

ANNUAL STATEMENT

For the Year Ended

December 31, 2014

OF THE CONDITION AND AFFAIRS OF THE

Mennonite Mutual Aid Society

ORGANIZED UNDER THE LAWS OF THE STATE OF OHIO

Made to the

INSURANCE COMMISSIONER OF THE STATE OF OHIO

Pursuant to the Laws thereof

NAIC Company Code

10279

Home Office

1000 South Main Street

Orrville

44667

OH

Street and Number

City

Zip Code

Mail Address

PO Box 300

Orrville

44667

OH

Street and Number

City

Zip Code

Main Administrative Office

(330) 682-2986

Telephone Number

Organized

April 10, 1907

Commenced Business

June 5, 1905

Annual Statement Contact Person

Ric Hochstetler

Telephone Number

330-683-3730 Ext 118

Contact Person Email Address

rhochstetler@mennonitemutual.com

OFFICERS

President

David Luther Lehman

Vice President

Secretary

George Bixler, Jr

Treasurer

David Luther Lehman

DIRECTORS

(ALL DIRECTORS MUST BE SHOWN)

Robert Eugene Aschilman

George Bixler, Jr

Paul Bontrager

David Luther Lehman

Morris Stutzman

Craig Thomas Mercer

Donald Dravenstott

Tyson L Stuckey

State of Ohio

County of

Wayne

David Luther Lehman

President and

George Bixler, Jr

Secretary of the

Mennonite Mutual Aid Society

, being duly sworn each for himself/herself deposes and says, that they are the

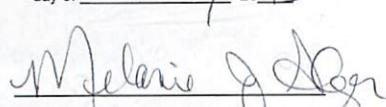
above described officers of said reporting entity, and that on the reporting period stated above all the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, with the schedules and explanations herein contained, annexed or referred to, is a full and correct statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, according to the best of their information, knowledge and belief, respectively.

RECEIVED

MAR 03 2015

OFFICE OF RISK
ASSESSMENT

Subscribed and sworn to before me, this 24
day of February 2015


Melanie J. Alger
Notary Public, State of Ohio
My Commission Expires April, 9, 2016

President

Secretary

Signature of Person Preparing Statement

Mennonite Mutual Aid Society**ASSETS**

| | | Assets Current Year | Nonadmitted Assets Current Year | Net Admitted Assets Current Year | Net Admitted Assets Prior Year |
|------|---|------------------------|---------------------------------------|--|--------------------------------------|
| 1 | Bonds (Schedule D - Part 1) | 0.00 | 0.00 | 0.00 | 0.00 |
| 2 | Preferred stocks, common stocks and mutual funds (Schedule D - Part 2) | 29,641.87 | 16,966.77 | 12,675.10 | 13,623.34 |
| 3 | Real estate (less liens, encumbrances) (Schedule A) | 204,885.94 | 154,185.55 | 50,700.39 | 54,493.37 |
| 4 | Cash (Schedule E) | 160,714.12 | 0.00 | 160,714.12 | 168,161.28 |
| 5 | Short-term investments | | 0.00 | 0.00 | 0.00 |
| 6 | Aggregate write-ins for invested assets | | 0.00 | 0.00 | |
| 7 | Subtotals, cash and invested assets | 395,241.93 | 171,152.32 | 224,089.61 | 236,277.99 |
| 8 | Investment income due and accrued | | 0.00 | 0.00 | 0.00 |
| 9.1 | Assessments or premiums in the course of collection (including agents balances) | 11,487.00 | 0.00 | 11,487.00 | 17,853.00 |
| 9.2 | Deferred premiums, agents' balances and installments booked but deferred and not yet due | | 0.00 | 0.00 | 0.00 |
| 9.3 | Earned but unbilled premiums (post assessment) | | 0.00 | 0.00 | 0.00 |
| 10.1 | Amounts recoverable from reinsurers | | 0.00 | 0.00 | 0.00 |
| 10.2 | Funds held by or deposited with reinsured companies | | 0.00 | 0.00 | 0.00 |
| 11.1 | Current federal income tax recoverable and interest thereon | | 0.00 | 0.00 | 0.00 |
| 11.2 | Net deferred tax asset | | 0.00 | 0.00 | 0.00 |
| 12 | Electronic data processing equipment and software | | 0.00 | 0.00 | 0.00 |
| 13 | Furniture and equipment | | 0.00 | 0.00 | 0.00 |
| 14 | Receivables from parent, subsidiaries and affiliates | 100,274.98 | 0.00 | 100,274.98 | 116,777.62 |
| 15 | Aggregate write-ins for other than invested assets | 0.00 | 0.00 | 0.00 | 0.00 |
| 16 | Total Assets | 507,003.91 | 171,152.32 | 335,851.59 | 370,908.61 |
| | Details of Write-Ins for Assets: | | | | |
| 1501 | | | | 0.00 | |
| 1502 | | | | 0.00 | |
| 1503 | | | | 0.00 | |
| 1598 | Summary or remaining write-ins from overflow page | 0.00 | 0.00 | 0.00 | 0.00 |
| 1599 | Total aggregate write-ins | 0.00 | 0.00 | 0.00 | 0.00 |

ANNUAL STATEMENT FOR THE YEAR

2014

Mennonite Mutual Aid Society

LIABILITIES, SURPLUS AND OTHER FUNDS

| | | Current Year | Prior Year |
|------|---|--------------|------------|
| 1 | Unpaid Losses (Underwriting Exhibit - Part 2A) | 0.00 | 0.00 |
| 2 | Unpaid loss adjustment expenses (Underwriting Exhibit - Part 2A) | 0.00 | 0.00 |
| 3 | Commissions due and payable to agents | | |
| 4 | Other expenses (excluding taxes, licenses and fees) | 3,369.00 | 5,757.96 |
| 5 | Taxes, licenses and fees (excluding federal income taxes) | | |
| 6 | Current federal income taxes (including \$0 on realized capital gains (losses)) | | |
| 7 | Net deferred tax liability | | |
| 8 | Borrowed money and interest thereon | | |
| 9 | Unearned assessment/premium reserve | 34,384.00 | |
| 10 | Advance premium | | |
| 11 | Ceded reinsurance premiums payable | 36,842.46 | |
| 12 | Funds held by company under reinsurance treaties | | |
| 13 | Amounts withheld or retained by company for account of others | 1,526.10 | 2,161.01 |
| 14 | Provision for unauthorized reinsurance | | |
| 15 | Payable to parent, subsidiaries and affiliates | | 126,081.86 |
| 16 | Aggregate write-ins for liabilities | 0.00 | 0.00 |
| 17 | Total liabilities | 76,121.56 | 134,000.83 |
| 18 | Surplus as regards policyholders | 259,730.03 | 236,907.78 |
| 19 | Total liabilities and surplus | 335,851.59 | 370,908.61 |
| | Details of Write-Ins for Liabilities: | | |
| 1601 | | | |
| 1602 | | | |
| 1603 | | | |
| 1698 | Summary or remaining write-ins from overflow page | 0.00 | 0.00 |
| 1699 | Total aggregate write-ins | 0.00 | 0.00 |

ANNUAL STATEMENT FOR THE YEAR

2014

Mennonite Mutual Aid Society

STATEMENT OF INCOME

| | | Current Year | Prior Year |
|-----------------------------|---|--------------|-------------|
| UNDERWRITING INCOME | | | |
| 1.1 | Gross Assessments/Premiums earned | 371,447.00 | 501,333.05 |
| 1.2 | Less: Return Assessments/Premiums earned | | 2,089.06 |
| 1.3 | Direct Assessments/Premiums earned | 371,447.00 | 499,243.99 |
| 1.4 | Deduct premiums for reinsurance ceded (Reinsurance Schedule) | 337,407.00 | 501,333.05 |
| 1.5 | Add premiums received for reinsurance assumed (Reinsurance Schedule) | 0.00 | 0.00 |
| 1.6 | Net Assessments/Premiums earned | 34,040.00 | -2,089.06 |
| DEDUCTIONS | | | |
| 2 | Losses incurred (Underwriting Exhibit - Part 2) | 1,226.37 | 116,700.92 |
| 3 | Loss expenses incurred (Expense Exhibit) | 0.00 | 0.00 |
| 4 | Other underwriting expenses incurred (Expense Exhibit) | 30,036.49 | 130,324.00 |
| 5 | Aggregate write-ins for underwriting deductions | 0.00 | 0.00 |
| 6 | Total underwriting deductions | 31,262.86 | 247,024.92 |
| 7 | Net underwriting gain (loss) | 2,777.14 | -249,113.98 |
| INVESTMENT INCOME | | | |
| 8 | Net investment income earned | 5.36 | 64.25 |
| 9 | Net realized capital gains (losses) less capital gains tax | | |
| 10 | Net investment gain (loss) | 5.36 | 64.25 |
| OTHER INCOME | | | |
| 11 | Net gain (loss) from agents' or premium balances charged off | | |
| 12 | Finance and service charges not included in premiums | | |
| 13 | Aggregate write-ins for miscellaneous income | 17,166.89 | 44,570.23 |
| 14 | Total other income | 17,166.89 | 44,570.23 |
| 15 | Net income, after capital gains tax and before federal income taxes | 19,949.39 | -204,479.50 |
| 16 | Federal income taxes incurred | | |
| 17 | Net income | 19,949.39 | -204,479.50 |
| SURPLUS ACCOUNT | | | |
| 18 | Surplus as regards policyholders, December 31 prior year | 236,907.78 | 450,489.44 |
| 19 | Net income | 19,949.39 | -204,479.50 |
| 20 | Change in net unrealized capital gains or (losses) less capital gains tax | | |
| 21 | Change in net deferred income tax | | |
| 22 | Change in nonadmitted assets (Exhibit of Nonadmitted Assets) | 2,872.86 | -9,102.16 |
| 23 | Change in provision for reinsurance | | |
| 24 | Aggregate write-ins for gains and losses in surplus | 0.00 | 0.00 |
| 25 | Change in surplus as regards policyholders for the year | 22,822.25 | -213,581.66 |
| 26 | Surplus as regards policyholders, December 31 current year | 259,730.03 | 236,907.78 |
| DETAILS OF WRITE-INS | | | |
| 0501 | | | |
| 0502 | | | |
| 0503 | | | |
| 0599 | Total Aggregate write-ins for underwriting deductions | 0.00 | 0.00 |
| 1301 | Management Fees | 14,666.89 | 40,021.59 |
| 1302 | Miscellaneous Income | 2,500.00 | 4,548.64 |
| 1303 | | | |
| 1304 | | | |
| 1399 | Total Aggregate write-ins for miscellaneous income | 17,166.89 | 44,570.23 |
| 2401 | | | |
| 2402 | | | |
| 2499 | Total Aggregate write-ins for gains and losses in surplus | 0.00 | 0.00 |

ANNUAL STATEMENT FOR THE YEAR

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Mennonite Mutual Aid Society

CASH FLOW STATEMENT

| | | Current Year | Prior Year |
|---|--|--------------|------------|
| Cash from Operations | | | |
| 1 | Premiums/Assessments collected net of reinsurance | 62,048.00 | 287,492.05 |
| 2 | Net investment income | 5.36 | 64.25 |
| 3 | Miscellaneous income | | 2,667.00 |
| 4 | Total | 62,053.36 | 290,223.30 |
| 5 | Benefit and loss related payments | 1,228.64 | 120,556.19 |
| 6 | Commissions, expenses paid and aggregate write-ins for deductions | 29,974.00 | 126,468.73 |
| 7 | Federal and foreign income taxes paid (recovered) | | |
| 8 | Total | 31,202.64 | 247,024.92 |
| 9 | Net cash from operations | 30,850.72 | 43,198.38 |
| Cash from Investments | | | |
| 10 | Proceeds from investments sold, matured or repaid: | | |
| 10.1 | Bonds | | |
| 10.2 | Stocks | | |
| 10.3 | Real estate | | |
| 10.4 | Net gains (losses) on cash, cash equivalents and short- term investments | | |
| 10.5 | Miscellaneous proceeds | | 69,531.73 |
| 10.6 | Total investment proceeds | 0.00 | 69,531.73 |
| 11 | Cost of investments acquired (long-term only): | | |
| 11.1 | Bonds | | |
| 11.2 | Stocks | | |
| 11.3 | Real estate | | |
| 11.4 | Miscellaneous applications | 38,297.88 | |
| 11.5 | Total investments acquired | 38,297.88 | 0.00 |
| 11.6 | Net cash from investments | -38,297.88 | 69,531.73 |
| Cash from Financing and Miscellaneous Sources | | | |
| 12.1 | Borrowed funds (cash provided/applied) | | |
| 12.2 | Other cash provided (applied) | | |
| 13 | Net cash from financing and miscellaneous sources | 0.00 | 0.00 |
| RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT- TERM INVESTMENTS | | | |
| 14 | Net change in cash, cash equivalents and short-term investments | -7,447.16 | 112,730.11 |
| 15.1 | Beginning of year (cash, cash equivalents and short-term investments) | 168,161.28 | 55,431.17 |
| 15.2 | End of year (cash, cash equivalents and short-term investments) | 160,714.12 | 168,161.28 |

ANNUAL STATEMENT FOR THE YEAR
Mennonite Mutual Aid Society

2014

EXPENSE EXHIBIT

| | | Current Year |
|------|---|--------------|
| 1.1 | Claim Adjusting: Direct | 311.31 |
| 1.2 | Reinsurance assumed | |
| 1.3 | Reinsurance ceded excluding contingent (commission and brokerage) | 249.04 |
| 1.4 | Net claim adjusting | 62.27 |
| 2.1 | Commission and Brokerage: Direct commission and brokerage | 44,029.08 |
| 2.2 | Reinsurance assumed excluding contingent | |
| 2.3 | Reinsurance ceded excluding contingent (commission and brokerage) | |
| 2.4 | Contingent - direct (commission and brokerage) | |
| 2.5 | Contingent - reinsurance assumed (commission and brokerage) | |
| 2.6 | Contingent - reinsurance ceded (commission and brokerage) | 82,109.00 |
| 2.7 | Policy and membership fees (commission and brokerage) | |
| 2.8 | Net commission and brokerage | (38,079.92) |
| 3 | Allowances to managers and agents | 0.00 |
| 4 | Advertising | 479.92 |
| 5 | Boards, bureaus and associations | 2,110.00 |
| 6 | Surveys and underwriting reports | |
| 7 | Audit of assureds' records | |
| 8.1 | Salary and related items: Salaries | 30,782.27 |
| 8.2 | Payroll taxes | 452.88 |
| 9 | Employee relations and welfare | |
| 10 | Insurance | 1,130.00 |
| 11 | Directors' fees | 19,000.00 |
| 12 | Travel and travel items | |
| 13 | Rent and rent items | |
| 14 | Equipment | 0.00 |
| 15 | Cost or depreciation of EDP equipment and software | 7,614.08 |
| 16 | Printing and stationery | |
| 17 | Postage, telephone, exchange and express | 210.00 |
| 18 | Legal and auditing | 800.00 |
| 19 | Loss adjustment expenses | |
| 18 | Investment expenses | |
| 19 | Totals | 62,579.15 |
| 20.1 | Taxes, licenses and fees: State and local insurance taxes | 250.00 |
| 20.2 | Insurance department licenses and fees | 880.00 |
| 20.3 | All other (excluding federal income and real estate) | 317.40 |
| 20.4 | Total taxes, licenses and fees | 1,447.40 |
| 21 | Real estate expenses | 2,996.09 |
| 22 | Real estate taxes | 1,031.50 |
| 23 | Aggregate write-ins for miscellaneous expenses | 0.00 |
| 24 | Total expenses incurred (a) | 30,036.49 |
| 25 | Less unpaid expenses - current year | |
| 26 | Add unpaid expenses - prior year | |
| 27 | Total expenses paid | 30,036.49 |
| | Details of Write-Ins: | |
| 2301 | | |
| 2302 | | |
| 2303 | | |
| 2304 | | |
| 2305 | | |
| 2399 | Total Write-ins | 0.00 |

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

ANNUAL STATEMENT FOR THE YEAR**2014****Mennonite Mutual Aid Society****INSURANCE IN FORCE**

| | Amount (dollars) | Number |
|---|---|---------------|
| 1 | In force December 31 of previous year (to equal prior year's statement) | 119,337,506 |
| 2 | Written during the year | 0 |
| 3 | Total | 119,337,506 |
| 4 | Deduct those expired and cancelled | 33,550,549 |
| 5 | In force December 31 of current year | 85,786,957 |
| 6 | Deduct amount reinsured | 68,629,566 |
| 7 | Net amount in force | 17,157,391 |

**ANNUAL STATEMENT FOR THE YEAR
Mennonite Mutual Aid Society**

2014

**UNDERWRITING EXHIBIT - PART 2
LOSSES INCURRED**

| 1 Lines of Business | 2 Direct Losses Incurred | 3 Losses Incurred on Reinsurance Assumed | 4 Deduct: Reinsurance Recovered on Incurred Losses | 5 Deduct: Salvage and Subrogation Converted To Cash | 6 * Net Losses Incurred Columns 2 and 3 minus Columns 4 and 5 |
|------------------------|-----------------------------------|---|--|--|--|
| Fire | 6,132.38 | | 4,906.01 | | 1,226.37 |
| | | | | | - |
| | | | | | - |
| | | | | | - |
| | | | | | - |
| OVERFLOW AMOUNTS | | | | | - |
| Totals | \$ 6,132.38 | \$ - | \$ 4,906.01 | \$ - | \$ 1,226.37 |

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

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

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

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

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

Mennonite Mutual Aid Society

EXHIBIT OF NONADMITTED ASSETS

| | | Current Year Total Nonadmitted Assets | Prior Year Total Nonadmitted Assets | Change in Total Nonadmitted Assets |
|------|--|--|--|---|
| 1 | Bonds | | | 0.00 |
| 2 | Preferred and common stocks and mutual funds | 16,966.77 | 16,018.53 | -948.24 |
| 3 | Real estate (less liens, encumbrances) | 154,185.55 | 158,006.65 | 3,821.10 |
| 4 | Cash | | | 0.00 |
| 5 | Short-term investments | | | 0.00 |
| 6 | Aggregate write-ins for invested assets | | | 0.00 |
| 7 | Subtotals, cash and invested assets | 171,152.32 | 174,025.18 | 2,872.86 |
| 8 | Investment income due and accrued | | | 0.00 |
| 9.1 | Assessments or premiums in the course of collection (including agents balances) | | | 0.00 |
| 9.2 | Premium receivable for advance pay | | | 0.00 |
| 9.3 | Earned but unbilled premiums (post assessment) | | | 0.00 |
| 10.1 | Amounts recoverable from reinsurers | | | 0.00 |
| 10.2 | Funds held by or deposited with reinsured companies | | | 0.00 |
| 11.1 | Current federal income tax recoverable and interest thereon | | | 0.00 |
| 11.2 | Net deferred tax asset | | | 0.00 |
| 12 | Electronic data processing equipment and software | | | 0.00 |
| 13 | Furniture and equipment | | | 0.00 |
| 14 | Receivables from parent, subsidiaries and affiliates | | | 0.00 |
| 15 | Aggregate write-ins for other than invested assets | 0.00 | 0.00 | 0.00 |
| 16 | Total Assets | 171,152.32 | 174,025.18 | 2,872.86 |
| | Details of Write-Ins for Assets: | | | |
| 1501 | | | | 0.00 |
| 1502 | | | | 0.00 |
| 1503 | | | | 0.00 |
| 1598 | Summary or remaining write-ins from overflow page | 0.00 | 0.00 | 0.00 |
| 1599 | Total aggregate write-ins | 0.00 | 0.00 | 0.00 |

SCHEDULE A

Showing All Real Estate OWNED December 31 of Current Year

| 1 | 2 | 3 | 4 | 5 Current Year Acquisitions or Permanent Improvements | 6 | 7 | 8 Book Value End of Current Year (Col. 4+5-6-7) * | 9 Gross Income Current Year (Real Estate) | 10 Gross Expenses Current Year (Real Estate) |
|-------------------------------|------------------|---|---------------|--|-----------------------------|------------------------------|--|---|--|
| Description of Property | Date Acquired | Name of Vendor | Actual Cost | | Accumulated Depreciation | Amount of Encumbrances | | | |
| 208 S Main St, Bluffton, Ohio | 10/01/2005 | Paul M King & Lois I King Charitable Trust | 271,194.09 | | 66,308.15 | | 204,885.94 | | |
| | | | | | | | - | | |
| | | | | | | | - | | |
| | | | | | | | - | | |
| | | | | | | | - | | |
| OVERFLOW AMOUNTS | | | | | | | - | | |
| Totals | XXX | XXX | \$ 271,194.09 | \$ - | \$ 66,308.15 | \$ - | \$ 204,885.94 | \$ - | \$ - |

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

FURNITURE, FIXTURES and AUTOMOBILES

Showing All Furniture, Fixtures and Automobiles **OWNED** December 31 of Current Year

SCHEDULE D - PART 1

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

* Annual Statement Value

SCHEDULE D - PART 2

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

SCHEDULE D - PART 3

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

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

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

SCHEDULE D - PART 4
Showing all Bonds and Preferred & Common Stocks SOLD, REDEEMED OR OTHERWISE DISPOSED OF During the Current Year

SCHEDULE D - PART 4

Showing all Bonds and

REINSURANCE SCHEDULE

Reinsurance Ceded and Reinsurance Assumed

| 1 Reinsurer or Reinsured | 2 Ceded or Assumed | 3 Location of Company | 4 Total Amount Reinsured | 5 Total Premiums Ceded * | 6 Total Premiums Assumed ** | 7 Largest Risk Ceded or Assumed | 8 Remarks |
|-----------------------------|-----------------------|--------------------------|-----------------------------|-----------------------------|--------------------------------|------------------------------------|--------------|
| Mennonite Mutual Insurance | Ceded | Orville, Oh | | 337,407.00 | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| OVERFLOW AMOUNTS | | | | | | | |
| Totals | XXX | XXX | \$ - | \$ 337,407.00 | \$ - | XXX | XXX |

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

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

COMPENSATION SCHEDULE

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

| 1 Name of Payee | 2 Title | 3 Salaries | 4 Commissions | 5 Claim Adjustment Expenses | 6 Directors Fees & Expenses | 7 Travel & Travel Items | 8 All Other | 9 Total |
|---------------------|------------------------|---------------|------------------|--------------------------------|--------------------------------|----------------------------|----------------|--------------|
| Officers/Employees: | | | | | | | | |
| David L Lehman | President/Treasurer | | | 2,600.00 | | | | \$ 2,600.00 |
| George Bixler, JR | Secretary | | | 2,600.00 | | | | \$ 2,600.00 |
| | | | | | | | | \$ - |
| | | | | | | | | \$ - |
| | | | | | | | | \$ - |
| | | | | | | | | \$ - |
| Directors: | | | | | | | | |
| Robert E Aschliman | Director | | | 2,000.00 | | | | \$ 2,000.00 |
| Paul Bontrager | Vice-Chairman of Board | | | 2,600.00 | | | | \$ 2,600.00 |
| Morris Stutzman | Chairman of Board | | | 3,200.00 | | | | \$ 3,200.00 |
| Craig Mercer | Director | | | 2,000.00 | | | | \$ 2,000.00 |
| Donald Dravenstott | Director | | | 2,000.00 | | | | \$ 2,000.00 |
| Tyson Stuckey | | | | 2,000.00 | | | | \$ 2,000.00 |
| | | | | | | | | \$ - |
| | | | | | | | | \$ - |
| | | | | | | | | \$ - |
| | | | | | | | | \$ - |
| | | | | | | | | \$ - |
| Totals | XXXX | \$ - | \$ - | \$ - | \$ 19,000.00 | \$ - | \$ - | \$ 19,000.00 |

GENERAL INTERROGATORIES

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

1. Company's retention: Fire \$0 Wind \$0 Other \$0

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

2. What is the largest risk assumed and retained:

3. What kind of perils are being covered? Wind, Fire, Lightning, Extended Coverages

4. Have the by-laws been amended during the current year? Yes If so, were such amendments filed with the Ohio Department of Insurance? Yes

5. In what counties does the Company operate: Allen, Hancock, Hardin, Putnam

6. Name of Principal Officer and amount of bond. David L Lehman 100,000

7. Are all of the persons who handle funds of the Company bonded? Yes X No Bethany Theis 100,000
State the name and amount of each bond on each, except person named in Item 6 above.
Melanie Alger 100,000

8. Does the Company have an annual audit conducted by an independent CPA? Yes

9. State the number of members holding policies in the Company. 418

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

11. State as of what date the latest examination of the Company was made by the Ohio Department of Insurance. 31-Dec

12. How many assessments were made during the year? 2 Date of last assessment 09/01/2013

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

14. Rate of policy fee Various

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

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

**ANNUAL STATEMENT FOR THE YEAR
Mennonite Mutual Aid Society**

2014

SCHEDULE E - CASH or CASH EQUIVALENTS

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

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

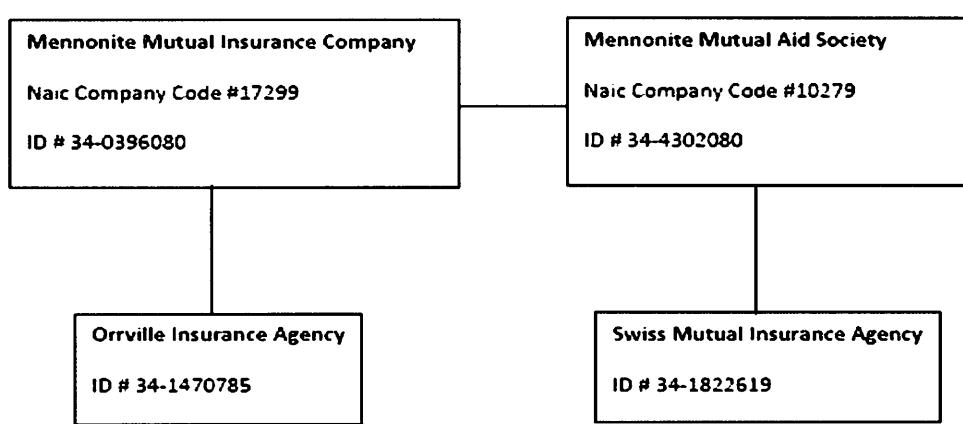
*Total to agree with Page 2, Line 4, Current Year.

**ANNUAL STATEMENT FOR THE YEAR
Mennonite Mutual Aid Society**

2014

ORGANIZATIONAL CHART

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



1 Both companies and agencies are controlled by a common board of directors and officers

**ANNUAL STATEMENT FOR THE YEAR
Mennonite Mutual Aid Society
Overflow Page for Write-ins**

2014

Additional Write-ins for Assets:

| | | Assets Current Year | Nonadmitted Assets Current Year | Net Admitted Assets Current Year | Net Admitted Assets Prior Year |
|------|---|---------------------|---------------------------------|----------------------------------|--------------------------------|
| 1504 | None | | | 0.00 | |
| 1505 | | | | 0.00 | |
| 1506 | | | | | |
| 1507 | | | | | |
| 1508 | | | | | |
| 1509 | | | | | |
| 1510 | | | | | |
| 1511 | | | | 0.00 | |
| 1597 | Summary of remaining write-ins for Line 15 page 2 | 0.00 | 0.00 | 0.00 | 0.00 |

Additional Write-ins for Liabilities:

| | | Current Year | Prior Year |
|------|---|--------------|------------|
| 1604 | | | |
| 1605 | | | |
| 1606 | | | |
| 1607 | | | |
| 1608 | | | |
| 1609 | | | |
| 1610 | | | |
| 1606 | | | |
| 1697 | Summary of remaining write-ins for Line 16 page 3 | 0.00 | 0.00 |

Additional Write-ins for Statement of Income:

Additional Write-ins for Nonadmitted Assets:

| | | Current Year Total Nonadmitted Assets | Prior Year Total Nonadmitted Assets | Change in Total Nonadmitted Assets |
|------|---|--|--|---|
| 1504 | | | | 0.00 |
| 1505 | | | | 0.00 |
| 1506 | | | | |
| 1507 | | | | |
| 1508 | | | | |
| 1509 | | | | |
| 1510 | | | | |
| 1511 | | | | 0.00 |
| 1597 | Summary of remaining write-ins for Line 15 page 9 | 0.00 | 0.00 | 0.00 |

Overflow Page for Investments Owned

SCHEDULE D - PART 1

Showing all BONDS Owned on December 31 of Current Year

| 1 Cusip # | 2 Description Give complete and accurate description of all bonds owned. | 3 From Whom Acquired | 4 Date Acquired | 5 Par Value | 6 Actual Cost | 7 Book Value / Amortized Value* | 8 Market Value December 31 of Current Year | Interest | | | 12 Increase by Adjustment, in Book Value During Year | 13 Decrease by Adjustment, in Book Value During Year | 14 Amount of Interest due and accrued Dec. 31. Current year, on bonds in default as to principal or interest | 15 Maturity Date | 16 NAIC Designation |
|--------------|--|-------------------------|--------------------|----------------|------------------|------------------------------------|---|---|---------------------------------------|----------------|---|---|---|---------------------|------------------------|
| | | | | | | | | 9 Amount Due and Accrued Dec. 31 of Current Year on bonds not in default | 10 Gross Am't Received During Year | 11 Rate (%) | | | | | |
| | None | | | | | | | | | | | | | | |
| | ** You can insert additional rows in yellow above if needed! | | | | | | | | | | | | | | |
| XXX | Totals to Page 11 | XXX | XXX | \$ - | \$ - | \$ - | \$ - | XXX | \$ - | \$ - | \$ - | \$ - | \$ - | XXX | XXX |

* Annual Statement Value

SCHEDULE D - PART 2

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

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

**ANNUAL STATEMENT FOR THE YEAR
Mennonite Mutual Aid Society
OVERFLOW PAGE FOR SCHEDULE E
SCHEDULE E - CASH or CASH EQUIVALENTS**

2014

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

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