



PROPERTY AND CASUALTY COMPANIES—ASSOCIATION EDITION

ANNUAL STATEMENT
For the Year Ended December 31, 2021
OF THE CONDITION AND AFFAIRS OF THE
MENNONITE MUTUAL INSURANCE COMPANY

NAIC Group Code	04780 (Current Period)	04780 (Prior Period)	NAIC Company Code	17299	Employer's ID Number	34-0396080
Organized under the Laws of	Ohio		State of Domicile or Port of Entry	Ohio		
Country of Domicile	United States					
Incorporated/Organized	02/01/1905		Commenced Business	02/01/1895		
Statutory Home Office	1000 South Main Street (Street and Number)		, Orrville, OH, US 44667-0300		(City or Town, State, Country and Zip Code)	
Main Administrative Office	1000 South Main Street (Street and Number)		Orrville, OH, US 44667-0300		330-682-2986	(Area Code) (Telephone Number)
Mail Address	PO Box 300 (Street and Number or P.O. Box)		, Orrville, OH, US 44667-0300		(City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	1000 South Main Street (Street and Number)		Orrville, OH, US 44667-0300		330-684-4118	(Area Code) (Telephone Number)
Internet Web Site Address	mennonitemutual.com					
Statutory Statement Contact	Scott Ezzo (Name)		330-684-4118 (Area Code) (Telephone Number) (Extension)			
	sezzo@mennonitemutual.com (E-Mail Address)		330-683-2083 (Fax Number)			

OFFICERS

Name	Title	Name	Title
Christopher J Blough	President	George Bixler Jr	Secretary
George Bixler Jr	Treasurer		

OTHER OFFICERS

J Todd Neville, Vice-President of Claims, Thomas A Troyer, Vice-President of Underwriting

DIRECTORS OR TRUSTEES

Robert Eugene Aschliman George Bixler Jr Paul Bontrager Donald Dravenstott
Morris Stutzman Patrick Helmuth Tyson L Stuckey James Peter Suter #

State of Ohio
County of Wayne

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.

Christopher J Blough
President

George Bixler Jr
Secretary

George Bixler Jr
Treasurer

Subscribed and sworn to before me
this 22nd day of

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 Alger, Notary Public
April 18th, 2026

ANNUAL STATEMENT FOR THE YEAR 2021 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).....	19,027,728		19,027,728	16,416,789
2. Stocks (Schedule D):				
2.1 Preferred stocks	0		0	0
2.2 Common stocks	12,024,963	.100	12,024,863	11,163,643
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances).....	599,250		599,250	653,024
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 (\$ (640,102) , Schedule E-Part 1), cash equivalents (\$ 3,301,106 , Schedule E-Part 2) and short-term investments (\$ 1,198,926 , Schedule DA).....	3,859,930		3,859,930	5,896,584
6. Contract loans (including \$ premium notes).....			0	0
7. Derivatives (Schedule DB).....	0		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)	35,511,871	.100	35,511,771	34,130,040
13. Title plants less \$ charged off (for Title insurers only).....			0	0
14. Investment income due and accrued	102,670		102,670	.97,093
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	.56,243		.56,243	.73,548
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums).....	.8,603,898		.8,603,898	.7,809,451
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	2,967,214		2,967,214	.85,615
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			0	0
18.2 Net deferred tax asset.....	417,219		417,219	.296,813
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software.....	.29,830	.12,162	.17,668	.4,256
21. Furniture and equipment, including health care delivery assets (\$)	199,774	.199,774	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates .....	.8,290		.8,290	.17,689
24. Health care (\$) and other amounts receivable.....			0	0
25. Aggregate write-ins for other-than-invested assets	0	.0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	47,897,009	.212,036	.47,684,973	.42,514,505
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	0
28. Total (Lines 26 and 27)	47,897,009	.212,036	.47,684,973	.42,514,505
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.....			0	0
2502. Federal Home Loan Bank.....			0	0
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)	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Losses (Part 2A, Line 35, Column 8)	4,925,490	2,608,468
2. Reinsurance payable on paid losses and loss adjustment expenses (Schedule F, Part 1, Column 6)	0	0
3. Loss adjustment expenses (Part 2A, Line 35, Column 9)	713,331	611,330
4. Commissions payable, contingent commissions and other similar charges	1,862,222	1,968,645
5. Other expenses (excluding taxes, licenses and fees)	186,964	312,232
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	335,427	222,535
7.1 Current federal and foreign income taxes (including \$ on realized capital gains (losses))	(19,421)	270,178
7.2 Net deferred tax liability	0	0
8. Borrowed money \$ and interest thereon \$	0	0
9. Unearned premiums (Part 1A, Line 38, Column 5) (after deducting unearned premiums for ceded reinsurance of \$ 585,150 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)	14,739,853	12,990,224
10. Advance premium	213,634	383,460
11. Dividends declared and unpaid:		
11.1 Stockholders	0	0
11.2 Policyholders	0	0
12. Ceded reinsurance premiums payable (net of ceding commissions)	558,284	511,312
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)	113,120	98,781
14. Amounts withheld or retained by company for account of others	150	1
15. Remittances and items not allocated	0	0
16. Provision for reinsurance (including \$ certified) (Schedule F, Part 3, Column 78)	0	0
17. Net adjustments in assets and liabilities due to foreign exchange rates	0	0
18. Drafts outstanding	0	0
19. Payable to parent, subsidiaries and affiliates	0	0
20. Derivatives	0	0
21. Payable for securities	0	0
22. Payable for securities lending	0	0
23. Liability for amounts held under uninsured plans	0	0
24. Capital notes \$ and interest thereon \$	0	0
25. Aggregate write-ins for liabilities	0	0
26. Total liabilities excluding protected cell liabilities (Lines 1 through 25)	23,629,054	19,977,166
27. Protected cell liabilities	0	0
28. Total liabilities (Lines 26 and 27)	23,629,054	19,977,166
29. Aggregate write-ins for special surplus funds	0	0
30. Common capital stock	0	0
31. Preferred capital stock	0	0
32. Aggregate write-ins for other-than-special surplus funds	0	0
33. Surplus notes	0	0
34. Gross paid in and contributed surplus	0	0
35. Unassigned funds (surplus)	24,055,919	22,537,339
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 30 \$)	0	0
36.2 shares preferred (value included in Line 31 \$)	0	0
37. Surplus as regards policyholders (Lines 29 to 35, less 36) (Page 4, Line 39)	24,055,919	22,537,339
38. Totals (Page 2, Line 28, Col. 3)	47,684,973	42,514,505
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 2021 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)	23,071,419	20,150,953
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7)	12,099,427	7,186,479
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1)	2,215,163	2,191,140
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2)	8,859,131	8,395,878
5. Aggregate write-ins for underwriting deductions	0	0
6. Total underwriting deductions (Lines 2 through 5)	23,173,721	17,773,497
7. Net income of protected cells	0	0
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7)	(102,302)	2,377,456
INVESTMENT INCOME		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17)	446,989	391,005
10. Net realized capital gains (losses) less capital gains tax of \$ 328,103 (Exhibit of Capital Gains (Losses))	1,234,293	325,755
11. Net investment gain (loss) (Lines 9 + 10)	1,681,282	716,760
OTHER INCOME		
12. Net gain (loss) from agents' or premium balances charged off (amount recovered \$ charged off \$)	amount	0
13. Finance and service charges not included in premiums	54,138	61,769
14. Aggregate write-ins for miscellaneous income	(14,800)	19,912
15. Total other income (Lines 12 through 14)	39,338	81,681
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15)	1,618,318	3,175,897
17. Dividends to policyholders	0	0
18. Net income, after dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Line 16 minus Line 17)	1,618,318	3,175,897
19. Federal and foreign income taxes incurred	194,243	704,197
20. Net income (Line 18 minus Line 19) (to Line 22)	1,424,075	2,471,700
CAPITAL AND SURPLUS ACCOUNT		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2)	22,537,339	19,143,466
22. Net income (from Line 20)	1,424,075	2,471,700
23. Net transfers (to) from Protected Cell accounts	0	0
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ (6,725)	(25,298)	744,276
25. Change in net unrealized foreign exchange capital gain (loss)	0	0
26. Change in net deferred income tax	113,682	91,500
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3)	6,121	86,528
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1)	0	0
29. Change in surplus notes	0	0
30. Surplus (contributed to) withdrawn from protected cells	0	0
31. Cumulative effect of changes in accounting principles	0	0
32. Capital changes:		
32.1 Paid in	0	0
32.2 Transferred from surplus (Stock Dividend)	0	0
32.3 Transferred to surplus	0	0
33. Surplus adjustments:		
33.1 Paid in	0	0
33.2 Transferred to capital (Stock Dividend)	0	0
33.3 Transferred from capital	0	0
34. Net remittances from or (to) Home Office	0	0
35. Dividends to stockholders	0	0
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1)	0	0
37. Aggregate write-ins for gains and losses in surplus	0	(131)
38. Change in surplus as regards policyholders for the year (Lines 22 through 37)	1,518,580	3,393,873
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37)	24,055,919	22,537,339
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.....	(14,800)	19,912
1402.		
1403.		
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)	(14,800)	19,912
3701. Workers Comp Deposit Balance True-up.....		
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)	0	(131)

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

CASH FLOW

	1 Current Year	2 Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	23,921,052	20,795,528
2. Net investment income	602,386	610,196
3. Miscellaneous income	39,338	81,681
4. Total (Lines 1 through 3)	24,562,776	21,487,405
5. Benefit and loss related payments	12,664,004	7,111,938
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions	10,978,281	9,789,971
8. Dividends paid to policyholders	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ 328,103 tax on capital gains (losses)	1,039,308	743,000
10. Total (Lines 5 through 9)	24,681,593	17,644,909
11. Net cash from operations (Line 4 minus Line 10)	(118,817)	3,842,496
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	10,282,544	10,528,779
12.2 Stocks	4,792,743	540,867
12.3 Mortgage loans	0	0
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	1,338,755	22
12.7 Miscellaneous proceeds	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	16,414,042	11,069,668
13. Cost of investments acquired (long-term only):		
13.1 Bonds	12,986,288	11,362,148
13.2 Stocks	4,135,283	3,955,174
13.3 Mortgage loans	0	0
13.4 Real estate	2,702	8,977
13.5 Other invested assets	0	0
13.6 Miscellaneous applications	1,338,756	19
13.7 Total investments acquired (Lines 13.1 to 13.6)	18,463,029	15,326,318
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)	(2,048,987)	(4,256,650)
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)	131,150	162,113
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	131,150	162,113
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)	(2,036,653)	(252,041)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	5,896,584	6,148,625
19.2 End of year (Line 18 plus Line 19.1)	3,859,930	5,896,584

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS EARNED

Line of Business	1 Net Premiums Written per Column 6, Part 1B	2 Unearned Premiums Dec. 31 Prior Year - per Col. 3, Last Year's Part 1	3 Unearned Premiums Dec. 31 Current Year - per Col. 5 Part 1A	4 Premiums Earned During Year (Cols. 1 + 2 - 3)
1. Fire	1,160,053	789,299	695,367	1,253,985
2. Allied lines	(6,160)	0	96,225	(102,385)
3. Farmowners multiple peril	7,578,847	3,689,558	4,181,911	7,086,494
4. Homeowners multiple peril	0	0	0	0
5. Commercial multiple peril	13,427,291	7,306,285	8,383,884	12,349,692
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	401,944	203,375	211,710	393,609
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	1,578,141	716,521	820,936	1,473,726
21. Auto physical damage	680,932	285,186	349,820	616,298
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	24,821,048	12,990,224	14,739,853	23,071,419
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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1A - RECAPITULATION OF ALL PREMIUMS

Line of Business	1 Amount Unearned (Running One Year or Less from Date of Policy) (a)	2 Amount Unearned (Running More Than One Year from Date of Policy) (a)	3 Earned but Unbilled Premium	4 Reserve for Rate Credits and Retrospective Adjustments Based on Experience	5 Total Reserve for Unearned Premiums Cols. 1 + 2 + 3 + 4
1. Fire	695,367				695,367
2. Allied lines	96,225				96,225
3. Farmowners multiple peril	4,181,911				4,181,911
4. Homeowners multiple peril					0
5. Commercial multiple peril	8,383,884				8,383,884
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	211,710				211,710
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	820,936				820,936
21. Auto physical damage	349,820				349,820
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					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	14,739,853	0	0	0	14,739,853
36. Accrued retrospective premiums based on experience					
37. Earned but unbilled premiums					
38. Balance (Sum of Lines 35 through 37)					14,739,853
DETAILS OF WRITE-INS					
3401.					
3402.					
3403.					
3498. Sum. of remaining write-ins for Line 34 from overflow page.....	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 plus 3498) (Line 34 above)	0	0	0	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1B - PREMIUMS WRITTEN

Line of Business	1 Direct Business (a)	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1 + 2 + 3 - 4 - 5
		2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1. Fire	1,319,463	(122)			159,288	1,160,053
2. Allied lines	154,824				160,984	(6,160)
3. Farmowners multiple peril	8,910,714				1,331,867	7,578,847
4. Homeowners multiple peril					0	0
5. Commercial multiple peril	17,017,208				3,589,917	13,427,291
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	1,654,046		61,359		1,313,461	401,944
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	1,770,995				192,854	1,578,141
21. Auto physical damage	761,582				80,650	680,932
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	31,588,832	(122)	61,359	0	6,829,021	24,821,048
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 [X]

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 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - LOSSES PAID AND INCURRED

Line of Business	Direct Business	Losses Paid Less Salvage			Net Losses Unpaid Current Year (Part 2A, Col. 8)	Net Losses Unpaid Prior Year	Losses Incurred Current Year (Cols. 4 + 5 - 6)	Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
		1 Reinsurance Assumed	2 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)				
1. Fire	680,418	1,941		682,359	82,061	34,139	730,280	58.2
2. Allied lines				0	0	0	0	0.0
3. Farmowners multiple peril	2,921,311		8,478	2,912,833	862,017	544,361	3,230,490	45.6
4. Homeowners multiple peril				0	0	0	0	0.0
5. Commercial multiple peril	10,656,102		5,398,877	5,257,225	2,877,304	1,755,944	6,378,585	51.6
6. Mortgage guaranty				0	0	0	0	0.0
8. Ocean marine				0	0	0	0	0.0
9. Inland marine				0	0	0	0	0.0
10. Financial guaranty				0	0	0	0	0.0
11.1 Medical professional liability-occurrence				0	0	0	0	0.0
11.2 Medical professional liability-claims-made				0	0	0	0	0.0
12. Earthquake				0	0	0	0	0.0
13. Group accident and health				0	0	0	0	0.0
14. Credit accident and health (group and individual)				0	0	0	0	0.0
15. Other accident and health				0	0	0	0	0.0
16. Workers' compensation				0	0	0	0	0.0
17.1 Other liability-occurrence	9,414	12,489		21,903	605,580	114,688	512,795	130.3
17.2 Other liability-claims-made				0	0	0	0	0.0
17.3 Excess workers' compensation				0	0	0	0	0.0
18.1 Products liability-occurrence				0	0	0	0	0.0
18.2 Products liability-claims-made				0	0	0	0	0.0
19.1,19.2 Private passenger auto liability				0	0	0	0	0.0
19.3,19.4 Commercial auto liability	178,582			178,582	424,732	117,459	485,854	33.0
21. Auto physical damage	729,502			729,502	73,797	41,877	761,422	123.5
22. Aircraft (all perils)				0	0	0	0	0.0
23. Fidelity				0	0	0	0	0.0
24. Surety				0	0	0	0	0.0
26. Burglary and theft				0	0	0	0	0.0
27. Boiler and machinery				0	0	0	0	0.0
28. Credit				0	0	0	0	0.0
29. International				0	0	0	0	0.0
30. Warranty				0	0	0	0	0.0
31. Reinsurance-nonproportional assumed property	XXX			0	0	0	0	0.0
32. Reinsurance-nonproportional assumed liability	XXX			0	0	0	0	0.0
33. Reinsurance-nonproportional assumed financial lines	XXX			0	0	0	0	0.0
34. Aggregate write-ins for other lines of business	0	0	0	0	0	0	0	0.0
35. TOTALS	15,175,330	14,430	5,407,355	9,782,405	4,925,490	2,608,468	12,099,427	52.4
DETAILS OF WRITE-INS								
3401.								
3402.								
3403.								
3498. Sum. of remaining write-ins for Line 34 from overflow page	0	0	0	0	0	0	0	0.0
3499. Totals (Lines 3401 through 3403 + 3498) (Line 34 above)	0	0	0	0	0	0	0	0.0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - UNPAID LOSSES AND LOSS ADJUSTMENT EXPENSES

Line of Business	Reported Losses				Incurred But Not Reported			8	9	
	1 Direct	2 Reinsurance Assumed	3 Deduct Reinsurance Recoverable	4 Net Losses Excl. Incurred But Not Reported (Cols. 1 + 2 - 3)	5 Direct	6 Reinsurance Assumed	7 Reinsurance Ceded			
1. Fire .....	.55,965			.55,965	.26,096			.82,061	.14,989
2. Allied lines .....				.0				.0	.0
3. Farmowners multiple peril .....	.1,215,805		.519,317	.696,488	.165,529			.862,017	.118,393
4. Homeowners multiple peril .....				.0				.0	.0
5. Commercial multiple peril .....	.6,542,563		.4,251,395	.2,291,168	.586,136			.2,877,304	.464,911
6. Mortgage guaranty .....				.0				.0	.0
8. Ocean marine .....				.0				.0	.0
9. Inland marine .....				.0				.0	.0
10. Financial guaranty .....				.0				.0	.0
11.1 Medical professional liability-occurrence .....				.0				.0	.0
11.2 Medical professional liability-claims-made .....				.0				.0	.0
12. Earthquake .....				.0				.0	.0
13. Group accident and health .....				.0			(a)	.0	.0
14. Credit accident and health (group and individual) .....				.0			(a)	.0	.0
15. Other accident and health .....				.0				.0	.0
16. Workers' compensation .....				.0				.0	.0
17.1 Other liability-occurrence .....	.481,298		.23,644	.504,942	.54,521	.46,117		.605,580	.37,755
17.2 Other liability-claims-made .....				.0				.0	.0
17.3 Excess workers' compensation .....				.0				.0	.0
18.1 Products liability-occurrence .....				.0				.0	.0
18.2 Products liability-claims-made .....				.0				.0	.0
19.1,19.2 Private passenger auto liability .....				.0				.0	.0
19.3,19.4 Commercial auto liability .....	.397,774			.397,774	.26,958			.424,732	.65,318
21. Auto physical damage .....	.69,931			.69,931	.3,866			.73,797	.11,965
22. Aircraft (all perils) .....				.0				.0	.0
23. Fidelity .....				.0				.0	.0
24. Surety .....				.0				.0	.0
26. Burglary and theft .....				.0				.0	.0
27. Boiler and machinery .....				.0				.0	.0
28. Credit .....				.0				.0	.0
29. International .....				.0				.0	.0
30. Warranty .....				.0				.0	.0
31. Reinsurance-nonproportional assumed property	XXX			.0	XXX			.0	.0	
32. Reinsurance-nonproportional assumed liability	XXX			.0	XXX			.0	.0	
33. Reinsurance-nonproportional assumed financial lines	XXX			.0	XXX			.0	.0	
34. Aggregate write-ins for other lines of business	0	.0	.0	0	0	.0	0	0	.0	
35. TOTALS	8,763,335		.23,644	4,770,712	4,016,267	.863,106	.46,117	0	4,925,490	.713,331
DETAILS OF WRITE-INS										
3401.										
3402.										
3403.										
3498. Sum. of remaining write-ins for Line 34 from overflow page	0	.0	.0	0	0	.0	0	0	.0	
3499. Totals (Lines 3401 through 3403 + 3498) (Line 34 above)	0	0	0	0	0	0	0	0	0	

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - EXPENSES

	1 Loss Adjustment Expenses	2 Other Underwriting Expenses	3 Investment Expenses	4 Total
1. Claim adjustment services:				
1.1 Direct	496,760	.0	.0	496,760
1.2 Reinsurance assumed	3,736	.0	.0	3,736
1.3 Reinsurance ceded .....	.0	.0	.0	0
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3)	500,496	.0	.0	500,496
2. Commission and brokerage:				
2.1 Direct, excluding contingent .....	.0	4,623,492	.0	4,623,492
2.2 Reinsurance assumed, excluding contingent .....	.0	16,629	.0	16,629
2.3 Reinsurance ceded, excluding contingent .....	.0	635,275	.0	635,275
2.4 Contingent-direct .....	.0	638,372	.0	638,372
2.5 Contingent-reinsurance assumed .....	.0	.0	.0	0
2.6 Contingent-reinsurance ceded .....	.0	361,951	.0	361,951
2.7 Policy and membership fees .....	.0	.0	.0	0
2.8 Net commission and brokerage (2.1 + 2.2 - 2.3 + 2.4 + 2.5 - 2.6 + 2.7)	0	4,281,267	.0	4,281,267
3. Allowances to manager and agents .....	.0	.0	.0	0
4. Advertising .....	.0	80,798	.0	80,798
5. Boards, bureaus and associations .....	.0	139,275	.0	139,275
6. Surveys and underwriting reports .....	.0	82,903	.0	82,903
7. Audit of assureds' records .....	.0	.0	.0	0
8. Salary and related items:				
8.1 Salaries	762,667	1,690,579	88,978	2,542,224
8.2 Payroll taxes	56,542	125,335	6,597	188,474
9. Employee relations and welfare	215,237	477,108	25,111	717,456
10. Insurance	22,885	50,728	2,670	76,283
11. Directors' fees	50,375	123,238	6,297	179,910
12. Travel and travel items	26,157	97,436	7,193	130,786
13. Rent and rent items	37,440	101,520	5,040	144,000
14. Equipment	30,499	67,607	3,558	101,664
15. Cost or depreciation of EDP equipment and software	389,537	727,323	1,265	1,118,125
16. Printing and stationery	8,029	22,962	1,124	32,115
17. Postage, telephone and telegraph, exchange and express	22,574	64,562	3,160	90,296
18. Legal and auditing	73,793	205,745	15,633	295,171
19. Totals (Lines 3 to 18)	1,695,735	4,057,119	166,626	5,919,480
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$ .....	.0	45,716	.0	45,716
20.2 Insurance department licenses and fees .....	.0	76,462	.0	76,462
20.3 Gross guaranty association assessments .....	.0	.0	.0	0
20.4 All other (excluding federal and foreign income and real estate) .....	.0	341,303	.0	341,303
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4)	0	463,481	.0	463,481
21. Real estate expenses .....	.0	.0	93,031	93,031
22. Real estate taxes .....	.0	.0	25,075	25,075
23. Reimbursements by uninsured plans .....	.0	.0	.0	0
24. Aggregate write-ins for miscellaneous expenses	18,932	57,264	0	76,196
25. Total expenses incurred	2,215,163	8,859,131	284,732	(a) 11,359,026
26. Less unpaid expenses-current year	713,331	2,384,613	.0	3,097,944
27. Add unpaid expenses-prior year	611,330	2,503,413	.0	3,114,743
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)	2,113,162	8,977,931	284,732	11,375,825
DETAILS OF WRITE-INS				
2401. DONATIONS	18,932	56,795	.0	75,727
2402. MISC .....	.0	469	.0	469
2403. .....	.0	.0	.0	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)	18,932	57,264	0	76,196

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a)	32,945
1.1 Bonds exempt from U.S. tax	(a)	99,716
1.2 Other bonds (unaffiliated)	(a)	165,016
1.3 Bonds of affiliates	(a)	0
2.1 Preferred stocks (unaffiliated)	(b)	0
2.11 Preferred stocks of affiliates	(b)	327,325
2.2 Common stocks (unaffiliated)	(c)	327,906
2.21 Common stocks of affiliates	(d)	0
3. Mortgage loans	(e)	12,730
4. Real estate	(f)	144,000
5. Contract loans		
6. Cash, cash equivalents and short-term investments	(g)	13,619
7. Derivative instruments	(h)	0
8. Other invested assets		
9. Aggregate write-ins for investment income	(i)	(297)
10. Total gross investment income	782,621	788,197
11. Investment expenses	(g)	284,732
12. Investment taxes, licenses and fees, excluding federal income taxes	(g)	0
13. Interest expense	(h)	0
14. Depreciation on real estate and other invested assets	(i)	56,476
15. Aggregate write-ins for deductions from investment income		0
16. Total deductions (Lines 11 through 15)		341,208
17. Net investment income (Line 10 minus Line 16)		446,989
DETAILS OF WRITE-INS		
0901. NAMICO		(297)
0902. MISC		
0903.		
0998. Summary of remaining write-ins for Line 9 from overflow page	0	0
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above)	0	(297)
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 \$ 10,752 accrual of discount less \$ 115,250 amortization of premium and less \$ 6,764 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 \$ 144,000 for company's occupancy of its own buildings; and excludes \$ 0 interest on encumbrances.		
(e) Includes \$ accrual of discount less \$ 456 amortization of premium and less \$ paid for accrued interest on purchases.		
(f) Includes \$ accrual of discount less \$ amortization of premium.		
(g) Includes \$ 284,732 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 \$ 56,476 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	(5,802)		(5,802)		
1.1 Bonds exempt from U.S. tax			0		
1.2 Other bonds (unaffiliated)	17,495		17,495		
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)	1,550,703	0	1,550,703	(32,023)	0
2.21 Common stocks of affiliates	0	0	0	0	0
3. Mortgage loans	0	0	0	0	0
4. Real estate	0	0	0	0	0
5. Contract loans					
6. Cash, cash equivalents and short-term investments	0		0	0	0
7. Derivative instruments					
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)	1,562,396	0	1,562,396	(32,023)	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 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....	0	0	0
2. Stocks (Schedule D):			
2.1 Preferred stocks	0	0	0
2.2 Common stocks	100	100	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)	100	100	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 and contracts subject to redetermination	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	0	0
19. Guaranty funds receivable or on deposit	0	0	0
20. Electronic data processing equipment and software.....	12,162	31,727	19,565
21. Furniture and equipment, including health care delivery assets.....	199,774	186,330	(13,444)
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	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	212,036	218,157	6,121
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0
28. Total (Lines 26 and 27).....	212,036	218,157	6,121
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.....		0	0
2502.		0	0
2503.		0	0
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)	0	0	0

Notes to the Financial Statements

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

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:

	SSAP #	F/S Page	F/S Line #	2021	2020
Net Income					
(1) State basis (Page 4, Line 20, Columns 1 & 2).....	XXX.....	XXX.....	XXX.....	\$..... 1,424,075	\$..... 2,471,700
(2) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(3) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4).....	XXX.....	XXX.....	XXX.....	\$ 1,424,075	\$ 2,471,700
Surplus					
(5) State basis (Page 3, Line 37, Columns 1 & 2).....	XXX.....	XXX.....	XXX.....	\$..... 24,055,919	\$..... 22,537,339
(6) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(7) State permitted practices that are an increase / (decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8).....	XXX.....	XXX.....	XXX.....	\$ 24,055,919	\$ 22,537,339

B. Use of Estimates in the Preparation of the 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 and the Company continues to maintain a \$2,000 capitalization policy limit.

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 the Company's uncombined subsidiary, which is carried on an 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) The Company carries Orrville Insurance Agency, Inc. at GAAP equity.
- (8) Investments in joint ventures, partnerships and limited liability companies - Not Applicable
- (9) Derivatives - Not Applicable
- (10) The Company does not anticipate investment income as a factor in the premium deficiency reserve calculation.
- (11) 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) Changes in capitalization policy - Not Applicable
- (13) Pharmaceutical rebate receivables - Not Applicable

D. Going Concern - Not Applicable

Notes to the Financial Statements

2. Accounting Changes and Corrections of Errors

(Description of above other than results from codification)

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 by the State of Ohio Insurance Commissioners.

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

3. Business Combinations and Goodwill - Not Applicable

4. Discontinued Operations - Not Applicable

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans - Not Applicable

B. Debt Restructuring - Not Applicable

C. Reverse Mortgages - Not Applicable

D. Loan-Backed Securities

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

(2) Loan-backed and structured securities with a recognized other-than-temporary impairment (OTTI) - Not Applicable

(3) Securities held that were other-than-temporarily impaired due to the present value of cash flows expected to be collected was less than the amortized cost of securities - Not Applicable

(4) All impaired securities for which an OTTI has not been recognized in earnings as a realized loss

Impaired but not OTTI Securities YTD as of December 31, 2021:

a. The aggregate amount of unrealized losses:

1. Less than 12 months.....	\$ 22,543
2. 12 months or longer.....	.....

b. The aggregate related fair value of securities with unrealized losses:

1. Less than 12 months.....	\$ 2,969,391
2. 12 months or longer.....	.....

(5) Support for concluding impairments are not other-than-temporary - Not Applicable

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

(1) 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.

(2) Carrying amount and classification of assets pledged as collateral and not reclassified and separately reported - Not Applicable

(3) Collateral received

Cash collateral received is invested in short-term investments and the offsetting collateral liability is included in "Other miscellaneous liabilities".

(a) Aggregate amount collateral received - Not Applicable

(b) Fair value and portion sold or repledged - Not Applicable

(c) Sources and uses of collateral - Not Applicable

(4) Securities lending transactions administered by an affiliated agent - Not Applicable

(5) Collateral reinvestment - Not Applicable

(6) Collateral not permitted by contract or custom to sell or repledge - Not Applicable

(7) Collateral for securities lending transactions that extend beyond one year from the reporting date - Not Applicable

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing - Not Applicable

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing - Not Applicable

H. Repurchase Agreements Transactions Accounted for as a Sale - Not Applicable

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale - Not Applicable

J. Real Estate - Not Applicable

K. Low-Income Housing Tax Credits (LIHTC) - Not Applicable

L. Restricted Assets - Not Applicable

M. Working Capital Finance Investments - Not Applicable

Notes to the Financial Statements

5. Investments (Continued)

- N. Offsetting and Netting of Assets and Liabilities - Not Applicable
- O. 5GI Securities - Not Applicable
- P. Short Sales - Not Applicable
- Q. Prepayment Penalty and Acceleration Fees - None
- R. Reporting Entity's Share of Cash Pool by Asset type

Asset Type	Percent Share
(1) Cash.....	(17.000)%
(2) Cash Equivalents	86.000 %
(3) Short-Term Investments.....	31.000 %
(4) Total.....	<u>100.000 %</u>

6. Joint Ventures, Partnerships and Limited Liability Companies - Not Applicable

7. Investment Income - Not Applicable

8. Derivative Instruments - Not Applicable

9. Income Taxes

MENNONTIE MUTUAL INSURANCE COMPANY
Income Tax Disclosures Required under SSAP 101
December 31, 2021

A. Components of the Net Deferred Tax Asset/(Liability)

The components of the net deferred tax asset / (liability) calculated at December 31, 2021 are as follows:

(1) Change between years by tax character

	2021			2020			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	Total (Col 1+2)	Ordinary	Capital	Total (Col 4+5)	Ordinary (Col 1-4)	Capital (Col 2-5)	Total (Col 7+8)
(a) Gross deferred tax assets.....	\$ 800,356	\$	800,356	\$ 683,444	\$	683,444	\$ 116,912	\$	116,912
(b) Statutory valuation allowance adjustments.....									
(c) Adjusted gross deferred tax assets (1a - 1b).....	800,356		800,356	683,444		683,444	116,912		116,912
(d) Deferred tax assets nonadmitted.....									
(e) Subtotal net admitted deferred tax asset (1c - 1d).....	\$ 800,356	\$	800,356	\$ 683,444	\$	683,444	\$ 116,912	\$	116,912
(f) Deferred tax liabilities.....	21,554	361,583	383,137	18,323	368,308	386,631	3,231	(6,725)	(3,494)
(g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f).....	\$ 778,802	\$ (361,583)	\$ 417,219	\$ 665,121	\$ (368,308)	\$ 296,813	\$ 113,681	\$ 6,725	\$ 120,406

(2) Admission calculation components SSAP No. 101

	2021			2020			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	Total (Col 1+2)	Ordinary	Capital	Total (Col 4+5)	Ordinary (Col 1-4)	Capital (Col 2-5)	Total (Col 7+8)
(a) Federal income taxes paid in prior years recoverable through loss carrybacks.....	\$ 669,082	\$	669,082	\$ 589,842	\$	589,842	\$ 79,240	\$	79,240
(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 (lesser of 2(b)1 and 2(b)2 below).....	59,062		59,062	43,002		43,002	16,060		16,060
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date.....									
2. Adjusted gross deferred tax assets allowed per limitation threshold.....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
(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.....	72,212		72,212	50,600		50,600	21,612		21,612
(d) Deferred tax assets admitted as the result of application of SSAP No. 101.									
Total (2(a) + 2(b) + 2(c)).....	\$ 800,356	\$	800,356	\$ 683,444	\$	683,444	\$ 116,912	\$	116,912

Notes to the Financial Statements

9. Income Taxes (Continued)

(3) Ratio used as basis of admissibility

	2021	2020
(a) Ratio percentage used to determine recovery period and threshold limitation amount	1,076.000 %	1,042.000 %
(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above	\$ 23,638,700	\$ 22,236,270

(4) Impact of tax-planning strategies

(a) Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage

	2021		2020		Change	
	(1)	(2)	(3)	(4)	(5)	(6)
	Ordinary	Capital	Ordinary	Capital	Ordinary (Col. 1-3)	Capital (Col. 2-4)
1. Adjusted gross DTAs amount from Note 9A1(c)	\$ 800,356	\$	\$ 683,444	\$	\$ 116,912	\$
2. Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies	%	%	%	%	%	%
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$ 800,356	\$	\$ 683,444	\$	\$ 116,912	\$
4. Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning strategies	%	%	%	%	%	%

(b) Use of reinsurance-related tax-planning strategies - Not Applicable

B. Regarding Deferred Tax Liabilities That Are Not Recognized - Not Applicable

C. Major Components of Current Income Taxes Incurred

Current tax and change in deferred tax at December 31, 2021 are as follows:

	(1)	(2)	(3)
	2021	2020	Change (1-2)
Current income taxes incurred consist of the following major components:			
1. Current Income Tax			
(a) Federal	\$ 522,346	\$ 790,790	\$ (268,444)
(b) Foreign			
(c) Subtotal	\$ 522,346	\$ 790,790	\$ (268,444)
(d) Federal income tax on net capital gains	(328,103)	(86,593)	(241,510)
(e) Utilization of capital loss carry-forwards			
(f) Other			
(g) Federal and foreign income taxes incurred	\$ 194,243	\$ 704,197	\$ (509,954)

Notes to the Financial Statements**9. Income Taxes (Continued)**

	(1) 2021	(2) 2020	(3) Change (1-2)
2. Deferred Tax Assets			
(a) Ordinary			
(1) Discounting of unpaid losses	\$ 65,735	\$ 37,973	\$ 27,762
(2) Unearned premium reserve	628,046	561,695	66,351
(3) Policyholder reserves			
(4) Investments			
(5) Deferred acquisition costs			
(6) Policyholder dividends accrual			
(7) Fixed assets			
(8) Compensation and benefits accrual			
(9) Pension accrual			
(10) Receivables - nonadmitted			
(11) Net operating loss carry-forward			
(12) Tax credit carry-forward			
(13) Other (including items less than 5% of total ordinary tax assets)	106,575	83,776	22,799
(99) Subtotal	<u>\$ 800,356</u>	<u>\$ 683,444</u>	<u>\$ 116,912</u>
(b) Statutory valuation allowance adjustment			
(c) Nonadmitted			
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$ 800,356	\$ 683,444	\$ 116,912
(e) Capital			
(1) Investments	\$	\$	\$
(2) Net capital loss carry-forward			
(3) Real estate			
(4) Other (including items <5% of total capital tax assets)			
(99) Subtotal	<u>\$</u>	<u>\$</u>	<u>\$</u>
(f) Statutory valuation allowance adjustment			
(g) Nonadmitted			
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)			
(i) Admitted deferred tax assets (2d + 2h)	<u>\$ 800,356</u>	<u>\$ 683,444</u>	<u>\$ 116,912</u>
	(1) 2021	(2) 2020	(3) Change (1-2)
3. Deferred Tax Liabilities			
(a) Ordinary			
(1) Investments	\$	\$	\$
(2) Fixed assets			
(3) Deferred and uncollected premium			
(4) Policyholder reserves			
(5) Other (including items <5% of total ordinary tax liabilities)	21,554	18,323	3,231
(99) Subtotal	<u>\$ 21,554</u>	<u>\$ 18,323</u>	<u>\$ 3,231</u>
(b) Capital			
(1) Investments	\$ 361,583	\$ 368,308	\$ (6,725)
(2) Real estate			
(3) Other (including items <5% of total capital tax liabilities)			
(99) Subtotal	<u>\$ 361,583</u>	<u>\$ 368,308</u>	<u>\$ (6,725)</u>
(c) Deferred tax liabilities (3a99 + 3b99)	<u>\$ 383,137</u>	<u>\$ 386,631</u>	<u>\$ (3,494)</u>
4. Net deferred tax assets/liabilities (2i - 3c)	<u>\$ 417,219</u>	<u>\$ 296,813</u>	<u>\$ 120,406</u>

D. Among the More Significant Book to Tax Adjustments

Current tax and change in deferred tax at December 31, 2021 are as follows :

Notes to the Financial Statements

9. Income Taxes (Continued)

	2021	Effective Tax Rate
Provision computed at statutory rate	\$ 408,748	21.000 %
Tax exempt investment income	(20,509)	-1.054 %
Dividends received deduction	(163,953)	-8.423 %
Proration of tax exempt investment income	13,735	0.706 %
Disallowable travel and entertainment	3,984	0.205 %
Accrual adjustment - prior year	(2,856)	-0.147 %
Enacted rate changes		%
Discounted Loss Reserve Restatement	(1,438)	-0.074 %
Other	170,953	8.783 %
Total	\$ 408,664	20.996 %

	2021	Effective Tax Rate
Current year income tax incurred	\$ 194,243	9.979 %
Realized Capital Gains Tax	328,103	16.857 %
Change in net deferred income taxes	(113,681)	-5.841 %
Total statutory income taxes	\$ 408,665	20.996 %

	2020	Effective Tax Rate
Provision computed at statutory rate	\$ 685,123	21.000 %
Tax exempt investment income	(23,497)	-0.720 %
Dividends received deduction	(92,485)	-2.835 %
Proration of tax exempt investment income	10,730	0.329 %
Disallowable travel and entertainment	13,231	0.406 %
Accrual adjustment - prior year	(2,557)	-0.078 %
Enacted rate changes		%
Discounted Loss Reserve Restatement	(1,438)	-0.044 %
Other	110,183	3.377 %
Total	\$ 699,290	21.434 %

	2020	Effective Tax Rate
Current year income tax incurred	\$ 704,197	21.585 %
Realized Capital Gains Tax	86,593	2.654 %
Change in net deferred income taxes	(91,500)	-2.805 %
Total statutory income taxes	\$ 699,290	21.434 %

E. Operating Loss and Tax Credit Carryforwards

- (1) Unused loss carryforwards available - Not Applicable
- (2) Income tax expense available for recoupment

The Company has income tax expense for 2021 and 2020 of \$525,202 and \$793,347, respectively, which is available for the recoupment in the event of a future net losses.

- (3) Deposits admitted under IRS Code Section 6603 - Not Applicable

F. Consolidated Federal Income Tax Return - Not Applicable

G. Federal or Foreign Income Tax Loss Contingencies - Not Applicable

H. Repatriation Transition Tax (RTT) - Not Applicable

I. Alternative Minimum Tax (AMT) Credit - Not Applicable

10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

- A. All outstanding shares of the Orrville Insurance Agency are owned by the Mennonite Mutual Insurance Company domiciled in the state of Ohio. Mennonite Mutual Aid Society became an affiliate of Mennonite Mutual Insurance Company in 2013.
- B. Detail of Related Party Transactions - Not Applicable
- C. Transactions With Related Party Who Are Not Reported on Schedule Y - Not Applicable
- D. Amounts Due To or From Related Parties - Not Applicable
- E. Management Service Contracts and Cost Sharing Arrangements - Not Applicable
- F. Guarantees or Contingencies - Not Applicable
- G. Nature of Relationships that Could Affect Operations - Not Applicable
- H. Amount Deducted for Investment in Upstream Company - Not Applicable
- I. Detail of Investments in Affiliates Greater Than 10% of Admitted Assets - Not Applicable
- J. Write-Down for Impairments of Investments in Subsidiary Controlled or Affiliated Companies - Not Applicable

Notes to the Financial Statements

10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties (Continued)

- K. Foreign Subsidiary Value Using CARVM - Not Applicable
- L. Downstream Holding Company Value Using Look-Through Method - Not Applicable
- M. All SCA Investments - Not Applicable
- N. Investment in Insurance SCAs - Not Applicable
- O. SCA and SSAP No. 48 Entity Loss Tracking - Not Applicable

11. Debt - Not Applicable

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

- A. Defined Benefit Plan - Not Applicable
- B. Investment Policies and Strategies of Plan Assets - Not Applicable
- C. Fair Value of Each Class of Plan Assets - Not Applicable
- D. Expected Long-Term Rate of Return for the Plan Assets - Not Applicable
- E. Defined Contribution Plans

The Company provides its employees with an employer matched safe harbor 401(K) retirement plan. The Board of Directors may also award qualified employees with an additional 401(K) bonus contribution based on the Company's underwriting profit.

- F. Multiemployer Plans - Not Applicable
- G. Consolidated/Holding Company Plans - Not Applicable
- H. Postemployment Benefits and Compensated Absences - Not Applicable
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17) - Not Applicable

13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

- A. Outstanding Shares - Not Applicable
- B. Dividend Rate of Preferred Stock - Not Applicable
- C. Dividend Restrictions - Not Applicable
- D. Ordinary Dividends - Not Applicable
- E. Company Profits Paid as Ordinary Dividends - Not Applicable
- F. Surplus Restrictions - Not Applicable
- G. Surplus Advances - Not Applicable
- H. Stock Held for Special Purposes - Not Applicable
- I. Changes in Special Surplus Funds - Not Applicable
- J. Unassigned Funds (Surplus)

The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and (losses) is \$938,277.

- K. Company-Issued Surplus Debentures or Similar Obligations - Not Applicable
- L. Impact of Any Restatement Due to Prior Quasi-Reorganizations - Not Applicable
- M. Effective Date(s) of Quasi-Reorganizations in the Prior 10 Years - Not Applicable

14. Liabilities, Contingencies and Assessments

- A. Contingent Commitments

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.

 - (1) Commitments or contingent commitment(s) to an SCA entity, joint venture, partnership, or limited liability company - Not Applicable
 - (2) Nature and circumstances of guarantee - Not Applicable
 - (3) Aggregate compilation of guarantee obligations - Not Applicable
- B. Assessments - Not Applicable
- C. Gain Contingencies - Not Applicable
- D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits - Not Applicable
- E. Product Warranties - Not Applicable
- F. Joint and Several Liabilities - Not Applicable
- G. All Other Contingencies - Not Applicable

15. Leases - Not Applicable

Notes to the Financial Statements

16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk - Not Applicable

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities - Not Applicable

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans - Not Applicable

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators - Not Applicable

20. Fair Value Measurements

A. 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.

(1) Fair value measurements at reporting date

The following tables provide information as of December 31, 2021 about the Company's financial assets measured at fair value on a recurring basis:

Description for each class of asset or liability	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Total
a. Assets at fair value					
Common Stock: Industrials and Miscellaneous.....	\$ 11,920,532	\$ 104,331	\$ 53,304	\$ 12,024,863	
Common Stock: Parents, Subsidiaries and Affiliates.....			100	100	
Cash & Equivalents: Industrials and Miscellaneous.....	2,661,004				2,661,004
Total assets at fair value/NAV.....	<u>\$ 14,581,536</u>	<u>\$ 104,331</u>	<u>\$ 100</u>	<u>\$ 14,685,967</u>	
b. Liabilities at fair value					
Total liabilities at fair value.....	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>

Level 1 Transfers – Details

NONE

(2) Fair value measurements in Level 3 of the fair value hierarchy

Description	Beginning balance as of 01/01/2021	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Ending Balance at 12/31/2021			
						Purchases	Issuances	Sales	Settlements
a. Assets									
Common Stock: Parents, Subsidiaries and Affiliates.....	\$ 100	\$	\$	\$	\$	\$	\$	\$	100
Total assets.....	<u>\$ 100</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$ 100</u>
b. Liabilities									
Total liabilities.....	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>

(3) Policy on transfers into and out of Level 3 - Not Applicable

(4) Inputs and techniques used for Level 2 and Level 3 fair values - Not Applicable

(5) Derivatives - Not Applicable

B. Other Fair Value Disclosures - Not Applicable

C. Fair Values for All Financial Instruments by Level 1, 2 and 3

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bond.....	\$ 14,826,629	\$ 14,619,736	\$ 14,773,325	\$ 53,304	\$	\$	\$
CMO.....	3,691,676	3,652,655	3,691,676				
MBS.....	788,061	755,337	788,061				
Common Stock.....	12,024,963	12,024,963	11,920,532	104,331	100		
Short Term.....	1,198,926	1,198,926	1,198,926				
Cash & Cash Equivalents.....	2,661,004	2,661,004	2,661,004				

D. Not Practicable to Estimate Fair Value

Type or Class of Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation
Total Cash & Cash Equivalents.....	\$ 2,661,004	0.467 %	12/31/2021	
Total Short Term.....	1,198,926	0.177 %	12/31/2021	

E. Nature and Risk of Investments Reported at NAV - Not Applicable

21. Other Items - Not Applicable

22. Events Subsequent - Not Applicable

Notes to the Financial Statements

23. Reinsurance

A. Unsecured Reinsurance Recoverables - Not Applicable

B. Reinsurance Recoverable in Dispute - Not Applicable

C. Reinsurance Assumed and Ceded

(1) Maximum amount of return commission that would have been due reinsurers if all of the company's reinsurance was canceled or if the company's insurance assumed was canceled

	Assumed Reinsurance		Ceded Reinsurance		Net	
	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity	Premium Reserve	Commission Equity
a. Affiliates	\$ 286	\$ 86	\$	\$	\$ 286	\$ 86
b. All other	29,520	10,332	585,150	193,100	(555,630)	(182,768)
c. Total	<u>\$ 29,806</u>	<u>\$ 10,418</u>	<u>\$ 585,150</u>	<u>\$ 193,100</u>	<u>\$ (555,344)</u>	<u>\$ (182,682)</u>
d. Direct unearned premium reserve			\$ 15,295,197			

Commission equity amounts computed by applying the fixed or provisional commission rate for each contract to the unearned premium reserve:

Assumed Affiliates - 30%.

Assumed Other - 35%.

Ceded Other - 33%.

(2) The additional or return commission, predicated on loss experience or on any other form of profit sharing arrangements in this statement as a result of existing contractual arrangements is accrued as follows: - Not Applicable

(3) Risks attributed to each of the company's protected cells - Not Applicable

D. Uncollectible Reinsurance - Not Applicable

E. Commutation of Ceded Reinsurance - Not Applicable

F. Retroactive Reinsurance - Not Applicable

G. Reinsurance Accounted for as a Deposit - Not Applicable

H. Disclosures for the Transfer of Property and Casualty Run-Off Agreements - Not Applicable

I. Certified Reinsurer Rating Downgraded or Status Subject to Revocation - Not Applicable

J. Reinsurance Agreements Qualifying for Reinsurer Aggregation - Not Applicable

K. Reinsurance Credit - Not Applicable

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. Method Used to Estimate - Not Applicable

B. Method Used to Record - Not Applicable

C. Amount and Percent of Net Retrospective Premiums - Not Applicable

D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act

	(1) Individual	(2) Small Group Employer	(3) Large Group Employer	(4) Other Categories with Rebates	(5) Total
Prior Reporting Year					
(1) Medical loss ratio rebates incurred	\$	\$	\$	\$	\$
(2) Medical loss ratio rebates paid					
(3) Medical loss rebates unpaid					
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	XXX
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	XXX
(6) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$
Current Reporting Year-to-Date					
(7) Medical loss ratio rebates incurred	\$	\$	\$	\$	\$
(8) Medical loss ratio rebates paid					
(9) Medical loss rebates unpaid					
(10) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	XXX
(11) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	XXX
(12) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$

Notes to the Financial Statements

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination (Continued)

E. Calculation of Nonadmitted Retrospective Premium

(1) For Ten Percent (10%) Method of determining nonadmitted retrospective premium

Ten percent of the amount of accrued retrospective premiums not offset by retrospective return premiums, other liabilities to the same party (other than loss and loss adjustment expense reserves), or collateral as permitted by SSAP No. 66-Retrospectively Rated Contracts has been nonadmitted.

a. Total accrued retro premium.....	\$
b. Unsecured amount.....	.....
c. Less: nonadmitted amount (10%).....	.....
d. Less: nonadmitted for any person for whom agents' balances or uncollected premiums are nonadmitted.....	.....
e. Admitted amount (a-c-d).....	<u>\$</u> _____

(2) For Quality Rating Method of determining nonadmitted retrospective premium

(1) Insured's Current Quality Rating	(2) Total Amount	(2) Unsecured Balances	(3) % Nonadmitted Amount (2) x %	(4) Admitted Amount (1 - 3)
a. 1	\$	\$	1 %	\$
b. 2			2 %	
c. 3			5 %	
d. 4			10 %	
e. 5			20 %	
f. 6			100 %	
g. Nonadmitted for any person for whom agents' balances or uncollected premiums are nonadmitted.....				
h. Total (a) through (f) - (g).....	<u>\$</u> _____	<u>\$</u> _____	<u>%</u> <u>\$</u> _____	<u>\$</u> _____

F. Risk-Sharing Provisions of the Affordable Care Act (ACA)

The Company does not write any accident or health insurance premiums that are subject to the Affordable Care Act risk-sharing provisions.

(1) Accident and health insurance premium subject to the Affordable Care Act risk-sharing provisions

Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions?
NO

Notes to the Financial Statements

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination (Continued)

(2) Impact of Risk-Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year

	Amount
a. Permanent ACA Risk Adjustment Program	
Assets	
1. Premium adjustments receivable due to the ACA risk adjustment (including high risk pool payments).....	\$.....
Liabilities	
2. Risk adjustment user fees payable for ACA risk adjustment.....	\$.....
3. Premium adjustments payable due to ACA risk adjustment (including high risk pool premium).....	\$.....
Operations (Revenue & Expense)	
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA risk adjustment.....	\$.....
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid).....	\$.....
b. Transitional ACA Reinsurance Program	
Assets	
1. Amounts recoverable for claims paid due to ACA reinsurance.....	\$.....
2. Amounts recoverable for claims unpaid due to ACA reinsurance (contra liability).....	\$.....
3. Amounts receivable relating to uninsured plans for contributions for ACA reinsurance.....	\$.....
Liabilities	
4. Liabilities for contributions payable due to ACA reinsurance - not reported as ceded premium.....	\$.....
5. Ceded reinsurance premiums payable due to ACA reinsurance.....	\$.....
6. Liabilities for amounts held under uninsured plans contributions for ACA reinsurance.....	\$.....
Operations (Revenue & Expense)	
7. Ceded reinsurance premiums due to ACA reinsurance.....	\$.....
8. Reinsurance recoveries (income statement) due to ACA reinsurance payments or expected payments.....	\$.....
9. ACA reinsurance contributions - not reported as ceded premium.....	\$.....
c. Temporary ACA Risk Corridors Program	
Assets	
1. Accrued retrospective premium due to ACA risk corridors liabilities.....	\$.....
2. Reserve for rate credits or policy experience rating refunds due to ACA risk corridors.....	\$.....
Operations (Revenue & Expense)	
3. Effect of ACA risk corridors on net premium income (paid/received).....	\$.....
4. Effect of ACA risk corridors on change in reserves for rate credits.....	\$.....

Notes to the Financial Statements

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination (Continued)

(3) Roll-forward of prior year ACA risk-sharing provisions for the following asset (gross of any nonadmission) and liability balances, along with the reasons for adjustments to prior year balance

					Differences		Adjustments		Unsettled Balances as of the Reporting Date		
	Accrued During the Prior Year on Business Written Before Dec 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before Dec 31 of the Prior Year		Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)	
	(1) Receivable	(2) (Payable)	(3) Receivable	(4) (Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. Permanent ACA Risk Adjustment Program											
1. Premium adjustments receivable (including high risk pool payments)	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	A	\$.....	\$.....
2. Premium adjustments (payable) (including high risk pool premium).....									B		
3. Subtotal ACA Permanent Risk Adjustment Program.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....		\$.....	\$.....
b. Transitional ACA Reinsurance Program											
1. Amounts recoverable for claims paid.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	C	\$.....	\$.....
2. Amounts recoverable for claims unpaid (contra liability).....									D		
3. Amounts receivable relating to uninsured plans.....									E		
4. Liabilities for contributions payable due to ACA reinsurance - not reported as ceded premium.....									F		
5. Ceded reinsurance premiums payable.....									G		
6. Liability for amounts held under uninsured plans.....									H		
7. Subtotal ACA Transitional Reinsurance Program.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....		\$.....	\$.....
c. Temporary ACA Risk Corridors Program											
1. Accrued retrospective premium.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	I	\$.....	\$.....
2. Reserve for rate credits or policy experience rating refunds.....									J		
3. Subtotal ACA Risk Corridors Program.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....		\$.....	\$.....
d. Total for ACA risk sharing provisions	<u>\$.....</u>	<u>\$.....</u>	<u>\$.....</u>	<u>\$.....</u>	<u>\$.....</u>	<u>\$.....</u>	<u>\$.....</u>	<u>\$.....</u>		<u>\$.....</u>	<u>\$.....</u>

Explanations of Adjustments: None

(4) Roll-forward of risk corridors asset and liability balances by program benefit year

Risk Corridors Program Year					Differences		Adjustments		Unsettled Balances as of the Reporting Date		
	Accrued During the Prior Year on Business Written Before Dec 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before Dec 31 of the Prior Year		Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances	Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)	
	(1) Receivable	(2) (Payable)	(3) Receivable	(4) (Payable)	Receivable	(Payable)	Receivable	(Payable)	Ref	Receivable	(Payable)
a. 2014											
1. Accrued retrospective premium.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	A	\$.....	\$.....
2. Reserve for rate credits or policy experience rating refunds.....									B		
b. 2015											
1. Accrued retrospective premium.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	C	\$.....	\$.....
2. Reserve for rate credits or policy experience rating refunds.....									D		
c. 2016											
1. Accrued retrospective premium.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	E	\$.....	\$.....
2. Reserve for rate credits or policy experience rating refunds.....									F		
d. Total for Risk Corridors	<u>\$.....</u>	<u>\$.....</u>	<u>\$.....</u>	<u>\$.....</u>	<u>\$.....</u>	<u>\$.....</u>	<u>\$.....</u>	<u>\$.....</u>		<u>\$.....</u>	<u>\$.....</u>

Explanations of Adjustments: None

Notes to the Financial Statements

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination (Continued)

(5) ACA risk corridors receivable as of reporting date

Risk Corridor Program Year	(1) Estimated Amount to be Filed or Final Amount Filed with CMS	(2) Nonaccrued Amounts for Impairment or Other Reasons	(3) Amounts Received from CMS	(4) Asset Balance Gross of Nonadmissions (1-2-3)	(5) Non-admitted Amount	(6) Net Admitted Asset (4-5)
a. 2014.....	\$	\$	\$	\$	\$	\$
b. 2015.....
c. 2016.....
d. Total (a+b+c).....	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>

25. Changes in Incurred Losses and Loss Adjustment Expenses

A. Reasons for Changes in the Provision for Incurred Loss and Loss Adjustment Expenses Attributable to Insured Events of Prior Years

Reserves for incurred losses and LAE as of 12/31/20 were \$3,219,798. As of 12/31/21, \$2,258,646 has been paid for incurred losses attributable to insured events of prior years. Reserves remaining for prior years are now \$1,880,000 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been \$918,848 of **unfavorable** development from prior years. Increases and decreases of this nature occur as a result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

B. Significant Changes in Methodologies and Assumptions Used in Calculating the Liability for Unpaid Losses and Loss Adjustment Expenses - Not Applicable

26. Intercompany Pooling Arrangements - Not Applicable

27. Structured Settlements - Not Applicable

28. Health Care Receivables - Not Applicable

29. Participating Policies - Not Applicable

30. Premium Deficiency Reserves

	FIRE	HO / FO	CMP	GL / UMB	CAP / APD	Total
Net unearned premium reserve at 12/31/21	\$ 695,367	\$ 4,181,911	\$ 8,480,109	\$ 211,710	\$ 1,170,756	\$ 14,739,853
Anticipated loss and adjusting (5 year average)	(296,173)	(2,109,313)	(4,587,540)	(121,515)	(654,603)	(7,769,144)
Acquisition costs (at renewal)	-	-	-	-	-	-
Policy maintenance cost (10.0% estimate)	(69,537)	(418,191)	(848,011)	(21,171)	(117,076)	(1,473,985)
Surplus / (Deficiency)	\$ 329,657	\$ 1,654,407	\$ 3,044,558	\$ 69,024	\$ 399,077	\$ 5,496,724

Net earned premium 2017	1,472	4,954	7,052	115	899
Net earned premium 2018	1,423	5,201	7,609	367	1,048
Net earned premium 2019	1,407	5,493	8,910	695	1,269
Net earned premium 2020	1,349	6,083	10,729	396	1,594
Net earned premium 2021	1,254	7,086	12,247	394	2,090
\$ 6,905	\$ 28,817	\$ 46,547	\$ 1,967	\$ 6,900	
Net incurred loss & lae 2017	489	3,708	2,298	169	821
Net incurred loss & lae 2018	337	1,046	3,706	251	324
Net incurred loss & lae 2019	1,100	3,319	5,567	425	548
Net incurred loss & lae 2020	211	2,792	5,961	239	937
Net incurred loss & lae 2021	804	3,670	7,649	45	1,228
\$ 2,941	\$ 14,535	\$ 25,181	\$ 1,129	\$ 3,858	

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. The Company does not anticipate investment income when evaluating the need for premium deficiency reserves.

1. Liability carried for premium deficiency reserves: \$
2. Date of the most recent evaluation of this liability: 12/31/2021
3. Was anticipated investment income utilized in the calculation? NO

31. High Deductibles - Not Applicable

32. Discounting of Liabilities For Unpaid Losses or Unpaid Loss Adjustment Expenses - Not Applicable

33. Asbestos/Environmental Reserves - Not Applicable

34. Subscriber Savings Accounts - Not Applicable

35. Multiple Peril Crop Insurance - Not Applicable

36. Financial Guaranty Insurance - Not Applicable

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 []

If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.

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 [] N/A []

1.3 State Regulating? Ohio.....

1.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes [] No [X]

1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

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.12/31/2017

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.12/31/2017

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).05/10/2018

3.4 By what department or departments? Ohio Department of Insurance.....

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 [] N/A []

3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [] No [X] N/A []

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]

If yes, complete and file the merger history data file with the NAIC.

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 control0.0 %

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
.....
.....
.....

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES

8.1 Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board? Yes [] No [X]

8.2 If response to 8.1 is yes, please identify the name of the DIHC.

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

8.5 Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the reporting entity? Yes [] No [X]

8.6 If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule? Yes [] No [X] N/A []

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 18A 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 [] N/A []

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?
Frank Huang, Consulting Actuary, Merlinos and Associates, 5550 Peachtree Parkway, Suite 600, Peachtree Corners, GA 30092.....

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 _____ 0

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 [] N/A [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).

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

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 [X] No []

23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$..... 8,290

24.1 Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days? Yes [] No [X]

24.2 If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

1 Name of Third-Party	2 Is the Third-Party Agent a Related Party (Yes/No)
.....

INVESTMENT

25.01 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 25.03) Yes [X] No []

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES

25.02 If no, give full and complete information, relating thereto

25.03 For securities 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)

25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. \$.....0

25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$.....0

25.06 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]

25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] NA [X]

25.08 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]

25.09 For the reporting entity's securities lending program, state the amount of the following as of December 31 of the current year:

25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$.....0

25.092 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$.....0

25.093 Total payable for securities lending reported on the liability page \$.....0

26.1 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 24.1 and 25.03). Yes [X] No []

26.2 If yes, state the amount thereof at December 31 of the current year:

26.21 Subject to repurchase agreements \$.....

26.22 Subject to reverse repurchase agreements \$.....

26.23 Subject to dollar repurchase agreements \$.....

26.24 Subject to reverse dollar repurchase agreements \$.....

26.25 Placed under option agreements \$.....

26.26 Letter stock or securities restricted as to sale – excluding FHLB Capital Stock \$.....

26.27 FHLB Capital Stock \$.....58,600

26.28 On deposit with states \$.....

26.29 On deposit with other regulatory bodies \$.....

26.30 Pledged as collateral – excluding collateral pledged to an FHLB \$.....

26.31 Pledged as collateral to FHLB – including assets backing funding agreements \$.....

26.32 Other \$.....

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

27.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]

27.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A [X]

If no, attach a description with this statement.

LINES 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? Yes [] No [X]

27.4 If the response to 27.3 is YES, does the reporting entity utilize:

27.41 Special accounting provision of SSAP No. 108 Yes [] No []

27.42 Permitted accounting practice Yes [] No []

27.43 Other accounting guidance Yes [] No []

27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following: Yes [] No []

- The reporting entity has obtained explicit approval from the domiciliary state.
- Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.
- Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.
- Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No [X]

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

29. Excluding items in Schedule E – Part 3 – Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III – General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping agreements of the NAIC *Financial Condition Examiners Handbook*? Yes [X] No []

29.01 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
Federal Home Loan Bank.....	Cincinnati, Ohio.....
Commercial Savings Bank.....	Orrville, Ohio.....
Wayne Savings Community Bank.....	Wooster, Ohio.....
Manufacturers and Traders Trust co.....	Baltimore, MD.....

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES

29.02 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)

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?

Yes [] No [X]

29.04 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

29.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. [“...that have access to the investment accounts”; “...handle securities”]

1 Name of Firm or Individual	2 Affiliation
Logan Capital Management, Inc.....	U.....
Payden & Rygel Investment Management.....	U.....
The Concord Advisory Group, Ltd.....	U.....

29.0597 For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) manage more than 10% of the reporting entity’s invested assets?

Yes [X] No []

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a “U”) listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity’s invested assets?

Yes [X] No []

29.06 For those firms or individuals listed in the table for 29.05 with an affiliation code of “A” (affiliated) or “U” (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed

30.1 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 [X] No []

30.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
30.2001 411512-73-4.....	HARBOR FD.....	1,033,729
30.2002 921908-60-4.....	VANGUARD SPECIALIZED PORTFOLIO.....	1,025,659
30.2003 922908-67-8.....	VANGUARD INDEX FDS.....	1,022,735
30.2004 722005-62-6.....	PIMCO FDS PAC INVT MGMT SER.....	1,012,922
30.2005 922908-75-1.....	VANGUARD INDEX FDS.....	956,022
30.2006 256206-10-3.....	DODGE & COX FDS.....	748,044
30.2007 31420B-30-0.....	FEDERATED INSTL TR.....	729,724
30.2008 44134R-52-9.....	HOTCHKIS & WILEY FDS.....	718,854
30.2009 921909-76-8.....	VANGUARD STAR FD.....	623,622
30.2010 922031-73-7.....	VANGUARD FIXED INCOME SECS FD INFL.....	480,073
30.2011 922908-73-6.....	VANGUARD INDEX FDS.....	468,514
30.2999 TOTAL		8,819,898

30.3 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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES

31. 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 (+)
31.1 Bonds.....	20,226,654	19,306,365	(920,289)
31.2 Preferred Stocks.....	0		0
31.3 Totals	20,226,654	19,306,365	(920,289)

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

32.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [] No []
 32.2 If the answer to 32.1 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 [] No []
 32.3 If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

33.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed? Yes [] No []
 33.2 If no, list exceptions:

34. By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security:
 a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
 b. Issuer or obligor is current on all contracted interest and principal payments.
 c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? Yes [] No []

35. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:
 a. The security was purchased prior to January 1, 2018.
 b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as an NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
 d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities? Yes [] No []

36. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:
 a. The shares were purchased prior to January 1, 2019.
 b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
 c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.
 d. The fund only or predominantly holds bonds in its portfolio.
 e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.
 f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes [] No []

37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:
 a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
 b. If the investment is with a nonrelated party or nonaffiliated then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
 c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
 d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a -37.c are reported as long-term investments.

Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? Yes [] No [] NA []

GENERAL INTERROGATORIES

OTHER

38.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$

38.2 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.....	\$..... 66,690

39.1 Amount of payments for legal expenses, if any?

\$ 105,845

39.2 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
FISHER MAAS HOWARD LLOYD & WHEELER, P.C.....	\$..... 39,527

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

40.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers, or departments of government during the period covered by this statement.

1 Name	2 Amount Paid
.....

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

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 0

All years prior to most current three years:

1.64 Total premium earned \$ 0

1.65 Total incurred claims \$ 0

1.66 Number of covered lives 0

1.7 Group policies:

Most current three years:

1.71 Total premium earned \$ 0

1.72 Total incurred claims \$ 0

1.73 Number of covered lives 0

All years prior to most current three years:

1.74 Total premium earned \$ 0

1.75 Total incurred claims \$ 0

1.76 Number of covered lives 0

2. Health Test:

	1 Current Year	2 Prior Year
2.1 Premium Numerator	\$ 0	\$ 0
2.2 Premium Denominator	\$ 23,071,419	\$ 20,150,953
2.3 Premium Ratio (2.1/2.2)	.....0.000	.....0.000
2.4 Reserve Numerator	\$ 0	\$ 0
2.5 Reserve Denominator	\$ 20,378,674	\$ 16,210,022
2.6 Reserve Ratio (2.4/2.5)	.....0.000	.....0.000

3.1 Did the reporting entity issue participating policies during the calendar year? Yes [] No [X]

3.2 If yes, provide the amount of premium written for participating and/or non-participating policies during the calendar year:

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 [X] No []

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 []

5.2 If yes, is the commission paid:

5.21 Out of Attorney's-in-fact compensation Yes [] No [] N/A []

5.22 As a direct expense of the exchange Yes [] No [] N/A []

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 []

5.5 If yes, give full information

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

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:
Guy Carpenter - AIR Touchstone Version 7.....

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 1000 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?
.....

6.5 If no, describe any arrangements or mechanisms employed by the reporting entity to supplement its catastrophe reinsurance program or to hedge its exposure to unreinsured catastrophic loss
.....

7.1 Has the reporting entity reinsured any risk with any other entity under a quota share reinsurance contract that includes a provision that would limit the reinsurer's losses below the stated quota share percentage (e.g., a deductible, a loss ratio corridor, a loss cap, an aggregate limit or any similar provisions)?
.....

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

7.3 If yes, does the amount of reinsurance credit taken reflect the reduction in quota share coverage caused by any applicable limiting provision(s)?
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 noncancelable by the reporting entity during the contract term; (b) A limited or conditional cancellation provision under which cancellation triggers an obligation by the reporting entity, or an affiliate of the reporting entity, to enter into a new reinsurance contract with the reinsurer, or an affiliate of the reinsurer; (c) Aggregate stop loss reinsurance coverage; (d) A unilateral right by either party (or both parties) to commute the reinsurance contract, whether conditional or not, except for such provisions which are only triggered by a decline in the credit status of the other party; (e) A provision permitting reporting of losses, or payment of losses, less frequently than on a quarterly basis (unless there is no activity during the period); or (f) Payment schedule, accumulating retentions from multiple years or any features inherently designed to delay timing of the reimbursement to the ceding entity?
Yes [] No []

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 36 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 (b) The entity only engages in a 100% quota share contract with an affiliate and the affiliated or lead company has filed an attestation supplement; or (c) The entity has no external cessions and only participates in an intercompany pool and the affiliated or lead company has filed an attestation supplement?
Yes [] No []
Yes [] No []
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 [X] No [] N/A []

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

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

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

12.2 Of the amount on Line 15.3, Page 2, state the amount that is secured by letters of credit, collateral and other funds..... \$.....

12.3 If the reporting entity underwrites commercial insurance risks, such as workers' compensation, are premium notes or promissory notes accepted from its insureds covering unpaid premiums and/or unpaid losses?..... Yes [] No [X] N/A []

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 [] No [X]

12.6 If yes, state the amount thereof at December 31 of current year:
 12.61 Letters of Credit..... \$.....
 12.62 Collateral and other funds..... \$.....

13.1 Largest net aggregate amount insured in any one risk (excluding workers' compensation):..... \$.....
 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 reporting entity a cedant in a multiple cedant reinsurance contract?..... Yes [] No [X]
 14.2 If yes, please describe the method of allocating and recording reinsurance among the cedants:

 14.3 If the answer to 14.1 is yes, are the methods described in item 14.2 entirely contained in the respective multiple cedant reinsurance contracts?..... Yes [] No []
 14.4 If the answer to 14.3 is no, are all the methods described in 14.2 entirely contained in written agreements?..... Yes [] No []
 14.5 If the answer to 14.4 is no, please explain:

15.1 Has the reporting entity guaranteed any financed premium accounts?..... Yes [] No [X]
 15.2 If yes, give full information

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

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

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

* Disclose type of coverage:

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

GENERAL INTERROGATORIES
PART 2 - PROPERTY & CASUALTY INTERROGATORIES

17.1 Does the reporting entity include amounts recoverable on unauthorized reinsurance in Schedule F – Part 3 that is exempt from the statutory provision for unauthorized reinsurance? Yes [] No [X]

Incurred but not reported losses on contracts in force prior to July 1, 1984, and not subsequently renewed are exempt from the statutory provision for unauthorized reinsurance. Provide the following information for this exemption:

17.11	Gross amount of unauthorized reinsurance in Schedule F – Part 3 exempt from the statutory provision for unauthorized reinsurance.....	\$.....
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.....	\$.....

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. \$.....

19. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes [X] No []

19.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? Yes [] No []

ANNUAL STATEMENT FOR THE YEAR 2021 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 2021	2 2020	3 2019	4 2018	5 2017
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)	3,486,400	2,969,150	2,459,299	2,205,888	1,939,135
2. Property lines (Lines 1, 2, 9, 12, 21 & 26)	2,235,747	2,084,811	1,944,968	1,918,933	1,952,545
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	25,927,922	22,393,066	19,597,388	17,198,178	14,980,133
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)	31,650,069	27,447,027	24,001,655	21,322,999	18,871,813
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)	1,980,085	1,709,794	1,366,751	1,221,415	1,173,914
8. Property lines (Lines 1, 2, 9, 12, 21 & 26)	1,834,825	1,858,343	1,746,060	1,743,608	1,728,388
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	21,006,138	18,178,594	15,888,066	13,865,902	12,460,910
10. All other lines (Lines 6, 10, 13, 14, 15, 23, 24, 28, 29, 30 & 34)	0	0	0	0	0
11. Nonproportional reinsurance lines (Lines 31, 32 & 33)	0	0	0	0	0
12. Total (Line 35)	24,821,048	21,746,731	19,000,877	16,830,925	15,363,212
Statement of Income (Page 4)					
13. Net underwriting gain (loss) (Line 8)	(102,302)	2,377,456	226,495	1,813,801	710,111
14. Net investment gain (loss) (Line 11)	1,681,282	716,760	895,380	435,514	380,634
15. Total other income (Line 15)	39,338	81,681	65,415	49,624	46,379
16. Dividends to policyholders (Line 17)	0	0	0	0	0
17. Federal and foreign income taxes incurred (Line 19)	194,243	704,197	252,493	518,823	374,885
18. Net income (Line 20)	1,424,075	2,471,700	934,797	1,780,116	762,239
Balance Sheet Lines (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3)	47,684,973	42,514,505	36,564,306	33,095,559	28,916,769
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1)	56,243	73,548	300,575	593,644	343,023
20.2 Deferred and not yet due (Line 15.2)	8,603,898	7,809,451	6,481,512	5,444,229	4,731,834
20.3 Accrued retrospective premiums (Line 15.3)	0	0	0	0	0
21. Total liabilities excluding protected cell business (Page 3, Line 26)	23,629,054	19,977,166	17,420,840	15,691,655	13,230,949
22. Losses (Page 3, Line 1)	4,925,490	2,608,468	2,734,127	1,781,440	1,947,680
23. Loss adjustment expenses (Page 3, Line 3)	713,331	611,330	466,966	388,118	215,200
24. Unearned premiums (Page 3, Line 9)	14,739,853	12,990,224	11,394,446	10,167,888	8,984,888
25. Capital paid up (Page 3, Lines 30 & 31)	0	0	0	0	0
26. Surplus as regards policyholders (Page 3, Line 37)	24,055,919	22,537,339	19,143,466	17,403,904	15,685,820
Cash Flow (Page 5)					
27. Net cash from operations (Line 11)	(118,817)	3,842,496	1,726,158	2,632,340	1,795,506
Risk-Based Capital Analysis					
28. Total adjusted capital	24,055,919	22,537,339	19,143,466	17,403,904	15,685,820
29. Authorized control level risk-based capital	2,197,985	2,134,915	1,827,708	1,815,728	1,477,406
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)	53.6	48.1	52.6	50.6	51.2
31. Stocks (Lines 2.1 & 2.2)	33.9	32.7	23.8	23.5	27.8
32. Mortgage loans on real estate (Lines 3.1 and 3.2)	0.0	0.0	0.0	0.0	0.0
33. Real estate (Lines 4.1, 4.2 & 4.3)	1.7	1.9	2.4	2.9	3.5
34. Cash, cash equivalents and short-term investments (Line 5)	10.9	17.3	21.2	23.0	17.5
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	0.0	0.0
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	0.0	0.0
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					
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

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2021	2 2020	3 2019	4 2018	5 2017
Capital and Surplus Accounts (Page 4)					
51. Net unrealized capital gains (losses) (Line 24)	(25,298)	744,276	396,273	(518,834)	595,257
52. Dividends to stockholders (Line 35)	0	0	0	0	0
53. Change in surplus as regards policyholders for the year (Line 38)	1,518,580	3,393,873	1,739,562	1,718,084	935,536
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)	200,485	237,050	189,098	2,875,315	698,005
55. Property lines (Lines 1, 2, 9, 12, 21 & 26)	1,411,861	783,321	869,523	352,255	715,801
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	13,577,414	6,855,762	6,443,345	5,009,021	5,711,235
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)	15,189,760	7,876,133	7,501,966	8,236,591	7,125,041
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)	200,485	237,050	202,699	147,519	698,005
61. Property lines (Lines 1, 2, 9, 12, 21 & 26)	1,411,861	693,866	869,523	352,255	715,801
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27)	8,170,059	6,381,221	6,043,810	4,151,692	4,932,275
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)	9,782,405	7,312,137	7,116,032	4,651,466	6,346,081
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)	52.4	35.7	45.4	28.7	42.9
68. Loss expenses incurred (Line 3)	9.6	10.9	10.3	12.5	10.8
69. Other underwriting expenses incurred (Line 4)	38.4	41.7	43.1	47.3	41.4
70. Net underwriting gain (loss) (Line 8)	(0.4)	11.8	1.3	11.6	4.9
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)	35.5	38.2	40.0	43.7	38.8
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0)	62.0	46.5	55.6	41.1	53.7
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)	103.2	96.5	99.3	96.7	97.9
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)	676	(144)	(521)	(44)	434
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)	3.0	(0.8)	(3.0)	(0.3)	2.9
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)	(17)	(635)	(543)	126	223
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)	(0.1)	(3.6)	(3.5)	0.9	1.7

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3 - *Accounting Changes and Correction of Errors*?

Yes No

If no, please explain

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

SCHEDULE P - ANALYSIS OF LOSSES AND LOSS EXPENSES
SCHEDULE P - PART 1 - SUMMARY

(\$000 Omitted)

Years in Which Premiums Were Earned and Losses Were Incurred	Premiums Earned			Loss and Loss Expense Payments								12 Number of Claims Reported Direct and Assumed	
	1 Direct and Assumed	2 Ceded	3 Net (Cols. 1 - 2)	Loss Payments		Defense and Cost Containment Payments		Adjusting and Other Payments		10 Salvage and Subrogation Received	11 Total Net Paid (Cols. 4 - 5 + 6 - 7 + 8 - 9)		
				4 Direct and Assumed	5 Ceded	6 Direct and Assumed	7 Ceded	8 Direct and Assumed	9 Ceded				
1. Prior	XXX	XXX	XXX	0	0	0	0	0	0	0	0	XXX	
2. 2012	13,276	3,254	10,022	9,013	3,316	172	0	1,109	0	93	6,978	XXX	
3. 2013	13,454	3,244	10,210	5,699	1,208	70	0	997	0	.68	5,558	XXX	
4. 2014	14,142	3,110	11,032	5,281	1,235	281	0	1,134	0	.44	5,461	XXX	
5. 2015	15,113	2,979	12,134	3,923	3	37	0	1,064	0	.88	5,021	XXX	
6. 2016	16,278	3,515	12,763	4,429	311	.41	0	1,343	0	.200	5,502	XXX	
7. 2017	17,971	3,480	14,491	9,197	3,334	111	0	1,473	0	.205	7,447	XXX	
8. 2018	20,141	4,492	15,649	5,648	1,581	119	0	1,431	0	.179	5,617	XXX	
9. 2019	22,773	5,000	17,773	8,483	136	299	0	1,572	0	.212	10,218	XXX	
10. 2020	25,851	5,700	20,151	7,489	466	.262	0	1,871	0	.80	9,156	XXX	
11. 2021	29,829	6,758	23,071	12,807	4,687	244	0	1,274	0	.206	9,638	XXX	
12. Totals	XXX	XXX	XXX	71,969	16,277	1,636	0	13,268	0	1,375	70,596	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	22			
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded	Direct and Assumed	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.	2	0	4	0	0	0	0	0	0	0	0	6	XXX
4.	2	0	3	0	0	0	0	0	0	0	0	5	XXX
5.	1	0	16	0	0	0	0	0	0	.7	0	24	XXX
6.	18	0	9	0	.6	0	0	0	0	.2	0	.35	XXX
7.	.5	0	.16	0	.8	0	0	0	0	.9	0	.38	XXX
8.	2	0	.29	0	1	0	0	0	0	15	0	.47	XXX
9.	480	20	120	0	.39	0	0	0	0	.63	0	682	XXX
10.	1,486	715	151	0	42	0	0	0	0	.79	0	1,043	XXX
11.	6,791	4,035	1,061	500	121	0	0	0	0	320	0	3,758	XXX
12.	8,787	4,770	1,409	500	217	0	0	0	495	0	0	5,638	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		
	Direct and Assumed	Ceded	Net	Direct and Assumed	Ceded	Net	Loss	Loss Expense	Direct and Assumed	Ceded		
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0	0
2.	10,294	3,316	6,978	.77.5	101.9	69.6	0	0	0	0	0	0
3.	.6,772	1,208	.5,564	.50.3	.37.2	.54.5	0	0	0	0	.6	0
4.	.6,701	1,235	.5,466	.47.4	.39.7	.49.5	0	0	0	0	.5	0
5.	.5,048	.3	.5,045	.33.4	.0.1	.41.6	0	0	0	0	.17	.7
6.	.5,848	.311	.5,537	.35.9	.8.8	.43.4	0	0	0	0	.27	.8
7.	10,819	3,334	7,485	60.2	.95.8	.51.7	0	0	0	0	.21	.17
8.	.7,245	1,581	.5,664	.36.0	.35.2	.36.2	0	0	0	0	.31	.16
9.	11,056	.156	10,900	.48.5	.3.1	.61.3	0	0	0	0	.580	102
10.	11,380	1,181	10,199	.44.0	.20.7	.50.6	0	0	0	0	.922	121
11.	22,618	9,222	13,396	75.8	136.5	58.1	0	0	0	0	3,317	441
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	4,926	712	

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 2021 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 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	11 One Year	12 Two Year
1. Prior	140	255	382	212	173	137	338	136	136	136	0	0
2. 2012	5,842	5,705	5,698	5,727	5,768	5,823	5,859	5,859	5,876	5,869	(7)	10
3. 2013	XXX	4,977	4,558	4,521	4,478	4,582	4,567	4,564	4,560	4,567	7	3
4. 2014	XXX	XXX	4,340	4,039	4,209	4,513	4,356	4,331	4,347	4,332	(15)	1
5. 2015	XXX	XXX	XXX	4,380	4,009	4,047	4,022	3,932	3,963	3,974	11	42
6. 2016	XXX	XXX	XXX	XXX	4,531	4,500	4,152	4,139	4,155	4,192	37	53
7. 2017	XXX	XXX	XXX	XXX	XXX	5,968	6,232	6,066	6,057	6,003	(54)	(63)
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	4,645	4,623	4,442	4,218	(224)	(405)
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,923	8,893	9,265	372	342
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	7,700	8,249	549	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,802	XXX	XXX
										12. Totals	676	(17)

SCHEDULE P - PART 3 - SUMMARY

Years in Which Losses Were Incurred	CUMULATIVE PAID NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										11 Number of Claims Closed With Loss Payment	12 Number of Claims Closed Without Loss Payment
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021		
1. Prior	000	104	152	124	132	132	132	136	136	136	XXX	XXX
2. 2012	4,813	5,443	5,525	5,571	5,714	5,783	5,801	5,859	5,869	5,869	XXX	XXX
3. 2013	XXX	3,704	4,447	4,483	4,477	4,571	4,567	4,564	4,560	4,561	XXX	XXX
4. 2014	XXX	XXX	3,476	3,957	3,978	4,533	4,282	4,314	4,321	4,327	XXX	XXX
5. 2015	XXX	XXX	XXX	2,926	3,349	3,881	3,886	3,889	3,958	3,957	XXX	XXX
6. 2016	XXX	XXX	XXX	XXX	3,330	4,280	4,109	4,113	4,127	4,159	XXX	XXX
7. 2017	XXX	XXX	XXX	XXX	XXX	4,301	5,887	5,960	6,007	5,974	XXX	XXX
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	3,546	3,785	3,933	4,186	XXX	XXX
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	6,978	8,482	8,646	XXX	XXX
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	5,893	7,285	XXX	XXX
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	8,364	XXX	XXX

SCHEDULE P - PART 4 - SUMMARY

Years in Which Losses Were Incurred	BULK AND IBNR RESERVES ON NET LOSSES AND DEFENSE AND COST CONTAINMENT EXPENSES REPORTED AT YEAR END (\$000 OMITTED)										10 2021
	1 2012	2 2013	3 2014	4 2015	5 2016	6 2017	7 2018	8 2019	9 2020	10 2021	
1. Prior	.46	.61	55	18	.5	5	.56	0	0	0	0
2. 2012	408	.71	65	.45	10	0	16	0	3	0	0
3. 2013	XXX	321	41	6	0	10	0	0	0	0	4
4. 2014	XXX	XXX	.395	.74	.67	0	.20	0	.19	0	3
5. 2015	XXX	XXX	XXX	414	147	.67	.37	1	4	4	16
6. 2016	XXX	XXX	XXX	XXX	347	147	.13	4	8	8	9
7. 2017	XXX	XXX	XXX	XXX	XXX	347	124	.21	.24	24	16
8. 2018	XXX	XXX	XXX	XXX	XXX	XXX	324	320	.72	29	
9. 2019	XXX	XXX	XXX	XXX	XXX	XXX	XXX	420	129	120	
10. 2020	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	428	151	
11. 2021	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	561	

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE MENNONITE MUTUAL INSURANCE COMPANY

SCHEDULE T - EXHIBIT OF PREMIUMS WRITTEN

Allocated By States And Territories

States, etc.	1 Active Status (a)	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. 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	13,124,792	11,966,182	0	8,948,512	.11,928,649	5,006,994	22,493
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	18,464,040	17,767,754	0	6,226,818	.9,624,740	4,619,447	31,643
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	XXX		31,588,832	29,733,936	0	15,175,330	21,553,389	9,626,441	54,136
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

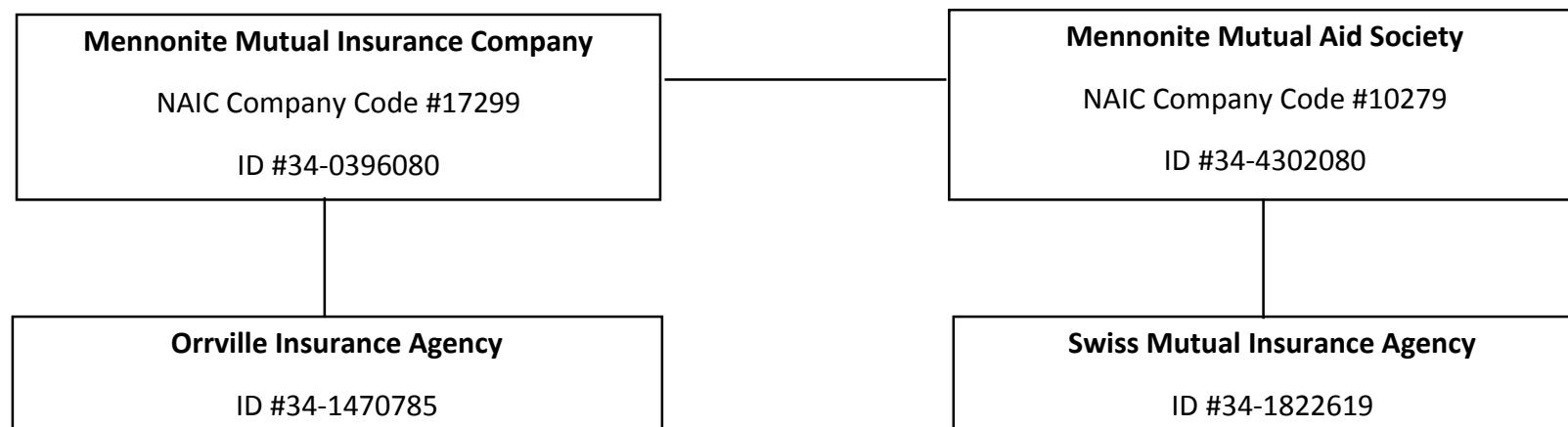
(a) Active Status Counts

L – Licensed or Chartered – Licensed insurance carrier or domiciled RRG 3 R – Registered – Non-domiciled RRGs 0
E – Eligible – Reporting entities eligible or approved to write surplus lines in the state (other
than their state of domicile – See DSLI) 0 Q – Qualified – Qualified or accredited reinsurer 0
D – Domestic Surplus Lines Insurer (DSLI) – Reporting entities authorized to write surplus
lines in the state of domicile 0 N – None of the above – Not allowed to write business in the state 54

(b) Explanation of basis of allocation of premiums by states, etc.

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

**MENNONITE MUTUAL GROUP
ORGANIZATIONAL CHART
NAIC Group Code #4780**



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