

ANNUAL STATEMENT

RECEIVED

FEB 14 2012

OFRS

For the Year Ended

December 31, 2011

OF THE CONDITION AND AFFAIRS OF THE

THE GERMAN MUTUAL INSURANCE ASSOCIATION OF GLANDORF OHIO

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

10334

Home Office

132 S MIAN STREET

Street and Number

GLANDORF 45848

City

Zip Code

OH

Mail Address

P. O. BOX 120

Street and Number

GLANDORF 45848

City

Zip Code

OH

Main Administrative Office

(419) 538-6902

Telephone Number

Organized

FEBRUARY 18, 1878

Commenced Business

FEBRUARY 18, 1878

Annual Statement Contact Person

ELAINE A. GERDING

Telephone Number

419-538-6902

Contact Person Email Address

GLANDORF@BRIGHT.NET

OFFICERS

President

JAMES E. UNTERBRINK

Vice President

DALE J. GERDING

Secretary

ELAINE A. GERDING

Treasurer

ELAINE A. GERDING

DIRECTORS

(ALL DIRECTORS MUST BE SHOWN)

DALE J. GERDING

DONALD E. STECHSCHULTE

VIRGIL R. RIEMAN

ROBERT DILLER

CARL SCHIERLOH

State of Ohio

County of

PUTNAM

JAMES E. UNTERBRINK

President and

ELAINE A. GERDING

Secretary of the

THE GERMAN MUTUAL INSURANCE ASSOCIATION OF GLANDORF OHIO.

, 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 February 20 12

ANNUAL STATEMENT FOR THE YEAR
THE GERMAN MUTUAL INSURANCE ASSOCIATION OF GLANDORF OHIO

2011

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	0.00
2	Preferred stocks, common stocks and mutual funds (Schedule D - Part 2)	8,814.60	0.00	8,814.60	7,300.28
3	Real estate (less liens, encumbrances) (Schedule A)	0.00	0.00	0.00	0.00
4	Cash (Schedule E)	247,105.71	0.00	247,105.71	310,734.74
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	255,920.31	0.00	255,920.31	318,035.02
8	Investment income due and accrued		0.00	0.00	
9.1	Assessments or premiums in the course of collection (including agents balances)	142,275.33	0.00	142,275.33	130,154.46
9.2	Deferred premiums, agents' balances and installments booked but deferred and not yet due		0.00	0.00	
9.3	Earned but unbilled premiums (post assessment)		0.00	0.00	
10.1	Amounts recoverable from reinsurers		0.00	0.00	
10.2	Funds held by or deposited with reinsured companies		0.00	0.00	
11.1	Current federal income tax recoverable and interest thereon		0.00	0.00	
11.2	Net deferred tax asset		0.00	0.00	
12	Electronic data processing equipment and software		0.00	0.00	
13	Furniture and equipment		0.00	0.00	
14	Receivables from parent, subsidiaries and affiliates		0.00	0.00	
15	Aggregate write-ins for other than invested assets	0.00	0.00	0.00	0.00
16	Total Assets	398,195.64	0.00	398,195.64	448,189.48
	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
THE GERMAN MUTUAL INSURANCE ASSOCIATION OF GLANDORF OHIO

2011

LIABILITIES, SURPLUS AND OTHER FUNDS

		Current Year	Prior Year
1	Unpaid Losses (Underwriting Exhibit - Part 2A)	0.00	11,000.00
2	Unpaid loss adjustment expenses (Underwriting Exhibit - Part 2A)	0.00	
3	Commissions due and payable to agents	4,900.86	4,804.49
4	Other expenses (excluding taxes, licenses and fees)	15,093.49	16,056.78
5	Taxes, licenses and fees (excluding federal income taxes)	184.03	228.07
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	23,123.00	21,249.00
10	Advance premium		
11	Ceded reinsurance premiums payable	21,345.70	17,076.17
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	64,647.08	70,414.51
18	Surplus as regards policyholders	333,548.56	377,774.97
19	Total liabilities and surplus	398,195.64	448,189.48
	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

2011

THE GERMAN MUTUAL INSURANCE ASSOCIATION OF GLANDORF OHIO**STATEMENT OF INCOME**

		Current Year	Prior Year
	UNDERWRITING INCOME		
1.1	Gross Assessments/Premiums earned	563,789.95	517,169.17
1.2	Less: Return Assessments/Premiums earned	1,025.62	602.75
1.3	Direct Assessments/Premiums earned	562,764.33	516,566.42
1.4	Deduct premiums for reinsurance ceded (Reinsurance Schedule)	245,397.72	197,316.16
1.5	Add premiums received for reinsurance assumed (Reinsurance Schedule)	0.00	
1.6	Net Assessments/Premiums earned	317,366.61	319,250.26
	DEDUCTIONS		
2	Losses incurred (Underwriting Exhibit - Part 2)	167,035.92	192,455.17
3	Loss expenses incurred (Expense Exhibit)	0.00	163,435.96
4	Other underwriting expenses incurred (Expense Exhibit)	198,900.69	
5	Aggregate write-ins for underwriting deductions	0.00	0.00
6	Total underwriting deductions	365,936.61	355,891.13
7	Net underwriting gain (loss)	-48,570.00	-36,640.87
	INVESTMENT INCOME		
8	Net investment income earned	1,029.27	3,326.62
9	Net realized capital gains (losses) less capital gains tax		
10	Net investment gain (loss)	1,029.27	3,326.62
	OTHER INCOME		
11	Net gain (loss) from agents' or premium balances charged off		
12	Finance and service charges not included in premiums		
13	Aggregate write-ins for miscellaneous income	1,800.00	3,119.58
14	Total other income	1,800.00	3,119.58
15	Net income, after capital gains tax and before federal income taxes	-45,740.73	-30,194.67
16	Federal income taxes incurred		
17	Net income	-45,740.73	-30,194.67
	SURPLUS ACCOUNT		
18	Surplus as regards policyholders, December 31 prior year	377,774.97	408,179.60
19	Net income	-45,740.73	-30,194.67
20	Change in net unrealized capital gains or (losses) less capital gains tax	1,514.32	-209.96
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	-44,226.41	-30,404.63
26	Surplus as regards policyholders, December 31 current year	333,548.56	377,774.97
	DETAILS OF WRITE-INS		
0501			
0502			
0503			
0599	Total Aggregate write-ins for underwriting deductions	0.00	0.00
1301	AGENCY RENT	1,800.00	3,119.58
1302			
1303			
1304			
1399	Total Aggregate write-ins for miscellaneous income	1,800.00	3,119.58
2401			

ANNUAL STATEMENT FOR THE YEAR
THE GERMAN MUTUAL INSURANCE ASSOCIATION OF GLANDORF OHIO
CASH FLOW STATEMENT

2011

		Current Year	Prior Year
Cash from Operations			
1	Premiums/Assessments collected net of reinsurance	311,043.33	319,250.26
2	Net investment income	1,029.27	3,326.62
3	Miscellaneous income	1,800.00	3,119.58
4	Total	313,872.60	325,696.46
5	Benefit and loss related payments	178,035.92	192,455.17
6	Commissions, expenses paid and aggregate write-ins for deductions	199,465.71	163,435.96
7	Federal and foreign income taxes paid (recovered)		
8	Total	377,501.63	355,891.13
9	Net cash from operations	-63,629.03	-30,194.67
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)		106.97
13	Net cash from financing and miscellaneous sources	0.00	106.97
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
14	Net change in cash, cash equivalents and short-term investments	-63,629.03	-30,087.70
15.1	Beginning of year (cash, cash equivalents and short-term investments)	310,734.71	340,822.41
15.2	End of year (cash, cash equivalents and short-term investments)	247,105.68	310,734.71

**ANNUAL STATEMENT FOR THE YEAR
THE GERMAN MUTUAL INSURANCE ASSOCIATION OF GLANDORF OHIO**

2011

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	40,418.83
2.2	Reinsurance assumed excluding contingent	0.00
2.3	Reinsurance ceded excluding contingent (commission and brokerage)	0.00
2.4	Contingent - direct (commission and brokerage)	0.00
2.5	Contingent - reinsurance assumed (commission and brokerage)	0.00
2.6	Contingent - reinsurance ceded (commission and brokerage)	0.00
2.7	Policy and membership fees (commission and brokerage)	0.00
2.8	Net commission and brokerage	40,418.83
3	Allowances to managers and agents	0.00
4	Advertising	3,511.13
5	Boards, bureaus and associations	3,479.25
6	Surveys and underwriting reports	0.00
7	Audit of assureds' records	0.00
	Salary and related items:	
8.1	Salaries	64,228.89
8.2	Payroll taxes	9,673.85
9	Employee relations and welfare	0.00
10	Insurance	11,409.68
11	Directors' fees	4,350.00
12	Travel and travel items	1,613.77
13	Rent and rent items	3,462.00
14	Equipment	0.00
15	Cost or depreciation of EDP equipment and software	0.00
16	Printing and stationery	3,774.45
17	Postage, telephone, exchange and express	8,220.77
18	Legal and auditing	16,048.66
19	Loss adjustment expenses	0.00
18	Investment expenses	0.00
19	Totals	129,772.45
	Taxes, licenses and fees:	
20.1	State and local insurance taxes	0.00
20.2	Insurance department licenses and fees	5,991.52
20.3	All other (excluding federal income and real estate)	0.00
20.4	Total taxes, licenses and fees	5,991.52
21	Real estate expenses	0.00
22	Real estate taxes	0.00
23	Aggregate write-ins for miscellaneous expenses	22,717.89
24	Total expenses incurred (a)	198,900.69
25	Less unpaid expenses - current year	0.00
26	Add unpaid expenses - prior year	0.00
27	Total expenses paid	198,900.69
	Details of Write-Ins:	
2301	CONTRIBUTIONS	160.00
2302	COMPUTER EXPENSE	15,271.71
2303	REPAIRS	563.34

ANNUAL STATEMENT FOR THE YEAR 2011
THE GERMAN MUTUAL INSURANCE ASSOCIATION OF GLANDORF OHIO

INSURANCE IN FORCE

		Amount (dollars)	Number
1	In force December 31 of previous year (to equal prior year's statement)	195,605,276	771
2	Written during the year	22,684,810	74
3	Total	218,290,086	845
4	Deduct those expired and cancelled	11,709,250	60
5	In force December 31 of current year	206,580,836	785
6	Deduct amount reinsured	0	XXX
7	Net amount in force	206,580,836	XXX

ANNUAL STATEMENT FOR THE YEAR
THE GERMAN MUTUAL INSURANCE ASSOCIATION OF GLANDORF OHIO

2011

UNDERWRITING EXHIBIT - PART 2
LOSSES INCURRED

1	2	3	4	5	6
Lines of Business	Direct Losses Incurred	Losses Incurred on Reinsurance Assumed	Deduct: Reinsurance Recovered on Incurred Losses	Deduct: Salvage and Subrogation Converted To Cash	Net Losses Incurred Columns 2 and 3 minus Columns 4 and 5
STANDARD	16,293.36				16,293.36
HOMEOWNER	130,107.79		31,777.42		98,330.37
FARMOWNER	63,412.19				63,412.19
LESS LOSS PROVISIONS 1-1-11	(11,000.00)				(11,000.00)
PLUS LOSS PROVISIONS 12-31-11					
OVERFLOW AMOUNTS					
Totals	\$ 198,813.34	\$ -	\$ 31,777.42	\$ -	\$ 167,035.92

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

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

1	2	3	4	5	6
Lines of Business	Direct Unpaid Losses	Unpaid Losses on Reinsurance Assumed	Deduct: Reinsurance Recoverable on Unpaid Losses	Unpaid Loss Adjustment Expenses	Net Unpaid Losses Columns 2 and 3 minus Column 4
0					-
0					-
0					-
0					-
0					-
OVERFLOW AMOUNTS					-
Totals	\$ -	\$ -	\$ -	\$ -	\$ -

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

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

THE GERMAN MUTUAL INSURANCE ASSOCIATION OF GLANDORF OHIO**EXHIBIT OF NONADMITTED ASSETS**

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

SCHEDULE A

[illegible]

FURNITURE, FIXTURES and AUTOMOBILES

[illegible]

MENT OF THE

SCHEDULE D - PART 1
Showing all **BONDS** Owned on December 31 of Current Year

[illegible]

SCHEDULE D - PART 2

FROM PAGE 19

THE GERMAN MUTUAL INSURANCE ASSOCIATION OF GLANDORF OHIO

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

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

[illegible]

th 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.

THE GERMAN MUTUAL INSURANCE ASSOCIATION OF GLANDORF OHIO

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

Common stocks and mutual funds to be grouped separately.

[illegible]

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
GRINNELL REINSURANCE CEDED		GRINNELL, IA	206,580,836	245,397.72		1,942,000	30303
OVERFLOW AMOUNTS							
Totals	XXX	XXX	\$ 206,580,836	\$ 245,397.72	\$ -	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:								
JAMES E. UNTERBRINK	PRESIDENT	7,200.00					250.00	\$ 7,450.00
BERNICE UNTERBRINK	MANAGER	5,670.00					100.00	\$ 5,770.00
ELAINE A. GERDING	SECRETARY/TREASURER	27,535.00	5,806.25				250.00	\$ 33,591.25
CYTHINA MAAG	ADMINISTRATIVE ASST/AGENT	20,815.00	1,651.73				750.00	\$ 23,216.73
STEVE UNTERBRINK	AGENT		1,653.67					\$ 1,653.67
								\$ -
Directors:								
DALE J. GERDING	DIRECTOR/AGENT		3,502.17		700.00		50.00	\$ 4,252.17
DONALD E. STECHSCHULTZ	DIRECTOR/AGENT		14,341.55		750.00		50.00	\$ 15,141.55
ROBERT DILLER	DIRECTOR/AGENT PART YR		5,027.99		800.00		50.00	\$ 5,877.99
CARL SCHIERLOH	DIRECTOR/AGENT		8,339.10		600.00		50.00	\$ 8,989.10
VIRGIL RIEMAN	DIRECTOR				1,500.00		630.00	\$ 2,330.00
CARDMEMBER SERC						1,514.89		\$ 1,514.89
ACCRUAL ADJUSTMENT		(686.00)	95.37					\$ (789.63)
								\$ -
								\$ -
								\$ -
								\$ -
Totals	XXXX	\$ 60,334.00	\$ 40,418.83	\$ -	\$ 4,350.00	\$ 1,514.89	\$ 2,380.00	\$ 108,997.72

GENERAL INTERROGATORIES

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

1. Company's retention: Fire Wind Other 50,000 PER CLAIM

1a. Retention before reinsurance applies for: Catastrophe Reinsurance Aggregate excess of loss \$172,108

2. What is the largest risk assumed and retained: \$1,942,000

3. What kind of perils are being covered? FIRE, LIGHTNING, WIND AND EXTENDED COVERAGES

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: PUTNAM, ALLEN, HANCOCK, DEFIANCE, PAULDING, WOOD AND VAN WERT

6. Name of Principal Officer and amount of bond: EMPLOYEES OF GERMAN MUTUAL INSURANCE ASSOCIATION OF GLANDORFF \$35,000

7. Are all of the persons who handle funds of the Company bonded? Yes YES ☒ No State the name and amount of each bond on each, except person named in Item 6 above.

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. 785

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. Mar-11

12. How many assessments were made during the year? 2 Date of last assessment ON ANNIVERSARY DATE

13. Did the assessment provide for all losses, expenses and all other liabilities prior to the date of assessment? NO ☒

14. Rate of policy fee NONE

15. State the amount of borrowed money since date of last assessment NONE interest thereon

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 ☒ NO

2011

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

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2011
THE GERMAN MUTUAL INSURANCE ASSOCIATION OF GLANDORF OHIO

ORGANIZATIONAL CHART

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

NONE



ANNUAL STATEMENT FOR THE YEAR
THE GERMAN MUTUAL INSURANCE ASSOCIATION OF GLANDORF OHIO
Overflow Page for Write-ins

2011

Additional Write-ins for Assets:

		Assets Current Year	Nonadmitted Assets Current Year	Net Admitted Assets Current Year	Net Admitted Assets Prior Year
1504	NONE			0.00	
1505				0.00	
1506					
1507					
1508					
1509					
1510					
1511				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			
1607			
1608			
1609			
1610			
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:

		Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets
1504				0.00
1505				0.00
1506				
1507				
1508				
1509				
1510				
1511				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

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

SCHEDULE D - PART 2

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

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

2011

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

[illegible]

MUTUAL PROTECTIVE ANNUAL STATEMENT INSTRUCTIONS

1. Date of filing: This statement is required to be filed by March 1st. This date is fixed by statute and no extension of time will be granted (Ohio Revised Code 3939.09).
2. Blank schedules will not be accepted as meaning anything. If no entries are to be made, write "none" in the first line in the description column.
3. Bonds rated 1 or 2 by the Securities Valuation Office are carried at amortized value; bonds rated 3-6 are carried at the lower of amortized cost or fair value. Bonds shall be valued in accordance with SSAP No. 26, the *NAIC Purposes and Procedures of the Securities Valuation Office Manual*, and the designation assigned in the *NAIC Valuations of Securities product* prepared by the NAIC Securities Valuation Office.
4. Unaffiliated common stocks shall be valued at fair value. In those instances where unit price is not available from the Securities Valuation Office, it is the responsibility of management to determine fair value based on analytical or pricing mechanisms. See SSAP No. 30.
5. Investments in Subsidiary, controlled or affiliated common stocks are addressed in SSAP No. 88.
6. The bonds and stocks should be grouped in the following order and each group arranged alphabetically in their respective schedules, viz:

BONDS

- (a) Government
- (b) States, Territories and Possessions
- (c) Political Subdivisions of States, Territories and Possessions
- (d) Special Revenue and Special Assessment Obligations
- (e) Public Utilities
- (f) Industrial and Miscellaneous

STOCKS

- (a) Public Utilities
- (b) Banks, Trusts and Insurance Companies
- (c) Industrial and Miscellaneous
- (e) Mutual Funds

7. Credit for interest due and accrued on bonds in default as to principal or interest should be nonadmitted in "investment income due and accrued."
8. Breakout the portion of premiums and losses attributable to each covered peril to the extent such can be identified, in Column 1 in Underwriting Exhibit Part 2 and Underwriting Exhibit Part 2A on page 8.
8. If unable to breakout perils, aggregate the premiums and losses and label as "physical damage to property" in column 1 in both Exhibits.
9. All reinsurance ceded and assumed must be itemized in the Reinsurance Schedule on page 15. For reinsurance ceded the name of the reinsurer, not the broker, is to be listed.
10. The Organizational Chart on page 17 should clearly present the identities of and interrelationship between the parent, all affiliated insurers and other affiliates of an insurance holding company system as defined in Chapter 3901.32 of the Ohio Revised Code. Each mutual protective association that meets the definition of an insurance holding company system is required to file an annual Form B Insurance Holding Company System Registration Statement by June 1st. See Ohio Regulation 3901-3-02 for more information.
11. Attach additional sheets if necessary for any section that may require additional lines. Additional overflow schedules are on pages 18-20.

OVERFLOW PAGE INSTRUCTIONS

- 1) Overflow pages are unprotected for insertion of additional rows as needed.
- 2) When additional rows have been inserted, copy and paste formulas located in the non colored cells from the cells above.
- 3) Please be sure to check the formulas.
- 4) Since the overflow pages are unprotected, data input will be different for the over flow pages.