



ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2011
OF THE CONDITION AND AFFAIRS OF THE
MENNONITE MUTUAL INSURANCE COMPANY

NAIC Group Code	0000	0000	NAIC Company Code	17299	Employer's ID Number	34-0396080
	(Current Period)	(Prior Period)				
Organized under the Laws of	Ohio			State of Domicile or Port of Entry		Ohio
Country of Domicile	United States					
Incorporated/Organized	02/01/1905			Commenced Business		02/01/1895
Statutory Home Office	1000 South Main Street			Orrville, OH 44667-0300		
	(Street and Number)			(City or Town, State and Zip Code)		
Main Administrative Office	1000 South Main Street			Orrville, OH 44667-0300		330-683-3730-21
	(Street and Number)			(City or Town, State and Zip Code)		(Area Code) (Telephone Number)
Mail Address	PO Box 300			Orrville, OH 44667-0300		
	(Street and Number or P.O. Box)			(City or Town, State and Zip Code)		
Primary Location of Books and Records	1000 South Main Street			Orrville, OH 44667-0300		330-683-3730-118
	(Street and Number)			(City or Town, State and Zip Code)		(Area Code) (Telephone Number)
Internet Website Address	mennonitemutual.com					
Statutory Statement Contact	Ric Hochstetler			330-683-3730-118		
	(Name)			(Area Code) (Telephone Number) (Extension)		
	rhochstetler@mennonitemutual.com			330-683-2083		
	(E-mail Address)			(Fax Number)		

OFFICERS

Name	Title	Name	Title
DAVID LUTHER LEHMAN	President	GEORGE BIXLER JR	Secretary
DAVID LUTHER LEHMAN	Treasurer		

OTHER OFFICERS

J MARK ZOOK	Vice-President of Underwriting	J TODD NEVILLE	Vice-President of Claims
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DIRECTORS OR TRUSTEES

ROBERT EUGENE ASCHILMAN	GEORGE BIXLER JR	PAUL BONTRAGER	DAVID LUTHER LEHMAN
MORRIS STUTZMAN	CRAIG THOMAS MERCER	DONALD DRAVENSTOTT	TYSON L STUCKEY

State ofOhio.....

County ofWayne..... ss

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

DAVID LUTHER LEHMAN President	GEORGE BIXLER, JR Secretary	DAVID LUTHER LEHMAN Treasurer
Subscribed and sworn to before me this 21 day of February, 2012		a. Is this an original filing? Yes [X] No [] b. If no, 1. State the amendment number 2. Date filed 3. Number of pages attached
Melanie J Alger Notary Public April 9, 2016		