

ANNUAL STATEMENT

For the Year Ended

December 31, 2020

OF THE CONDITION AND AFFAIRS OF THE

SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION

ORGANIZED UNDER THE LAWS OF THE STATE OF OHIO

Made to the

INSURANCE COMMISSIONER OF THE STATE OF OHIO

Pursuant to the Laws thereof

NAIC Company Code	10272		
Home Office	13439 WOODWORTH RD Street and Number	NEW SPRINGFIELD 44443 City	OH Zip Code
Mail Address	PO BOX 228 Street and Number	NEW SPRINGFIELD 44443 City	OH Zip Code
Main Administrative Office	330-549-2880 Telephone Number		
Organized	JANUARY 1, 1892	Commenced Business	SEPTEMBER 1, 1852
Annual Statement Contact Person	CHRISTINE A SEIFERT	Telephone Number	330-549-2880
Contact Person Email Address	cseifert@springfieldmutual.com		

OFFICERS

President	J DANIEL SIMON	Vice President	LEE F KOHLER
Secretary	CHRISTINE A SEIFERT	Treasurer	CHRISTINE A SEIFERT

DIRECTORS

(ALL DIRECTORS MUST BE SHOWN)

J DANIEL SIMON WYNN A COOPER	LEE F KOHLER MARLENE M WENTZ	DONALD H SNYDER, JR	MICHAEL W BACON

State of Ohio

County of

MAHONING

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

Subscribed and sworn to before me, this _____

day of _____ 20____

Notary Public

President

Secretary

Signature of Person Preparing Statement

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

2020

ASSETS

		Assets Current Year	Nonadmitted Assets Current Year	Net Admitted Assets Current Year	Net Admitted Assets Prior Year
1	Bonds (Schedule D - Part 1)	0.00	0.00	0.00	
2	Preferred stocks, common stocks and mutual funds (Schedule D - Part 2)	330,606.29	0.00	330,606.29	317,597.37
3	Real estate (less liens, encumbrances) (Schedule A)	35,104.37	0.00	35,104.37	44,261.37
4	Cash (Schedule E)	3,650,970.42	0.00	3,650,970.42	3,439,567.19
5	Short-term investments		0.00	0.00	
6	Aggregate write-ins for invested assets		0.00	0.00	
7	Subtotals, cash and invested assets	4,016,681.08	0.00	4,016,681.08	3,801,425.93
8	Investment income due and accrued	5,614.22	0.00	5,614.22	8,707.28
9.1	Assessments or premiums in the course of collection (including agents balances)		0.00	0.00	
9.2	Deferred premiums, agents' balances and installments booked but deferred and not yet due		0.00	0.00	
9.3	Earned but unbilled premiums (post assessment)	27,330.00	0.00	27,330.00	28,210.00
10.1	Amounts recoverable from reinsurers	118,297.00	0.00	118,297.00	23,015.00
10.2	Funds held by or deposited with reinsured companies		0.00	0.00	
11.1	Current federal income tax recoverable and interest thereon	3,706.00	0.00	3,706.00	11,489.87
11.2	Net deferred tax asset		0.00	0.00	
12	Electronic data processing equipment and software		0.00	0.00	
13	Furniture and equipment		0.00	0.00	
14	Receivables from parent, subsidiaries and affiliates		0.00	0.00	
15	Aggregate write-ins for other than invested assets	0.00	0.00	0.00	0.00
16	Total Assets	4,171,628.30	0.00	4,171,628.30	3,872,848.08
	Details of Write-Ins for Assets:				
1501				0.00	
1502				0.00	
1503				0.00	
1598	Summary or remaining write-ins from overflow page	0.00	0.00	0.00	0.00
1599	Total aggregate write-ins	0.00	0.00	0.00	0.00

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

2020

LIABILITIES, SURPLUS AND OTHER FUNDS

		Current Year	Prior Year
1	Unpaid Losses (Underwriting Exhibit - Part 2A)	121,895.00	64,243.00
2	Unpaid loss adjustment expenses (Underwriting Exhibit - Part 2A)	5,000.00	5,000.00
3	Commissions due and payable to agents	20,306.33	23,204.37
4	Other expenses (excluding taxes, licenses and fees)	2,138.77	2,055.84
5	Taxes, licenses and fees (excluding federal income taxes)	631.00	654.96
6	Current federal income taxes (including \$0 on realized capital gains (losses))		
7	Net deferred tax liability		
8	Borrowed money and interest thereon		
9	Unearned assessment/premium reserve	606,976.75	620,877.75
10	Advance premium		
11	Ceded reinsurance premiums payable	33,706.00	35,458.00
12	Funds held by company under reinsurance treaties		
13	Amounts withheld or retained by company for account of others		
14	Provision for unauthorized reinsurance		
15	Payable to parent, subsidiaries and affiliates		
16	Aggregate write-ins for liabilities	0.00	0.00
17	Total liabilities	790,653.85	751,493.92
18	Surplus as regards policyholders	3,380,974.45	3,121,354.16
19	Total liabilities and surplus	4,171,628.30	3,872,848.08
	Details of Write-Ins for Liabilities:		
1601			
1602			
1603			
1698	Summary or remaining write-ins from overflow page	0.00	0.00
1699	Total aggregate write-ins	0.00	0.00

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

2020

		Current Year	Prior Year	
	UNDERWRITING INCOME			
1.1	Gross Assessments/Premiums earned	2,012,903.08	2,056,169.83	
1.2	Less: Return Assessments/Premiums earned	34,132.74	31,336.75	
1.3	Direct Assessments/Premiums earned	1,978,770.34	2,024,833.08	
1.4	Deduct premiums for reinsurance ceded (Reinsurance Schedule)	865,649.00	863,979.00	
1.5	Add premiums received for reinsurance assumed (Reinsurance Schedule)	0.00		
1.6	Net Assessments/Premiums earned	1,113,121.34	1,160,854.08	
	DEDUCTIONS			
2	Losses incurred (Underwriting Exhibit - Part 2)	425,904.31	600,953.60	
3	Loss expenses incurred (Expense Exhibit)	72,488.30	83,730.49	
4	Other underwriting expenses incurred (Expense Exhibit)	429,126.30	438,044.42	
5	Aggregate write-ins for underwriting deductions	0.00	0.00	
6	Total underwriting deductions	927,518.91	1,122,728.51	
7	Net underwriting gain (loss)	185,602.43	38,125.57	
	INVESTMENT INCOME			
8	Net investment income earned	42,807.85	50,716.85	
9	Net realized capital gains (losses) less capital gains tax	0.00		
10	Net investment gain (loss)	42,807.85	50,716.85	
	OTHER INCOME			
11	Net gain (loss) from agents' or premium balances charged off			
12	Finance and service charges not included in premiums	29,440.11	31,178.87	
13	Aggregate write-ins for miscellaneous income	44,838.85	31,189.22	
14	Total other income	74,278.96	62,368.09	
15	Net income, after capital gains tax and before federal income taxes	302,689.24	151,210.51	
16	Federal income taxes incurred	56,077.87	42,209.13	
17	Net income	246,611.37	109,001.38	
	SURPLUS ACCOUNT			
18	Surplus as regards policyholders, December 31 prior year	3,121,354.16	2,984,944.53	
19	Net income	246,611.37	109,001.38	
20	Change in net unrealized capital gains or (losses) less capital gains tax	13,008.92	27,408.25	
21	Change in net deferred income tax			
22	Change in nonadmitted assets (Exhibit of Nonadmitted Assets)	0.00		
23	Change in provision for reinsurance			
24	Aggregate write-ins for gains and losses in surplus	0.00	0.00	
25	Change in surplus as regards policyholders for the year	259,620.29	136,409.63	
26	Surplus as regards policyholders, December 31 current year	3,380,974.45	3,121,354.16	
	DETAILS OF WRITE-INS			
0501				
0502				
0503				
0599	Total Aggregate write-ins for underwriting deductions	0.00	0.00	
1301	misc income	22,017.07	5,613.09	
1302	mine sub;uo payments; wm payments	22,821.78	25,576.13	
1303				
1304				
1399	Total Aggregate write-ins for miscellaneous income	44,838.85	31,189.22	
2401				
2402				
2499	Total Aggregate write-ins for gains and losses in surplus	0.00	0.00	

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

2020

CASH FLOW STATEMENT

		Current Year	Prior Year
Cash from Operations			
1	Premiums/Assessments collected net of reinsurance	1,264,482.78	1,308,382.08
2	Net investment income	45,900.91	49,118.27
3	Miscellaneous income	72,878.19	63,525.28
4	Total	1,383,261.88	1,421,025.63
5	Benefit and loss related payments	536,250.10	646,706.82
6	Commissions, expenses paid and aggregate write-ins for deductions	587,314.55	591,023.48
7	Federal and foreign income taxes paid (recovered)	48,294.00	53,699.00
8	Total	1,171,858.65	1,291,429.30
9	Net cash from operations	211,403.23	129,596.33
Cash from Investments			
10	Proceeds from investments sold, matured or repaid:		
10.1	Bonds		
10.2	Stocks		
10.3	Real estate		
10.4	Net gains (losses) on cash, cash equivalents and short- term investments		
10.5	Miscellaneous proceeds		
10.6	Total investment proceeds	0.00	0.00
11	Cost of investments acquired (long-term only):		
11.1	Bonds		
11.2	Stocks		
11.3	Real estate		
11.4	Miscellaneous applications		
11.5	Total investments acquired	0.00	0.00
11.6	Net cash from investments	0.00	0.00
Cash from Financing and Miscellaneous Sources			
12.1	Borrowed funds (cash provided/applied)		
12.2	Other cash provided (applied)		
13	Net cash from financing and miscellaneous sources	0.00	0.00
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT- TERM INVESTMENTS			
14	Net change in cash, cash equivalents and short-term investments	211,403.23	129,596.33
15.1	Beginning of year (cash, cash equivalents and short-term investments)	3,439,567.19	3,309,970.86
15.2	End of year (cash, cash equivalents and short-term investments)	3,650,970.42	3,439,567.19

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

2020

EXPENSE EXHIBIT

		Current Year
	Claim Adjusting:	
1.1	Direct	0.00
1.2	Reinsurance assumed	0.00
1.3	Reinsurance ceded excluding contingent (commission and brokerage)	0.00
1.4	Net claim adjusting	0.00
	Commission and Brokerage:	
2.1	Direct commission and brokerage	292,674.14
2.2	Reinsurance assumed excluding contingent	
2.3	Reinsurance ceded excluding contingent (commission and brokerage)	168,799.50
2.4	Contingent - direct (commission and brokerage)	0.00
2.5	Contingent - reinsurance assumed (commission and brokerage)	0.00
2.6	Contingent - reinsurance ceded (commission and brokerage)	0.00
2.7	Policy and membership fees (commission and brokerage)	0.00
2.8	Net commission and brokerage	123,874.64
3	Allowances to managers and agents	0.00
4	Advertising	3,252.61
5	Boards, bureaus and associations	
6	Surveys and underwriting reports	0.00
7	Audit of assureds' records	0.00
	Salary and related items:	
8.1	Salaries	152,000.18
8.2	Payroll taxes	11,965.01
9	Employee relations and welfare	0.00
10	Insurance	0.00
11	Directors' fees	32,100.00
12	Travel and travel items	
13	Rent and rent items	0.00
14	Equipment	0.00
15	Cost or depreciation of EDP equipment and software	19,048.71
16	Printing and stationery	11,105.96
17	Postage, telephone, exchange and express	8,532.36
18	Legal and auditing	3,739.20
19	Loss adjustment expenses	72,488.30
18	Investment expenses	0.00
19	Totals	314,232.33
	Taxes, licenses and fees:	
20.1	State and local insurance taxes	231.70
20.2	Insurance department licenses and fees	4,134.00
20.3	All other (excluding federal income and real estate)	0.00
20.4	Total taxes, licenses and fees	4,365.70
21	Real estate expenses	2,165.00
22	Real estate taxes	2,795.56
23	Aggregate write-ins for miscellaneous expenses	54,181.37
24	Total expenses incurred (a)	501,614.60
25	Less unpaid expenses - current year	0.00
26	Add unpaid expenses - prior year	0.00
27	Total expenses paid	501,614.60
	Details of Write-Ins:	
2301	utilities;security;trash;clen serv';awn serv	14,958.60
2302	E&O;dues/fees;bond;educ	23,473.25
2303	bk fee;relifund;prem ref;dep exp	15,749.52
2304		
2305		
2399	Total Write-ins	54,181.37

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

ANNUAL STATEMENT FOR THE YEAR 2020
SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION

INSURANCE IN FORCE

		Amount (dollars)	Number
1	In force December 31 of previous year (to equal prior year's statement)	302,682,340	3,261
2	Written during the year	25,848,900	246
3	Total	328,531,240	3,507
4	Deduct those expired and cancelled	38,798,300	412
5	In force December 31 of current year	289,732,940	3,095
6	Deduct amount reinsured	121,220,279	XXX
7	Net amount in force	168,512,661	XXX

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

2020

**UNDERWRITING EXHIBIT - PART 2
LOSSES INCURRED**

1 Lines of Business	2 Direct Losses Incurred	3 Losses Incurred on Reinsurance Assumed	4 Deduct: Reinsurance Recovered on Incurred Losses	5 Deduct: Salvage and Subrogation Converted To Cash	6 * Net Losses Incurred Columns 2 and 3 minus Columns 4 and 5
PHYSICAL DAMAGE TO PROPERTY	1,008,392.97		582,261.17	227.49	425,904.31
					-
					-
					-
					-
					-
OVERFLOW AMOUNTS					-
Totals	\$ 1,008,392.97	\$ -	\$ 582,261.17	\$ 227.49	\$ 425,904.31

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

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

1 Lines of Business	2 Direct Unpaid Losses	3 Unpaid Losses on Reinsurance Assumed	4 Deduct: Reinsurance Recoverable on Unpaid Losses	5 ** Unpaid Loss Adjustment Expenses	6 *** Net Unpaid Losses Columns 2 and 3 minus Column 4
PHYSICAL DAMAGE TO PROPERTY	220,192.00		118,297.00	5,000.00	101,895.00
IBNR	20,000.00				20,000.00
					-
					-
					-
					-
OVERFLOW AMOUNTS					-
Totals	\$ 240,192.00	\$ -	\$ 118,297.00	\$ 5,000.00	\$ 121,895.00

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

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

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

2020

EXHIBIT OF NONADMITTED ASSETS

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

SCHEDULE AShowing All Real Estate **OWNED** December 31 of Current Year

1 Description of Property	2 Date Acquired	3 Name of Vendor	4 Actual Cost	5 Current Year Acquisitions or Permanent Improvements	6 Accumulated Depreciation	7 Amount of Encumbrances	8 Book Value End of Current Year (Col. 4+5-6-7) *	9 Gross Income Current Year (Real Estate)	10 Gross Expenses Current Year (Real Estate)
HOME OFFICE	2/1/1991	SPRINGFIELD TWP MUT	311,263.37		276,159.00		35,104.37		225.00
							-		
							-		
							-		
							-		
OVERFLOW AMOUNTS									
Totals	XXX	XXX	\$ 311,263.37	\$ -	\$ 276,159.00	\$ -	\$ 35,104.37	\$ -	\$ 225.00

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

FURNITURE, FIXTURES and AUTOMOBILESShowing All Furniture, Fixtures and Automobiles **OWNED** December 31 of Current Year

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

SCHEDULE D - PART 1

* Annual Statement Value

SCHEDULE D - PART 2

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

1 Cusip #	2 Description Give complete and accurate description of all stocks and mutual funds owned.	3 From Whom Acquired	4 Date Acquired	5 No. of Shares	6 Par Value Per Share (Preferred Stocks)	7 Book Value	8 Rate Per Share Used To Obtain Market Value	9 Market Value/ Fair Value December 31 of Current Year	10 Actual Cost	Dividends		13 Increase, by Adjustment, in Book Value During Year	14 Decrease, by Adjustment in Book Value During Year	
										11 Received During Year	12 Dividends Amount Due and Accrued Dec. 31			
	SPRINGFIELD TWP MUTUAL INS AGENCY	SAME		100.00		311,723.09		311,723.09					13,152.92	
62989*105	NAMICO			60.00		18,883.20		314.72	3,000.00					144.00
OVERFLOW AMOUNTS FROM PAGE 19, 20 and 21														
XXX	Totals	XXX	XXX	XXX	XXX	\$ 330,606.29	XXX	\$ 312,037.81	\$ 3,000.00	\$ -	\$ -	\$ 13,152.92	\$ 144.00	

SCHEDULE D - PART 3

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

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

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

SCHEDULE D - PART 4

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

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

REINSURANCE SCHEDULE
Reinsurance Ceded and Reinsurance Assumed

1 Reinsurer or Reinsured	2 Ceded or Assumed	3 Location of Company	4 Total Amount Reinsured	5 Total Premiums Ceded *	6 Total Premiums Assumed **	7 Largest Risk Ceded or Assumed	8 Remarks
AM AG	16.5	CT	20,001,346	142,832.00	-		
ASPEN	2.5	NY	3,030,507	21,641.00	-		
BERKLEY	14	CT	16,870,839	121,191.00			
HANNOVER	7.5	NY	9,091,521.00	64,924.00			
RENAISSANCE RE	4	DC	4,848,811	34,626.00	-		
SWISS RE	18.5	NY	22,425,752	160,145.00	-		
TOA RE	9.2	NY	12,122,028	86,565.00	-		
REGIONAL TREATY	27	CT	32,729,475	233,725.00	-		
OVERFLOW AMOUNTS					-		
Totals		XXX	XXX	\$ 121,220,279	\$ 865,649.00	\$ -	XXX
							XXX

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

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

COMPENSATION SCHEDULE

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

1 Name of Payee	2 Title	3 Salaries	4 Commissions	5 Claim Adjustment Expenses	6 Directors Fees & Expenses	7 Travel & Travel Items	8 All Other	9 Total
Officers/Employees:								
1) J DANIEL SIMON	PRES/DIRECTOR		15,706.34		6,300.00			\$ 22,006.34
2) LEE F KOHLER	VICE PRES/DIRECTOR				5,400.00			\$ 5,400.00
3) MARLENE M WENTZ	SECY-TREAS	54,000.01			5,100.00			\$ 59,100.01
4) CHRISTINE A SEIFERT	ASST SECY-TREAS/UW	54,000.01						\$ 54,000.01
5) CASEY L HARTLEY	CSR/UW	44,000.16						\$ 44,000.16
								\$ -
Directors:								
DONALD H SNYDER JR					5,100.00			\$ 5,100.00
MICHAEL W BACON					5,100.00			\$ 5,100.00
WYNN A COOPER					5,100.00			\$ 5,100.00
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
								\$ -
Totals		XXXX	\$ 152,000.18	\$ 15,706.34	\$ -	\$ 32,100.00	\$ -	\$ 199,806.52

GENERAL INTERROGATORIES

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

1. Company's retention: Fire **\$40,000** Wind **\$40,000** Other **\$40,000**

1a. Retention before reinsurance applies for: Catastrophe Reinsurance **Aggregate excess of loss**

2. What is the largest risk assumed and retained: **\$40,000**

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

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

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

6. Name of Principal Officer and amount of bond: **CHRISTINE A SEIFERT \$100,000**

7. Are all of the persons who handle funds of the Company bonded? Yes **X** No
State the name and amount of each bond on each, except person named in Item 6 above. **MARLENE M WENTZ \$100,000**

CASEY L HARTLEY \$100,000

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

9. State the number of members holding policies in the Company. **3095**

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

11. State as of what date the latest examination of the Company was made by the Ohio Department of Insurance. **FEB 17 2017**

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

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

14. Rate of policy fee **0**

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

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

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

2020

SCHEDULE E - CASH or CASH EQUIVALENTS

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

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

1 DEPOSITORY Give Full Name and Location	2 Interest Rate	3 Amount of Interest Received During Year	4 Amount of Interest Accrued Dec. 31 of Current Year	5 Book Balance Dec. 31 of Current Year *
OPEN DEPOSITORIES:				
#1012 PREMIER MM	0.260%	944.41		212,138.52
#1014 CORTLAND BANK	2.450%	5,534.87		214,044.91
#1000 HUNTING CHECKING ACCOUNT				1,232,890.86
STIFEL CD'S				
#1032-DISCOVER BANK	2.200%	1,147.13	567.29	52,000.00
#1037-AMERICAN EXPRESS	1.350%	1,310.40	435.78	137,000.00
#1038-CAPITAL ONE NA	1.450%	1,432.16	665.22	197,000.00
#1039-BMO HARRIS BANK NA	0.750%	393.20	72.66	104,000.00
#1040-JPMORGAN CHASE	0.300%		129.46	125,000.00
#1041-BMO HARRIS BANK	0.500%	60.49	23.02	48,000.00
#1042-TEXAS EXCHANGE	0.500%	94.73	21.86	76,000.00
#1043-BMO HARRIS BANK	0.300%	57.59	2.53	77,000.00
#1044-BRIDGEWATER BANK	0.400%	51.48	13.50	77,000.00
#1045-HAPOALIM	0.450%		33.29	60,000.00
#1046-JPMORGAN BK	0.750%		44.72	68,000.00
#1050-HSBC BANK	3.000%	3,128.55	906.08	104,000.00
#1063-GOLDMAN SACHS BK	2.150%	1,724.71	678.57	80,000.00
#1072-SYNCHRONY BANK	2.400%	3,008.22	353.43	125,000.00
#1073-MORGAN STANLEY PVT BK	1.950%	1,192.76	316.12	61,000.00
#1081-CAPITAL ONE BANK	2.250%	970.16	196.15	43,000.00
#1083-MORGAN STANLEY	2.450%	1,842.54	372.53	75,000.00
#1097-JONESBORO STATE	50.000%	274.57	39.49	131,000.00
#1098-WELLS FARGO NATL	1.900%	269.90	66.38	85,000.00
#1088-SN MM ACCT	0.900%	9.77		153,896.13
#1084-AMERICAN EXP BK	2.100%	2,379.50	676.14	113,000.00
#1098-WELLS FARGO-CLOSED		1,212.34		
#1095-BMO BK-CLOSED		249.32		
#1086-HSBC BANK-CLOSED		1,491.57		
#1080-WELLS FARGO-CLOSED		846.90		
#1031-DISCOVER BANK-CLOSED		522.33		
#1034-GOLDMAN SACHS-CLOSED		518.58		
#1035-JP MORGAN-CLOSED		1,059.09		
#1036-MORGAN STANLEY-CLOSED		374.79		
#1062-FINEREC-CLOSED		1,403.85		
#1069-CAPITAL ONE-CLOSED		3,083.42		
#1071-BMO BANK-CLOSED		623.29		
#1074-DISCOVER BANK-CLOSED		822.74		
#1075-ALLY BANK-CLOSED		354.79		
#1076-ALLY BANK-CLOSED		565.55		
#1085-JP MORGAN-CLOSED		1,142.62		
#1090-FNB AM-CLOSED		364.65		
#1091-WELLS FARGO		1,428.35		
#1092-GOLDMAN SACHS-CLOSED		1,598.65		
#1093-SECURITY BNAK-CLOSED		353.32		
#1096-ALLY BANK-CLOSED		469.28		
#1094-JP MORGAN-CLOSED		1,588.34		
OVERFLOW AMOUNTS	xxxx	0.00	0.00	0.00
Total	xxxx	\$ 45,900.91	\$ 5,614.22	\$ 3,650,970.42

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

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

2020

ORGANIZATIONAL CHART

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

SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION
PARENT
OHIO CORPORATION - INSURER

SPRINGFIELD TOWNSHIP MUTUAL INSURANCE AGENCY
SUBSIDIARY
OHIO CORPORATION - NO-INSURER

**ANNUAL STATEMENT FOR THE YEAR
SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION
Overflow Page for Write-ins**

2020

Additional Write-ins for Assets:

		Assets Current Year	Nonadmitted Assets Current Year	Net Admitted Assets Current Year	Net Admitted Assets Prior Year
1504				0.00	
1505				0.00	
1506				0.00	
1597	Summary of remaining write-ins for Line 15 page 2	0.00	0.00	0.00	0.00

Additional Write-ins for Liabilities:

		Current Year	Prior Year
1604			
1605			
1606			
1697	Summary of remaining write-ins for Line 16 page 3	0.00	0.00

Additional Write-ins for Statement of Income:

		Current Year	Prior Year
	Summary of remaining write-ins for Statement of Income page 4	0.00	0.00

Additional Write-ins for Nonadmitted Assets:

Additional Write-ins for Nonadmitted Assets:		Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets
1504				0.00
1505				0.00
1506				0.00
1597	Summary of remaining write-ins for Line 15 page 9	0.00	0.00	0.00

Overflow Page for Investments Owned

SCHEDULE D - PART 1

Showing all BONDS Owned on December 31 of Current Year

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

* Annual Statement Value

SCHEDULE D - PART 2

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

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

Overflow Page for Investments Owned - CONTINUED

SCHEDULE D - PART 1

Showing all **BONDS** Owned on December 31 of Current Year

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

* Annual Statement Value

SCHEDULE D - PART 2

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

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

Overflow Page for Investments Owned - CONTINUED

SCHEDULE D - PART 1

Showing all **BONDS** Owned on December 31 of Current Year

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

* Annual Statement Value

SCHEDULE D - PART 2
Showing all Preferred & Common Stocks and Mutual Funds Owned December 31 of Current Year

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

**ANNUAL STATEMENT FOR THE YEAR
SPRINGFIELD TOWNSHIP MUTUAL INSURANCE ASSOCIATION
OVERFLOW PAGE FOR SCHEDULE E
SCHEDULE E - CASH or CASH EQUIVALENTS**

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

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