



ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2012
OF THE CONDITION AND AFFAIRS OF THE
MENNONITE MUTUAL INSURANCE COMPANY

NAIC Group Code 0000, 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, Orrville, OH, US 44667-0300
Main Administrative Office 1000 South Main Street, Orrville, OH, US 44667-0300
Mail Address PO Box 300, Orrville, OH, US 44667-0300
Primary Location of Books and Records 1000 South Main Street, Orrville, OH, US 44667-0300
Internet Website Address mennonitemutual.com
Statutory Statement Contact Ric Hochstetler, 330-683-3730-118

OFFICERS

Table with 4 columns: Name, Title, Name, Title. Includes DAVID LUTHER LEHMAN (President, Treasurer) and GEORGE BIXLER JR (Secretary).

OTHER OFFICERS

Table with 4 columns: Name, Title, Name, Title. Includes J MARK ZOOK (Vice-President of Underwriting) and J TODD NEVILLE (Vice-President of Claims).

DIRECTORS OR TRUSTEES

Table with 4 columns: Name, Name, Name, Name. Includes ROBERT EUGENE ASCHILMAN, MORRIS STUTZMAN, GEORGE BIXLER JR, CRAIG THOMAS MERCER, PAUL BONTRAGER, DONALD DRAVENSTOTT, DAVID LUTHER LEHMAN, 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
22 day of February, 2012

- a. Is this an original filing? Yes [X] No []
b. If no,
1. State the amendment number
2. Date filed
3. Number of pages attached

Melanie J Alger Notary Public
April 9, 2016

ANNUAL STATEMENT FOR THE YEAR 2012 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).....	10,619,071		10,619,071	11,600,633
2. Stocks (Schedule D):				
2.1 Preferred stocks	0		0	0
2.2 Common stocks	1,490,570		1,490,570	1,338,338
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens			0	0
3.2 Other than first liens			0	58,491
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances).....	965,808		965,808	786,008
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 (\$ (130,625) , Schedule E - Part 1), cash equivalents (\$ 0 , Schedule E - Part 2) and short-term investments (\$ 3,177,392 , Schedule DA).....	3,046,767		3,046,767	2,724,492
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)	16,122,216	0	16,122,216	16,507,962
13. Title plants less \$ charged off (for Title insurers only).....			0	0
14. Investment income due and accrued	69,260		69,260	75,646
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	262,213		262,213	311,595
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums).....	2,604,936		2,604,936	2,510,732
15.3 Accrued retrospective premiums.....			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	273,244		273,244	0
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	117,377		117,377	93,194
18.2 Net deferred tax asset.....	495,094		495,094	434,109
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software.....	125,633	106,842	18,791	24,171
21. Furniture and equipment, including health care delivery assets (\$)	122,305	122,305	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	30,131	131	30,000	26,600
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	20,222,409	229,278	19,993,131	19,984,009
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	0
28. Total (Lines 26 and 27)	20,222,409	229,278	19,993,131	19,984,009
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.....	30,000		30,000	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)	30,131	131	30,000	26,600

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)	1,168,329	1,593,926
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)		0
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)	151,400	160,200
4. Commissions payable, contingent commissions and other similar charges	993,879	740,182
5. Other expenses (excluding taxes, licenses and fees)	184,797	147,113
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	146,904	135,652
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))		0
7.2 Net deferred tax liability		0
8. Borrowed money \$ and interest thereon \$		0
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$139,420 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)	6,224,761	6,599,623
10. Advance premium	231,525	250,301
11. Dividends declared and unpaid:		
11.1 Stockholders		0
11.2 Policyholders		0
12. Ceded reinsurance premiums payable (net of ceding commissions)	197,483	105,321
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 19)		0
14. Amounts withheld or retained by company for account of others	2,094	1,241
15. Remittances and items not allocated	7,289	7,076
16. Provision for reinsurance (including \$ certified) (Schedule F, Part 8)	0	0
17. Net adjustments in assets and liabilities due to foreign exchange rates		0
18. Drafts outstanding		0
19. Payable to parent, subsidiaries and affiliates		0
20. Derivatives		0
21. Payable for securities		0
22. Payable for securities lending		0
23. Liability for amounts held under uninsured plans		0
24. Capital notes \$ and interest thereon \$		0
25. Aggregate write-ins for liabilities	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	9,308,461	9,740,635
27. Protected cell liabilities		0
28. Total liabilities (Lines 26 and 27)	9,308,461	9,740,635
29. Aggregate write-ins for special surplus funds	0	0
30. Common capital stock		0
31. Preferred capital stock		0
32. Aggregate write-ins for other than special surplus funds	0	0
33. Surplus notes		0
34. Gross paid in and contributed surplus		0
35. Unassigned funds (surplus)	10,684,670	10,243,374
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)		0
36.2 shares preferred (value included in Line 31 \$)		0
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	10,684,670	10,243,374
38. Totals (Page 2, Line 28, Col. 3)	19,993,131	19,984,009
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 2012 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)	10,021,753	10,738,253
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7)	5,293,213	5,836,829
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1)	1,183,186	1,108,788
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2)	3,680,593	4,091,655
5. Aggregate write-ins for underwriting deductions .....	.0	.0
6. Total underwriting deductions (Lines 2 through 5)	10,156,992	11,037,272
7. Net income of protected cells .....		.0
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	(135,239)	(299,019)
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17)	304,024	402,051
10. Net realized capital gains (losses) less capital gains tax of \$	95,624	28,688
11. Net investment gain (loss) (Lines 9 + 10)	399,648	430,739
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ .....		.0
13. Finance and service charges not included in premiums	101,067	117,636
14. Aggregate write-ins for miscellaneous income	(29,576)	(42,780)
15. Total other income (Lines 12 through 14)	71,491	74,856
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	335,900	206,576
17. Dividends to policyholders		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)	335,900	206,576
19. Federal and foreign income taxes incurred	75,817	69,996
20. Net income (Line 18 minus Line 19) (to Line 22)	260,083	136,580
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	10,243,374	9,861,758
22. Net income (from Line 20)	260,083	136,580
23. Net transfers (to) from Protected Cell accounts .....		.0
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$	105,441	(5,601)
25. Change in net unrealized foreign exchange capital gain (loss) .....		.0
26. Change in net deferred income tax	(42,374)	15,840
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)	118,146	234,797
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1) .....	.0	.0
29. Change in surplus notes .....		.0
30. Surplus (contributed to) withdrawn from protected cells .....		.0
31. Cumulative effect of changes in accounting principles	157,678	.0
32. Capital changes:		
32.1 Paid in .....		.0
32.2 Transferred from surplus (Stock Dividend) .....		.0
32.3 Transferred to surplus .....		.0
33. Surplus adjustments:		
33.1 Paid in .....		.0
33.2 Transferred to capital (Stock Dividend) .....		.0
33.3 Transferred from capital .....		.0
34. Net remittances from or (to) Home Office .....		.0
35. Dividends to stockholders .....		.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	(157,678)	.0
38. Change in surplus as regards policyholders for the year (Lines 22 through 37)	441,296	381,616
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	10,684,670	10,243,374
DETAILS OF WRITE-INS		
0501.		
0502.		
0503.		
0598. Summary of remaining write-ins for Line 5 from overflow page .....	.0	.0
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above)	0	0
1401. MISC.....	(29,576)	(42,780)
1402. ....		.0
1403. ....		.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)	(29,576)	(42,780)
3701. Effect of accounting change.....	(157,678)	.0
3702.		
3703.		
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)	(157,678)	0

CASH FLOW

	1 Current Year	2 Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance.....	9,675,455	11,032,775
2. Net investment income	462,156	516,198
3. Miscellaneous income	71,491	74,856
4. Total (Lines 1 through 3)	10,209,102	11,623,829
5. Benefit and loss related payments	5,992,054	5,281,454
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	4,569,946	5,084,407
8. Dividends paid to policyholders	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses).....	(73,185)	291,556
10. Total (Lines 5 through 9)	10,488,815	10,657,417
11. Net cash from operations (Line 4 minus Line 10)	(279,713)	966,412
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	3,740,673	7,397,857
12.2 Stocks	175,473	0
12.3 Mortgage loans	58,491	20,517
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	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	3,974,637	7,418,374
13. Cost of investments acquired (long-term only):		
13.1 Bonds	2,763,408	8,383,074
13.2 Stocks	175,473	0
13.3 Mortgage loans	0	0
13.4 Real estate	224,098	0
13.5 Other invested assets	0	0
13.6 Miscellaneous applications	1	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	3,162,980	8,383,074
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)	811,657	(964,700)
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).....	(209,669)	(88,951)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(209,669)	(88,951)
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).....	322,275	(87,239)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	2,724,492	2,811,731
19.2 End of year (Line 18 plus Line 19.1)	3,046,767	2,724,492

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	1,389,969	911,610	884,827	1,416,752
2.	Allied lines	0	0	0	0
3.	Farmowners multiple peril	3,553,709	2,236,215	2,317,593	3,472,331
4.	Homeowners multiple peril	1,273,933	1,574,251	821,467	2,026,717
5.	Commercial multiple peril	2,328,334	1,270,060	1,570,499	2,027,895
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	488,042	321,282	309,807	499,517
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	448,084	206,271	232,034	422,321
21.	Auto physical damage	164,820	79,934	88,534	156,220
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	9,646,891	6,599,623	6,224,761	10,021,753
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 plus 3498) (Line 34 above)	0	0	0	0

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	884,827				884,827
2.	Allied lines					0
3.	Farmowners multiple peril	2,317,593				2,317,593
4.	Homeowners multiple peril	821,467				821,467
5.	Commercial multiple peril	1,570,499				1,570,499
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	309,807				309,807
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	232,034				232,034
21.	Auto physical damage	88,534				88,534
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	6,224,761	0	0	0	6,224,761
36.	Accrued retrospective premiums based on experience					
37.	Earned but unbilled premiums					
38.	Balance (Sum of Lines 35 through 37)					6,224,761
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 .

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	1,657,867				267,898	1,389,969
2. Allied lines						0
3. Farmowners multiple peril	4,746,934				1,193,225	3,553,709
4. Homeowners multiple peril	1,653,289				379,356	1,273,933
5. Commercial multiple peril	3,225,110				896,776	2,328,334
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	875,453		27,286		414,697	488,042
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	523,324				75,240	448,084
21. Auto physical damage	198,233				33,413	164,820
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	12,880,210	0	27,286	0	3,260,605	9,646,891
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 2012 OF THE MENNONITE MUTUAL INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business	Losses Paid Less Salvage				5 Net Losses Unpaid Current Year (Part 2A, Col. 8)	6 Net Losses Unpaid Prior Year	7 Losses Incurred Current Year (Cols. 4 + 5 - 6)	8 Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
	1 Direct Business	2 Reinsurance Assumed	3 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)				
1. Fire	921,746		165,224	756,522	26,540	171,497	611,565	43.2
2. Allied lines				.0	.0	.0	.0	.0
3. Farmowners multiple peril	3,483,474		1,681,163	1,802,311	454,994	271,590	1,985,715	57.2
4. Homeowners multiple peril	2,860,779		1,033,123	1,827,656	80,335	784,210	1,123,781	55.4
5. Commercial multiple peril	1,266,303		189,448	1,076,855	131,532	154,471	1,053,916	52.0
6. Mortgage guaranty				.0	.0	.0	.0	.0
8. Ocean marine				.0	.0	.0	.0	.0
9. Inland marine				.0	.0	.0	.0	.0
10. Financial guaranty				.0	.0	.0	.0	.0
11.1 Medical professional liability - occurrence				.0	.0	.0	.0	.0
11.2 Medical professional liability - claims-made				.0	.0	.0	.0	.0
12. Earthquake				.0	.0	.0	.0	.0
13. Group accident and health				.0	.0	.0	.0	.0
14. Credit accident and health (group and individual)				.0	.0	.0	.0	.0
15. Other accident and health				.0	.0	.0	.0	.0
16. Workers' compensation				.0	.0	.0	.0	.0
17.1 Other liability - occurrence	74,629	9,025		83,654	329,677	137,080	276,251	55.3
17.2 Other liability - claims-made				.0	.0	.0	.0	.0
17.3 Excess workers' compensation				.0	.0	.0	.0	.0
18.1 Products liability - occurrence				.0	.0	.0	.0	.0
18.2 Products liability - claims-made				.0	.0	.0	.0	.0
19.1,19.2 Private passenger auto liability				.0	.0	.0	.0	.0
19.3,19.4 Commercial auto liability	79,820			79,820	130,551	69,432	140,939	33.4
21. Auto physical damage	93,869		1,877	91,992	14,700	5,646	101,046	64.7
22. Aircraft (all perils)				.0	.0	.0	.0	.0
23. Fidelity				.0	.0	.0	.0	.0
24. Surety				.0	.0	.0	.0	.0
26. Burglary and theft				.0	.0	.0	.0	.0
27. Boiler and machinery				.0	.0	.0	.0	.0
28. Credit				.0	.0	.0	.0	.0
29. International				.0	.0	.0	.0	.0
30. Warranty				.0	.0	.0	.0	.0
31. Reinsurance - nonproportional assumed property	XXX			.0	.0	.0	.0	.0
32. Reinsurance - nonproportional assumed liability	XXX			.0	.0	.0	.0	.0
33. Reinsurance - nonproportional assumed financial lines	XXX			.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	8,780,620	9,025	3,070,835	5,718,810	1,168,329	1,593,926	5,293,213	52.8
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
3499. Totals (Lines 3401 through 3403 + 3498) (Line 34 above)	0	0	0	0	0	0	0	0.0

ANNUAL STATEMENT FOR THE YEAR 2012 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 Net Losses Unpaid (Cols. 4 + 5 + 6 - 7)	9 Net Unpaid Loss Adjustment Expenses
	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	12,705		6,165	6,540	20,000			26,540	2,654
2. Allied lines				.0				.0	
3. Farmowners multiple peril	1,192,001		863,516	328,485	126,509			454,994	47,431
4. Homeowners multiple peril	70,266		12,884	57,382	22,953			80,335	4,017
5. Commercial multiple peril	102,279		7,500	94,779	36,753			131,532	12,401
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				.0	
15. Other accident and health				.0			(a)	.0	
16. Workers' compensation				.0				.0	
17.1 Other liability - occurrence	251,802	4,203	94,875	161,130	143,435	25,112		329,677	58,217
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	57,551			57,551	73,000			130,551	25,210
21. Auto physical damage	7,350			7,350	7,350			14,700	1,470
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	1,693,954	4,203	984,940	713,217	430,000	25,112	0	1,168,329	151,400
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.

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	352,114			352,114
1.2 Reinsurance assumed	2,948	0		2,948
1.3 Reinsurance ceded				0
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3)	355,062	0	0	355,062
2. Commission and brokerage:				
2.1 Direct, excluding contingent		1,911,640		1,911,640
2.2 Reinsurance assumed, excluding contingent		10,405		10,405
2.3 Reinsurance ceded, excluding contingent		690,805		690,805
2.4 Contingent-direct		468,909		468,909
2.5 Contingent-reinsurance assumed				0
2.6 Contingent-reinsurance ceded		256,106		256,106
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	1,444,043	0	1,444,043
3. Allowances to manager and agents				0
4. Advertising		74,810		74,810
5. Boards, bureaus and associations		84,984		84,984
6. Surveys and underwriting reports		27,717		27,717
7. Audit of assureds' records				0
8. Salary and related items:				
8.1 Salaries	399,206	884,908	46,574	1,330,688
8.2 Payroll taxes	31,341	69,472	3,656	104,469
9. Employee relations and welfare	102,486	227,177	11,956	341,619
10. Insurance	11,863	26,295	1,384	39,542
11. Directors' fees	30,504	74,626	3,813	108,943
12. Travel and travel items	18,823	70,117	5,176	94,116
13. Rent and rent items	37,497	101,675	5,048	144,220
14. Equipment	9,329	20,680	1,088	31,097
15. Cost or depreciation of EDP equipment and software	30,083	66,685	3,510	100,278
16. Printing and stationery	8,487	24,271	1,188	33,946
17. Postage, telephone and telegraph, exchange and express	16,115	46,088	2,256	64,459
18. Legal and auditing	75,390	209,583	16,586	301,559
19. Totals (Lines 3 to 18)	771,124	2,009,088	102,235	2,882,447
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$		41,085		41,085
20.2 Insurance department licenses and fees		41,998		41,998
20.3 Gross guaranty association assessments				0
20.4 All other (excluding federal and foreign income and real estate)		31,048		31,048
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)	0	114,131	0	114,131
21. Real estate expenses			75,715	75,715
22. Real estate taxes			21,300	21,300
23. Reimbursements by uninsured plans				0
24. Aggregate write-ins for miscellaneous expenses	57,000	113,331	0	170,331
25. Total expenses incurred	1,183,186	3,680,593	199,250 (a)	5,063,029
26. Less unpaid expenses - current year	151,400	1,304,519	21,061	1,476,980
27. Add unpaid expenses - prior year	160,200	1,002,681	20,266	1,183,147
28. Amounts receivable relating to uninsured plans, prior year	0	0	0	0
29. Amounts receivable relating to uninsured plans, current year	0	0	0	0
30. TOTAL EXPENSES PAID (Lines 25 - 26 + 27 - 28 + 29)	1,191,986	3,378,755	198,455	4,769,196
DETAILS OF WRITE-INS				
2401. DATA PROCESSING	50,462	93,716		144,178
2402. DONATIONS	6,538	19,615		26,153
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)	57,000	113,331	0	170,331

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

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a) 42,178	42,367
1.1 Bonds exempt from U.S. tax	(a) 169,116	168,618
1.2 Other bonds (unaffiliated)	(a) 178,205	172,129
1.3 Bonds of affiliates	(a) 0	
2.1 Preferred stocks (unaffiliated)	(b) 0	
2.11 Preferred stocks of affiliates	(b) 0	
2.2 Common stocks (unaffiliated)	14,321	14,321
2.21 Common stocks of affiliates	0	
3. Mortgage loans	(c) 780	780
4. Real estate	(d) 144,000	144,000
5. Contract loans		
6. Cash, cash equivalents and short-term investments	(e) 3,125	3,125
7. Derivative instruments	(f)	
8. Other invested assets		
9. Aggregate write-ins for investment income	2,232	2,232
10. Total gross investment income	553,957	547,572
11. Investment expenses		(g) 199,250
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) 44,298
15. Aggregate write-ins for deductions from investment income		0
16. Total deductions (Lines 11 through 15)		243,548
17. Net investment income (Line 10 minus Line 16)		304,024
DETAILS OF WRITE-INS		
0901. NAMICO	2,232	2,232
0902.		0
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)	2,232	2,232
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow page		0
1599. Totals (Lines 1501 through 1503) plus 1598 (Line 15 above)		0

- (a) Includes \$ 20,119 accrual of discount less \$ 127,567 amortization of premium and less \$ 16,649 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	24,946		24,946		
1.1 Bonds exempt from U.S. tax	35,094		35,094		
1.2 Other bonds (unaffiliated)	43,111		43,111		
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)	(7,527)	0	(7,527)	159,760	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			0		
6. Cash, cash equivalents and short-term investments			0	0	0
7. Derivative instruments			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)	95,624	0	95,624	159,760	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

EXHIBIT OF NONADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Nonadmitted Assets	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.....	0	157,678	157,678
19. Guaranty funds receivable or on deposit	0	0	0
20. Electronic data processing equipment and software.....	106,842	123,074	16,232
21. Furniture and equipment, including health care delivery assets.....	122,305	66,541	(55,764)
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).....	229,278	347,424	118,146
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0
28. Total (Lines 26 and 27)	229,278	347,424	118,146
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
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	2012	2011
(1) Net Income ABC state basis	OH	260,083	136,580
(2) State Prescribed Practices (Income): Depreciation of fixed assets			
(3) State Permitted Practices (Income): Depreciation, home office property.			
(4) Net Income, NAIC SAP		260,083	136,580
(5) Statutory Surplus ABC basis		10,684,670	10,243,374
(6) State Prescribed Practices (Surplus): Goodwill, net Fixed Assets, net			
(7) State Permitted Practices (Surplus): Home Office Property			
(8) Statutory Surplus, NAIC SAP		10,684,670	10,243,374

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. Derivatives - 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 p the State of Ohio Insurance Commisssioners.

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. No OTTI recognized.

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

NOTES TO FINANCIAL STATEMENTS

MENNONITE MUTUAL INSURANCE COMPANY
Income Tax Disclosures Required under SSAP 101
December 31, 2012

Note 9 - Income Taxes

A. The components of the net deferred tax asset/(liability) at December 31 are as follows:
1.

	December 31, 2012			December 31, 2011			Change		
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
(a) Gross deferred tax assets	\$592,572	\$0	\$592,572	\$623,996	\$0	\$623,996	(\$31,424)	\$0	(\$31,424)
(b) Statutory valuation allowance adjustments	0	0	0	0	0	0	0	0	0
(c) Adjusted gross deferred tax assets (1a - 1b)	592,572	0	592,572	623,996	0	623,996	(31,424)	0	(31,424)
(d) Deferred Tax Assets Nonadmitted	0	0	0	157,677	0	157,677	(157,677)	0	(157,677)
(e) Subtotal Net Admitted Deferred Tax Asset (1c - 1d)	592,572	0	592,572	466,319	0	466,319	126,253	0	126,253
(f) Deferred Tax Liabilities	21,723	75,755	97,478	10,773	21,437	32,210	10,950	54,318	65,268
(g) Net admitted deferred tax asset/(Net Deferred Tax Liability) (1e - 1f)	\$570,849	(\$75,755)	\$495,094	\$455,546	(\$21,437)	\$434,109	\$115,303	(\$54,318)	\$60,985

2.

SSAP 101, paragraphs 11.a., 11.b., and 11.c.:	2012			2011			Change		
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
(a) Federal Income Taxes Paid in Prior Years Recoverable Through Loss Carrybacks	\$131,315	\$0	\$131,315	\$66,389	\$0	\$66,389	\$64,926	\$0	\$64,926
(b) Adjusted Gross Deferred Tax Assets Expected to be Realized (Excluding The Amount of Deferred Tax Assets From 2(a) above) After Application of the Threshold Limitation. (The Lesser of 2(b)1 and 2(b)2 Below)	436,818	0	436,818	367,720	0	367,720	69,098	0	69,098
1. Adjusted Gross Deferred Tax Assets Expected to be Realized Following the Balance Sheet Date	436,818	0	436,818	367,720	0	367,720	69,098	0	69,098
2. Adjusted Gross Deferred Tax Assets Allowed per Limitation Threshold	XXX	XXX	1,519,875	XXX	XXX	978,509	XXX	XXX	541,366
(c) Adjusted Gross Deferred Tax Assets (Excluding the Amount of Deferred Tax Assets From 2(a) and 2(b) above) Offset by Gross Deferred Tax Liabilities	24,440	0	24,440	32,210	0	32,210	(7,770)	0	(7,770)
(d) Deferred Tax Assets Admitted as the Result of Application of SSAP No. 101 Total (2(a) + 2(b) + 2(c))	592,573	0	592,573	466,319	0	466,319	126,254	0	126,254

3.

	2012	2011
	Percentage	Percentage
(a) Ratio Percentage Used to Determine Recovery Period and Threshold Limitation Amount	897%	805%
(b) Amount of Adjusted Capital and Surplus Used to Determine Recovery Period and Threshold Limitation in 2(b)2 Above	10,132,502	9,785,094

4.

Impact of Tax Planning Strategies	December 31, 2012			December 31, 2011			Change		
	Ordinary	Capital	Total %	Ordinary	Capital	Total	Ordinary	Capital	Total
(a) Adjusted Gross DTAs (% of Total Adjusted Gross DTAs)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
(b) Net Admitted Adjusted Gross DTAs (% of Total Net Admitted Adjusted Gross DTAs)	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%

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

B. Unrecognized DTLs

Not applicable

NOTES TO FINANCIAL STATEMENTS

C. Current Tax and Change in Deferred Tax

1. Current income tax:

	2012	2011	Change
(a) Federal	75,817	70,027	5,790
(b) Foreign	0	0	0
(c) Subtotal	75,817	70,027	5,790
(d) Federal income tax on net capital gains	0	0	0
(e) Utilization of capital loss carryforward	0	0	0
(f) Other	0	0	0
Federal and foreign income taxes incurred	75,817	70,027	5,790

2. Deferred tax assets:

	2012	2011	Change
(a) Ordinary:			
(1) Discounting of unpaid losses	33,748	41,805	(8,057)
(2) Unearned premium reserve	439,523	466,276	(26,753)
(3) Policyholder reserves	0	0	0
(4) Investments	0	0	0
(5) Guaranty fund accrual	0	0	0
(6) Policyholder dividends accrual	0	0	0
(7) Fixed assets	0	0	0
(8) Compensation and benefits accrual	0	0	0
(9) Pension accrual	0	0	0
(10) Receivables - nonadmitted	0	0	0
(11) Net operating loss carry-forward	0	0	0
(12) Tax credit carry-forward	0	0	0
(13) Other (including items <5% of total ordinary tax assets)	41,392	51,447	(10,055)
(14) Other assets – nonadmitted	77,910	64,469	13,441
(99) Subtotal	592,573	623,997	(31,424)
(b) Statutory valuation allowance adjustment	0	0	0
(c) Nonadmitted	0	157,677	(157,677)
(d) Admitted ordinary deferred tax assets (2a99-2b-2c)	592,573	466,320	126,253
(e) Capital			
(1) Investments	0	0	0
(2) Net capital loss carry-forward	0	0	0
(3) Real estate	0	0	0
(4) Other (including items <5% of total capital tax assets)	0	0	0
(99) Subtotal	0	0	0
(f) Statutory valuation allowance adjustment	0	0	0
(g) Nonadmitted	0	0	0
(h) Admitted capital deferred tax assets (2e99-2f-2g)	0	0	0
(i) Admitted deferred tax assets (2d+2h)	592,573	466,320	126,253

NOTES TO FINANCIAL STATEMENTS

3. Deferred tax liabilities:

	2012	2011	Change
(a) Ordinary:			
(1) Investments	2,755	2,554	201
(2) Fixed assets	18,968	8,218	10,750
(3) Deferred and uncollected premiums	0	0	0
(4) Policyholder reserves	0	0	0
(5) Other (including items <5% of total ordinary tax liabilities)	0	0	0
(6) Additional acquisition costs-installment premiums	(1)	0	(1)
(7) Discount of accrued salvage and subrogation	0	0	0
(8) Guaranty funds receivable	0	0	0
(99) Subtotal	21,722	10,772	10,950
(b) Capital			
(1) Investments	75,755	21,437	54,318
(2) Real estate	0	0	0
(3) Other (including items <5% of total capital tax liabilities)	0	0	0
(99) Subtotal	75,755	21,437	54,318
(c) Deferred tax liabilities (3a99+3b99)	97,477	32,209	65,268

4. Net deferred tax assets/liabilities (2i-3c) 495,096 434,111 60,985

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

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

	December 31, 2012	Effective Tax Rate
Provision computed at statutory rate	\$114,206	34.0%
Change in nonadmitted assets	32,921	9.8%
Tax exempt income deduction	(57,330)	-17.1%
Dividends received deduction	(3,409)	-1.0%
Accrued dividend from 100% owned affiliate	0	0.0%
Goodwill amortization	0	0.0%
Proration of tax exempt investment income	9,111	2.7%
Other than temporary impairments	0	0.0%
Disallowed travel and entertainment	10,608	3.2%
Taxes recovered - 2009 RAR	0	0.0%
Accrual adjustment - prior year	3,221	1.0%
Alternative minimum tax	0	0.0%
Other	8,863	2.7%
Totals	\$118,191	35.3%
Federal and foreign income taxes incurred	\$75,817	22.6%
Realized capital gains (losses) tax	0	0.0%
Change in net deferred income taxes	42,374	12.6%
	\$118,191	35.2%

NOTES TO FINANCIAL STATEMENTS

E. Operating Loss and Tax Credit Carryforwards

(1) At December 31, 2012, the Company did not have any unused operating loss carryforwards available to offset against future taxable income.

(2) The following is income tax expense for 2012 and 2011 that is available for recoupment in the event of future net losses:

Year	Amount
2012	\$72,596
2011	\$70,027

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

F. Consolidated Federal Income Tax Return - N/A

G. Federal or Foreign Federal Income Tax Loss Contingencies

The Company has no tax loss contingencies for which it is reasonably possible that the total liability will significantly increase within twelve months of the reporting date.

NOTE 10 - INFORMATION CONCERNING 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:	105,441
2. nonadmitted asset values:	118,146
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.

NOTES TO FINANCIAL STATEMENTS

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 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, 2012 about the Company's financial assets measured at fair value on a recurring basis:

Fair Value Hierarchy - Note 20 A. (1)

MENNONITE MUTUAL INSURANCE COMPANY

Year to Date as of: December 31, 2012

Description for each class of Asset or Liability

	(Level 1)	(Level 2)	(Level 3)	Total
a. Assets at Fair Value				
Common Stock				
INDUSTRIAL & MISCELLANEOUS	1,422,876.78	67,593.00	0.00	1,490,469.78
PARENTS, SUBSIDIARIES AND AFFILIATES	0.00	0.00	100.00	100.00
Total Common Stock:	1,422,876.78	67,593.00	100.00	1,490,569.78
Total a. Assets at Fair Value:	1,422,876.78	67,593.00	100.00	1,490,569.78
Total MENNONITE MUTUAL INSURANCE COMPANY:	1,422,876.78	67,593.00	100.00	1,490,569.78

Level 1 Transfers - Details

MENNONITE MUTUAL INSURANCE COMPANY -

Year to Date as of: December 31, 2012

	Current Fair Value	Transfers into Level 1 from Level 2	Transfers out of Level 1 to Level 2	Comments
N/A	0.00	0.00	0.00	
Total Assets MENNONITE MUTUAL INSURANCE COMPANY:	0.00	0.00	0.00	

Fair Value Measurements - Level 3

Reconciliation

MENNONITE MUTUAL INSURANCE COMPANY

Year to Date as of: December 31, 2012

Beginning Balance at 01/01/2012	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2012

NOTES TO FINANCIAL STATEMENTS

Description

a. ASSETS

Common Stock

PARENTS, SUBSIDIARIES AND AFFILIATES	100.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	100.00
Total a. ASSETS:	100.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	100.00
Total MENNONITE MUTUAL INSURANCE COMPANY:	100.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	100.00

Aggregate Fair Value by Hierarchical Level
MENNONITE MUTUAL INSURANCE COMPANY

Year to Date as of: December 31, 2012

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Not Practicable (Carrying Value)
Bond	8,763,676.50	8,390,765.16	8,763,676.50	0.00	0.00	0.00
CMO	1,807,303.14	1,763,171.89	1,807,303.14	0.00	0.00	0.00
MBS	471,492.38	465,134.37	471,492.38	0.00	0.00	0.00
Common Stock	1,490,569.78	1,490,569.78	1,422,876.78	67,593.00	100.00	0.00
Short Term	3,177,392.47	3,177,392.47	0.00	0.00	0.00	3,177,392.47
Total Assets MENNONITE MUTUAL INSURANCE COMPANY:	15,710,434.27	15,287,033.67	12,465,348.80	67,593.00	100.00	3,177,392.47

Not Practicable to Estimate Fair Value Detail

MENNONITE MUTUAL INSURANCE COMPANY

Year to Date as of: December 31, 2012

Type or Class of Financial Instrument

Type or Class of Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date
Total Short Term:	3,177,392.47		12/30/2013
Total Assets MENNONITE MUTUAL INSURANCE COMPANY:	3,177,392.47		

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

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	\$14,269	\$5,708	\$139,420	\$41,826	\$125,151	36,118
3. Total						
4. Direct Unearned Premium reserve	\$ 6,349,912					

D. Uncollectible Reinsurance - N/A

E. Commutation of Ceded Reinsurance - NA

NOTES TO FINANCIAL STATEMENTS

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 384,601 during 2012. 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.

	2012 Calendar Year Losses & LAE Incurred	2011 Loss Year Losses & LAE Incurred Sch. P – Part 1	Total Shortage (Redundancy)	Loss & DCC Shortage (Redundancy) Sch. P – Part 2	Impact of AO on Total Shortage (Redundancy)
Net Losses Incurred Page 4, Col. 1, Line 2	5,293,213				
Net LAE Incurred Page 4, Col. 1, Line 3	1,183,186				
Sch. P Part 1 Summary Col 28, Line 11	6,476,399	6,861,000	(384,601)	(375,000)	(9,601)
ROLLFORWARD					
Unpaid losses & LAE At Beginning of Year	1,754,126				
Losses & LAE incurred in current year:					
For current year losses And LAE (Sch. P Part 1)	6,861,000				
For prior year losses & defence Cost containment expenses (Sch. P Part 2)	(375,000)				
For prior year adjusting & Other expenses	(9,601)				
Income Statement Col 1, Lines 2 and 3	6,476,399				

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 12/31/12	884,827	3,139,060	1,570,499	309,807	320,568	6,224,761
Anticipated loss and adjusting (5 year average)	-450,104	-2,176,504	-877,135	-80,662	-131,607	-3,716,012
Acquisition costs (at renewal)	0	0	0	0	0	0
Policy maintenance cost (10.0% estimate)	-88,483	-313,906	-157,050	-30,981	-32,057	-622,477
If negative - deficiency	346,240	648,650	536,314	198,164	156,904	1,886,272
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	
Net earned premium 2012	1,417	5,499	2,028	500	578	
	7,018	29,706	7,905	2,472	2,599	
Net incurred loss & lae 2007	557	3,529	415	81	156	
Net incurred loss & lae 2008	875	3,561	681	45	143	
Net incurred loss & lae 2009	726	4,426	923	31	197	

NOTES TO FINANCIAL STATEMENTS

Net incurred loss & lae 2010	639	4,933	1,186	75	256
Net incurred loss & lae 2011	773	4,148	1,120	415	315
	<u>3,570</u>	<u>20,597</u>	<u>4,415</u>	<u>647</u>	<u>1,067</u>

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)

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 [X] No []
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [X] No [] 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 [X]
- 2.2 If yes, date of change:
- 3.1 State as of what date the latest financial examination of the reporting entity was made or is being made.12/31/2007
- 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).06/01/2012
- 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 [X] No [] NA []
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] 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 [X]
- 4.12 renewals? Yes [] No [X]
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
- 4.21 sales of new business? Yes [] No [X]
- 4.22 renewals? Yes [] No [X]
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 5.2 If yes, provide 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.

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 [X]
- 6.2 If yes, give full information
- 7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]
- 7.2 If yes,
- 7.21 State the percentage of foreign control
- 7.22 State the nationality(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).

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

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 Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

- 9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
Buffamente, Whipple, Buttafaro, P.C., 201 West Third Street Suite # 300, Jamestown, NY 14701.....
- 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 [X]
- 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 []
 - a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
 - b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
 - c. Compliance with applicable governmental laws, rules and regulations;
 - d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
 - e. Accountability for adherence to the code.
- 14.11 If the response to 14.1 is no, please explain:
.....
- 14.2 Has the code of ethics for senior managers been amended?..... Yes [] No [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).
.....

GENERAL INTERROGATORIES

- 15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [] No [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

BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a 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 the 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

- 24.01 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 24.03) Yes [] No [X]
- 24.02 If no, give full and complete information, relating thereto
.....
- 24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)
.....
- 24.04 Does the company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? Yes [] No [] NA [X]
- 24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs. \$
- 24.06 If answer to 24.04 is no, report amount of collateral for other programs. \$
- 24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] NA [X]
- 24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] NA [X]
- 24.09 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? Yes [] No [] NA [X]
- 24.10 For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:
- 24.101 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$
 - 24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$
 - 24.103 Total payable for securities lending reported on the liability page \$

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 24.03). Yes [] No []
- 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 []
- 26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] NA []
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 []
- 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 [] 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.....

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 []
- 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

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.....	13,796,464	14,219,865	423,401
30.2 Preferred Stocks.....	0		0
30.3 Totals	13,796,464	14,219,865	423,401

- 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:
-

GENERAL INTERROGATORIES

OTHER

33.1 Amount of payments to Trade associations, service organizations and statistical or rating bureaus, if any?.....\$32,747

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.....	32,747

34.1 Amount of payments for legal expenses, if any?.....\$177,896

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
Reminger Co., LPA.....	53,847

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

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
.....
.....

GENERAL INTERROGATORIES
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes [] No [X]
 1.2 If yes, indicate premium earned on U.S. business only. \$0
 1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? \$

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. \$
 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

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

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

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

2. Health Test:

		1		2
		Current Year		Prior Year
2.1	Premium Numerator	\$0	\$	.....0
2.2	Premium Denominator	\$10,021,753	\$	.....10,738,253
2.3	Premium Ratio (2.1/2.2)	.....0.000		.....0.000
2.4	Reserve Numerator	\$0	\$	.....0
2.5	Reserve Denominator	\$7,544,490	\$	.....8,353,749
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:.....
 N/A.....
- 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:.....
 AIR Classic/2 Version 14.0.....
- 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?.....
 Purchases Cat Reinsurance to the 500 year event.....
- 6.4 Does the reporting entity carry catastrophe reinsurance protection for at least one reinstatement, in an amount sufficient to cover its estimated probable maximum loss attributable to a single loss event or occurrence?..... Yes No
- 6.5 If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to uninsured catastrophic loss.

- 7.1 Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?..... Yes No
- 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)?..... Yes No
- 8.1 Has this reporting entity reinsured any risk with any other entity and agreed to release such entity from liability, in whole or in part, from any loss that may occur on this risk, or portion thereof, reinsured?..... Yes No
- 8.2 If yes, give full information

- 9.1 Has the reporting entity ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates) for which during the period covered by the statement: (i) it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; (ii) it accounted for that contract as reinsurance and not as a deposit; and (iii) the contract(s) contain one or more of the following features or other features that would have similar results:
 (a) A contract term longer than two years and the contract is noncancellable by the reporting entity during the contract term;
 (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer;
 (c) Aggregate stop loss reinsurance coverage;
 (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party;
 (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or
 (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity..... Yes No
- 9.2 Has the reporting entity during the period covered by the statement ceded any risk under any reinsurance contract (or under multiple contracts with the same reinsurer or its affiliates), for which, during the period covered by the statement, it recorded a positive or negative underwriting result greater than 5% of prior year-end surplus as regards policyholders or it reported calendar year written premium ceded or year-end loss and loss expense reserves ceded greater than 5% of prior year-end surplus as regards policyholders; excluding cessions to approved pooling arrangements or to captive insurance companies that are directly or indirectly controlling, controlled by, or under common control with (i) one or more unaffiliated policyholders of the reporting entity, or (ii) an association of which one or more unaffiliated policyholders of the reporting entity is a member, where:
 (a) The written premium ceded to the reinsurer by the reporting entity or its affiliates represents fifty percent (50%) or more of the entire direct and assumed premium written by the reinsurer based on its most recently available financial statement; or
 (b) Twenty-five percent (25%) or more of the written premium ceded to the reinsurer has been retroceded back to the reporting entity or its affiliates in a separate reinsurance contract..... Yes No
- 9.3 If yes to 9.1 or 9.2, please provide the following information in the Reinsurance Summary Supplemental Filing for General Interrogatory 9:
 (a) The aggregate financial statement impact gross of all such ceded reinsurance contracts on the balance sheet and statement of income;
 (b) A summary of the reinsurance contract terms and indicate whether it applies to the contracts meeting the criteria in 9.1 or 9.2; and
 (c) A brief discussion of management's principle objectives in entering into the reinsurance contract including the economic purpose to be achieved.
- 9.4 Except for transactions meeting the requirements of paragraph 31 of SSAP No. 62R, Property and Casualty Reinsurance, has the reporting entity ceded any risk under any reinsurance contract (or multiple contracts with the same reinsurer or its affiliates) during the period covered by the financial statement, and either:
 (a) Accounted for that contract as reinsurance (either prospective or retroactive) under statutory accounting principles ("SAP") and as a deposit under generally accepted accounting principles ("GAAP"); or
 (b) Accounted for that contract as reinsurance under GAAP and as a deposit under SAP?..... Yes No
- 9.5 If yes to 9.4, explain in the Reinsurance Summary Supplemental Filing for General Interrogatory 9 (Section D) why the contract(s) is treated differently for GAAP and SAP.
- 9.6 The reporting entity is exempt from the Reinsurance Attestation Supplement under one or more of the following criteria:
 (a) The entity does not utilize reinsurance; or, Yes No
 (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 Yes No
 (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
10. If the reporting entity has assumed risks from another entity, there should be charged on account of such reinsurances a reserve equal to that which the original entity would have been required to charge had it retained the risks. Has this been done? Yes No N/A

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 a reporting entity, or to secure any of the reporting entity's reported direct unpaid loss reserves, including unpaid losses under loss deductible features of commercial policies?..... Yes [X] No []
 12.6 If yes, state the amount thereof at December 31 of current year:
 12.61 Letters of Credit..... \$114
 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:

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 [X] No []

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 2012 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 2012	2 2011	3 2010	4 2009	5 2008
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)	1,426,063	1,354,547	1,276,693	1,256,916	1,307,997
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	1,856,100	1,863,714	1,888,014	1,788,950	1,765,617
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	9,625,333	10,167,703	9,500,947	9,006,493	8,874,472
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)	12,907,496	13,385,964	12,665,654	12,052,359	11,948,086
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)	936,126	944,156	877,740	749,482	815,163
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)	1,554,789	1,668,146	1,671,452	1,530,533	1,498,970
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	7,155,976	8,457,036	7,811,533	7,432,466	7,160,903
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)	9,646,891	11,069,338	10,360,725	9,712,481	9,475,036
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)	(135,239)	(299,019)	40,069	287,159	1,165,466
14. Net investment gain (loss) (Line 11)	399,648	430,739	475,517	235,794	405,771
15. Total other income (Line 15)	71,491	74,856	97,239	107,283	94,626
16. Dividends to policyholders (Line 17)	0	0	0	0	0
17. Federal and foreign income taxes incurred (Line 19)	75,817	69,996	205,724	211,444	504,275
18. Net income (Line 20)	260,083	136,580	407,101	418,792	1,161,588
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	19,993,131	19,984,009	19,167,533	18,187,812	17,200,574
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)	262,213	311,595	284,248	319,698	277,959
20.2 Deferred and not yet due (Line 15.2)	2,604,936	2,510,732	2,352,251	2,053,124	2,091,627
20.3 Accrued retrospective premiums (Line 15.3)	0	0	0	0	0
21. Total liabilities excluding protected cell business (Page 3, Line 26)	9,308,461	9,740,635	9,305,775	8,862,829	8,699,464
22. Losses (Page 3, Line 1)	1,168,329	1,593,926	1,506,765	1,511,092	1,263,458
23. Loss adjustment expenses (Page 3, Line 3)	151,400	160,200	153,200	181,300	172,000
24. Unearned premiums (Page 3, Line 9)	6,224,761	6,599,623	6,268,538	5,906,292	5,850,650
25. Capital paid up (Page 3, Lines 30 & 31)	0	0	0	0	0
26. Surplus as regards policyholders (Page 3, Line 37)	10,684,670	10,243,374	9,861,758	9,324,983	8,501,110
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	(279,713)	966,412	180,951	1,663,408	126,781
Risk-Based Capital Analysis					
28. Total adjusted capital	10,684,670	10,243,374	9,861,758	9,324,983	8,501,110
29. Authorized control level risk-based capital	693,342	783,684	717,783	858,469	898,803
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)	65.9	70.3	67.8	56.5	66.6
31. Stocks (Lines 2.1 & 2.2)	9.2	8.1	8.6	16.0	15.8
32. Mortgage loans on real estate (Lines 3.1 and 3.2)	0.0	0.4	0.5	0.6	0.9
33. Real estate (Lines 4.1, 4.2 & 4.3)	6.0	4.8	5.3	5.7	6.7
34. Cash, cash equivalents and short-term investments (Line 5)	18.9	16.5	17.9	21.3	10.0
35. Contract loans (Line 6)	0.0	0.0	0.0	0.0	0.0
36. Derivatives (Line 7)	0.0	0.0	0.0	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	0.0	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. Total Investment in parent included in lines 42 to 47 above					
50. Percentage of investments in parent, subsidiaries and affiliates to surplus as regards policyholders (Line 48 above divided by Page 3, Col. 1, Line 37 x 100.0)	0.0	0.0	0.0	0.0	0.0

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2012	2 2011	3 2010	4 2009	5 2008
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24)	105,441	(5,601)	89,808	380,734	(1,023,682)
52. Dividends to stockholders (Line 35)	0	0	0	0	0
53. Change in surplus as regards policyholders for the year (Line 38)	441,296	381,616	536,775	823,873	197,221
Gross Losses Paid (Page 9, Part 2, Cols. 1 & 2)					
54. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	163,474	80,848	42,519	100,249	469,866
55. Property lines (Lines 1, 2, 9, 12, 21 & 26)	1,015,615	828,473	633,994	1,264,329	494,904
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	7,610,556	5,729,088	6,151,017	4,444,792	5,173,753
57. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
58. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
59. Total (Line 35)	8,789,645	6,638,409	6,827,530	5,809,370	6,138,523
Net Losses Paid (Page 9, Part 2, Col. 4)					
60. Liability lines (Lines 11.1, 11.2, 16, 17.1, 17.2, 17.3, 18.1, 18.2, 19.1, 19.2 & 19.3, 19.4)	163,474	80,848	42,519	100,249	174,189
61. Property lines (Lines 1, 2, 9, 12, 21 & 26)	848,514	817,627	632,219	913,229	372,168
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	4,706,822	4,851,193	4,617,723	3,512,981	3,015,118
63. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
64. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
65. Total (Line 35)	5,718,810	5,749,668	5,292,461	4,526,459	3,561,475
Operating Percentages (Page 4) (Item divided by Page 4, Line 1) x 100.0					
66. Premiums earned (Line 1)	100.0	100.0	100.0	100.0	100.0
67. Losses incurred (Line 2)	52.8	54.4	52.9	49.4	36.5
68. Loss expenses incurred (Line 3)	11.8	10.3	9.6	9.0	8.8
69. Other underwriting expenses incurred (Line 4)	36.7	38.1	37.1	38.6	42.2
70. Net underwriting gain (loss) (Line 8)	(1.3)	(2.8)	0.4	3.0	12.5
Other Percentages					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0)	37.4	36.3	34.9	37.3	40.4
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	64.6	64.7	62.5	58.4	45.3
73. Net premiums written to policyholders' surplus (Page 8, Part 1B, Col. 6, Line 35 divided by Page 3, Line 37, Col. 1 x 100.0)	90.3	108.1	105.1	104.2	111.5
One Year Loss Development (000 omitted)					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2 - Summary, Line 12, Col. 11)	(375)	(397)	(508)	(50)	(526)
75. Percent of development of losses and loss expenses incurred to policyholders' surplus of prior year end (Line 74 above divided by Page 4, Line 21, Col. 1 x 100.0)	(3.7)	(4.0)	(5.4)	(0.6)	(6.3)
Two Year Loss Development (000 omitted)					
76. Development in estimated losses and loss expenses incurred 2 years before the current year and prior year (Schedule P, Part 2 - Summary, Line 12, Col. 12)	(530)	(567)	(198)	(681)	(910)
77. Percent of development of losses and loss expenses incurred to reported policyholders' surplus of second prior year end (Line 76 above divided by Page 4, Line 21, Col. 2 x 100.0)	(5.4)	(6.1)	(2.3)	(8.2)	(12.3)

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:

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	4	0	4	0	0	0	2	8	XXX
2. 2003	9,605	2,524	7,081	4,207	1,040	136	0	518	0	295	3,821	XXX
3. 2004	10,481	1,901	8,580	3,651	495	132	0	478	0	118	3,766	XXX
4. 2005	10,957	2,177	8,780	4,198	580	25	0	560	0	96	4,203	XXX
5. 2006	11,569	2,427	9,142	5,978	2,139	164	0	692	0	14	4,695	XXX
6. 2007	11,601	2,203	9,398	4,991	483	155	0	684	0	31	5,347	XXX
7. 2008	11,767	2,470	9,297	6,321	2,381	59	0	739	0	54	4,738	XXX
8. 2009	11,986	2,329	9,657	5,948	1,657	111	0	866	0	86	5,268	XXX
9. 2010	12,287	2,289	9,998	7,333	1,959	38	0	851	0	136	6,263	XXX
10. 2011	13,046	2,307	10,739	6,350	291	12	0	986	0	91	7,057	XXX
11. 2012	13,276	3,254	10,022	7,186	2,390	17	0	877	0	37	5,690	XXX
12. Totals	XXX	XXX	XXX	56,167	13,415	853	0	7,251	0	960	50,856	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.	25	0	13	0	0	0	0	0	2	0	0	40	XXX
4.	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5.	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6.	0	0	0	0	0	0	0	0	0	0	0	0	XXX
7.	0	0	0	0	0	0	0	0	0	0	0	0	XXX
8.	28	0	8	0	0	0	0	0	1	0	0	37	XXX
9.	29	0	8	0	0	0	0	0	3	0	0	40	XXX
10.	12	0	17	0	0	0	0	0	3	0	0	32	XXX
11.	1,606	985	408	0	0	0	0	0	142	0	0	1,171	XXX
12. Totals	1,700	985	454	0	0	0	0	0	151	0	0	1,320	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.	4,861	1,040	3,821	50.6	41.2	54.0	0	0		0	0
3.	4,301	495	3,806	41.0	26.0	44.4	0	0		38	2
4.	4,783	580	4,203	43.7	26.6	47.9	0	0		0	0
5.	6,834	2,139	4,695	59.1	88.1	51.4	0	0		0	0
6.	5,830	483	5,347	50.3	21.9	56.9	0	0		0	0
7.	7,119	2,381	4,738	60.5	96.4	51.0	0	0		0	0
8.	6,962	1,657	5,305	58.1	71.1	54.9	0	0		36	1
9.	8,262	1,959	6,303	67.2	85.6	63.0	0	0		37	3
10.	7,380	291	7,089	56.6	12.6	66.0	0	0		29	3
11.	10,236	3,375	6,861	77.1	103.7	68.5	0	0		1,029	142
12. Totals	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	1,169	151

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 2012 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 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012	11 One Year	12 Two Year
1. Prior	833	949	806	719	670	689	669	625	596	604	8	(21)
2. 2003	3,606	3,498	3,533	3,455	3,422	3,305	3,304	3,305	3,303	3,303	0	(2)
3. 2004	XXX	3,724	3,414	3,411	3,328	3,307	3,309	3,309	3,312	3,326	14	17
4. 2005	XXX	XXX	4,167	3,884	3,679	3,644	3,655	3,633	3,644	3,643	(1)	10
5. 2006	XXX	XXX	XXX	4,365	4,102	4,019	3,979	3,978	4,034	4,003	(31)	25
6. 2007	XXX	XXX	XXX	XXX	5,029	4,780	4,681	4,679	4,681	4,663	(18)	(16)
7. 2008	XXX	XXX	XXX	XXX	XXX	3,985	4,090	4,002	4,042	3,999	(43)	(3)
8. 2009	XXX	XXX	XXX	XXX	XXX	XXX	4,901	4,501	4,409	4,438	29	(63)
9. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,926	5,540	5,449	(91)	(477)
10. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,342	6,100	(242)	XXX
11. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,842	XXX	XXX
12. Totals											(375)	(530)

SCHEDULE P - PART 3 - SUMMARY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11	12
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012	Number of Claims Closed With Loss Payment	Number of Claims Closed Without Loss Payment
1. Prior	000	447	530	587	603	591	595	596	596	604	XXX	XXX
2. 2003	2,125	2,838	3,059	3,331	3,412	3,297	3,304	3,305	3,303	3,303	XXX	XXX
3. 2004	XXX	2,357	3,063	3,207	3,237	3,259	3,272	3,272	3,274	3,288	XXX	XXX
4. 2005	XXX	XXX	3,138	3,619	3,643	3,623	3,631	3,633	3,644	3,643	XXX	XXX
5. 2006	XXX	XXX	XXX	3,348	3,801	3,889	3,914	3,965	3,969	4,003	XXX	XXX
6. 2007	XXX	XXX	XXX	XXX	4,102	4,392	4,499	4,554	4,603	4,663	XXX	XXX
7. 2008	XXX	XXX	XXX	XXX	XXX	3,374	3,825	3,960	3,977	3,999	XXX	XXX
8. 2009	XXX	XXX	XXX	XXX	XXX	XXX	3,989	4,306	4,350	4,402	XXX	XXX
9. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,860	5,469	5,412	XXX	XXX
10. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,124	6,071	XXX	XXX
11. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	4,813	XXX	XXX

SCHEDULE P - PART 4 - SUMMARY

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)									
	1 2003	2 2004	3 2005	4 2006	5 2007	6 2008	7 2009	8 2010	9 2011	10 2012
1. Prior	168	112	56	31	16	13	6	8	0	0
2. 2003	326	172	110	41	5	3	0	0	0	0
3. 2004	XXX	432	226	84	29	16	12	12	13	13
4. 2005	XXX	XXX	440	213	18	7	6	0	0	0
5. 2006	XXX	XXX	XXX	466	154	54	17	3	15	0
6. 2007	XXX	XXX	XXX	XXX	456	167	63	29	18	0
7. 2008	XXX	XXX	XXX	XXX	XXX	297	130	26	15	0
8. 2009	XXX	XXX	XXX	XXX	XXX	XXX	369	71	12	8
9. 2010	XXX	XXX	XXX	XXX	XXX	XXX	XXX	306	28	8
10. 2011	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	354	17
11. 2012	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	408

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	996,985	799,071	0	629,564	660,806	84,997	4,023
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	11,883,225	12,453,212	0	8,151,056	8,268,102	2,038,957	97,044
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	CAN	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		12,880,210	13,252,283	0	8,780,620	8,928,908	2,123,954	101,067
DETAILS OF WRITE-INS									
58001.	XXX								
58002.	XXX								
58003.	XXX								
58998. Sum. of remaining write-ins for Line 58 from overflow page	XXX		0	0	0	0	0	0	0
58999. Totals (Lines 58001 through 58003 + 58998) (Line 58 above)	XXX		0	0	0	0	0	0	0

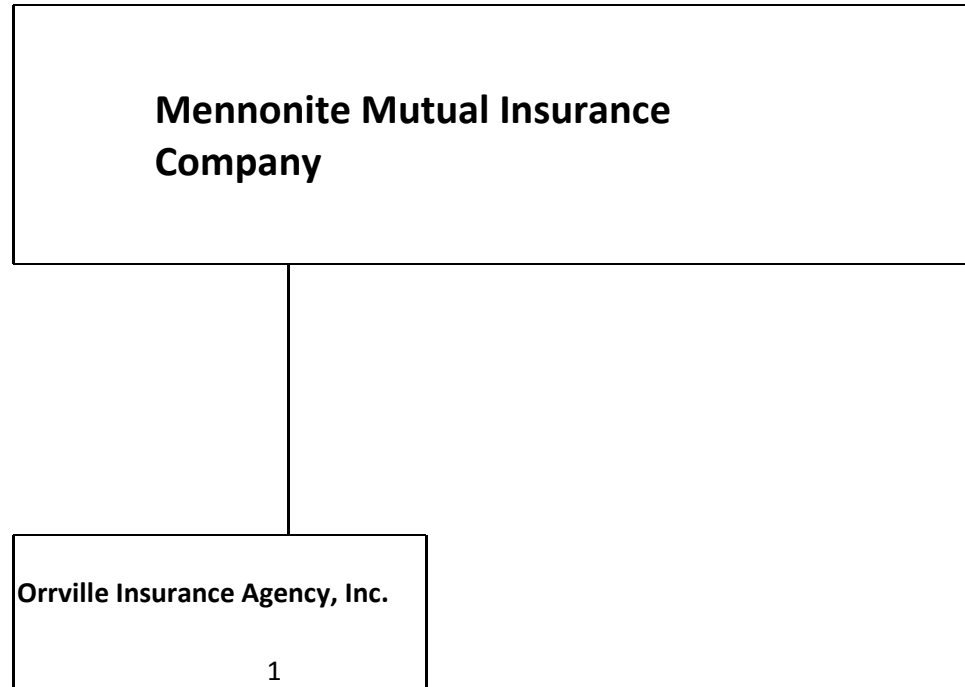
(L) Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) Registered - Non-domiciled RRGs; (Q) Qualified - Qualified or Accredited Reinsurer; (E) Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) None of the above - Not allowed to write business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

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