011

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

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holdings	4 Date of Valuation
COHEN & STEERS GLOBAL	Visa Inc Class A	783	12/31/2015
COHEN & STEERS GLOBAL	Exxon Mobil Corporation	738	12/31/2015
COHEN & STEERS GLOBAL	Walt Disney Co	729	12/31/2015
COHEN & STEERS GLOBAL	Avago Technologies Ltd	654	12/31/2015
COHEN & STEERS GLOBAL	JPMorgan Chase & Co	547	12/31/2015
FRANKLIN OHIO INSD TAX	Hamilton Cnty Ohio Sales Tax Sales Ta 5%	3,277	12/31/2015
FRANKLIN OHIO INSD TAX	Ohio St Higher Edl Fac Commn R Rev 5.25%	3,037	12/31/2015
FRANKLIN OHIO INSD TAX	Amer Mun Pwr Ohio Inc Rev Engy Re 5.25%	2,797	12/31/2015
FRANKLIN OHIO INSD TAX	Cleveland Ohio Arpt Sys Rev Rev Bds 5%	2,726	12/31/2015
FRANKLIN OHIO INSD TAX	Jobsohio Beverage Sys Ohio Sta Rev Bd 5%	2,670	12/31/2015
GOLDMAN SACHS STRATEGIC INC	Italy(Rep Of) 2.35%	9,072	12/31/2015
GOLDMAN SACHS STRATEGIC INC	Spain(Kingdom Of) 5.5%	7,219	12/31/2015
GOLDMAN SACHS STRATEGIC INC	Italian Govt Btp 0.65% 01 Nov 2020	6,364	12/31/2015
GOLDMAN SACHS STRATEGIC INC	Spain(Kingdom Of) 1.15%	5,937	12/31/2015
GOLDMAN SACHS STRATEGIC INC	Fed Natl Mort Assc 3%	5,557	12/31/2015
HARTFORD MUT FDS - SHORT DURATION	Us 2yr Note (Cbt) Mar16 Xcbt 20160331	28,905	12/31/2015
HARTFORD MUT FDS - SHORT DURATION	Us 5yr Note (Cbt) Mar16 Xcbt 20160331	22,376	12/31/2015
HARTFORD MUT FDS - SHORT DURATION	FHLMC 0.875%	11,402	12/31/2015
HARTFORD MUT FDS - SHORT DURATION	FNMA 3.5%	1,754	12/31/2015
HARTFORD MUT FDS - SHORT DURATION	FNMA 3%	1,735	12/31/2015
HARTFORD MUTUAL FDS - FLOATING RATE	U.S. Renal Care Inc. 2015 Term Loan B	4,437	12/31/2015
HARTFORD MUTUAL FDS - FLOATING RATE	Jbs Usa Llc Term Loan B	4,396	12/31/2015
HARTFORD MUTUAL FDS - FLOATING RATE	Avago Technologies Cayman Ltd. Term Loan B	4,272	12/31/2015
HARTFORD MUTUAL FDS - FLOATING RATE	Endo Lux Finance Company 2015 Term Loan B	4,189	12/31/2015
HARTFORD MUTUAL FDS - FLOATING RATE	First Data Corp 2018 New Dollar Term Loans	4,023	12/31/2015
HARTFORD MUTUAL FUNDS INC	US Treasury TIP	11,277	12/31/2015
HARTFORD MUTUAL FUNDS INC	US Treasury TIP	11,182	12/31/2015
HARTFORD MUTUAL FUNDS INC	US Treasury TIP 0.125%	10,204	12/31/2015
HARTFORD MUTUAL FUNDS INC	US Treasury TIP	10,047	12/31/2015
HARTFORD MUTUAL FUNDS INC	US Treasury TIP	9,779	12/31/2015

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

		1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1	Bonds	38,549,262	38,088,916	(460,346)
30.2	Preferred Stocks	141,135	173,870	32,735
30.3	Totals	38,690,397	38,262,786	(427,611)

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

- 31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?

Yes [X] No []
- 31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?

Yes [X] No []
- 31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliance pricing source for purposes of disclosure of fair value for Schedule D:
- 32.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed?

Yes [X] No []
- 32.2 If no, list exceptions:

OTHER

- 33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?

\$267,587
- 33.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

WAYNE MUTUAL INSURANCE COMPANY
GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

	1 Name	2 Amount Paid
	INSURANCE SERVICES OFFICE INC	\$ 99,049
34.1	Amount of payments for legal expenses, if any?	\$ 7,700
34.2	List the name of the firm and the amount paid if any such payment represented25% or more of the total payments for legal expenses during the period covered by this statement.	
	1 Name	2 Amount Paid
	LOGEE, HOSTETLER, STUTZMAN & LEHMAN	\$ 6,900
35.1	Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?	\$ 9,599
35.2	List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.	
	1 Name	2 Amount Paid
	NAMIC	\$ 2,622

GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

1.1

Does the reporting entity have any direct Medicare Supplement Insurance in force?

Yes [☐]

No [☒ X]

1.2

If yes, indicate premium earned on U.S. business only.

\$

0

1.3

What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?

\$

0

1.31

Reason for excluding:

1.4

Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.

\$

0

1.5

Indicate total incurred claims on all Medicare Supplement insurance.

\$

0

1.6

Individual policies:

Most current three years:

1.61

Total premium earned

\$

0

1.62

Total incurred claims

\$

0

1.63

Number of covered lives

0

All years prior to most current three years:

1.64

Total premium earned

\$

0

1.65

Total incurred claims

\$

0

1.66

Number of covered lives

0

1.7

Group policies:

Most current three years:

1.71

Total premium earned

\$

0

1.72

Total incurred claims

\$

0

1.73

Number of covered lives

0

All years prior to most current three years:

1.74

Total premium earned

\$

0

1.75

Total incurred claims

\$

0

1.76

Number of covered lives

0

2.

Health Test:

1

Current Year

2

Prior Year

2.1

Premium Numerator

\$

0

\$

0

2.2

Premium Denominator

\$

41,021,595

\$

37,634,719

2.3

Premium Ratio (2.1/2.2)

2.4

Reserve Numerator

\$

0

\$

0

2.5

Reserve Denominator

\$

29,448,979

\$

27,346,390

2.6

Reserve Ratio (2.4/2.5)

3.1

Does the reporting entity issue both participating and non-participating policies?

Yes [☐]

No [☒ X]

3.2

If yes, state the amount of calendar year premiums written on:

3.21

Participating policies

\$

0

3.22

Non-participating policies

\$

0

4.

FOR MUTUAL REPORTING ENTITIES AND RECIPROCAL EXCHANGES ONLY:

4.1

Does the reporting entity issue assessable policies?

Yes [☐]

No [☒ X]

4.2

Does the reporting entity issue non-assessable policies?

Yes [☒ X]

No [☐]

4.3

If assessable policies are issued, what is the extent of the contingent liability of the policyholders?

%

4.4

Total amount of assessments paid or ordered to be paid during the year on deposit notes or contingent premiums.

\$

0

5.

FOR RECIPROCAL EXCHANGES ONLY:

5.1

Does the exchange appoint local agents?

Yes [☐]

No [☐]

5.2

If yes, is the commission paid:

5.21

Out of Attorney's-in-fact compensation

Yes [☐]

No [☐]

N/A [☐]

5.22

As a direct expense of the exchange

Yes [☐]

No [☐]

N/A [☐]

5.3

What expenses of the exchange are not paid out of the compensation of the Attorney-in-fact?

5.4

Has any Attorney-in-fact compensation, contingent on fulfillments of certain conditions, been deferred?

Yes [☐]

No [☐]

5.5

If yes, give full information:

6.1

What provision has this reporting entity made to protect itself from an excessive loss in the event of a catastrophe under a workers' compensation contract issued without limit of loss?

6.2

Describe the method used to estimate this reporting entity's probable maximum insurance loss, and identify the type of insured exposures comprising that probable maximum loss, the locations of concentrations of those exposures and the external resources (such as consulting firms or computer software models), if any, used in the estimation process:
Computer modeling by Guy Carpenter using the Applied Insurance Reseach (AIR) Touchstone V3 model. The model totaled all company property coverage by Zip Code. Greatest concentration in Wayne County area.

6.3

What provision has this reporting entity made (such as catastrophic reinsurance program) to protect itself from an excessive loss arising from the types and concentrations of insured exposures comprising its probable maximum property insurance loss?
The Company has a \$24 million catastrophic excess reinsurance program

6.4

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

Yes [☒ X]

No [☐]

6.5

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

7.1

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

Yes [☐]

No [☒ X]

7.2

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

0

16

GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

7.3	If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?	Yes []	No []
8.1	Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?	Yes []	No [X]
8.2	If yes, give full information		
9.1	Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results: (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term; (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer; (c) Aggregate stop loss reinsurance coverage; (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party; (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity?	Yes []	No [X]
9.2	Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member where: (a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract.	Yes []	No [X]
9.3	If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9: (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income; (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and (c) A brief discussion of management’s principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.		
9.4	Except for transactions meeting the requirements of paragraph 31 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either: (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles (“SAP”) and as a deposit under generally accepted accounting principles (“GAAP”); or (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?	Yes []	No [X]
9.5	If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.		
9.6	The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria: (a) The entity does not utilize reinsurance; or (b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or (c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement.	Yes []	No [X]
10.	If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done?	Yes [X]	No [] N/A []
11.1	Has the reporting entity guaranteed policies issued by any other entity and now in force?	Yes [X]	No []
11.2	If yes, give full information NAMICO POOL AA-9995095 Mutual Reinsurance Bureau AA-9995035		
12.1	If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the assets schedule, Page 2, state the amount of corresponding liabilities recorded for: 12.11 Unpaid losses 12.12 Unpaid underwriting expenses (including loss adjustment expenses)	\$	0
12.2	Of the amount on Line 15.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds?	\$	0
12.3	If the reporting entity underwrites commercial insurance risks, such as workers’ compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses?	Yes []	No [X] N/A []
12.4	If yes, provide the range of interest rates charged under such notes during the period covered by this statement: 12.41 From 12.42 To		%
12.5	Are letters of credit or collateral and other funds received from insureds being utilized by the reporting entity to secure premium notes or promissory notes taken by a reporting entity, or to secure any of the reporting entity’s reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies?	Yes []	No [X]
12.6	If yes, state the amount thereof at December 31 of current year: 12.61 Letters of Credit 12.62 Collateral and other funds	\$	0
13.1	Largest net aggregate amount insured in any one risk (excluding workers’ compensation):	\$	250,000
13.2	Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision?	Yes []	No [X]
13.3	State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount.		10
14.1	Is the company a cedant in a multiple cedant reinsurance contract?	Yes []	No [X]

GENERAL INTERROGATORIES

PART 2 – PROPERTY & CASUALTY INTERROGATORIES

14.2

If yes, please describe the method of allocating and recording reinsurance among the cedants:

14.3

If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts?

Yes [☐] No [☐]

14.4

If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements?

Yes [☐] No [☐]

14.5

If the answer to 14.4 is no, please explain:

15.1

Has the reporting entity guaranteed any financed premium accounts?

Yes [☐] No [☒]

15.2

If yes, give full information

16.1

Does the reporting entity write any warranty business?

Yes [☐] No [☒]

If yes, disclose the following information for each of the following types of warranty coverage:

		1	2	3	4	5
		Direct Losses Incurred	Direct Losses Unpaid	Direct Written Premium	Direct Premium Unearned	Direct Premium Earned
16.11	Home	\$ 0	\$ 0	\$ 0	\$ 0	0
16.12	Products	\$ 0	\$ 0	\$ 0	\$ 0	0
16.13	Automobile	\$ 0	\$ 0	\$ 0	\$ 0	0
16.14	Other*	\$ 0	\$ 0	\$ 0	\$ 0	0

*

Disclose type of coverage:

17.1

Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F – Part 3 that it excludes from Schedule F – Part 5.

Yes [☐] No [☒]

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

17.11	Gross amount of unauthorized reinsurance in Schedule F – Part 3 excluded from Schedule F – Part 5	\$ 0
17.12	Unfunded portion of Interrogatory 17.11	\$ 0
17.13	Paid losses and loss adjustment expenses portion of Interrogatory 17.11	\$ 0
17.14	Case reserves portion of Interrogatory 17.11	\$ 0
17.15	Incurred but not reported portion of Interrogatory 17.11	\$ 0
17.16	Unearned premium portion of Interrogatory 17.11	\$ 0
17.17	Contingent commission portion of Interrogatory 17.11	\$ 0

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

17.18	Gross amount of unauthorized reinsurance in Schedule F – Part 3 excluded from Schedule F – Part 5	\$ 0
17.19	Unfunded portion of Interrogatory 17.18	\$ 0
17.20	Paid losses and loss adjustment expenses portion of Interrogatory 17.18	\$ 0
17.21	Case reserves portion of Interrogatory 17.18	\$ 0
17.22	Incurred but not reported portion of Interrogatory 17.18	\$ 0
17.23	Unearned premium portion of Interrogatory 17.18	\$ 0
17.24	Contingent commission portion of Interrogatory 17.18	\$ 0

18.1

Do you act as a custodian for health savings accounts?

Yes [☐] No [☒]

18.2

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

\$ 0

18.3

Do you act as an administrator for health savings accounts?

Yes [☐] No [☒]

18.4

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

\$ 0

FIVE-YEAR HISTORICAL DATA

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

	1 2015	2 2014	3 2013	4 2012	5 2011
Gross Premiums Written (Page 8, Part 1B, Cols. 1, 2 & 3)					
1. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....	8,936,500	7,950,849	7,421,169	6,944,986	6,874,898
2. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	17,930,214	16,372,792	15,525,469	11,423,842	11,005,051
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	18,536,732	17,086,641	16,087,816	14,186,201	12,381,389
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....					
5. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
6. Total (Line 35).....	45,403,446	41,410,282	39,034,454	32,555,029	30,261,338
Net Premiums Written (Page 8, Part 1B, Col. 6)					
7. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....	8,445,174	7,551,361	7,020,899	6,528,259	6,489,048
8. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	17,543,933	16,014,015	15,084,608	10,846,538	10,585,080
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	16,979,502	15,572,643	14,262,137	12,198,693	11,088,122
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....					
11. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
12. Total (Line 35).....	42,968,609	39,138,019	36,367,644	29,573,490	28,162,250
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8).....	5,942,393	5,927,786	1,400,091	1,377,841	1,162,970
14. Net investment gain (loss) (Line 11).....	926,652	943,815	1,106,640	880,850	989,128
15. Total other income (Line 15).....	620,906	585,711	508,022	570,486	527,489
16. Dividends to policyholders (Line 17).....					
17. Federal and foreign income taxes incurred (Line 19).....	2,715,237	2,446,141	968,715	813,986	431,254
18. Net income (Line 20).....	4,774,714	5,011,171	2,046,038	2,015,191	2,248,333
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3).....	65,431,442	57,735,744	49,696,810	41,741,331	37,319,862
20. Premiums and considerations (Page 2, Col. 3):					
20.1 In course of collection (Line 15.1).....	505,527	454,968	416,575	367,700	331,667
20.2 Deferred and not yet due (Line 15.2).....	10,032,245	8,978,668	8,222,286	7,071,227	6,517,076
20.3 Accrued retrospective premiums (Line 15.3).....					
21. Total liabilities excluding protected cell business (Page 3, Line 26).....	33,227,253	30,141,649	27,416,824	22,387,831	20,617,014
22. Losses (Page 3, Line 1).....	7,558,965	7,533,390	6,871,167	5,429,582	4,789,716
23. Loss adjustment expenses (Page 3, Line 3).....	670,000	540,000	492,000	477,000	525,000
24. Unearned premiums (Page 3, Line 9).....	21,220,014	19,273,000	17,769,700	14,468,429	13,618,992
25. Capital paid up (Page 3, Lines 30 & 31).....					
26. Surplus as regards policyholders (Page 3, Line 37).....	32,204,189	27,594,095	22,279,986	19,353,500	16,702,848
Cash Flow (Page 5)					
27. Net cash from operations (Line 11).....	6,602,262	6,630,409	5,370,367	3,100,522	1,419,803
Risk-Based Capital Analysis					
28. Total adjusted capital.....	32,204,189	27,594,095	22,279,986	19,353,500	16,702,848
29. Authorized control level risk-based capital.....	3,527,954	3,002,970	2,637,699	2,320,181	2,118,914
Percentage Distribution of Cash, Cash Equivalents and Invested Assets (Page 2, Col. 3) (Item divided by Page 2, Line 12, Col. 3) x 100.0					
30. Bonds (Line 1).....	71.9	69.5	69.5	66.1	70.3
31. Stocks (Lines 2.1 & 2.2).....	16.6	18.3	19.3	21.5	23.4
32. Mortgage loans on real estate (Lines 3.1 & 3.2).....	0.1	0.1	0.1	0.2	0.2
33. Real estate (Lines 4.1, 4.2 & 4.3).....	0.9	1.1	1.4	1.4	1.4
34. Cash, cash equivalents and short-term investments (Line 5).....	10.6	11.0	9.7	10.9	4.7
35. Contract loans (Line 6).....					
36. Derivatives (Line 7).....					
37. Other invested assets (Line 8).....					
38. Receivable for securities (Line 9).....					
39. Securities lending reinvested collateral assets (Line 10).....					
40. Aggregate write-ins for invested assets (Line 11).....					
41. Cash, cash equivalents and invested assets (Line 12).....	100.0	100.0	100.0	100.0	100.0
Investments in Parent, Subsidiaries and Affiliates					
42. Affiliated bonds (Sch. D, Summary, Line 12, Col. 1).....					
43. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1).....					
44. Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1).....	500	500	500	500	500
45. Affiliated short-term investments (subtotals included in Schedule DA, Verification, Column 5, Line 10).....					
46. Affiliated mortgage loans on real estate.....					
47. All other affiliated.....					
48. Total of above lines 42 to 47.....	500	500	500	500	500
49. Total investment in parent included in Lines 42 to 47 above.....					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0).....	0.0	0.0	0.0	0.0	0.0

WAYNE MUTUAL INSURANCE COMPANY
FIVE-YEAR HISTORICAL DATA
(Continued)

	1	2	3	4	5
	2015	2014	2013	2012	2011
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24).....	.....(336,375)	.....196,660	.....563,280	.....477,763	.....(55,153)
52. Dividends to stockholders (Line 35).....					
53. Change in surplus as regards policyholders for the year (Line 38).....	.....4,610,094	.....5,314,109	.....2,926,486	.....2,650,652	.....2,215,595
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....	.....4,620,370	.....3,488,027	.....3,223,029	.....2,971,932	.....3,218,922
55. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	.....6,964,028	.....6,767,052	.....6,660,076	.....6,232,379	.....6,855,110
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	.....6,762,617	.....6,815,163	.....7,206,899	.....8,395,047	.....7,889,280
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....					
58. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
59. Total (Line 35).....	.....18,347,015	.....17,070,242	.....17,090,004	.....17,599,358	.....17,963,312
Net Losses Paid (Page 9, Part 2, Col. 4)					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4).....	.....3,734,126	.....3,269,859	.....3,114,962	.....2,739,817	.....3,166,596
61. Property lines (Lines 1, 2, 9, 12, 21 & 26).....	.....6,964,028	.....6,767,052	.....6,631,831	.....5,561,808	.....6,678,706
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27).....	.....6,514,672	.....5,670,676	.....6,879,381	.....6,618,450	.....7,376,482
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34).....					
64. Nonproportional reinsurance lines (Lines 31, 32 & 33).....					
65. Total (Line 35).....	.....17,212,826	.....15,707,587	.....16,626,174	.....14,920,075	.....17,221,784
Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1).....	.....100.0	.....100.0	.....100.0	.....100.0	.....100.0
67. Losses incurred (Line 2).....	.....42.0	.....43.5	.....54.6	.....54.2	.....56.9
68. Loss expenses incurred (Line 3).....	.....7.8	.....6.9	.....6.5	.....7.4	.....7.5
69. Other underwriting expenses incurred (Line 4).....	.....35.7	.....33.9	.....34.7	.....33.6	.....31.4
70. Net underwriting gain (loss) (Line 8).....	.....14.5	.....15.8	.....4.2	.....4.8	.....4.1
Other Percentages					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0).....	.....32.6	.....31.1	.....30.1	.....30.7	.....29.6
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0).....	.....49.8	.....50.4	.....61.1	.....61.6	.....64.5
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35, divided by Page 3, Line 37, Col. 1 x 100.0).....	.....133.4	.....141.8	.....163.2	.....152.8	.....168.6
One Year Loss Development (000 omitted)					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11).....	.....(1,207)	.....(691)	.....(703)	.....(967)	.....(1,865)
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100).....	.....(4.4)	.....(3.1)	.....(3.6)	.....(5.8)	.....(12.9)
Two Year Loss Development (000 omitted)					
76. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2-Summary, Line 12, Col. 12).....	.....(928)	.....(854)	.....(1,086)	.....(2,218)	.....(1,188)
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0).....	.....(4.2)	.....(4.4)	.....(6.5)	.....(15.3)	.....(8.0)

If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of

SSAP No. 3, Accounting Changes and Correction of Errors?

Yes[] No[X]

If no, please explain:

SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES

SCHEDULE P - PART 1 - SUMMARY

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported- Direct and Assumed
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)	
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded			
1. Prior.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....	.....	.....	.....	.....	.....0	.....XXX.....
2. 2006.....	.....17,660	.....1,374	.....16,286	.....11,451	.....1,831	.....195	.....13	.....1,158	.....55	.....479	.....10,905	.....XXX.....
3. 2007.....	.....18,087	.....1,559	.....16,528	.....12,035	.....2,027	.....181	.....9	.....1,292	.....63	.....445	.....11,409	.....XXX.....
4. 2008.....	.....18,346	.....1,583	.....16,763	.....13,838	.....2,446	.....230	.....19	.....1,600	.....161	.....528	.....13,042	.....XXX.....
5. 2009.....	.....22,523	.....1,599	.....20,924	.....14,139	.....1,164	.....255	.....21	.....1,580	.....88	.....580	.....14,701	.....XXX.....
6. 2010.....	.....26,276	.....1,943	.....24,333	.....16,004	.....475	.....246	.....6	.....1,913	.....10	.....348	.....17,672	.....XXX.....
7. 2011.....	.....30,268	.....2,099	.....28,169	.....17,364	.....358	.....304	.....3	.....1,874	.....8	.....376	.....19,173	.....XXX.....
8. 2012.....	.....31,705	.....2,981	.....28,724	.....18,688	.....3,144	.....317	.....13	.....1,962	.....5	.....416	.....17,805	.....XXX.....
9. 2013.....	.....35,733	.....2,667	.....33,066	.....18,770	.....1,521	.....497	.....29	.....1,866	.....18	.....384	.....19,565	.....XXX.....
10. 2014.....	.....39,906	.....2,271	.....37,635	.....15,660	.....638	.....250	.....2	.....2,102	.....9	.....420	.....17,363	.....XXX.....
11. 2015.....	.....43,455	.....2,435	.....41,020	.....13,476	.....198	.....272	.....13	.....2,181	.....8	.....284	.....15,710	.....XXX.....
12. Totals.....	.....XXX.....	.....XXX.....	.....XXX.....	.....151,425	.....13,802	.....2,747	.....128	.....17,528	.....425	.....4,260	.....157,345	.....XXX.....

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding- Direct and Assumed
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded					
1. Prior.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	....XXX.....
2. 2006.....	.....	.....	.....	.....	.....	.....	.....	.....	.....1	.....	.....	.....1	....XXX.....
3. 2007.....	.....11	.....	.....3	.....	.....	.....	.....	.....	.....1	.....	.....	.....15	....XXX.....
4. 2008.....	.....110	.....	.....29	.....3	.....	.....	.....2	.....	.....1	.....	.....	.....139	....XXX.....
5. 2009.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....0	....XXX.....
6. 2010.....	.....55	.....	.....16	.....1	.....	.....	.....1	.....	.....3	.....	.....	.....74	....XXX.....
7. 2011.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....2	.....0	....XXX.....
8. 2012.....	.....218	.....27	.....94	.....4	.....	.....	.....4	.....	.....11	.....	.....10	.....296	....XXX.....
9. 2013.....	.....329	.....	.....204	.....7	.....	.....	.....7	.....	.....19	.....	.....72	.....552	....XXX.....
10. 2014.....	.....809	.....	.....537	.....55	.....	.....	.....35	.....	.....69	.....	.....106	.....1,395	....XXX.....
11. 2015.....	.....3,714	.....448	.....2,061	.....86	.....	.....	.....146	.....	.....370	.....	.....197	.....5,757	....XXX.....
12. Totals...	.....5,246	.....475	.....2,944	.....156	.....0	.....0	.....195	.....0	.....475	.....0	.....387	.....8,229	....XXX.....

	Total Losses and Loss Expenses Incurred			Loss and Loss Expense Percentage (Incurred/Premiums Earned)			Nontabular Discount		34 Inter-Company Pooling Participation Percentage	Net Balance Sheet Reserves after Discount	
	26 Direct and Assumed	27 Ceded	28 Net	29 Direct and Assumed	30 Ceded	31 Net	32 Loss	33 Loss Expense		35 Losses Unpaid	36 Loss Expenses Unpaid
1. Prior..	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....	.....	.....XXX.....	.....0	.....0
2. 2006.	.....12,805	.....1,899	.....10,906	.....72.5	.....138.2	.....67.0	.....	.....	.....	.....0	.....1
3. 2007.	.....13,523	.....2,099	.....11,424	.....74.8	.....134.6	.....69.1	.....	.....	.....	.....14	.....1
4. 2008.	.....15,810	.....2,629	.....13,181	.....86.2	.....166.1	.....78.6	.....	.....	.....	.....136	.....3
5. 2009.	.....15,974	.....1,273	.....14,701	.....70.9	.....79.6	.....70.3	.....	.....	.....	.....0	.....0
6. 2010.	.....18,238	.....492	.....17,746	.....69.4	.....25.3	.....72.9	.....	.....	.....	.....70	.....4
7. 2011.	.....19,542	.....369	.....19,173	.....64.6	.....17.6	.....68.1	.....	.....	.....	.....0	.....0
8. 2012.	.....21,294	.....3,193	.....18,101	.....67.2	.....107.1	.....63.0	.....	.....	.....	.....281	.....15
9. 2013.	.....21,692	.....1,575	.....20,117	.....60.7	.....59.1	.....60.8	.....	.....	.....	.....526	.....26
10. 2014.	.....19,462	.....704	.....18,758	.....48.8	.....31.0	.....49.8	.....	.....	.....	.....1,291	.....104
11. 2015.	.....22,220	.....753	.....21,467	.....51.1	.....30.9	.....52.3	.....	.....	.....	.....5,241	.....516
12. Totals	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....0	.....0	.....XXX.....	.....7,559	.....670

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

SCHEDULE P - PART 2 - SUMMARY

Years in Which Losses Were Incurred	Incurred Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										DEVELOPMENT	
	1	2	3	4	5	6	7	8	9	10	11	12
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	One Year	Two Year
1. Prior.....	.....1,643	.....1,261	.....1,070	.....1,041	.....1,022	.....1,011	.....1,003	.....1,000	.....1,033	.....1,033	.....0	.....33
2. 2006.....	.....10,960	.....10,365	.....9,955	.....9,812	.....9,791	.....9,797	.....9,796	.....9,794	.....9,792	.....9,802	.....10	.....8
3. 2007.....	.....XXX.....	.....11,620	.....10,744	.....10,275	.....10,197	.....10,205	.....10,201	.....10,198	.....10,194	.....10,194	.....0	.....(4)
4. 2008.....	.....XXX.....	.....XXX.....	.....13,227	.....11,782	.....11,580	.....11,776	.....11,729	.....11,724	.....11,734	.....11,741	.....7	.....17
5. 2009.....	.....XXX.....	.....XXX.....	.....XXX.....	.....14,237	.....13,504	.....13,170	.....13,149	.....13,214	.....13,211	.....13,209	.....(2)	.....(5)
6. 2010.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....17,848	.....16,118	.....15,846	.....15,844	.....15,842	.....15,840	.....(2)	.....(4)
7. 2011.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....18,122	.....17,508	.....17,339	.....17,345	.....17,307	.....(38)	.....(32)
8. 2012.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....16,828	.....16,244	.....16,055	.....16,133	.....78	.....(111)
9. 2013.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....19,080	.....18,539	.....18,250	.....(289)	.....(830)
10. 2014.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....17,567	.....16,596	.....(971)	.....XXX.....
11. 2015.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....18,924	.....XXX.....	.....XXX.....
12. Totals.....											.....(1,207)	.....(928)

SCHEDULE P - PART 3 - SUMMARY

Years in Which Losses Were Incurred	Cumulative Paid Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)										11	12
	1	2	3	4	5	6	7	8	9	10	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015		
1. Prior.....	.....000.....	.....539	.....871	.....954	.....1,022	.....1,011	.....1,003	.....1,000	.....1,033	.....1,033	.....XXX.....	.....XXX.....
2. 2006.....	.....7,139	.....9,224	.....9,601	.....9,778	.....9,762	.....9,797	.....9,796	.....9,794	.....9,792	.....9,802	.....XXX.....	.....XXX.....
3. 2007.....	.....XXX.....	.....7,717	.....9,590	.....9,921	.....10,098	.....10,166	.....10,172	.....10,169	.....10,181	.....10,180	.....XXX.....	.....XXX.....
4. 2008.....	.....XXX.....	.....XXX.....	.....8,390	.....10,529	.....11,071	.....11,395	.....11,607	.....11,604	.....11,606	.....11,603	.....XXX.....	.....XXX.....
5. 2009.....	.....XXX.....	.....XXX.....	.....XXX.....	.....9,769	.....12,487	.....13,076	.....13,134	.....13,208	.....13,211	.....13,209	.....XXX.....	.....XXX.....
6. 2010.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....13,441	.....15,311	.....15,571	.....15,773	.....15,778	.....15,769	.....XXX.....	.....XXX.....
7. 2011.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....14,563	.....16,496	.....17,035	.....17,295	.....17,307	.....XXX.....	.....XXX.....
8. 2012.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....12,776	.....15,172	.....15,680	.....15,848	.....XXX.....	.....XXX.....
9. 2013.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....13,721	.....16,642	.....17,717	.....XXX.....	.....XXX.....
10. 2014.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....12,446	.....15,270	.....XXX.....	.....XXX.....
11. 2015.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....13,537	.....XXX.....	.....XXX.....

SCHEDULE P - PART 4 - SUMMARY

Years in Which Losses Were Incurred	Bulk and IBNR Reserves on Net Losses and Defense and Cost Containment Expenses Reported at Year End (\$000 omitted)									
	1	2	3	4	5	6	7	8	9	10
	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015
1. Prior.....	.....778	.....187	.....106	.....18						
2. 2006.....	.....1,589	.....531	.....140	.....7	.....4					
3. 2007.....	.....XXX.....	.....1,611	.....561	.....89	.....15	.....6	.....5	.....5	.....2	.....3
4. 2008.....	.....XXX.....	.....XXX.....	.....1,522	.....243	.....67	.....101	.....12	.....10	.....18	.....28
5. 2009.....	.....XXX.....	.....XXX.....	.....XXX.....	.....965	.....194	.....21	.....3	.....1		
6. 2010.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....1,042	.....227	.....51	.....16	.....14	.....16
7. 2011.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....1,083	.....318	.....49	.....7	
8. 2012.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....1,294	.....313	.....85	.....94
9. 2013.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....1,504	.....623	.....204
10. 2014.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....1,924	.....517
11. 2015.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....XXX.....	.....2,121

WAYNE MUTUAL INSURANCE COMPANY
SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.	1 Active Status	Gross Premiums, Including Policy and Membership Fees Less Return Premiums and Premiums on Policies Not Taken		4 Dividends Paid or Credited to Policyholders on Direct Business	5 Direct Losses Paid (Deducting Salvage)	6 Direct Losses Incurred	7 Direct Losses Unpaid	8 Finance and Service Charges not Included in Premiums	9 Direct Premiums Written for Federal Purchasing Groups (Incl. in Col. 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama.....AL	...N....								
2. Alaska.....AK	...N....								
3. Arizona.....AZ	...N....								
4. Arkansas.....AR	...N....								
5. California.....CA	...N....								
6. Colorado.....CO	...N....								
7. Connecticut.....CT	...N....								
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	...N....								
16. Iowa.....IA	...N....								
17. Kansas.....KS	...N....								
18. Kentucky.....KY	...N....								
19. Louisiana.....LA	...N....								
20. Maine.....ME	...N....								
21. Maryland.....MD	...N....								
22. Massachusetts.....MA	...N....								
23. Michigan.....MI	...N....								
24. Minnesota.....MN	...N....								
25. Mississippi.....MS	...N....								
26. Missouri.....MO	...N....								
27. Montana.....MT	...N....								
28. Nebraska.....NE	...N....								
29. Nevada.....NV	...N....								
30. New Hampshire.....NH	...N....								
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....	33,751,882	32,199,898		14,579,447	15,055,473	7,609,992	540,789	
37. Oklahoma.....OK	...N....								
38. Oregon.....OR	...N....								
39. Pennsylvania.....PA	...N....								
40. Rhode Island.....RI	...N....								
41. South Carolina.....SC	...N....								
42. South Dakota.....SD	...N....								
43. Tennessee.....TN	...N....								
44. Texas.....TX	...N....								
45. Utah.....UT	...N....								
46. Vermont.....VT	...N....								
47. Virginia.....VA	...N....								
48. Washington.....WA	...N....								
49. West Virginia.....WV	...N....								
50. Wisconsin.....WI	...N....								
51. Wyoming.....WY	...N....								
52. American Samoa.....AS	...N....								
53. Guam.....GU	...N....								
54. Puerto Rico.....PR	...N....								
55. US Virgin Islands.....VI	...N....								
56. Northern Mariana Islands...MP	...N....								
57. Canada.....CAN	...N....								
58. Aggregate Other Alien.....OT	XXX	0	0	0	0	0	0	0	0
59. Totals.....	(a)....1	33,751,882	32,199,898	0	14,579,447	15,055,473	7,609,992	540,789	0

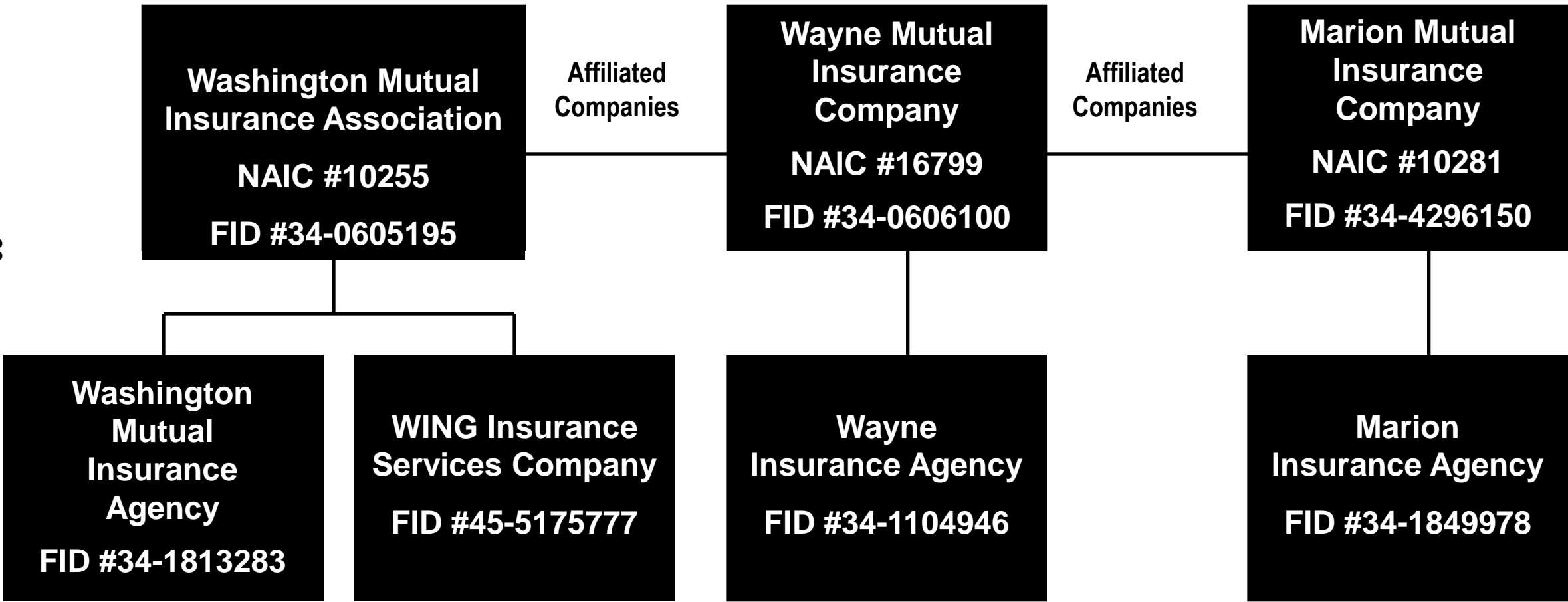
DETAILS OF WRITE-INS

58001.	XXX								
58002.	XXX								
58003.	XXX								
58998. Summary of remaining write-ins for Line 58 from overflow page	XXX	0	0	0	0	0	0	0	0
58999. Totals (Lines 58001 thru 58003+ Line 58998) (Line 58 above)	XXX	0	0	0	0	0	0	0	0

(a) Insert the number of "L" responses except for Canada and Other Alien.
(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer;
(E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) - None of the above - Not allowed to write business in the state.
Explanation of Basis of Allocation of Premiums by States, etc.
ALL OHIO

Schedule Y – Part 1 Organizational Chart
Wayne Mutual / Washington Mutual (Group Code #4678)

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