

ANNUAL STATEMENT

For the Year Ended

December 31, 2015

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

RECEIVED
MAR 01 2016
OFFICE OF RISK
ASSESSMENT

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

330-684-4118

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

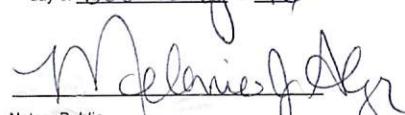
Mennonite Mutual Aid Society

, 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.

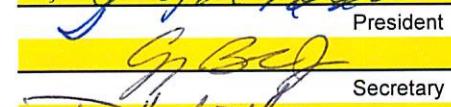
Subscribed and sworn to before me, this 23

day of February 2016


Notary Public

MELANIE J. ALGER
Notary Public, State of Ohio
My Commission Expires April, 9, 2016

Revised 2009


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	14,932.80	14,709.07	12,675.10
3	Real estate (less liens, encumbrances) (Schedule A)	198,119.48	139,283.20	58,836.28	50,700.39
4	Cash (Schedule E)	247,176.16	0.00	247,176.16	160,714.12
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	474,937.51	154,216.00	320,721.51	224,089.61
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)	37,908.00	0.00	37,908.00	11,487.00
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	75,517.26	0.00	75,517.26	100,274.98
15	Aggregate write-ins for other than invested assets	0.00	0.00	0.00	0.00
16	Total Assets	588,362.77	154,216.00	434,146.77	335,851.59
	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

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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)	10,680.87	3,369.00
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	34,122.00	34,384.00
10	Advance premium		
11	Ceded reinsurance premiums payable	44,476.37	36,842.46
12	Funds held by company under reinsurance treaties		
13	Amounts withheld or retained by company for account of others	1,620.18	1,526.10
14	Provision for unauthorized reinsurance		
15	Payable to parent, subsidiaries and affiliates		
16	Aggregate write-ins for liabilities	0.00	0.00
17	Total liabilities	90,899.42	76,121.56
18	Surplus as regards policyholders	343,247.35	259,730.03
19	Total liabilities and surplus	434,146.77	335,851.59
	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

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STATEMENT OF INCOME

		Current Year	Prior Year
UNDERWRITING INCOME			
1.1	Gross Assessments/Premiums earned	319,331.00	371,447.00
1.2	Less: Return Assessments/Premiums earned		
1.3	Direct Assessments/Premiums earned	319,331.00	371,447.00
1.4	Deduct premiums for reinsurance ceded (Reinsurance Schedule)	255,203.00	337,407.00
1.5	Add premiums received for reinsurance assumed (Reinsurance Schedule)	0.00	0.00
1.6	Net Assessments/Premiums earned	64,128.00	34,040.00
DEDUCTIONS			
2	Losses incurred (Underwriting Exhibit - Part 2)	8,766.60	1,226.37
3	Loss expenses incurred (Expense Exhibit)	0.00	0.00
4	Other underwriting expenses incurred (Expense Exhibit)	787.11	30,036.49
5	Aggregate write-ins for underwriting deductions	0.00	0.00
6	Total underwriting deductions	9,553.71	31,262.86
7	Net underwriting gain (loss)	54,574.29	2,777.14
INVESTMENT INCOME			
8	Net investment income earned	6.71	5.36
9	Net realized capital gains (losses) less capital gains tax		
10	Net investment gain (loss)	6.71	5.36
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	12,000.00	17,166.89
14	Total other income	12,000.00	17,166.89
15	Net income, after capital gains tax and before federal income taxes	66,581.00	19,949.39
16	Federal income taxes incurred		
17	Net income	66,581.00	19,949.39
SURPLUS ACCOUNT			
18	Surplus as regards policyholders, December 31 prior year	259,730.03	236,907.78
19	Net income	66,581.00	19,949.39
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)	16,936.32	2,872.86
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	83,517.32	22,822.25
26	Surplus as regards policyholders, December 31 current year	343,247.35	259,730.03
DETAILS OF WRITE-INS			
0501			
0502			
0503			
0599	Total Aggregate write-ins for underwriting deductions	0.00	0.00
1301	Management Fees	12,000.00	14,666.89
1302	Miscellaneous Income		2,500.00
1303			
1304			
1399	Total Aggregate write-ins for miscellaneous income	12,000.00	17,166.89
2401			
2402			
2499	Total Aggregate write-ins for gains and losses in surplus	0.00	0.00

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CASH FLOW STATEMENT

		Current Year	Prior Year
Cash from Operations			
1	Premiums/Assessments collected net of reinsurance	45,079.00	62,048.00
2	Net investment income	6.71	5.36
3	Miscellaneous income		
4	Total	45,085.71	62,053.36
5	Benefit and loss related payments	9,109.27	1,228.64
6	Commissions, expenses paid and aggregate write-ins for deductions	445.00	29,974.00
7	Federal and foreign income taxes paid (recovered)		
8	Total	9,554.27	31,202.64
9	Net cash from operations	35,531.44	30,850.72
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	50,930.60	
10.6	Total investment proceeds	50,930.60	0.00
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	0.00	38,297.88
11.6	Net cash from investments	50,930.60	-38,297.88
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	86,462.04	-7,447.16
15.1	Beginning of year (cash, cash equivalents and short-term investments)	160,714.12	168,161.28
15.2	End of year (cash, cash equivalents and short-term investments)	247,176.16	160,714.12

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EXPENSE EXHIBIT

		Current Year
	Claim Adjusting:	
1.1	Direct	1,713.30
1.2	Reinsurance assumed	
1.3	Reinsurance ceded excluding contingent (commission and brokerage)	1,370.63
1.4	Net claim adjusting	342.67
	Commission and Brokerage:	
2.1	Direct commission and brokerage	42,088.16
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)	76,640.00
2.7	Policy and membership fees (commission and brokerage)	
2.8	Net commission and brokerage	(34,551.84)
3	Allowances to managers and agents	0.00
4	Advertising	155.00
5	Boards, bureaus and associations	375.00
6	Surveys and underwriting reports	
7	Audit of assureds' records	
	Salary and related items:	
8.1	Salaries	
8.2	Payroll taxes	
9	Employee relations and welfare	
10	Insurance	
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	6,766.46
16	Printing and stationery	
17	Postage, telephone, exchange and express	144.00
18	Legal and auditing	2,786.09
19	Loss adjustment expenses	
18	Investment expenses	
19	Totals	29,226.55
	Taxes, licenses and fees:	
20.1	State and local insurance taxes	250.00
20.2	Insurance department licenses and fees	2,260.00
20.3	All other (excluding federal income and real estate)	199.57
20.4	Total taxes, licenses and fees	2,709.57
21	Real estate expenses	2,098.36
22	Real estate taxes	961.80
23	Aggregate write-ins for miscellaneous expenses	0.00
24	Total expenses incurred (a)	787.11
25	Less unpaid expenses - current year	
26	Add unpaid expenses - prior year	
27	Total expenses paid	787.11
	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

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INSURANCE IN FORCE

		Amount (dollars)	Number
1	In force December 31 of previous year (to equal prior year's statement)	85,786,957	316
2	Written during the year	18,789,874	88
3	Total	104,576,831	404
4	Deduct those expired and cancelled	27,820,759	92
5	In force December 31 of current year	76,756,072	312
6	Deduct amount reinsured	61,404,858	XXX
7	Net amount in force	15,351,214	XXX

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	43,832.93		35,066.33		8,766.60
					-
					-
					-
					-
OVERFLOW AMOUNTS					-
Totals	\$ 43,832.93	\$ -	\$ 35,066.33	\$ -	\$ 8,766.60

* 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	14,932.80	16,966.77	2,033.97
3	Real estate (less liens, encumbrances)	139,283.20	154,185.55	14,902.35
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	154,216.00	171,152.32	16,936.32
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	154,216.00	171,152.32	16,936.32
	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 Description of Property	2 Date Acquired	3 Name of Vendor	4 Actual Cost	5 Current Year Acquisitions or Permanent Improvements	6 Accumulated Depreciation	7 Amount of Encumbrances	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)
208 S Main St, Bluffton, Ohio	10/01/2005	Paul M King & Lois I King Charitable Trust	\$ 271,194.09		\$ 73,074.61		\$ 198,119.48		
OVERFLOW AMOUNTS									
Totals	XXX	XXX	\$ 271,194.09	\$ -	\$ 73,074.61	\$ -	\$ 198,119.48	\$ -	\$ -

*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

1 Description	2 Date Acquired	3 Name of Vendor	4 Actual Cost	5 Current Year Acquisitions or Permanent Improvements	6 Accumulated Depreciation	7 Amount of Encumbrances	8 Book Value End of Current Year (Col. 4+5-6-7)
OVERFLOW AMOUNTS							
Totals	XXX	XXX	\$ -	\$ -	\$ -	\$ -	\$ -

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

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

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	Orrville, Oh		255,203.00			
OVERFLOW AMOUNTS							
Totals	XXX	XXX	\$ -	\$ 255,203.00	\$ -	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.

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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 *Total to agree with Page 3, Line 4, Current Year

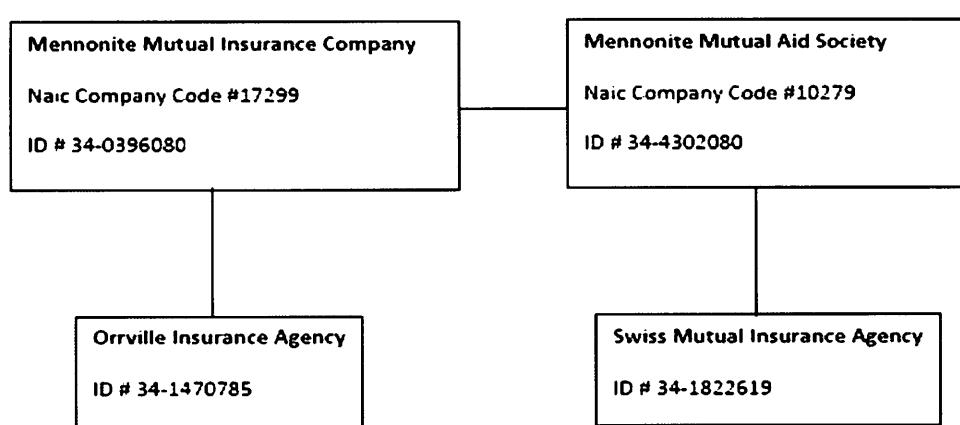
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Mennonite Mutual Aid Society

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