



PROPERTY AND CASUALTY COMPANIES—ASSOCIATION EDITION

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

NAIC Group Code	0000 (Current Period)	0000 (Prior Period)	NAIC Company Code	17299	Employer's ID Number	34-0396080
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 (Street and Number)		Orrville, OH 44667-0300 (City or Town, State and Zip Code)			
Main Administrative Office	1000 South Main Street (Street and Number)		Orrville, OH 44667-0300 (City or Town, State and Zip Code)	330-683-3730-21 (Area Code) (Telephone Number)		
Mail Address	PO Box 300 (Street and Number or P.O. Box)		Orrville, OH 44667-0300 (City or Town, State and Zip Code)			
Primary Location of Books and Records	1000 South Main Street (Street and Number)		Orrville, OH 44667-0300 (City or Town, State and Zip Code)	330-683-3730-118 (Area Code) (Telephone Number)		
Internet Website Address	mennonitemutual.com					
Statutory Statement Contact	Ric Hochstetler (Name)		330-683-3730-118 (Area Code) (Telephone Number) (Extension)			
	rhochstetler@mennonitemutual.com (E-mail Address)		330-683-2083 (Fax Number)			

OFFICERS

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

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 of Ohio.....
County of Wayne 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 <u>21</u> day of <u>February, 2012</u>		
<u>Melanie J Alger Notary Public</u> <u>April 9, 2016</u>		a. Is this an original filing? <input checked="" type="checkbox"/> Yes [<input checked="" type="checkbox"/>] No [<input type="checkbox"/>] b. If no, 1. State the amendment number _____ 2. Date filed _____ 3. Number of pages attached _____

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D).....	11,600,633		11,600,633	10,653,775
2. Stocks (Schedule D):				
2.1 Preferred stocks	0		0	0
2.2 Common stocks	1,338,338		1,338,338	1,351,577
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens	0		0	0
3.2 Other than first liens	58,491		58,491	79,008
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances).....	786,008		786,008	825,918
4.2 Properties held for the production of income (less \$ encumbrances).....			0	0
4.3 Properties held for sale (less \$ encumbrances).....			0	0
5. Cash (\$(75,777) , Schedule E - Part 1), cash equivalents (\$0 , Schedule E - Part 2) and short-term investments (\$2,800,269 , Schedule DA).....	2,724,492		2,724,492	2,811,731
6. Contract loans (including \$ premium notes).....			0	0
7. Derivatives (Schedule DB).....			0	0
8. Other invested assets (Schedule BA).....	0		0	0
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets (Schedule DL).....			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	16,507,962	0	16,507,962	15,722,009
13. Title plants less \$ charged off (for Title insurers only).....			0	0
14. Investment income due and accrued .....	.75,646		.75,646	.78,083
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	311,595		311,595	284,248
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums).....	2,510,732		2,510,732	2,352,251
15.3 Accrued retrospective premiums			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers			0	468,214
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon .....	.93,194		.93,194	0
18.2 Net deferred tax asset.....	591,787	.157,678	434,109	207,400
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software	147,245	.123,074	.24,171	.28,728
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....	.66,541	.66,541	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates			0	0
24. Health care (\$) and other amounts receivable			0	0
25. Aggregate write-ins for other than invested assets .....	.26,731	.131	.26,600	.26,600
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	20,331,433	.347,424	19,984,009	19,167,533
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	0
28. Total (Lines 26 and 27).....	20,331,433	.347,424	19,984,009	19,167,533
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	.0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above).....	0	0	0	0
2501. Workers Comp Deposit.....	.131	.131	0	0
2502. Federal Home Loan Bank.....	.26,600		.26,600	.26,600
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page	0	.0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above).....	26,731	.131	.26,600	.26,600

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)	1,593,926	1,506,765
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)	0	0
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)	160,200	153,200
4. Commissions payable, contingent commissions and other similar charges	740,182	684,553
5. Other expenses (excluding taxes, licenses and fees)	147,113	254,639
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	135,652	116,178
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))	96,686	0
7.2 Net deferred tax liability	0	0
8. Borrowed money \$ and interest thereon \$	0	0
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ 131,946 and including warranty reserves of \$ and accrued accident and health experience rating refunds including \$ for medical loss ratio rebate per the Public Health Service Act)	6,599,623	6,268,538
10. Advance premium	250,301	219,255
11. Dividends declared and unpaid:		
11.1 Stockholders	0	0
11.2 Policyholders	0	0
12. Ceded reinsurance premiums payable (net of ceding commissions)	105,321	(12,898)
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19)	0	0
14. Amounts withheld or retained by company for account of others	1,241	1,070
15. Remittances and items not allocated	7,076	17,789
16. Provision for reinsurance (Schedule F, Part 7)	0	0
17. Net adjustments in assets and liabilities due to foreign exchange rates	0	0
18. Drafts outstanding	0	0
19. Payable to parent, subsidiaries and affiliates	0	0
20. Derivatives	0	0
21. Payable for securities	0	0
22. Payable for securities lending	0	0
23. Liability for amounts held under uninsured plans	0	0
24. Capital notes \$ and interest thereon \$	0	0
25. Aggregate write-ins for liabilities	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	9,740,635	9,305,775
27. Protected cell liabilities	0	0
28. Total liabilities (Lines 26 and 27)	9,740,635	9,305,775
29. Aggregate write-ins for special surplus funds	0	0
30. Common capital stock	0	0
31. Preferred capital stock	0	0
32. Aggregate write-ins for other than special surplus funds	0	0
33. Surplus notes	0	0
34. Gross paid in and contributed surplus	0	0
35. Unassigned funds (surplus)	10,243,374	9,861,758
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)	0	0
36.2 shares preferred (value included in Line 31 \$)	0	0
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	10,243,374	9,861,758
38. Totals (Page 2, Line 28, Col. 3)	19,984,009	19,167,533
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 through 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 through 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 through 3203 plus 3298) (Line 32 above)	0	0

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

STATEMENT OF INCOME

	1 Current Year	2 Prior Year
UNDERWRITING INCOME		
1. Premiums earned (Part 1, Line 35, Column 4)	10,738,253	9,998,479
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7)	5,836,829	5,288,134
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1)	1,108,788	957,923
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2)	4,091,655	3,712,353
5. Aggregate write-ins for underwriting deductions	0	0
6. Total underwriting deductions (Lines 2 through 5)	11,037,272	9,958,410
7. Net income of protected cells	0	0
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	(299,019)	40,069
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17)	402,051	349,828
10. Net realized capital gains (losses) less capital gains tax of \$ (Exhibit of Capital Gains (Losses))	28,688	125,689
11. Net investment gain (loss) (Lines 9 + 10)	430,739	475,517
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ charged off \$)	amount	0
13. Finance and service charges not included in premiums	117,636	125,505
14. Aggregate write-ins for miscellaneous income	(42,780)	(28,266)
15. Total other income (Lines 12 through 14)	74,856	97,239
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	206,576	612,825
17. Dividends to policyholders	0	0
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)	206,576	612,825
19. Federal and foreign income taxes incurred	69,996	205,724
20. Net income (Line 18 minus Line 19) (to Line 22)	136,580	407,101
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	9,861,758	9,324,983
22. Net income (from Line 20)	136,580	407,101
23. Net transfers (to) from Protected Cell accounts	0	0
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ (2,886)	(5,601)	89,808
25. Change in net unrealized foreign exchange capital gain (loss)	0	0
26. Change in net deferred income tax	15,840	106,320
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)	234,797	(66,454)
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)	0	0
29. Change in surplus notes	0	0
30. Surplus (contributed to) withdrawn from protected cells	0	0
31. Cumulative effect of changes in accounting principles	0	0
32. Capital changes:		
32.1 Paid in	0	0
32.2 Transferred from surplus (Stock Dividend)	0	0
32.3 Transferred to surplus	0	0
33. Surplus adjustments:		
33.1 Paid in	0	0
33.2 Transferred to capital (Stock Dividend)	0	0
33.3 Transferred from capital	0	0
34. Net remittances from or (to) Home Office	0	0
35. Dividends to stockholders	0	0
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)	0	0
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)	381,616	530,775
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	10,243,374	9,861,758
DETAILS OF WRITE-INS		
0501.	0	0
0502.	0	0
0503.	0	0
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	0	0
1401. MISC.	(42,780)	(28,266)
1402.	0	0
1403.	0	0
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)	(42,780)	(28,266)
3701.	0	0
3702.	0	0
3703.	0	0
3798. Summary of remaining write-ins for Line 37 from overflow page	0	0
3799. Totals (Lines 3701 through 3703 plus 3798) (Line 37 above)	0	0

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

CASH FLOW

	1 Current Year	2 Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance.....	11,032,775	10,132,450
2. Net investment income.....	516,198	469,046
3. Miscellaneous income.....	74,856	97,239
4. Total (Lines 1 through 3).....	11,623,829	10,698,735
5. Benefit and loss related payments.....	5,281,454	5,641,599
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions.....	5,084,407	4,452,507
8. Dividends paid to policyholders.....	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses).....	291,556	423,678
10. Total (Lines 5 through 9).....	10,657,417	10,517,784
11. Net cash from operations (Line 4 minus Line 10).....	966,412	180,951
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	7,397,857	3,773,037
12.2 Stocks.....	0	2,503,279
12.3 Mortgage loans.....	20,517	5,674
12.4 Real estate.....	0	0
12.5 Other invested assets.....	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....	0	0
12.7 Miscellaneous proceeds.....	0	1
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	7,418,374	6,281,991
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....	8,383,074	5,755,140
13.2 Stocks.....	0	1,223,852
13.3 Mortgage loans.....	0	0
13.4 Real estate.....	0	0
13.5 Other invested assets.....	0	0
13.6 Miscellaneous applications.....	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6).....	8,383,074	6,978,992
14. Net increase (decrease) in contract loans and premium notes.....	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14).....	(964,700)	(697,001)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes.....	0	0
16.2 Capital and paid in surplus, less treasury stock.....	0	0
16.3 Borrowed funds.....	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....	0	0
16.5 Dividends to stockholders.....	0	0
16.6 Other cash provided (applied).....	(88,951)	69,038
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	(88,951)	69,038
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17).....	(87,239)	(447,012)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	2,811,731	3,258,743
19.2 End of year (Line 18 plus Line 19.1).....	2,724,492	2,811,731

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE 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 Dec. 31 Prior Year - per Col. 3, Last Year's Part 1	3 Unearned Premiums Dec. 31 Current Year - per Col. 5 Part 1A	4 Premiums Earned During Year (Cols. 1 + 2 - 3)
1. Fire	1,518,368	890,597	911,610	1,497,355
2. Allied lines	0	0	0	0
3. Farmowners multiple peril	3,731,462	2,174,666	2,236,215	3,669,913
4. Homeowners multiple peril	2,683,834	1,580,720	1,574,251	2,690,303
5. Commercial multiple peril	2,041,740	1,021,721	1,270,060	1,793,401
6. Mortgage guaranty	0	0	0	0
8. Ocean marine	0	0	0	0
9. Inland marine	0	0	0	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	525,935	328,839	321,282	533,492
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	0	0	0	0
19.3,19.4 Commercial auto liability	418,221	171,231	206,271	383,181
21. Auto physical damage	149,778	100,764	79,934	170,608
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	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	0	0	0	0
32. Reinsurance - nonproportional assumed liability	0	0	0	0
33. Reinsurance - nonproportional assumed financial Lines	0	0	0	0
34. Aggregate write-ins for other lines of business	0	0	0	0
35. TOTALS	11,069,338	6,268,538	6,599,623	10,738,253
DETAILS OF WRITE-INS				
3401.				
3402.				
3403.				
3498. Sum. of remaining write-ins for Line 34 from overflow page	0	0	0	0
3499. Totals (Lines 3401 through 3403 + 3498) (Line 34 above)	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1A - RECAPITULATION OF ALL PREMIUMS

Line of Business	1 Amount Unearned (Running One Year or Less from Date of Policy) (a)	2 Amount Unearned (Running More Than One Year from Date of Policy) (a)	3 Earned but Unbilled Premium	4 Reserve for Rate Credits and Retrospective Adjustments Based on Experience	5 Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4
1. Fire	911,610				911,610
2. Allied lines					0
3. Farmowners multiple peril	2,236,215				2,236,215
4. Homeowners multiple peril	1,574,251				1,574,251
5. Commercial multiple peril	1,270,060				1,270,060
6. Mortgage guaranty					0
8. Ocean marine					0
9. Inland marine					0
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	321,282				321,282
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					0
19.3,19.4 Commercial auto liability	206,271				206,271
21. Auto physical damage	79,934				79,934
22. Aircraft (all perils)					0
23. Fidelity					0
24. Surety					0
26. Burglary and theft					0
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	6,599,623	0	0	0	6,599,623
36. Accrued retrospective premiums based on experience					
37. Earned but unbilled premiums					
38. Balance (Sum of Lines 35 through 37)					6,599,623
DETAILS OF WRITE-INS					
3401.					
3402.					
3403.					
3498. Sum. of remaining write-ins for Line 34 from overflow page	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0	0	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE 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	1,694,578				176,210	1,518,368
2. Allied lines						0
3. Farmowners multiple peril	4,537,267				805,805	3,731,462
4. Homeowners multiple peril	3,061,166				377,332	2,683,834
5. Commercial multiple peril	2,569,270				527,530	2,041,740
6. Mortgage guaranty						0
8. Ocean marine						0
9. Inland marine						0
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	868,709		19,275		362,049	525,935
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						0
19.3,19.4 Commercial auto liability	466,563				48,342	418,221
21. Auto physical damage	169,136				19,358	149,778
22. Aircraft (all perils)						0
23. Fidelity						0
24. Surety						0
26. Burglary and theft						0
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	13,366,689	0	19,275	0	2,316,626	11,069,338
DETAILS OF WRITE-INS						
3401.						
3402.						
3403.						
3498. Sum. of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0	0	0	0	0

(a) Does the company's direct premiums written include premiums recorded on an installment basis? Yes [] No []

If yes: 1. The amount of such installment premiums \$

2. Amount at which such installment premiums would have been reported had they been recorded on an annualized basis \$

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5	6	7	8
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)				
1. Fire	688,035		10,846	677,189	171,497	300,101	548,585	36.6
2. Allied lines			0	0	0	0	0	0.0
3. Farmowners multiple peril	1,446,474		112,288	1,334,186	271,590	267,666	1,338,110	36.5
4. Homeowners multiple peril	2,759,531		202,938	2,556,593	784,210	435,292	2,905,511	108.0
5. Commercial multiple peril	1,523,083		562,669	960,414	154,471	225,576	889,309	49.6
6. Mortgage guaranty			0	0	0	0	0	0.0
8. Ocean marine			0	0	0	0	0	0.0
9. Inland marine			0	0	0	0	0	0.0
10. Financial guaranty			0	0	0	0	0	0.0
11.1 Medical professional liability - occurrence			0	0	0	0	0	0.0
11.2 Medical professional liability - claims-made			0	0	0	0	0	0.0
12. Earthquake			0	0	0	0	0	0.0
13. Group accident and health			0	0	0	0	0	0.0
14. Credit accident and health (group and individual)			0	0	0	0	0	0.0
15. Other accident and health			0	0	0	0	0	0.0
16. Workers' compensation			0	0	0	0	0	0.0
17.1 Other liability - occurrence	30,691	8,122		38,813	137,080	186,029	(10,136)	(1.9)
17.2 Other liability - claims-made			0	0	0	0	0	0.0
17.3 Excess workers' compensation			0	0	0	0	0	0.0
18.1 Products liability - occurrence			0	0	0	0	0	0.0
18.2 Products liability - claims-made			0	0	0	0	0	0.0
19.1,19.2 Private passenger auto liability			0	0	0	0	0	0.0
19.3,19.4 Commercial auto liability	42,035			42,035	69,432	75,000	36,467	9.5
21. Auto physical damage	140,438			140,438	5,646	17,101	128,983	75.6
22. Aircraft (all perils)			0	0	0	0	0	0.0
23. Fidelity			0	0	0	0	0	0.0
24. Surety			0	0	0	0	0	0.0
26. Burglary and theft			0	0	0	0	0	0.0
27. Boiler and machinery			0	0	0	0	0	0.0
28. Credit			0	0	0	0	0	0.0
29. International			0	0	0	0	0	0.0
30. Warranty			0	0	0	0	0	0.0
31. Reinsurance - nonproportional assumed property	XXX			0	0	0	0	0.0
32. Reinsurance - nonproportional assumed liability	XXX			0	0	0	0	0.0
33. Reinsurance - nonproportional assumed financial lines	XXX		0	0	0	0	0	0.0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0.0
35. TOTALS	6,630,287	8,122	888,741	5,749,668	1,593,926	1,506,765	5,836,829	54.4
DETAILS OF WRITE-INS								
3401.								
3402.								
3403.								
3498. Sum. of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0.0
3499. Totals (Lines 3401 through 3403 + 3498) (Line 34 above)	0	0	0	0	0	0	0	0.0

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8	9
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable from Authorized and Unauthorized Companies	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded		
1. Fire	127,035			127,035	.44,462			171,497	8,575
2. Allied lines				0				0	
3. Farmowners multiple peril	466,392		257,478	208,914	.62,676			271,590	19,618
4. Homeowners multiple peril	723,488		118,986	604,502	.179,708			784,210	56,647
5. Commercial multiple peril	155,116		37,413	117,703	.36,768			154,471	14,090
6. Mortgage guaranty				0				0	
8. Ocean marine				0				0	
9. Inland marine				0				0	
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				(a)	0
15. Other accident and health				0				(a)	0
16. Workers' compensation				0				0	
17.1 Other liability - occurrence	44,780	6,600		.51,380	.60,163	25,537		137,080	39,654
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				0				0	
19.3,19.4 Commercial auto liability	26,032			.26,032	.43,400			.69,432	21,051
21. Auto physical damage	2,823			2,823	2,823			5,646	565
22. Aircraft (all perils)				0				0	
23. Fidelity				0				0	
24. Surety				0				0	
26. Burglary and theft				0				0	
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	1,545,666	6,600	413,877	1,138,389	430,000	25,537	0	1,593,926	160,200
DETAILS OF WRITE-INS									
3401.									
3402.									
3403.									
3498. Sum. of remaining write-ins for Line 34 from overflow page	0	.0	0	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 + 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
1. Claim adjustment services:				
1.1 Direct	318,890			318,890
1.2 Reinsurance assumed	4,015			4,015
1.3 Reinsurance ceded	0			0
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3)	322,905	0	0	322,905
2. Commission and brokerage:				
2.1 Direct, excluding contingent	0	1,913,279		1,913,279
2.2 Reinsurance assumed, excluding contingent	0	7,426		7,426
2.3 Reinsurance ceded, excluding contingent	0	84,937		84,937
2.4 Contingent-direct	0	239,363		239,363
2.5 Contingent-reinsurance assumed				0
2.6 Contingent-reinsurance ceded		140,978		140,978
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	1,934,153	0	1,934,153
3. Allowances to manager and agents				0
4. Advertising .....		.69,210		.69,210
5. Boards, bureaus and associations .....		.83,569		.83,569
6. Surveys and underwriting reports .....		.58,645		.58,645
7. Audit of assureds' records				0
8. Salary and related items:				
8.1 Salaries	381,335	.845,293	.44,489	1,271,117
8.2 Payroll taxes	29,496	.65,384	.3,441	.98,321
9. Employee relations and welfare	95,505	211,702	.11,143	318,350
10. Insurance .....	.9,450	.20,948	.1,102	.31,500
11. Directors' fees .....	.22,451	.54,924	.2,807	.80,182
12. Travel and travel items	17,862	.66,537	.4,912	.89,311
13. Rent and rent items .....	.37,497	.101,675	.5,048	.144,220
14. Equipment	10,704	.23,726	.1,249	.35,679
15. Cost or depreciation of EDP equipment and software	31,734	.70,344	.3,702	.105,780
16. Printing and stationery .....	.8,475	.24,239	.1,186	.33,900
17. Postage, telephone and telegraph, exchange and express	16,170	.46,246	.2,264	.64,680
18. Legal and auditing	62,123	172,703	.13,667	.248,493
19. Totals (Lines 3 to 18)	722,802	1,915,145	.95,010	.2,732,957
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$ .....		.51,422		.51,422
20.2 Insurance department licenses and fees .....		.40,786		.40,786
20.3 Gross guaranty association assessments				0
20.4 All other (excluding federal and foreign income and real estate)		23,293		23,293
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)	0	115,501	0	115,501
21. Real estate expenses .....			.86,257	.86,257
22. Real estate taxes .....			.20,266	.20,266
23. Reimbursements by uninsured plans				0
24. Aggregate write-ins for miscellaneous expenses	63,081	126,856	0	189,937
25. Total expenses incurred	1,108,788	.4,091,655	.201,533	(a) 5,401,976
26. Less unpaid expenses - current year	160,200	.1,002,681	.20,266	1,183,147
27. Add unpaid expenses - prior year	153,200	.1,034,458	.20,912	1,208,570
28. Amounts receivable relating to uninsured plans, prior year	0	0	0	0
29. Amounts receivable relating to uninsured plans, current year				0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	1,101,788	4,123,432	.202,179	5,427,399
DETAILS OF WRITE-INS				
2401. DATA PROCESSING	54,586	.101,373		.155,959
2402. DONATIONS .....	.8,495	.25,483		.33,978
2403. MISC				0
2498. Summary of remaining write-ins for Line 24 from overflow page	0	0	0	0
2499. Totals (Lines 2401 through 2403 plus 2498) (Line 24 above)	63,081	126,856	0	189,937

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

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a)	63,626
1.1 Bonds exempt from U.S. tax	(a)	147,948
1.2 Other bonds (unaffiliated)	(a)	257,402
1.3 Bonds of affiliates	(a)	0
2.1 Preferred stocks (unaffiliated)	(b)	0
2.11 Preferred stocks of affiliates	(b)	21,249
2.2 Common stocks (unaffiliated)	(c)	0
2.21 Common stocks of affiliates	(c)	2,886
3. Mortgage loans	(d)	144,480
4. Real estate	(e)	5,949
5. Contract loans	(f) .....	.....
6. Cash, cash equivalents and short-term investments	(g) .....	.....
7. Derivative instruments	(g) .....	.....
8. Other invested assets	(h) .....	.....
9. Aggregate write-ins for investment income	(i)	2,392
10. Total gross investment income	645,932	643,494
11. Investment expenses	(g)	201,533
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)	39,910
15. Aggregate write-ins for deductions from investment income .....	.....	0
16. Total deductions (Lines 11 through 15) .....	.....	241,443
17. Net investment income (Line 10 minus Line 16) .....	.....	402,051
DETAILS OF WRITE-INS		
0901. NAMICO	2,392	2,392
0902. MISC. .....	.....	.....
0903. .....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0
0999. Totals (Lines 0901 through 0903) plus 0998 (Line 9 above)	2,392	2,392
1501. .....	.....	.....
1502. .....	.....	.....
1503. .....	.....	.....
1598. Summary of remaining write-ins for Line 15 from overflow page	0	0
1599. Totals (Lines 1501 through 1503) plus 1598 (Line 15 above)	0	0

(a) Includes \$ 5,546 accrual of discount less \$ 77,346 amortization of premium and less \$ 53,095 paid for accrued interest on purchases.
 (b) Includes \$ accrual of discount less \$ 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 \$ paid for accrued interest on purchases.
 (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
 (e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
 (f) Includes \$ accrual of discount less \$ amortization of premium.
 (g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
 (h) Includes \$ interest on surplus notes and \$ interest on capital notes.
 (i) Includes \$ depreciation on real estate and \$ 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	6,612 .....	.....	6,612 .....	.....	.....
1.1 Bonds exempt from U.S. tax	(7,022) .....	.....	(7,022) .....	.....	.....
1.2 Other bonds (unaffiliated)	29,098 .....	.....	29,098	4,752	0
1.3 Bonds of affiliates	0	0	0	0	0
2.1 Preferred stocks (unaffiliated)	0	0	0	0	0
2.11 Preferred stocks of affiliates	0	0	0	0	0
2.2 Common stocks (unaffiliated)	0	0	0	(13,239)	0
2.21 Common stocks of affiliates	0	0	0	0	0
3. Mortgage loans	0	0	0	0	0
4. Real estate	0	0	0	0	0
5. Contract loans .....	.....	.....	.....	.....	.....
6. Cash, cash equivalents and short-term investments .....	.....	.....	.....	0	0
7. Derivative instruments .....	.....	.....	.....	0	0
8. Other invested assets	0	0	0	0	0
9. Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10. Total capital gains (losses)	28,688	0	28,688	(8,487)	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 through 0903) plus 0998 (Line 9 above)	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

EXHIBIT OF NONADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....	0	0	0
2. Stocks (Schedule D):			
2.1 Preferred stocks	0	0	0
2.2 Common stocks	0	0	0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens	0	0	0
3.2 Other than first liens	0	0	0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company	0	0	0
4.2 Properties held for the production of income.....	0	0	0
4.3 Properties held for sale	0	0	0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA).....	0	0	0
6. Contract loans	0	0	0
7. Derivatives (Schedule DB).....	0	0	0
8. Other invested assets (Schedule BA).....	0	0	0
9. Receivables for securities	0	0	0
10. Securities lending reinvested collateral assets (Schedule DL).....	0	0	0
11. Aggregate write-ins for invested assets	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	0	0	0
13. Title plants (for Title insurers only).....	0	0	0
14. Investment income due and accrued	0	0	0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection	0	0	0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....	0	0	0
15.3 Accrued retrospective premiums.....	0	0	0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers	0	0	0
16.2 Funds held by or deposited with reinsured companies	0	0	0
16.3 Other amounts receivable under reinsurance contracts	0	0	0
17. Amounts receivable relating to uninsured plans	0	0	0
18.1 Current federal and foreign income tax recoverable and interest thereon	0	0	0
18.2 Net deferred tax asset.....	157,678	365,661	207,983
19. Guaranty funds receivable or on deposit	0	0	0
20. Electronic data processing equipment and software.....	123,074	152,140	29,066
21. Furniture and equipment, including health care delivery assets.....	66,541	64,289	(2,252)
22. Net adjustment in assets and liabilities due to foreign exchange rates	0	0	0
23. Receivables from parent, subsidiaries and affiliates	0	0	0
24. Health care and other amounts receivable.....	0	0	0
25. Aggregate write-ins for other than invested assets	131	131	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	347,424	582,221	234,797
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0
28. Total (Lines 26 and 27).....	347,424	582,221	234,797
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above).....	0	0	0
2501. Workers Comp Deposit.....	131	131	0
2502.	0	0	0
2503.			
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above).....	131	131	0

NOTES TO FINANCIAL STATEMENTS

NOTE I - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A. The financial statements of Mennonite Mutual Insurance Company are presented on the basis of accounting practices prescribed or permitted by the Ohio Insurance Department.

The Ohio Insurance Department 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 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.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of ABC is shown below:

	State of Domicile	2011	2010
(1) Net Income ABC state basis	OH	136,580	407,101
(2) State Prescribed Practices (Income): Depreciation of fixed assets			
(3) State Permitted Practices (Income): Depreciation, home office property.			
(4) Net Income, NAIC SAP		136,580	407,101
(5) Statutory Surplus ABC basis		10,243,374	9,861,758
(6) State Prescribed Practices (Surplus): Goodwill, net Fixed Assets, net			
(7) State Permitted Practices (Surplus): Home Office Property			
(8) Statutory Surplus, NAIC SAP		10,243,374	9,861,758

B. Use of Estimates in the Preparation of Financial Statements

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 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 Policy

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 costs as sales commissions, are charged to operations as incurred. Expenses incurred are reduced for ceding allowances received or receivable.

Reinsurance recoverables are estimates of paid and unpaid losses collectible from the Company's reinsurers. The amounts ultimately collected may be more or less than these estimates. Any adjustments of these estimates is reflected in income as they are determined. The Company periodically reviews the financial condition of its reinsurers and amounts recoverable therefrom, recording an allowance when necessary for uncollectible reinsurance.

The capitalization policy for fixed assets has not changed from prior year.

In addition the Company uses the following accounting policies:

1. Short-Term investments are stated at cost, which is also their fair value.
2. Bonds are stated at amortized cost using the interest method unless required by the NAIC to be carried at fair value.
3. Common stocks are stated at fair value except the stock of its uncombined subsidiary is carried on the equity basis.
4. Preferred stocks are stated at fair value.
5. Mortgage loans - are valued at unpaid balance.
6. Loan backed securities are stated at amortized cost using the interest method unless required by the NAIC to be carried at fair value.
7. Investments in Subsidiary, Controlled and Affiliated Entities

NOTES TO FINANCIAL STATEMENTS

The Company carries Orrville Insurance Agency, Inc. at GAAP equity.

8. Joint Ventures, Partnerships, and Limited Liability Companies - N/A

9. Derivitives - N/A

10. The Company anticipates investment income as a factor in the premium deficiency calculation

11. Unpaid Claims, Losses and Loss Adjusting Expenses

Unpaid losses and loss adjustment expenses including 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 amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability are continually reviewed, and any adjustments are reflected in the period determined.

12. Capitalization policy - no change

13. Pharmaceutical rebate receivables - N/A

NOTE 2 - ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS

A. (Description of above other than results from codification)

B. The Company prepares its statutory financial statements in conformity with accounting practices prescribed or permitted by the State of Ohio. Effective January 1, 2001, the State of Ohio required that insurance companies domiciled in the State of Ohio prepare their statutory basis financial statements in accordance with the NAIC Accounting

Practices Procedures Manual - Version effective January 1, 2001, subject to any deviations prescribed or permitted by the State of Ohio Insurance Commissioners.

As a result of these changes, the Company reported a change of accounting principle, as an adjustment which increased unassigned funds of \$95,541 as of January 1, 2001. Included in this total adjustment is an increase in unassigned funds of approximately \$95,541 related to deferred tax assets.

NOTE 3 - BUSINESS COMBINATIONS AND GOODWILL - N/A

NOTE 4 - DISCONTINUED OPERATIONS - N/A

NOTE 5 - INVESTMENTS

A. Mortgage Loans - N/A

B. Debt Restructuring - N/A

C. Reverse Mortgages - N/A

D. Loan Backed and Structured Securities -

Prepayment assumptions for mortgage-backed/loan-backed and structured securities were obtained from broker dealer survey values or internal estimates.

E. Repurchase, Reverse Repurchase, and Dollar Repurchase Agreements

For repurchase agreements, Company policies require a minimum of 102% of the fair value of securities purchased under repurchase agreements to be maintained as collateral. Cash collateral received is invested in short-term investments and the offsetting collateral liability is included in "Miscellaneous liabilities".

F. Real Estate

G. Investment in low income Housing

NOTE 6 - INVESTMENTS IN JOINT VENTURES, PARTNERSHIPS, AND LLC'S - N/A

NOTE 7 - INVESTMENT INCOME - N/A

NOTE 8 - DERIVATIVES - N/A

NOTE 9 - INCOME TAXES

A. Components of Net Deferred Tax Assets (Liabilities) at December 31, 2011 and 2010 are as follows:

	December 31, 2011	December 31, 2010
Gross deferred tax assets	\$ 623,997	\$ 608,773
Gross deferred tax liabilities	<u>(32,210)</u>	<u>(35,713)</u>
Net deferred tax asset	591,787	573,061

NOTES TO FINANCIAL STATEMENTS

Nonadmitted deferred tax assets	(157,678)	(365,661)
Admitted deferred tax asset	<u>\$ 434,109</u>	<u>207,400</u>
Increase (decrease) in non-admitted	<u>\$ 226,709</u>	<u>\$ 76,743</u>

B. Unrecognized Deferred Tax Liabilities

N/A

C. Current Tax and Change in Deferred Tax

Current income taxes incurred consist of the following major components

Current year expense	\$ 66,806	\$ 200,210
Tax credits	--	--
Prior year overaccrual of tax reserves	<u>\$ 3,149</u>	<u>\$ 5,514</u>
	<u>\$ 69,996</u>	<u>\$ 205,724</u>

The tax effect of temporary differences that give rise to significant portions of the deferred tax assets and deferred tax liabilities are as follows:

	December 31, 2011	December 31, 2010
Deferred tax assets		
Unearned premium reserve	\$ 466,277	\$ 441,170
Loss and LAE discounting	\$ 41,806	\$ 48,848
Deferred liabilities	\$ 28,697	\$ 14,617
Nonadmitted assets	\$ 79,397	\$ 86,578
Unrealized capital losses	\$ 0	\$ 0
Accrual of salvage and subrogation	<u>\$ 7,820</u>	<u>\$ 8,500</u>
	\$ 623,997	\$ 608,773
Deferred tax liabilities		
Unrealized gains	\$ 21,437	25,939
Tax/book depreciation	8,218	9,768
Other	<u>\$ 2,554</u>	<u>\$ 6</u>
	\$ 32,210	\$ 35,713
Net deferred tax asset (liability)	\$ 591,787	\$ 573,061
Net deferred tax asset non-admitted	\$ 157,678	\$ 365,661
Net admitted deferred tax asset	<u>\$ 434,109</u>	<u>\$ 207,400</u>

The change in net deferred income taxes is comprised of the following:

	December 31, 2011	December 31, 2010	Change
Total gross deferred tax assets	\$ 623,997	\$ 608,773	15,223
Total gross deferred tax liabilities	<u>\$ 33,210</u>	<u>\$ 35,713</u>	3,503
Net deferred tax asset	<u>\$ 591,787</u>	<u>\$ 573,061</u>	18,726
Deferred tax on change in unrealized gains			<u>2,886</u>
Change in net deferred income tax			<u>\$ 15,840</u>

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

	December 31, 2011	Effective Tax Rate
Expected federal income tax	\$ 70,236	34.0%
Tax exempt income	\$ (58,168)	-28.2%
Other amounts:		
Discounts on unpaid losses & LAE	\$ (22)	0.0%
20% of unearned premiums	\$ 23,897	11.6%
Depreciation adjustments	\$ 18,640	9.0%
Proration of tax-exempt investment	\$ 9,484	4.6%
Non-deductible & deferred expenses	\$ 12,926	6.3%
Non-deductible capital loss	\$ 0	0.0%
Other amounts	<u>\$ (10,187)</u>	<u>-4.9%</u>
Current income tax expense	<u>\$ 66,806</u>	<u>32.4%</u>

E. Operating Loss and Tax Credit Carryforwards

1. N/A

2. The following are income taxes incurred in the current and prior years which will be

NOTES TO FINANCIAL STATEMENTS

available for recoupment in the event of future net losses.

2011	\$ 66,806
2010	\$ 200,210

F. The Company's federal income tax return is not consolidated with any other entity.

NOTE 10 - INFORMATION CONCERNING PARENTS, SUBSIDIARIES, AND AFFILIATES

All outstanding shares of the Orrville Insurance Agency are owned by the Mennonite Mutual Insurance Company domiciled in the state of Ohio.

NOTE 11 - DEBT - N/A

NOTE 12 - BENEFIT PLANS

The Company has provided its employees with a 401 (K) retirement plan. The company also makes an additional contribution each year for all qualified employees.

NOTE 13 - CAPITAL AND SURPLUS AND SHAREHOLDERS' AND POLICYHOLDERS' DIVIDEND RESTRICTIONS

1. N/A

2. The Company has no preferred stock outstanding.

3. N/A

4. N/A

5. There were no restrictions placed on the Company's surplus, including for whom the surplus is being held.

6. N/A

7. N/A

8. N/A

9. The portion of unassigned funds (surplus) represented or reduced by each item below is as follows:

1. unrealized gains and losses:	(5,601)
2. nonadmitted asset values:	234,797
3. provision for reinsurance:	0

10. N/A

NOTE 14 - CONTINGENCIES

A. Liabilities, Contingencies and Impairment of Assets

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

B. Guarantee Fund and Other Assessments

C. Gain Contingencies

D. All Other

NOTE 15 - LEASES - N/A

NOTE 16 - FINANCIAL INSTRUMENTS AND OFF-BALANCE SHEET RISK - N/A

NOTE 17 - TRANSFERS AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES - N/A

NOTE 18 - UNINSURED PLANS - NA

NOTE 19 - MANAGING GENERAL AGENTS/THIRD PARTY ADMINISTRATORS - NA

NOTE 20 – FAIR VALUE MEASUREMENT

Fair values are based on quoted market prices when available. The Company's financial assets and liabilities carried at fair value have been classified, for disclosure purposes, based on Statutory Accounting Principle No. 100, Fair Value Measurements. Level 1 inputs consist of unadjusted quoted prices for identical assets and liabilities in active markets accessible at the measurement date. Level 2 inputs consist of quoted prices for similar assets and liabilities in active markets, quoted prices from those willing to trade markets that are not active, or other inputs that are observable or can be confirmed by market data for the term of the instrument. Level 3 inputs consist of unobservable inputs (supported by little or

NOTES TO FINANCIAL STATEMENTS

no market activity) and reflect the Company's best estimate of what hypothetical market participants would use to determine a transaction price for the asset or liability at the reporting date.

The following table provides information as of December 31, 2011 about the Company's financial assets measured at fair value on a recurring basis:

	Quoted Prices in Active Markets for Identical Assets (Level1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)	Total at December 31, 2010	
Common Stock				1,272,128	66,110
Total				1,272,128	66,110

The following summarized the changes in assets classified in Level 3 for 2011

Balance at January 01, 2011	Common stock of affilliate 100	Unrealized gain included in surplu
		Balance at December 31, 2011

NOTE 21 – OTHER ITEMS - N/A

NOTE 22 – EVENTS SUBSEQUENT - N/A

NOTE 23 - REINSURANCE

A. Unsecured reinsurance recoverables in excess of 3% of surplus

1. 43-1898350 Maiden Reinsurance 396,000

B. Reinsurance Recoverable in Dispute

C. Reinsurance Assumed and Ceded

	ASSUMED REINSURANCE		CEDED REINSURANCE NET			(5)	(6)
	(1)	(2)	(3)	(4)			
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	
1. Affiliates							
2. All Other	\$9,584	\$3,834	\$131,946	\$39,584	\$92,362		37,750
3. Total							
4. Direct Unearned Premium reserve	\$ 6,721,985						

D. Uncollectible Reinsurance - N/A

E. Commutation of Ceded Reinsurance - N/A

F. Retroactive Reinsurance - N/A

NOTE 24 - RETROSPECTIVELY RATED CONTRACTS - N/A

NOTE 25- CHANGES IN INCURRED LOSSES AND LAE

The estimated cost of loss and loss adjustment expenses (LAE) attributable to insured events of prior years decreased by 404,383 during 2011. Increases or decreases of this nature occur as the result of claim settlements during the current year, and as additional information is received regarding individual claims, causing changes from the original estimates of the cost of these claims.

	2011 Calendar Year Losses & LAE Incurred	2011 Loss Year Losses & LAE Incurred	Total Shortage (Redundancy)	Loss & DCC Shortage (Redundancy)	Impact of AO on Total Shortage (Redundancy)
	Sch. P – Part 1			Sch. P – Part 2	
Net Losses Incurred					
Page 4, Col.1, Line 2		5,836,829			
Net LAE Incurred		1,108,778			
Page 4, Col.1, Line 3		6,945,617			
Sch.P Part 1 Summary		7,350,000	(404,383)	(397,000)	(7,383)
Col 28, Line 11					

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

NOTES TO FINANCIAL STATEMENTS

ROLLFORWARD
Unpaid losses & LAE
At Beginning of Year 1,659,965

Losses & LAE incurred in current year:

For current year losses
And LAE (Sch. P Part1) 7,350,000

For prior year losses & defence
Cost containment expenses
(Sch.P Part 2) (397,000)

For prior year adjusting &
Other expenses (7,383)

Income Statement Col 1,
Lines 2 and 3 6,945,617

NOTE 26 - INTERCOMPANY POOLING ARRANGEMENTS - NA

NOTE 27 - STRUCTURED SETTLEMENTS - N/A

NOTE 28 – HEALTH CARE RECEIVABLES - N/A

NOTE 29 – PARTICIPATING POLICIES - N/A

NOTE 30 – PREMIUM DEFICIENCY RESERVES -

	<u>Fire</u>	<u>HO/FO</u>	<u>CMP</u>	<u>G/L</u>	<u>CAP</u>	<u>Total</u>
Unearned premium reserve at 12/31/11	911,610	3,810,466	1,270,060	321,282	286,205	6,599,623
Anticipated loss and adjusting (5 year average)	-454,277	-2,597,607	-683,221	-67,584	-91,106	-3,893,795
Acquisition costs (at renewal)	0	0	0	0	0	0
Policy maintenance cost (10.0% estimate)	-91,161	-381,047	-127,006	-32,128	-28,620	-659,962
If negative - deficiency	366,172	831,812	459,833	221,570	166,479	2,045,866
Net earned premium 2007	1,258	5,853	1,252	487	548	
Net earned premium 2008	1,295	5,762	1,303	450	487	
Net earned premium 2009	1,359	6,014	1,349	471	464	
Net earned premium 2010	1,449	6,071	1,432	531	515	
Net earned premium 2011	1,498	6,360	1,793	533	555	
	6,859	30,060	7,129	2,472	2,569	
Net incurred loss & lae 2007	560	3,880	635	185	109	
Net incurred loss & lae 2008	557	3,575	415	81	156	
Net incurred loss & lae 2009	875	3,545	668	43	143	
Net incurred loss & lae 2010	726	4,424	993	31	212	
Net incurred loss & lae 2011	700	5,068	1,124	180	278	
	3,418	20,492	3,835	520	898	

Note 30

The Company evaluated the need to record a premium deficiency reserve as of the end of the year and determined a reserve was not required. This evaluation was completed subsequent to year end. The Company does not anticipate investment income when evaluating the need for premium deficiency reserves.

NOTE 31 – HIGH DEDUCTIBLES – N/A

NOTE 32 – DISCOUNTING OF LIABILITIES FOR UNPAID LOSSES AND LAE - N/A

NOTE 33 - ASBESTOS AND ENVIRONMENTAL CLAIMS

A. Does the Company have on the books, or has it ever written an insured for which you have identified a potential for the existence of a liability due to asbestos losses? Yes () No (X)

NOTES TO FINANCIAL STATEMENTS

NOTE 34 - SUBSCRIBER SAVINGS ACCOUNTS – N/A

NOTE 35 – MULTIPLE PERIL CROP INSURANCE – N/A

NOTE 36 – FINANCIAL GUARANTY INSURANCE - NA

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? Yes [] 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 [] No [] NA []

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 []

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. 12/31/2007

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. 12/31/2007

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). 12/31/2010

3.4 By what department or departments?

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 [] No [] NA []

3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [] NA []

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 []

4.12 renewals? Yes [] No []

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 []

4.22 renewals? Yes [] No []

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No []

5.2 If yes, provide the name of the 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. Yes [] No []

1 Name of Entity	2 NAIC Company Code	3 State of Domicile
.....
.....
.....
.....

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 []

6.2 If yes, give full information Yes [] No []

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No []

7.2 If yes,

7.21 State the percentage of foreign control Yes [] No []

7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney - in - fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney - in - fact). Yes [] No []

1 Nationality	2 Type of Entity
.....
.....
.....
.....

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES

8.1 Is the company a subsidiary of a bank holding company regulated by 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 response to 8.3 is yes, please provide 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 Office of Thrift Supervision (OTS), 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 OTS	6 FDIC	7 SEC

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?

10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant 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 the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 17A 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 compliance with the domiciliary state insurance laws? Yes [X] No [] NA []

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, President, Demotech, Inc., 2715 Tuller Parkway, Dublin, Ohio 43017-2310

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]

12.11 Name of real estate holding company
12.12 Number of parcels involved.....
12.13 Total book/adjusted carrying value..... \$.....

12.2 If yes, provide explanation

13. FOR UNITED STATES BRANCHES 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 [X] No []

13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No [X]

13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] NA []

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 [X] No []

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

a. 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 [X]

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 [X]

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

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES

BOARD OF DIRECTORS

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance with a NAIC rating of 3 or below? Yes [] No [X]
 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 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount
.....
.....
.....

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof? Yes [X] No []
 17. Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof? Yes [X] 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 [X] 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 [X]
 20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
 20.11 To directors or other officers \$
 20.12 To stockholders not officers \$
 20.13 Trustees, supreme or grand (Fraternal only) \$
 20.2 Total amount of loans outstanding at end of year (inclusive of Separate Accounts, exclusive of policy loans):
 20.21 To directors or other officers \$
 20.22 To stockholders not officers \$
 20.23 Trustees, supreme or grand (Fraternal only) \$
 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 reported in the statement? Yes [] No [X]
 21.2 If yes, state the amount thereof at December 31 of the current year:
 21.21 Rented from others \$
 21.22 Borrowed from others \$
 21.23 Leased from others \$
 21.24 Other \$
 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 [X]
 22.2 If answer is yes:
 22.21 Amount paid as losses or risk adjustment \$
 22.22 Amount paid as expenses \$
 22.23 Other amounts paid \$
 23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]
 23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$

INVESTMENT

24.1 Were all 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 24.3) Yes [] No [X]
 24.2 If no, give full and complete information, relating thereto
 24.3 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)
 24.4 Does the company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? Yes [] No [] NA [X]
 24.5 If answer to 24.4 is yes, report amount of collateral for conforming programs. \$
 24.6 If answer to 24.4 is no, report amount of collateral for other programs. \$
 24.7 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] NA [X]
 24.8 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] NA [X]
 24.9 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 [] NA [X]

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES

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 currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.3) Yes [] No [X]

25.2 If yes, state the amount thereof at December 31 of the current year: 25.21 Subject to repurchase agreements \$
25.22 Subject to reverse repurchase agreements \$
25.23 Subject to dollar repurchase agreements \$
25.24 Subject to reverse dollar repurchase agreements \$
25.25 Pledged as collateral \$
25.26 Placed under option agreements \$
25.27 Letter stock or securities restricted as to sale \$
25.28 On deposit with state or other regulatory body \$
25.29 Other \$

25.3 For category (25.27) 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 [X]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] NA [X]
If no, attach a description with this statement.

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 [X]

27.2 If yes, state the amount thereof at December 31 of the current year \$

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 [X] No []

28.01 For agreements that comply with the requirements of the NAIC *Financial Condition Examiners Handbook*, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
Wayne Savings Community Bank.....	Wooster, Ohio 44691.....
The Commercial & Savings Bank.....	91 N Clay Street, Millersburg, Ohio 44654.....

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)
.....
.....

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year? Yes [] No [X]

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, brokers/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 Number(s)	2 Name	3 Address
.....
.....

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES

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 [X]
 29.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
.....
29.2999 TOTAL		0

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 Holding	4 Date of Valuation
.....
.....
.....

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.....	14,400,901	14,689,085	288,184
30.2 Preferred Stocks.....	0	0	0
30.3 Totals.....	14,400,901	14,689,085	288,184

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

Wayne Savings Community Bank.....

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 reliable 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 Securities Valuation Office been followed?..... Yes [X] No []
 32.2 If no, list exceptions:

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES

OTHER

33.1 Amount of payments to Trade associations, service organizations and statistical or rating bureaus, if any?.....\$83,569
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.

1 Name	2 Amount Paid
AAIS.....	.....32,692

34.1 Amount of payments for legal expenses, if any?.....\$125,122
34.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
.....
.....

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?.....\$0
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
.....
.....

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES

(continued)

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	\$ 10,738,253	\$ 9,998,479
2.3 Premium Ratio (2.1/2.2)	.....0.000	.....0.000
2.4 Reserve Numerator	\$ 0	\$ 0
2.5 Reserve Denominator	\$ 8,353,749	\$ 7,928,503
2.6 Reserve Ratio (2.4/2.5)	.....0.000	.....0.000

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 \$

3.22 Non-participating policies \$

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 [] No [X]

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. \$

5. For Reciprocal Exchanges Only:

5.1 Does the exchange appoint local agents? Yes [] No [X]

5.2 If yes, is the commission paid:

5.21 Out of Attorney's-in-fact compensation Yes [] No [] NA [X]

5.22 As a direct expense of the exchange Yes [] No [] NA [X]

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 fulfillment of certain conditions, been deferred? Yes [] No [X]

5.5 If yes, give full information

GENERAL INTERROGATORIES

PART 2 - PROPERTY & CASUALTY INTERROGATORIES

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:.....

6.3 What provision has this reporting entity made (such as a 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?.....

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?.....

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 unreinsured catastrophic loss.

Yes [X] No []

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)?.....

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

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)?.....

7.4 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 the risk, or portion thereof, reinsured?.....

7.5 If yes, give full information.....

Yes [] No [X]

8.1 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 noncancelable 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]

9.1 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]

9.2 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.....

Yes [] No [X]

9.3 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]

9.4 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.

Yes [] No [X]

9.5 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 []

9.6 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 [] No [] N/A [X]

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

11.1 Has the reporting entity guaranteed policies issued by any other entity and now in force:..... Yes [] No [X]
 11.2 If yes, give full information

12.1 If the reporting entity recorded accrued retrospective premiums on insurance contracts on Line 15.3 of the asset schedule, Page 2, state the amount of corresponding liabilities recorded for:
 12.11 Unpaid losses..... \$.....
 12.12 Unpaid underwriting expenses (including loss adjustment expenses)..... \$.....

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?..... \$.....
 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] NA []

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 the 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 the current year:
 12.61 Letters of Credit..... \$.....
 12.62 Collateral and other funds..... \$.....

13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation):..... \$..... 150,000
 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:.....

14.1 Is the company a cedant in a multiple cedant reinsurance contract?..... Yes [] No [X]

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 [X]

15.2 If yes, give full information

16.1 Does the reporting entity write any warranty business?..... Yes [] No [X]

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

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

* Disclose type of coverage:

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY**GENERAL INTERROGATORIES**
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

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 [X]

Incurred 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	\$.....
17.12	Unfunded portion of Interrogatory 17.11.....	\$.....
17.13	Paid losses and loss adjustment expenses portion of Interrogatory 17.11.....	\$.....
17.14	Case reserves portion of Interrogatory 17.11.....	\$.....
17.15	Incurred but not reported portion of Interrogatory 17.11.....	\$.....
17.16	Unearned premium portion of Interrogatory 17.11.....	\$.....
17.17	Contingent commission portion of Interrogatory 17.11.....	\$.....

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	\$.....
17.19	Unfunded portion of Interrogatory 17.18.....	\$.....
17.20	Paid losses and loss adjustment expenses portion of Interrogatory 17.18.....	\$.....
17.21	Case reserves portion of Interrogatory 17.18.....	\$.....
17.22	Incurred but not reported portion of Interrogatory 17.18.....	\$.....
17.23	Unearned premium portion of Interrogatory 17.18.....	\$.....
17.24	Contingent commission portion of Interrogatory 17.18.....	\$.....

18.1 Do you act as a custodian for health savings accounts?..... Yes [] No [X]

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

18.3 Do you act as an administrator for health savings accounts?..... Yes [] No [X]

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

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

FIVE-YEAR HISTORICAL DATA

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

	1 2011	2 2010	3 2009	4 2008	5 2007
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)					
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)	1,354,547	1,276,693	1,256,916	1,307,997	1,240,756
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	1,863,714	1,888,014	1,788,950	1,765,617	1,698,701
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	10,167,703	9,500,947	9,006,493	8,874,472	8,657,358
4. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
5. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
6. Total (Line 35)	13,385,964	12,665,654	12,052,359	11,948,086	11,596,815
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)					
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) .....	.944,156	.877,740	.749,482	.815,163	.872,060
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)	1,668,146	1,671,452	1,530,533	1,498,970	1,407,402
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	8,457,036	7,811,533	7,432,466	7,160,903	7,111,910
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
12. Total (Line 35)	11,069,338	10,360,725	9,712,481	9,475,036	9,391,372
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)					
13. Net underwriting gain (loss) (Line 8)	(299,019)	40,069	287,159	1,165,466	651,112
14. Net investment gain (loss) (Line 11) .....	.430,739	.475,517	.235,794	.405,771	.539,276
15. Total other income (Line 15) .....	.74,856	.97,239	.107,283	.94,626	.151,392
16. Dividends to policyholders (Line 17)	0	0	0	0	0
17. Federal and foreign income taxes incurred (Line 19)	69,996	205,724	211,444	504,275	399,652
18. Net income (Line 20)	136,580	407,101	418,792	1,161,588	942,128
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	19,984,009	19,167,533	18,187,812	17,200,574	16,874,249
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1) .....	.311,595	.284,248	.319,698	.277,959	.262,910
20.2 Deferred and not yet due (Line 15.2) .....	.2,510,732	.2,352,251	.2,053,124	.2,091,627	.2,057,279
20.3 Accrued retrospective premiums (Line 15.3)	0	0	0	0	0
21. Total liabilities excluding protected cell business (Page 3, Line 26) .....	.9,740,635	.9,305,775	.8,862,829	.8,699,464	.8,570,360
22. Losses (Page 3, Line 1) .....	.1,593,926	.1,506,765	.1,511,092	.1,263,458	.1,431,137
23. Loss adjustment expenses (Page 3, Line 3) .....	.160,200	.153,200	.181,300	.172,000	.212,600
24. Unearned premiums (Page 3, Line 9) .....	.6,599,623	.6,268,538	.5,906,292	.5,850,650	.5,672,873
25. Capital paid up (Page 3, Lines 30 & 31)	0	0	0	0	0
26. Surplus as regards policyholders (Page 3, Line 37)	10,243,374	9,861,758	.9,324,983	.8,501,110	.8,303,889
Cash Flow (Page 5)					
27. Net cash from operations (Line 11) .....	.966,412	.180,951	.1,663,408	.126,781	.537,975
Risk-Based Capital Analysis					
28. Total adjusted capital	10,243,374	9,861,758	.9,324,983	.8,501,110	.8,303,889
29. Authorized control level risk-based capital .....	.783,684	.717,783	.858,469	.898,803	.801,862
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) .....	.70.3	.67.8	.56.5	.66.6	.57.1
31. Stocks (Lines 2.1 & 2.2) .....	.8.1	.8.6	.16.0	.15.8	.22.8
32. Mortgage loans on real estate (Lines 3.1 and 3.2) .....	.0.4	.0.5	.0.6	.0.9	.0.9
33. Real estate (Lines 4.1, 4.2 & 4.3) .....	.4.8	.5.3	.5.7	.6.7	.5.2
34. Cash, cash equivalents and short-term investments (Line 5) .....	.16.5	.17.9	.21.3	.10.0	.14.0
35. Contract loans (Line 6) .....	.0.0	.0.0	.0.0	.0.0	.0.0
36. Derivatives (Line 7) .....	.0.0	.0.0	.XXX	.XXX	.XXX
37. Other invested assets (Line 8) .....	.0.0	.0.0	.0.0	.0.0	.0.0
38. Receivables for securities (Line 9) .....	.0.0	.0.0	.0.0	.0.0	.0.0
39. Securities lending reinvested collateral assets (Line 10) .....	.0.0	.0.0	.XXX	.XXX	.XXX
40. Aggregate write-ins for invested assets (Line 11) .....	.0.0	.0.0	.0.0	.0.0	.0.0
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) .....	.0	.0	.0	.0	.0
43. Affiliated preferred stocks (Sch. D, Summary, Line 18, Col. 1) .....	.0	.0	.0	.0	.0
44. Affiliated common stocks (Sch. D, Summary, Line 24, Col. 1) .....	.100	.100	.100	.100	.100
45. Affiliated short-term investments (subtotals included in Schedule DA Verification, Col. 5, Line 10) .....	.0	.0	.0	.0	.0
46. Affiliated mortgage loans on real estate .....	.0	.0	.0	.0	.0
47. All other affiliated .....	.0	.0	.0	.0	.0
48. Total of above Lines 42 to 47 .....	.100	.100	.100	.100	.100
49. 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

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2011	2 2010	3 2009	4 2008	5 2007
Capital and Surplus Accounts (Page 4)					
50. Net unrealized capital gains (losses) (Line 24)	(5,601)	89,808	380,734	(1,023,682)	(10,598)
51. Dividends to stockholders (Line 35)	0	0	0	0	0
52. Change in surplus as regards policyholders for the year (Line 38)	381,616	536,775	823,873	197,221	934,026
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
53. 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)	80,848	42,519	100,249	469,866	190,478
54. Property lines (Lines 1, 2, 9, 12, 21 & 26)	828,473	633,994	1,264,329	494,904	616,812
55. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	5,729,088	6,151,017	4,444,792	5,173,753	4,347,203
56. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
57. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
58. Total (Line 35)	6,638,409	6,827,530	5,809,370	6,138,523	5,154,493
Net Losses Paid (Page 9, Part 2, Col. 4)					
59. 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)	80,848	42,519	100,249	174,189	171,259
60. Property lines (Lines 1, 2, 9, 12, 21 & 26)	817,627	632,219	913,229	372,168	541,528
61. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	4,851,193	4,617,723	3,512,981	3,015,118	3,856,466
62. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
63. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
64. Total (Line 35)	5,749,668	5,292,461	4,526,459	3,561,475	4,569,253
Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
65. Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
66. Losses incurred (Line 2)	54.4	52.9	49.4	36.5	45.3
67. Loss expenses incurred (Line 3)	10.3	9.6	9.0	8.8	9.2
68. Other underwriting expenses incurred (Line 4)	38.1	37.1	38.6	42.2	38.5
69. Net underwriting gain (loss) (Line 8)	(2.8)	0.4	3.0	12.5	6.9
Other Percentages					
70. 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)	36.3	34.9	37.3	40.4	36.9
71. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	64.7	62.5	58.4	45.3	54.5
72. 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)	108.1	105.1	104.2	111.5	113.1
One Year Loss Development (000 omitted)					
73. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2 - Summary, Line 12, Col. 11)	(397)	(508)	(50)	(526)	(633)
74. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 73 above divided by Page 4, Line 21, Col. 1 x 100.0)	(4.0)	(5.4)	(0.6)	(6.3)	(8.6)
Two Year Loss Development (000 omitted)					
75. 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)	(567)	(198)	(681)	(910)	(821)
76. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 75 above divided by Page 4, Line 21, Col. 2 x 100.0)	(6.1)	(2.3)	(8.2)	(12.3)	(13.3)

NOTE: 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

If no, please explain:

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

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	0	0	0	0	0	0	0	XXX	
2. 2002	8,125	2,277	5,848	5,656	2,549	.64	0	.448	0	.19	3,619	XXX	
3. 2003	9,605	2,524	7,081	4,207	1,040	136	0	.518	0	.291	3,821	XXX	
4. 2004	10,481	1,901	8,580	3,651	.495	.118	0	.478	0	.123	3,752	XXX	
5. 2005	10,957	2,177	8,780	4,199	.580	.25	0	.560	0	.97	4,204	XXX	
6. 2006	11,569	2,427	9,142	5,814	1,978	133	0	.692	0	.14	4,661	XXX	
7. 2007	11,601	2,203	9,398	4,976	483	110	0	.684	0	.31	5,287	XXX	
8. 2008	11,767	2,470	9,297	6,311	2,381	.47	0	.739	0	.54	4,716	XXX	
9. 2009	11,986	2,329	9,657	5,926	1,657	.81	0	.862	0	.81	5,212	XXX	
10. 2010	12,287	2,289	9,998	7,161	1,716	.24	0	.841	0	.66	6,310	XXX	
11. 2011	13,046	2,307	10,739	5,133	15	6	0	867	0	61	5,991	XXX	
12. Totals	XXX	XXX	XXX	53,034	12,894	744	0	6,689	0	837	47,573	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 Direct and Assumed	22 Ceded						
	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.	0	0	0	0	0	0	0	0	0	0	0	0	XXX			
2.	0	0	0	0	0	0	0	0	0	0	0	0	XXX			
3.	0	0	0	0	0	0	0	0	0	0	0	0	XXX			
4.	25	0	.13	0	0	0	0	0	.2	0	0	.40	XXX			
5.	0	0	0	0	0	0	0	0	0	0	0	0	XXX			
6.	50	0	.15	0	0	0	0	0	.3	0	0	.68	XXX			
7.	60	0	.18	0	0	0	0	0	.4	0	0	.82	XXX			
8.	50	0	.15	0	0	0	0	0	.3	0	0	.68	XXX			
9.	47	0	.12	0	0	0	0	0	.3	0	0	.62	XXX			
10.	322	279	.28	0	0	0	0	0	.5	0	0	.76	XXX			
11.	998	134	354	0	0	0	0	0	141	0	0	1,359	XXX			
12. Totals	1,552	413	455	0	0	0	0	0	161	0	0	1,755	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.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	.0	.0
2.	6,168	2,549	3,619	75.9	111.9	61.9	0	0		0	0
3.	4,861	1,040	3,821	50.6	41.2	54.0	0	0		0	0
4.	4,287	.495	3,792	40.9	26.0	44.2	0	0		.38	.2
5.	4,784	.580	4,204	.43.7	.26.6	.47.9	0	0		.0	.0
6.	6,707	1,978	4,729	58.0	.81.5	.51.7	0	0		.65	.3
7.	5,852	.483	5,369	.50.4	.21.9	.57.1	0	0		.78	.4
8.	7,165	2,381	4,784	.60.9	.96.4	.51.5	0	0		.65	.3
9.	6,931	1,657	5,274	.57.8	.71.1	.54.6	0	0		.59	.3
10.	8,381	1,995	.6,386	.68.2	.87.2	.63.9	0	0		.71	.5
11.	7,499	149	7,350	57.5	6.5	68.4	0	0		1,218	141
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	1,594	161

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.

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE MUTUAL INSURANCE COMPANY

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 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	11 One Year	12 Two Year
1. Prior	667	500	671	627	550	530	551	531	486	457	(29)	(74)
2. 2002	3,444	3,365	3,310	3,211	3,201	3,172	3,170	3,170	3,171	3,171	0	1
3. 2003	XXX	3,606	3,498	3,533	3,455	3,422	3,305	3,304	3,305	3,303	(2)	(1)
4. 2004	XXX	XXX	3,724	3,414	3,411	3,328	3,307	3,309	3,309	3,312	3	3
5. 2005	XXX	XXX	XXX	4,167	3,884	3,679	3,644	3,655	3,633	3,644	11	(11)
6. 2006	XXX	XXX	XXX	XXX	4,365	4,102	4,019	3,979	3,978	4,034	56	55
7. 2007	XXX	XXX	XXX	XXX	XXX	5,029	4,780	4,681	4,679	4,681	2	0
8. 2008	XXX	XXX	XXX	XXX	XXX	XXX	3,985	4,090	4,002	4,042	40	(48)
9. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,901	4,501	4,409	(92)	(492)
10. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,926	5,540	(386)	XXX
11. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,342	XXX	XXX
										12. Totals	(397)	(567)

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 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011		
1. Prior	000	53	297	364	418	463	453	457	457	457	XXX	XXX
2. 2002	2,730	2,979	3,182	3,198	3,201	3,172	3,170	3,170	3,171	3,171	XXX	XXX
3. 2003	XXX	2,125	2,838	3,059	3,331	3,412	3,297	3,304	3,305	3,303	XXX	XXX
4. 2004	XXX	XXX	2,357	3,063	3,207	3,237	3,259	3,272	3,272	3,274	XXX	XXX
5. 2005	XXX	XXX	XXX	3,138	3,619	3,643	3,623	3,631	3,633	3,644	XXX	XXX
6. 2006	XXX	XXX	XXX	XXX	3,348	3,801	3,889	3,914	3,965	3,969	XXX	XXX
7. 2007	XXX	XXX	XXX	XXX	XXX	4,102	4,392	4,499	4,554	4,603	XXX	XXX
8. 2008	XXX	XXX	XXX	XXX	XXX	XXX	3,374	3,825	3,960	3,977	XXX	XXX
9. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	3,989	4,306	4,350	XXX	XXX
10. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,860	5,469	XXX	XXX
11. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,124	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)										10 2011
	1 2002	2 2003	3 2004	4 2005	5 2006	6 2007	7 2008	8 2009	9 2010	10 2011	
1. Prior	171	75	82	53	31	16	13	6	8	0	
2. 2002	246	93	30	3	0	0	0	0	0	0	
3. 2003	XXX	326	172	110	41	5	3	0	0	0	
4. 2004	XXX	XXX	432	226	84	29	16	12	12	13	
5. 2005	XXX	XXX	XXX	440	213	18	7	6	0	0	
6. 2006	XXX	XXX	XXX	XXX	466	154	54	17	3	15	
7. 2007	XXX	XXX	XXX	XXX	XXX	456	167	63	29	18	
8. 2008	XXX	XXX	XXX	XXX	XXX	XXX	297	130	26	15	
9. 2009	XXX	XXX	XXX	XXX	XXX	XXX	XXX	369	71	12	
10. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	306	28	
11. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	354	

ANNUAL STATEMENT FOR THE YEAR 2011 OF THE MENNONITE 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 Premium Written for Federal Purchasing Groups (Included in Col. 2)
		2 Direct Premiums Written	3 Direct Premiums Earned						
1. Alabama	AL	N	0	.0	0	0	0	.0	.0
2. Alaska	AK	N	0	0	0	0	0	0	0
3. Arizona	AZ	N	0	0	0	0	0	0	0
4. Arkansas	AR	N	0	0	0	0	0	0	0
5. California	CA	N	0	0	0	0	0	0	0
6. Colorado	CO	N	0	0	0	0	0	0	0
7. Connecticut	CT	N	0	0	0	0	0	0	0
8. Delaware	DE	N	0	0	0	0	0	0	0
9. Dist. of Columbia	DC	N	0	0	0	0	0	0	0
10. Florida	FL	N	0	0	0	0	0	0	0
11. Georgia	GA	N	0	0	0	0	0	0	0
12. Hawaii	HI	N	0	0	0	0	0	0	0
13. Idaho	ID	N	0	0	0	0	0	0	0
14. Illinois	IL	N	0	0	0	0	0	0	0
15. Indiana	IN	L	589,023	.445,332	0	138,310	188,071	53,755	2,562
16. Iowa	IA	N	0	0	0	0	0	0	0
17. Kansas	KS	N	0	0	0	0	0	0	0
18. Kentucky	KY	N	0	0	0	0	0	0	0
19. Louisiana	LA	N	0	0	0	0	0	0	0
20. Maine	ME	N	0	0	0	0	0	0	0
21. Maryland	MD	N	0	0	0	0	0	0	0
22. Massachusetts	MA	N	0	0	0	0	0	0	0
23. Michigan	MI	N	0	0	0	0	0	0	0
24. Minnesota	MN	N	0	0	0	0	0	0	0
25. Mississippi	MS	N	0	0	0	0	0	0	0
26. Missouri	MO	N	0	0	0	0	0	0	0
27. Montana	MT	N	0	0	0	0	0	0	0
28. Nebraska	NE	N	0	0	0	0	0	0	0
29. Nevada	NV	N	0	0	0	0	0	0	0
30. New Hampshire	NH	N	0	0	0	0	0	0	0
31. New Jersey	NJ	N	0	0	0	0	0	0	0
32. New Mexico	NM	N	0	0	0	0	0	0	0
33. New York	NY	N	0	0	0	0	0	0	0
34. No. Carolina	NC	N	0	0	0	0	0	0	0
35. No. Dakota	ND	N	0	0	0	0	0	0	0
36. Ohio	OH	L	12,777,666	12,577,558	0	6,491,977	5,958,887	1,921,911	115,073
37. Oklahoma	OK	N	0	0	0	0	0	0	0
38. Oregon	OR	N	0	0	0	0	0	0	0
39. Pennsylvania	PA	L	0	0	0	0	0	0	0
40. Rhode Island	RI	N	0	0	0	0	0	0	0
41. So. Carolina	SC	N	0	0	0	0	0	0	0
42. So. Dakota	SD	N	0	0	0	0	0	0	0
43. Tennessee	TN	N	0	0	0	0	0	0	0
44. Texas	TX	N	0	0	0	0	0	0	0
45. Utah	UT	N	0	0	0	0	0	0	0
46. Vermont	VT	N	0	0	0	0	0	0	0
47. Virginia	VA	N	0	0	0	0	0	0	0
48. Washington	WA	N	0	0	0	0	0	0	0
49. West Virginia	WV	N	0	0	0	0	0	0	0
50. Wisconsin	WI	N	0	0	0	0	0	0	0
51. Wyoming	WY	N	0	0	0	0	0	0	0
52. American Samoa	AS	N	0	0	0	0	0	0	0
53. Guam	GU	N	0	0	0	0	0	0	0
54. Puerto Rico	PR	N	0	0	0	0	0	0	0
55. U.S. Virgin Islands	VI	N	0	0	0	0	0	0	0
56. Northern Mariana Islands	MP	N	0	0	0	0	0	0	0
57. Canada	CN	N	0	0	0	0	0	0	0
58. Aggregate other alien	OT	XXX	0	0	0	0	0	0	0
59. Totals	(a)	3	13,366,689	13,022,890	0	6,630,287	6,146,958	1,975,666	117,635
DETAILS OF WRITE-INS									
5801.		XXX							
5802.		XXX							
5803.		XXX							
5898. Sum. of remaining write-ins for Line 58 from overflow page		XXX	0	0	0	0	0	0	0
5899. Totals (Lines 5801 through 5803 + 5898) (Line 58 above)		XXX	0	0	0	0	0	0	0

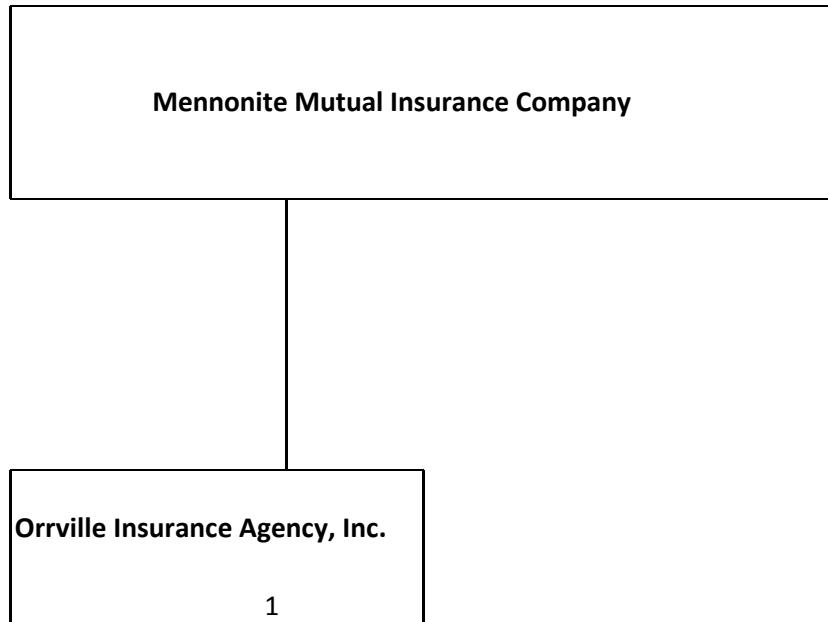
(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business in the state.

Explanation of basis of allocation of premiums by states, etc.

All of the premiums are allocated to the state in which the property or insured is located. Losses are allocated to the state in which the premium was allocated.

(a) Insert the number of L responses except for Canada and Other Alien.

SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 - ORGANIZATIONAL CHART



1. Owned 100% by Mennonite Mutual Insurance Company

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK

Assets	2
Cash Flow	5
Exhibit of Capital Gains (Losses)	12
Exhibit of Net Investment Income	12
Exhibit of Nonadmitted Assets	13
Exhibit of Premiums and Losses (State Page)	19
Five-Year Historical Data	17
General Interrogatories	15
Jurat Page	1
Liabilities, Surplus and Other Funds	3
Notes To Financial Statements	14
Overflow Page For Write-ins	97
Schedule A – Part 1	E01
Schedule A – Part 2	E02
Schedule A – Part 3	E03
Schedule A – Verification Between Years	SI02
Schedule B – Part 1	E04
Schedule B – Part 2	E05
Schedule B – Part 3	E06
Schedule B – Verification Between Years	SI02
Schedule BA – Part 1	E07
Schedule BA – Part 2	E08
Schedule BA – Part 3	E09
Schedule BA – Verification Between Years	SI03
Schedule D – Part 1	E10
Schedule D – Part 1A – Section 1	SI05
Schedule D – Part 1A – Section 2	SI08
Schedule D – Part 2 – Section 1	E11
Schedule D – Part 2 – Section 2	E12
Schedule D – Part 3	E13
Schedule D – Part 4	E14
Schedule D – Part 5	E15
Schedule D – Part 6 – Section 1	E16
Schedule D – Part 6 – Section 2	E16
Schedule D – Summary By Country	SI04
Schedule D – Verification Between Years	SI03
Schedule DA – Part 1	E17

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK (Continued)

Schedule DA – Verification Between Years	SI10
Schedule DB – Part A – Section 1	E18
Schedule DB – Part A – Section 2	E19
Schedule DB – Part A – Verification Between Years	SI11
Schedule DB – Part B – Section 1	E20
Schedule DB – Part B – Section 2	E21
Schedule DB – Part B – Verification Between Years	SI11
Schedule DB – Part C – Section 1	SI12
Schedule DB – Part C – Section 2	SI13
Schedule DB – Part D	E22
Schedule DB – Verification	SI14
Schedule DL – Part 1	E23
Schedule DL – Part 2	E24
Schedule E – Part 1 – Cash	E25
Schedule E – Part 2 – Cash Equivalents	E26
Schedule E – Part 3 – Special Deposits	E27
Schedule E – Verification Between Years	SI15
Schedule F – Part 1	20
Schedule F – Part 2	21
Schedule F – Part 3	22
Schedule F – Part 4	23
Schedule F – Part 5	24
Schedule F – Part 6	25
Schedule F – Part 7	26
Schedule F – Part 8	27
Schedule H – Accident and Health Exhibit – Part 1	28
Schedule H – Parts – 2, 3, and 4	29
Schedule H – Part 5 – Health Claims	30
Schedule P – Part 1 – Analysis of Losses and Loss Expenses	31
Schedule P – Part 1A – Homeowners/Farmowners	33
Schedule P – Part 1B – Private Passenger Auto Liability/Medical	34
Schedule P – Part 1C – Commercial Auto/Truck Liability/Medical	35
Schedule P – Part 1D – Workers' Compensation	36
Schedule P – Part 1E – Commercial Multiple Peril	37
Schedule P – Part 1F – Section 1 – Medical Professional Liability – Occurrence	38
Schedule P – Part 1F – Section 2 – Medical Professional Liability – Claims-Made	39
Schedule P – Part 1G - Special Liability (Ocean, Marine, Aircraft (All Perils), Boiler and Machinery)	40
Schedule P – Part 1H – Section 1 – Other Liability–Occurrence	41
Schedule P – Part 1H – Section 2 – Other Liability – Claims-Made	42
Schedule P – Part 1I – Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary & Theft)	43
Schedule P – Part 1J – Auto Physical Damage	44
Schedule P – Part 1K – Fidelity/Surety	45
Schedule P – Part 1L – Other (Including Credit, Accident and Health)	46
Schedule P – Part 1M – International	47

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK (Continued)

Schedule P – Part 1N – Reinsurance - Nonproportional Assumed Property	48
Schedule P – Part 1O – Reinsurance - Nonproportional Assumed Liability	49
Schedule P – Part 1P – Reinsurance - Nonproportional Assumed Financial Lines	50
Schedule P – Part 1R – Section 1 – Products Liability – Occurrence	51
Schedule P – Part 1R – Section 2 – Products Liability – Claims – Made	52
Schedule P – Part 1S – Financial Guaranty/Mortgage Guaranty	53
Schedule P – Part 1T – Warranty	54
Schedule P – Part 2, Part 3 and Part 4 - Summary	32
Schedule P – Part 2A – Homeowners/Farmowners	55
Schedule P – Part 2B – Private Passenger Auto Liability/Medical	55
Schedule P – Part 2C – Commercial Auto/Truck Liability/Medical	55
Schedule P – Part 2D – Workers' Compensation	55
Schedule P – Part 2E – Commercial Multiple Peril	55
Schedule P – Part 2F – Section 1 – Medical Professional Liability – Occurrence	56
Schedule P – Part 2F – Section 2 – Medical Professional Liability – Claims – Made	56
Schedule P – Part 2G – Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)	56
Schedule P – Part 2H – Section 1 – Other Liability – Occurrence	56
Schedule P – Part 2H – Section 2 – Other Liability – Claims – Made	56
Schedule P – Part 2I – Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, and Theft)	57
Schedule P – Part 2J – Auto Physical Damage	57
Schedule P – Part 2K – Fidelity, Surety	57
Schedule P – Part 2L – Other (Including Credit, Accident and Health)	57
Schedule P – Part 2M – International	57
Schedule P – Part 2N – Reinsurance - Nonproportional Assumed Property	58
Schedule P – Part 2O – Reinsurance - Nonproportional Assumed Liability	58
Schedule P – Part 2P – Reinsurance - Nonproportional Assumed Financial Lines	58
Schedule P – Part 2R – Section 1 – Products Liability – Occurrence	59
Schedule P – Part 2R – Section 2 – Products Liability – Claims-Made	59
Schedule P – Part 2S – Financial Guaranty/Mortgage Guaranty	59
Schedule P – Part 2T – Warranty	59
Schedule P – Part 3A – Homeowners/Farmowners	60
Schedule P – Part 3B – Private Passenger Auto Liability/Medical	60
Schedule P – Part 3C – Commercial Auto/Truck Liability/Medical	60
Schedule P – Part 3D – Workers' Compensation	60
Schedule P – Part 3E – Commercial Multiple Peril	60
Schedule P – Part 3F – Section 1 –Medical Professional Liability – Occurrence	61
Schedule P – Part 3F – Section 2 – Medical Professional Liability – Claims-Made	61
Schedule P – Part 3G – Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)	61
Schedule P – Part 3H – Section 1 – Other Liability – Occurrence	61
Schedule P – Part 3H – Section 2 – Other Liability – Claims-Made	61
Schedule P – Part 3I – Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary, and Theft)	62
Schedule P – Part 3J – Auto Physical Damage	62

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK (Continued)

Schedule P – Part 3K – Fidelity/Surety	62
Schedule P – Part 3L – Other (Including Credit, Accident and Health)	62
Schedule P – Part 3M – International	62
Schedule P – Part 3N – Reinsurance - Nonproportional Assumed Property	63
Schedule P – Part 3O – Reinsurance - Nonproportional Assumed Liability	63
Schedule P – Part 3P – Reinsurance - Nonproportional Assumed Financial Lines	63
Schedule P – Part 3R – Section 1 – Products Liability – Occurrence	64
Schedule P – Part 3R – Section 2 – Products Liability – Claims-Made	64
Schedule P – Part 3S – Financial Guaranty/Mortgage Guaranty	64
Schedule P – Part 3T – Warranty	64
Schedule P – Part 4A – Homeowners/Farmowners	65
Schedule P – Part 4B – Private Passenger Auto Liability/Medical	65
Schedule P – Part 4C – Commercial Auto/Truck Liability/Medical	65
Schedule P – Part 4D – Workers' Compensation	65
Schedule P – Part 4E – Commercial Multiple Peril	65
Schedule P – Part 4F – Section 1 – Medical Professional Liability – Occurrence	66
Schedule P – Part 4F – Section 2 – Medical Professional Liability – Claims-Made	66
Schedule P – Part 4G – Special Liability (Ocean Marine, Aircraft (All Perils), Boiler and Machinery)	66
Schedule P – Part 4H – Section 1 – Other Liability – Occurrence	66
Schedule P – Part 4H – Section 2 – Other Liability – Claims-Made	66
Schedule P – Part 4I – Special Property (Fire, Allied Lines, Inland Marine, Earthquake, Burglary and Theft)	67
Schedule P – Part 4J – Auto Physical Damage	67
Schedule P – Part 4K – Fidelity/Surety	67
Schedule P – Part 4L – Other (Including Credit, Accident and Health)	67
Schedule P – Part 4M – International	67
Schedule P – Part 4N – Reinsurance - Nonproportional Assumed Property	68
Schedule P – Part 4O – Reinsurance - Nonproportional Assumed Liability	68
Schedule P – Part 4P – Reinsurance - Nonproportional Assumed Financial Lines	68
Schedule P – Part 4R – Section 1 – Products Liability – Occurrence	69
Schedule P – Part 4R – Section 2 – Products Liability – Claims-Made	69
Schedule P – Part 4S – Financial Guaranty/Mortgage Guaranty	69
Schedule P – Part 4T – Warranty	69
Schedule P – Part 5A – Homeowners/Farmowners	70
Schedule P – Part 5B – Private Passenger Auto Liability/Medical	71
Schedule P – Part 5C – Commercial Auto/Truck Liability/Medical	72
Schedule P – Part 5D – Workers' Compensation	73
Schedule P – Part 5E – Commercial Multiple Peril	74
Schedule P – Part 5F – Medical Professional Liability – Claims-Made	76
Schedule P – Part 5F – Medical Professional Liability – Occurrence	75
Schedule P – Part 5H – Other Liability – Claims-Made	78
Schedule P – Part 5H – Other Liability – Occurrence	77
Schedule P – Part 5R – Products Liability – Claims-Made	80

ALPHABETICAL INDEX

ANNUAL STATEMENT BLANK (Continued)

Schedule P – Part 5R – Products Liability – Occurrence	79
Schedule P – Part 5T – Warranty	81
Schedule P – Part 6C – Commercial Auto/Truck Liability/Medical	82
Schedule P – Part 6D – Workers' Compensation	82
Schedule P – Part 6E – Commercial Multiple Peril	83
Schedule P – Part 6H – Other Liability – Claims-Made	84
Schedule P – Part 6H – Other Liability – Occurrence	83
Schedule P – Part 6M – International	84
Schedule P – Part 6N – Reinsurance - Nonproportional Assumed Property	85
Schedule P – Part 6O – Reinsurance - Nonproportional Assumed Liability	85
Schedule P – Part 6R – Products Liability – Claims-Made	86
Schedule P – Part 6R – Products Liability – Occurrence	86
Schedule P – Part 7A – Primary Loss Sensitive Contracts	87
Schedule P – Part 7B – Reinsurance Loss Sensitive Contracts	89
Schedule P Interrogatories	91
Schedule T – Exhibit of Premiums Written	92
Schedule T – Part 2 – Interstate Compact	93
Schedule Y – Information Concerning Activities of Insurer Members of a Holding Company Group	94
Schedule Y – Part 2 – Summary of Insurer's Transactions With Any Affiliates	95
Statement of Income	4
Summary Investment Schedule	SI01
Supplemental Exhibits and Schedules Interrogatories	96
Underwriting and Investment Exhibit Part 1	6
Underwriting and Investment Exhibit Part 1A	7
Underwriting and Investment Exhibit Part 1B	8
Underwriting and Investment Exhibit Part 2	9
Underwriting and Investment Exhibit Part 2A	10
Underwriting and Investment Exhibit Part 3	11

