



PROPERTY AND CASUALTY COMPANIES - ASSOCIATION EDITION

**ANNUAL STATEMENT**  
For the Year Ended December 31, 2024  
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

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## OTHER OFFICERS

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## OTHER OFFICERS

## DIRECTORS OR TRUSTEES

Robert Eugene Aschliman George Bixler Jr Paul Bontrager Donald Dravenstott  
Music Supervisor Patrick H. Brumley Technical Director James Peter Carter

State of ..... Ohio .....

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.

Thomas A Troyer  
President & CEO

George Bixler Jr  
Secretary

George Bixler Jr  
Treasurer

Subscribed and sworn to before me  
this 25th day of

Is this an original file?

r Yes [ X ] No [ ]

a. Is this  
b. If no:

b. If no.

2. Date filed

**3. Number of pages attached**

Melanie J Alger, Notary Public  
April 18th, 2026

Subscribed and sworn to before me  
this 25th day of February, 2025 \_\_\_\_\_

**ANNUAL STATEMENT FOR THE YEAR 2024 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).....	24,196,594		24,196,594	20,364,707
2. Stocks (Schedule D):				
2.1 Preferred stocks .....	0		0	0
2.2 Common stocks .....	11,650,224	100	11,650,124	13,119,248
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 \$ ..... 0 encumbrances).....	528,001		528,001	549,522
4.2 Properties held for the production of income (less \$ ..... 0 encumbrances) .....			0	0
4.3 Properties held for sale (less \$ ..... 0 encumbrances) .....			0	0
5. Cash (\$ ..... (972,025) , Schedule E-Part 1), cash equivalents (\$ ..... 3,886,066 , Schedule E-Part 2) and short-term investments (\$ ..... 0 , Schedule DA).....	2,914,041		2,914,041	339,882
6. Contract loans (including \$ ..... premium notes).....			0	0
7. Derivatives (Schedule DB).....	0		0	0
8. Other invested assets (Schedule BA).....	0	0	0	0
9. Receivables for securities .....	30,000		30,000	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) .....	39,318,860	100	39,318,760	34,373,359
13. Title plants less \$ ..... charged off (for Title insurers only).....			0	0
14. Investment income due and accrued .....	166,936		166,936	144,203
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	81,744		81,744	133,483
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums).....	12,846,219	22,320	12,823,899	11,370,641
15.3 Accrued retrospective premiums (\$ ..... ) and contracts subject to redetermination (\$ ..... ) .....			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	1,568,951		1,568,951	1,647,803
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 .....	834,371		834,371	710,838
19. Guaranty funds receivable or on deposit .....			0	0
20. Electronic data processing equipment and software .....	77,373	56,955	20,418	48,739
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....	114,776	114,776	0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates .....			0	0
23. Receivables from parent, subsidiaries and affiliates .....			0	2,000
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).....	55,009,230	194,151	54,815,079	48,431,066
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....			0	0
28. Total (Lines 26 and 27) .....	55,009,230	194,151	54,815,079	48,431,066
<b>DETAILS OF WRITE-INS</b>				
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 2024 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)	6,917,967	6,552,896
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)	1,481,301	1,271,093
4. Commissions payable, contingent commissions and other similar charges	3,503,960	2,312,295
5. Other expenses (excluding taxes, licenses and fees)	38,180	80,389
6. Taxes, licenses and fees (excluding federal and foreign income taxes)	480,773	380,753
7.1 Current federal and foreign income taxes (including \$ (20,641) on realized capital gains (losses))	(680,978)	(705,746)
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 \$ 1,649,389 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)	21,226,450	18,699,750
10. Advance premium	354,097	313,930
11. Dividends declared and unpaid:		
11.1 Stockholders	0	0
11.2 Policyholders	0	0
12. Ceded reinsurance premiums payable (net of ceding commissions)	614,716	1,208,056
13. Funds held by company under reinsurance treaties (Schedule F, Part 3, Column 20)	35,503	0
14. Amounts withheld or retained by company for account of others	7,174	0
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)	33,943,640	30,148,919
27. Protected cell liabilities	0	0
28. Total liabilities (Lines 26 and 27)	33,943,640	30,148,919
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)	20,871,439	18,282,147
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)	20,871,439	18,282,147
38. Totals (Page 2, Line 28, Col. 3)	54,815,079	48,431,066
<b>DETAILS OF WRITE-INS</b>		
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 2024 OF THE MENNONITE MUTUAL INSURANCE COMPANY**

**STATEMENT OF INCOME**

	1 Current Year	2 Prior Year
<b>UNDERWRITING INCOME</b>		
1. Premiums earned (Part 1, Line 35, Column 4) .....	29,838,051	27,406,086
DEDUCTIONS:		
2. Losses incurred (Part 2, Line 35, Column 7) .....	15,217,027	20,708,811
3. Loss adjustment expenses incurred (Part 3, Line 25, Column 1) .....	2,812,322	2,413,654
4. Other underwriting expenses incurred (Part 3, Line 25, Column 2) .....	12,124,808	10,518,638
5. Aggregate write-ins for underwriting deductions .....	0	0
6. Total underwriting deductions (Lines 2 through 5) .....	30,154,157	33,641,103
7. Net income of protected cells .....	0	0
8. Net underwriting gain (loss) (Line 1 minus Line 6 plus Line 7) .....	(316,106)	(6,235,017)
<b>INVESTMENT INCOME</b>		
9. Net investment income earned (Exhibit of Net Investment Income, Line 17) .....	1,105,926	745,711
10. Net realized capital gains (losses) less capital gains tax of \$ (20,011) (Exhibit of Capital Gains (Losses)) .....	(77,648)	(397,137)
11. Net investment gain (loss) (Lines 9 + 10) .....	1,028,278	348,574
<b>OTHER INCOME</b>		
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 .....	66,170	50,326
14. Aggregate write-ins for miscellaneous income .....	(24,914)	(10,203)
15. Total other income (Lines 12 through 14) .....	41,256	40,123
16. Net income before dividends to policyholders, after capital gains tax and before all other federal and foreign income taxes (Lines 8 + 11 + 15) .....	753,428	(5,846,320)
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) .....	753,428	(5,846,320)
19. Federal and foreign income taxes incurred .....	(86,592)	(445,207)
20. Net income (Line 18 minus Line 19) (to Line 22) .....	840,020	(5,401,113)
<b>CAPITAL AND SURPLUS ACCOUNT</b>		
21. Surplus as regards policyholders, December 31 prior year (Page 4, Line 39, Column 2) .....	18,282,147	21,868,651
22. Net income (from Line 20) .....	840,020	(5,401,113)
23. Net transfers (to) from Protected Cell accounts .....	0	0
24. Change in net unrealized capital gains or (losses) less capital gains tax of \$ 324,131 .....	1,219,351	1,540,788
25. Change in net unrealized foreign exchange capital gain (loss) .....	0	0
26. Change in net deferred income tax .....	(87,584)	722,399
27. Change in nonadmitted assets (Exhibit of Nonadmitted Assets, Line 28, Col. 3) .....	617,505	(448,578)
28. Change in provision for reinsurance (Page 3, Line 16, Column 2 minus Column 1) .....	0	0
29. Change in surplus notes .....	0	0
30. Surplus (contributed to) withdrawn from protected cells .....	0	0
31. Cumulative effect of changes in accounting principles .....	0	0
32. Capital changes:		
32.1 Paid in .....	0	0
32.2 Transferred from surplus (Stock Dividend) .....	0	0
32.3 Transferred to surplus .....	0	0
33. Surplus adjustments:		
33.1 Paid in .....	0	0
33.2 Transferred to capital (Stock Dividend) .....	0	0
33.3 Transferred from capital .....	0	0
34. Net remittances from or (to) Home Office .....	0	0
35. Dividends to stockholders .....	0	0
36. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Column 2 minus Column 1) .....	0	0
37. Aggregate write-ins for gains and losses in surplus .....	0	0
38. Change in surplus as regards policyholders for the year (Lines 22 through 37) .....	2,589,292	(3,586,504)
39. Surplus as regards policyholders, December 31 current year (Line 21 plus Line 38) (Page 3, Line 37) .....	20,871,439	18,282,147
<b>DETAILS OF WRITE-INS</b>		
0501. .....	0	0
0502. .....	0	0
0503. .....	0	0
0598. Summary of remaining write-ins for Line 5 from overflow page .....	0	0
0599. Totals (Lines 0501 through 0503 plus 0598) (Line 5 above) .....	0	0
1401. MISC.....	(24,914)	(10,203)
1402. .....	0	0
1403. .....	0	0
1498. Summary of remaining write-ins for Line 14 from overflow page .....	0	0
1499. Totals (Lines 1401 through 1403 plus 1498) (Line 14 above) .....	(24,914)	(10,203)
3701. Workers Comp Deposit Balance True-up.....	0	0
3702. .....	0	0
3703. .....	0	0
3798. Summary of remaining write-ins for Line 37 from overflow page .....	0	0
3799. Totals (Lines 3701 through 3703 plus 3798) (Line 37 above) .....	0	0

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MENNONITE MUTUAL INSURANCE COMPANY**

**CASH FLOW**

	1 Current Year	2 Prior Year
<b>Cash from Operations</b>		
1. Premiums collected net of reinsurance .....	30,395,563	29,133,172
2. Net investment income .....	1,122,904	798,269
3. Miscellaneous income .....	41,256	40,123
4. Total (Lines 1 through 3) .....	31,559,723	29,971,564
5. Benefit and loss related payments .....	14,773,104	17,165,383
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts .....	0	0
7. Commissions, expenses paid and aggregate write-ins for deductions .....	13,348,597	12,746,916
8. Dividends paid to policyholders .....	0	0
9. Federal and foreign income taxes paid (recovered) net of \$ (105,568) tax on capital gains (losses) .....	(259,767)	13,543
10. Total (Lines 5 through 9) .....	27,861,934	29,925,842
11. Net cash from operations (Line 4 minus Line 10) .....	3,697,789	45,722
<b>Cash from Investments</b>		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds .....	11,816,699	12,301,190
12.2 Stocks .....	3,547,640	1,096,146
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 .....	0	0
12.7 Miscellaneous proceeds .....	630	1
12.8 Total investment proceeds (Lines 12.1 to 12.7) .....	15,364,969	13,397,337
13. Cost of investments acquired (long-term only):		
13.1 Bonds .....	15,885,733	13,489,181
13.2 Stocks .....	398,444	1,399,065
13.3 Mortgage loans .....	0	0
13.4 Real estate .....	14,821	26,484
13.5 Other invested assets .....	0	0
13.6 Miscellaneous applications .....	30,000	1
13.7 Total investments acquired (Lines 13.1 to 13.6) .....	16,328,998	14,914,731
14. Net increase/(decrease) in contract loans and premium notes .....	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14) .....	(964,029)	(1,517,394)
<b>Cash from Financing and Miscellaneous Sources</b>		
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) .....	(159,601)	(105,217)
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6) .....	(159,601)	(105,217)
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) .....	2,574,159	(1,576,888)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year .....	339,882	1,916,771
19.2 End of year (Line 18 plus Line 19.1) .....	2,914,041	339,882

**ANNUAL STATEMENT FOR THE YEAR 2024 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 .....	1,181,017	789,467	818,717	1,151,767
2.1 Allied lines .....	0	0	0	0
2.2 Multiple peril crop .....	0	0	0	0
2.3 Federal flood .....	0	0	0	0
2.4 Private crop .....	0	0	0	0
2.5 Private flood .....	0	0	0	0
3. Farmowners multiple peril .....	10,367,101	5,531,108	6,364,195	9,534,014
4. Homeowners multiple peril .....	0	0	0	0
5.1 Commercial multiple peril (non-liability portion) .....	13,128,470	7,224,295	8,902,653	11,450,112
5.2 Commercial multiple peril (liability portion) .....	4,648,968	3,221,282	3,231,864	4,638,386
6. Mortgage guaranty .....	0	0	0	0
8. Ocean marine .....	0	0	0	0
9.1 Inland marine .....	0	0	0	0
9.2 Pet insurance plans .....	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
13.1 Comprehensive (hospital and medical) individual .....	0	0	0	0
13.2 Comprehensive (hospital and medical) group .....	0	0	0	0
14. Credit accident and health (group and individual) .....	0	0	0	0
15.1 Vision only .....	0	0	0	0
15.2 Dental only .....	0	0	0	0
15.3 Disability income .....	0	0	0	0
15.4 Medicare supplement .....	0	0	0	0
15.5 Medicaid Title XIX .....	0	0	0	0
15.6 Medicare Title XVIII .....	0	0	0	0
15.7 Long-term care .....	0	0	0	0
15.8 Federal employees health benefits plan .....	0	0	0	0
15.9 Other health .....	0	0	0	0
16. Workers' compensation .....	0	0	0	0
17.1 Other liability-occurrence .....	570,561	463,036	469,996	563,601
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 Private passenger auto no-fault (personal injury protection) .....	0	0	0	0
19.2 Other private passenger auto liability .....	0	0	0	0
19.3 Commercial auto no-fault (personal injury protection) .....	0	0	0	0
19.4 Other commercial auto liability .....	1,661,831	1,003,896	974,966	1,690,761
21.1 Private passenger auto physical damage .....	0	0	0	0
21.2 Commercial auto physical damage .....	806,803	466,666	464,059	809,410
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 .....	32,364,751	18,699,750	21,226,450	29,838,051
<b>DETAILS OF WRITE-INS</b>				
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 2024 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 .....	818,717				818,717
2.1 Allied lines .....					0
2.2 Multiple peril crop .....					0
2.3 Federal flood .....					0
2.4 Private crop .....					0
2.5 Private flood .....					0
3. Farmowners multiple peril .....	6,364,195				6,364,195
4. Homeowners multiple peril .....					0
5.1 Commercial multiple peril (non-liability portion) .....	8,902,653				8,902,653
5.2 Commercial multiple peril (liability portion) .....	3,231,864				3,231,864
6. Mortgage guaranty .....					0
8. Ocean marine .....					0
9.1 Inland marine .....					0
9.2 Pet insurance plans .....					0
10. Financial guaranty .....					0
11.1 Medical professional liability-occurrence .....					0
11.2 Medical professional liability-claims-made .....					0
12. Earthquake .....					0
13.1 Comprehensive (hospital and medical) individual .....					0
13.2 Comprehensive (hospital and medical) group .....					0
14. Credit accident and health (group and individual) .....					0
15.1 Vision only .....					0
15.2 Dental only .....					0
15.3 Disability income .....					0
15.4 Medicare supplement .....					0
15.5 Medicaid title XIX .....					0
15.6 Medicare title XVIII .....					0
15.7 Long-term care .....					0
15.8 Federal employees health benefits plan .....					0
15.9 Other health.....					0
16. Workers' compensation .....					0
17.1 Other liability-occurrence .....	469,996				469,996
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 Private passenger auto no-fault (personal injury protection) .....					0
19.2 Other private passenger auto liability .....					0
19.3 Commercial auto no-fault (personal injury protection) .....					0
19.4 Other commercial auto liability .....	974,966				974,966
21.1 Private passenger auto physical damage .....					0
21.2 Commercial auto physical damage .....	464,059				464,059
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 .....	21,226,450	0	0	0	21,226,450
36. Accrued retrospective premiums based on experience .....					
37. Earned but unbilled premiums .....					
38. Balance (Sum of Lines 35 through 37) .....					21,226,450
<b>DETAILS OF WRITE-INS</b>					
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 2024 OF THE MENNONITE MUTUAL INSURANCE COMPANY

## UNDERWRITING AND INVESTMENT EXHIBIT

## PART 1B - PREMIUMS WRITTEN

Line of Business	1	Reinsurance Assumed		Reinsurance Ceded		6 Net Premiums Written Cols. 1+2+3-4-5
	Direct Business (a)	2 From Affiliates	3 From Non-Affiliates	4 To Affiliates	5 To Non-Affiliates	
1. Fire .....	1,555,219				374,202	1,181,017
2.1 Allied lines .....						0
2.2 Multiple peril crop .....						0
2.3 Federal flood .....						0
2.4 Private crop .....						0
2.5 Private flood .....	261,338				261,338	0
3. Farmowners multiple peril .....	14,310,267				3,943,166	.10,367,101
4. Homeowners multiple peril .....						0
5.1 Commercial multiple peril (non-liability portion) .....	19,055,697				.5,927,227	.13,128,470
5.2 Commercial multiple peril (liability portion) .....	7,069,888				2,420,920	.4,648,968
6. Mortgage guaranty .....						0
8. Ocean marine .....						0
9.1 Inland marine .....						0
9.2 Pet insurance plans .....						0
10. Financial guaranty .....						0
11.1 Medical professional liability-occurrence .....						0
11.2 Medical professional liability-claims-made .....						0
12. Earthquake .....						0
13.1 Comprehensive (hospital and medical) individual .....						0
13.2 Comprehensive (hospital and medical) group .....						0
14. Credit accident and health (group and individual) .....						0
15.1 Vision only .....						0
15.2 Dental only .....						0
15.3 Disability income .....						0
15.4 Medicare supplement .....						0
15.5 Medicaid Title XIX .....						0
15.6 Medicare Title XVIII .....						0
15.7 Long-term care .....						0
15.8 Federal employees health benefits plan .....						0
15.9 Other health .....						0
16. Workers' compensation .....						0
17.1 Other liability-occurrence .....	1,937,737			48,452	1,415,628	.570,561
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 Private passenger auto no-fault (personal injury protection) .....						0
19.2 Other private passenger auto liability .....						0
19.3 Commercial auto no-fault (personal injury protection) .....						0
19.4 Other commercial auto liability .....	2,211,149				549,318	.1,661,831
21.1 Private passenger auto physical .....						0
21.2 Commercial auto physical damage .....	1,069,775				262,972	.806,803
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 .....	47,471,070	0	48,452	0	15,154,771	32,364,751

## 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 2024 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			5 Net Losses Unpaid Current Year (Part 2A, Col. 8)	6 Net Losses Unpaid Prior Year	7 Losses Incurred Current Year (Cols. 4 + 5 - 6)	8 Percentage of Losses Incurred (Col. 7, Part 2) to Premiums Earned (Col. 4, Part 1)
		1 Reinsurance Assumed	2 Reinsurance Recovered	4 Net Payments (Cols. 1 + 2 - 3)				
1. Fire .....	342,725			342,725	109,855	119,007	333,573	29.0
2.1 Allied lines .....				0	0	0	0	0.0
2.2 Multiple peril crop .....				0	0	0	0	0.0
2.3 Federal flood .....				0	0	0	0	0.0
2.4 Private crop .....				0	0	0	0	0.0
2.5 Private flood .....	75,096		75,096	0	10,000	0	10,000	0.0
3. Farmowners multiple peril .....	8,673,176	3,123,557		5,549,619	1,785,554	1,673,079	5,662,094	59.4
4. Homeowners multiple peril .....				0	0	0	0	0.0
5.1 Commercial multiple peril (non-liability portion) .....	10,276,184		4,208,066	6,068,118	2,889,521	1,581,909	7,375,729	64.4
5.2 Commercial multiple peril (liability portion) .....	1,231,513			1,231,513	1,116,105	2,069,800	277,818	6.0
6. Mortgage guaranty .....				0	0	0	0	0.0
8. Ocean marine .....				0	0	0	0	0.0
9.1 Inland marine .....				0	0	0	0	0.0
9.2 Pet insurance plans .....				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
13.1. Comprehensive (hospital and medical) individual .....				0	0	0	0	0.0
13.2. Comprehensive (hospital and medical) group .....				0	0	0	0	0.0
14. Credit accident and health (group and individual) .....				0	0	0	0	0.0
15.1. Vision only .....				0	0	0	0	0.0
15.2. Dental only .....				0	0	0	0	0.0
15.3. Disability income .....				0	0	0	0	0.0
15.4. Medicare supplement .....				0	0	0	0	0.0
15.5. Medicaid Title XIX .....				0	0	0	0	0.0
15.6. Medicare Title XVIII .....				0	0	0	0	0.0
15.7. Long-term care .....				0	0	0	0	0.0
15.8. Federal employees health benefits plan .....				0	0	0	0	0.0
15.9. Other health .....				0	0	0	0	0.0
16. Workers' compensation .....				0	0	0	0	0.0
17.1. Other liability-occurrence .....	24,691	29,695		54,386	287,972	135,393	206,965	36.7
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. Private passenger auto no-fault (personal injury protection) .....				0	0	0	0	0.0
19.2. Other private passenger auto liability .....				0	0	0	0	0.0
19.3. Commercial auto no-fault (personal injury protection) .....				0	0	0	0	0.0
19.4. Other commercial auto liability .....	490,504			490,504	200,668	682,668	8,504	0.5
21.1. Private passenger auto physical damage .....				0	0	0	0	0.0
21.2. Commercial auto physical damage .....	1,115,091			1,115,091	518,293	291,041	1,342,343	165.8
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 .....	22,228,980	29,695	7,406,719	14,851,956	6,917,967	6,552,896	15,217,027	51.0
<b>DETAILS OF WRITE-INS</b>								
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 2024 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 .....	83,391			83,391	26,464			109,855	69,809
2.1 Allied lines .....				0				0	0
2.2 Multiple peril crop .....				0				0	0
2.3 Federal flood .....				0				0	0
2.4 Private crop .....				0				0	0
2.5 Private flood .....	10,000			10,000				10,000	0
3. Farmowners multiple peril .....	3,298,858		1,756,480	1,542,378	543,176			1,785,554	254,899
4. Homeowners multiple peril .....				0				0	0
5.1 Commercial multiple peril (non-liability portion) .....	2,715,578		722,659	1,992,919	2,396,601		1,500,000	2,889,521	783,261
5.2 Commercial multiple peril (liability portion) .....	1,116,105			1,116,105				1,116,105	162,178
6. Mortgage guaranty .....				0				0	0
8. Ocean marine .....				0				0	0
9.1 Inland marine .....				0				0	0
9.2 Pet insurance plans .....				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
13.1 Comprehensive (hospital and medical) individual .....				0				(a)	0
13.2 Comprehensive (hospital and medical) group .....				0				(a)	0
14. Credit accident and health (group and individual) .....				0				0	0
15.1 Vision only .....				0				(a)	0
15.2 Dental only .....				0				(a)	0
15.3 Disability income .....				0				(a)	0
15.4 Medicare supplement .....				0				(a)	0
15.5 Medicaid Title XIX .....				0				(a)	0
15.6 Medicare Title XVIII .....				0				(a)	0
15.7 Long-term care .....				0				(a)	0
15.8 Federal employees health benefits plan .....				0				(a)	0
15.9 Other health .....				0				(a)	0
16. Workers' compensation .....				0				0	0
17.1 Other liability-occurrence .....	510,000		22,498	400,000	132,498	308,954	46,520	200,000	287,972
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 Private passenger auto no-fault (personal injury protection) .....				0				0	0
19.2 Other private passenger auto liability .....				0				0	0
19.3 Commercial auto no-fault (personal injury protection) .....				0				0	0
19.4 Other commercial auto liability .....	115,079			115,079	85,589			200,668	77,660
21.1 Private passenger auto physical damage .....				0				0	0
21.2 Commercial auto physical damage .....	506,337			506,337	11,956			518,293	31,717
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
35. TOTALS .....	8,355,348		22,498	2,879,139	5,498,707	3,372,740	46,520	2,000,000	6,917,967
<b>DETAILS OF WRITE-INS</b>									1,481,301
3401. ....									
3402. ....									
3403. ....									
3498. Sum. of remaining write-ins for Line 34 from overflow page .....	0		0	0	0	0	0	0	0
3499. Totals (Lines 3401 through 3403 + 3498) (Line 34 above) .....	0		0	0	0	0	0	0	0

(a) Including \$ ..... for present value of life indemnity claims reported in lines 13 and 15.

**ANNUAL STATEMENT FOR THE YEAR 2024 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 .....	927,600	.0	.0	927,600
1.2 Reinsurance assumed .....	4,129	.0	.0	4,129
1.3 Reinsurance ceded .....	.0	.0	.0	0
1.4 Net claim adjustment services (1.1 + 1.2 - 1.3) .....	931,729	.0	.0	931,729
2. Commission and brokerage:				
2.1 Direct, excluding contingent .....	.0	6,965,437	.0	6,965,437
2.2 Reinsurance assumed, excluding contingent .....	.0	20,065	.0	20,065
2.3 Reinsurance ceded, excluding contingent .....	.0	1,113,752	.0	1,113,752
2.4 Contingent-direct .....	.0	1,305,001	.0	1,305,001
2.5 Contingent-reinsurance assumed .....	.0	.0	.0	0
2.6 Contingent-reinsurance ceded .....	.0	361,461	.0	361,461
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	6,815,290	.0	6,815,290
3. Allowances to manager and agents .....	.0	.0	.0	0
4. Advertising .....	.0	82,119	.0	82,119
5. Boards, bureaus and associations .....	.0	250,171	.0	250,171
6. Surveys and underwriting reports .....	.0	114,131	.0	114,131
7. Audit of assureds' records .....	.0	.0	.0	0
8. Salary and related items:				
8.1 Salaries .....	827,134	1,833,480	96,500	2,757,114
8.2 Payroll taxes .....	62,571	138,698	7,300	208,569
9. Employee relations and welfare .....	209,830	465,122	24,480	699,432
10. Insurance .....	13,030	28,883	1,520	43,433
11. Directors' fees .....	49,721	121,638	6,215	177,574
12. Travel and travel items .....	19,878	74,046	5,466	99,390
13. Rent and rent items .....	37,538	101,785	5,053	144,376
14. Equipment .....	27,963	61,985	3,262	93,210
15. Cost or depreciation of EDP equipment and software .....	491,176	918,935	2,190	1,412,301
16. Printing and stationery .....	9,984	28,553	1,398	39,935
17. Postage, telephone and telegraph, exchange and express .....	28,234	80,750	3,953	112,937
18. Legal and auditing .....	90,096	251,122	19,166	360,384
19. Totals (Lines 3 to 18) .....	1,867,155	4,551,418	176,503	6,595,076
20. Taxes, licenses and fees:				
20.1 State and local insurance taxes deducting guaranty association credits of \$ .....	.0	70,500	.0	70,500
20.2 Insurance department licenses and fees .....	.0	73,313	.0	73,313
20.3 Gross guaranty association assessments .....	.0	.0	.0	0
20.4 All other (excluding federal and foreign income and real estate) .....	.0	573,604	.0	573,604
20.5 Total taxes, licenses and fees (20.1 + 20.2 + 20.3 + 20.4) .....	0	717,417	.0	717,417
21. Real estate expenses .....	.0	.0	95,455	95,455
22. Real estate taxes .....	.0	.0	18,393	18,393
23. Reimbursements by uninsured plans .....	.0	.0	.0	0
24. Aggregate write-ins for miscellaneous expenses .....	13,438	40,683	0	54,121
25. Total expenses incurred .....	2,812,322	12,124,808	290,351	(a) 15,227,481
26. Less unpaid expenses-current year .....	1,481,301	4,030,086	.0	5,511,387
27. Add unpaid expenses-prior year .....	1,271,093	2,773,435	.0	4,044,528
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) .....	2,602,114	10,868,157	290,351	13,760,622
<b>DETAILS OF WRITE-INS</b>				
2401. DONATIONS .....	13,438	40,315	.0	53,753
2402. MISC .....	.0	368	.0	368
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) .....	13,438	40,683	0	54,121

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

**ANNUAL STATEMENT FOR THE YEAR 2024 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) 252,976	245,102
1.1 Bonds exempt from U.S. tax .....	(a) .85,845	.77,893
1.2 Other bonds (unaffiliated) .....	(a) 466,652	505,239
1.3 Bonds of affiliates .....	(a) 0	0
2.1 Preferred stocks (unaffiliated) .....	(b) 0	0
2.11 Preferred stocks of affiliates .....	(b) 0	0
2.2 Common stocks (unaffiliated) .....	369,836	365,212
2.21 Common stocks of affiliates .....	0	0
3. Mortgage loans .....	(c) 0	0
4. Real estate .....	(d) 144,000	144,000
5. Contract loans .....	0	0
6. Cash, cash equivalents and short-term investments .....	(e) .90,577	.90,577
7. Derivative instruments .....	(f) 0	0
8. Other invested assets .....	0	0
9. Aggregate write-ins for investment income .....	0	4,594
10. Total gross investment income .....	1,409,886	1,432,617
11. Investment expenses .....	(g) 290,349	0
12. Investment taxes, licenses and fees, excluding federal income taxes .....	(g) 0	0
13. Interest expense .....	(h) 0	0
14. Depreciation on real estate and other invested assets .....	(i) 36,342	0
15. Aggregate write-ins for deductions from investment income .....	0	0
16. Total deductions (Lines 11 through 15) .....	326,691	0
17. Net investment income (Line 10 minus Line 16) .....	1,105,926	0
<b>DETAILS OF WRITE-INS</b>		
0901. NAMICO .....	0	4,594
0902. MISC .....	0	0
0903. .....	0	0
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	4,594
1501. .....	0	0
1502. .....	0	0
1503. .....	0	0
1598. Summary of remaining write-ins for Line 15 from overflow page .....	0	0
1599. Totals (Lines 1501 through 1503 plus 1598) (Line 15 above) .....	0	0

(a) Includes \$ 23,439 accrual of discount less \$ 26,808 amortization of premium and less \$ 38,981 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 \$ interest on encumbrances.  
 (e) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ paid for accrued interest on purchases.  
 (f) Includes \$ accrual of discount less \$ amortization of premium.  
 (g) Includes \$ 290,349 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 \$ 36,342 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 .....	(130,265)	0	(130,265)	0	0
1.1 Bonds exempt from U.S. tax .....	(6,569)	0	(6,569)	0	0
1.2 Other bonds (unaffiliated) .....	(58,433)	0	(58,433)	(39,612)	0
1.3 Bonds of affiliates .....	0	0	0	0	0
2.1 Preferred stocks (unaffiliated) .....	0	0	0	0	0
2.11 Preferred stocks of affiliates .....	0	0	0	0	0
2.2 Common stocks (unaffiliated) .....	96,978	0	96,978	1,583,094	0
2.21 Common stocks of affiliates .....	0	0	0	0	0
3. Mortgage loans .....	0	0	0	0	0
4. Real estate .....	0	0	0	0	0
5. Contract loans .....	0	0	0	0	0
6. Cash, cash equivalents and short-term investments .....	0	0	0	0	0
7. Derivative instruments .....	0	0	0	0	0
8. Other invested assets .....	0	0	0	0	0
9. Aggregate write-ins for capital gains (losses) .....	0	0	0	0	0
10. Total capital gains (losses) .....	(98,289)	0	(98,289)	1,543,482	0
<b>DETAILS OF WRITE-INS</b>			0	0	0
0901. .....	0	0	0	0	0
0902. .....	0	0	0	0	0
0903. .....	0	0	0	0	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.....	22,320	7,824	(14,496)
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	663,644	663,644
19. Guaranty funds receivable or on deposit .....	0	0	0
20. Electronic data processing equipment and software.....	56,955	10,289	(46,666)
21. Furniture and equipment, including health care delivery assets.....	114,776	129,799	15,023
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).....	194,151	811,656	617,505
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	0	0	0
28. Total (Lines 26 and 27).....	194,151	811,656	617,505
<b>DETAILS OF WRITE-INS</b>			
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 #	2024	2023
<b>Net Income</b>					
(1) State basis (Page 4, Line 20, Columns 1 & 2).....	XXX.....	XXX.....	XXX.....	\$..... 840,020	\$..... (5,401,113)
(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.....	<u>\$..... 840,020</u>	<u>\$..... (5,401,113)</u>
<b>Surplus</b>					
(5) State basis (Page 3, Line 37, Columns 1 & 2).....	XXX.....	XXX.....	XXX.....	\$..... 20,871,439	\$..... 18,282,147
(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.....	<u>\$..... 20,871,439</u>	<u>\$..... 18,282,147</u>

#### 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. SVO-identified bond ETFs are 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

## Notes to the Financial Statements

### 1. Summary of Significant Accounting Policies and Going Concern (Continued)

D. Going Concern - Not Applicable

### 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.

Beginning with the 2022 financial statement, the Company revised its method for calculating ceded unearned premium, which it feels more accurately depicts its true statutory liabilities. In the past, this contra-liability was determined using a factor of reinsurance premiums, applied with a proportional annual premium growth rate.

In accordance with the NAIC, a revised calculation based on each of the Company's quota share treaties and net of ceding commissions was utilized for year-end 2022 to more accurately reflect the reinsurers' return of premium liability during instances of policy cancellations.

As a result of this accounting update, there was a recognized benefit of \$725,793 that flowed through the Company's 2022 Annual Statement of Income (Line 1) as a net increase to Premiums Earned and on its Liabilities Page (Line 9) as a decrease to net Unearned Premiums.

### 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, 2024:

a. The aggregate amount of unrealized losses:

1. Less than 12 months.....	\$..... 12,816
2. 12 months or longer.....	64,836

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

1. Less than 12 months.....	\$..... 1,213,579
2. 12 months or longer.....	1,047,821

(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 held in cash & 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

## Notes to the Financial Statements

### 5. Investments (Continued)

- (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 - None
- M. Working Capital Finance Investments - Not Applicable
- 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

	General Account	Protected Cell
(1) Number of CUSIPs.....	1	
(2) Aggregate amount of investment income..... \$ .....	1,100	\$ .....

### R. Reporting Entity's Share of Cash Pool by Asset Type

Asset Type	Percent Share
(1) Cash.....	%
(2) Cash Equivalents.....	100.000 %
(3) Short-Term Investments.....	%
(4) Total (Must Equal 100%).....	<u>100.000 %</u>

### S. Aggregate Collateral Loans by Qualifying Investment Collateral - Not Applicable

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

### 7. Investment Income

- A. Due and Accrued Income Excluded from Surplus - Not Applicable
- B. Total Amount Excluded - Not Applicable
- C. The gross, nonadmitted and admitted amounts for interest income due and accrued

Interest Income Due and Accrued	Amount
1. Gross.....	\$ .....
2. Nonadmitted.....	\$ .....
3. Admitted.....	\$ .....

- D. The aggregate deferred interest - Not Applicable
- E. The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance - Not Applicable

### 8. Derivative Instruments - Not Applicable

### 9. Income Taxes

MENNONTIE MUTUAL INSURANCE COMPANY  
Income Tax Disclosures Required under SSAP 101  
December 31, 2024

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

The components of the net deferred tax asset / (liability) calculated at December 31, 2024 are as follows:

## Notes to the Financial Statements

### 9. Income Taxes (Continued)

#### (1) Change between years by tax character

	2024			2023			Change		
	(1)	(2)	(3) Total (Col 1+2)	(4)	(5)	(6) Total (Col 4+5)	(7)	(8)	(9) Total (Col 7+8)
	Ordinary	Capital	(Col 1+2)	Ordinary	Capital	(Col 4+5)	Ordinary (Col 1-4)	Capital (Col 2-5)	Total (Col 7+8)
(a) Gross deferred tax assets.....	\$ 1,376,822	\$ .....	\$ 1,376,822	\$ 1,593,195	\$ .....	\$ 1,593,195	\$ (216,373)	\$ .....	\$ (216,373)
(b) Statutory valuation allowance adjustments.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
(c) Adjusted gross deferred tax assets (1a - 1b).....	1,376,822	.....	1,376,822	1,593,195	.....	1,593,195	(216,373)	.....	(216,373)
(d) Deferred tax assets nonadmitted.....	.....	.....	.....	.....	663,644	663,644	.....	(663,644)	(663,644)
(e) Subtotal net admitted deferred tax asset (1c - 1d).....	\$ 1,376,822	\$ .....	\$ 1,376,822	\$ 1,593,195	\$ (663,644)	\$ 929,551	\$ (216,373)	\$ 663,644	\$ 447,271
(f) Deferred tax liabilities.....	15,471	526,980	542,451	15,864	202,849	218,713	(393)	324,131	323,738
(g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f).....	\$ 1,361,351	\$ (526,980)	\$ 834,371	\$ 1,577,331	\$ (866,493)	\$ 710,838	\$ (215,980)	\$ 339,513	\$ 123,533

#### (2) Admission calculation components SSAP No. 101

	2024			2023			Change		
	(1)	(2)	(3) Total (Col 1+2)	(4)	(5)	(6) Total (Col 4+5)	(7)	(8)	(9) Total (Col 7+8)
	Ordinary	Capital	(Col 1+2)	Ordinary	Capital	(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.....	\$ .....	\$ .....	\$ .....	\$ (992,164)	\$ .....	\$ (992,164)	\$ 992,164	\$ .....	\$ 992,164
(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).....	1,053,172	.....	1,053,172	1,703,002	.....	1,703,002	(649,830)	.....	(649,830)
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.....	323,650	.....	323,650	882,357	\$ (663,644)	218,713	(558,707)	663,644	104,937
(d) Deferred tax assets admitted as the result of application of SSAP No. 101.	.....	.....	.....	.....	.....	.....	.....	.....	.....
Total (2(a) + 2(b) + 2(c)).....	\$ 1,376,822	\$ .....	\$ 1,376,822	\$ 1,593,195	\$ (663,644)	\$ 929,551	\$ (216,373)	\$ 663,644	\$ 447,271

#### (3) Ratio used as basis of admissibility

		2024	2023
(a) Ratio percentage used to determine recovery period and threshold limitation amount.....	.....	694.000 %	661.000 %
(b) Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above.....	\$ .....	\$ 20,037,068	\$ 17,571,310

#### (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

	2024		2023		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).....	\$ 1,376,822	\$ .....	\$ 1,593,195	\$ .....	\$ (216,373)	\$ .....
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).....	\$ 1,376,822	.....	\$ 1,593,195	\$ (663,644)	\$ (216,373)	\$ 663,644
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, 2024 are as follows:

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

	(1) 2024	(2) 2023	(3) Change (1-2)
Current income taxes incurred consist of the following major components:			
1. Current Income Tax			
(a) Federal.....	\$ (107,233)	\$ (550,775)	\$ 443,542
(b) Foreign.....			
(c) Subtotal (1a+1b).....	\$ (107,233)	\$ (550,775)	\$ 443,542
(d) Federal income tax on net capital gains.....	20,641	105,568	(84,927)
(e) Utilization of capital loss carry-forwards.....			
(f) Other.....			
(g) Federal and foreign income taxes incurred (1c+1d+1e+1f).....	\$ (86,592)	\$ (445,207)	\$ 358,615
	(1) 2024	(2) 2023	(3) Change (1-2)
2. Deferred Tax Assets			
(a) Ordinary			
(1) Discounting of unpaid losses.....	\$ 87,528	\$ 81,265	\$ 6,263
(2) Unearned premium reserve.....	906,384	798,575	107,809
(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.....	259,126	598,886	(339,760)
(12) Tax credit carry-forward.....			
(13) Other.....	123,784	114,469	9,315
(99) Subtotal (Sum of 2a1 through 2a13).....	\$ 1,376,822	\$ 1,593,195	\$ (216,373)
(b) Statutory valuation allowance adjustment.....			
(c) Nonadmitted.....			
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c).....	\$ 1,376,822	\$ 1,593,195	\$ (216,373)
(e) Capital			
(1) Investments.....	\$	\$	\$
(2) Net capital loss carry-forward.....			
(3) Real estate.....			
(4) Other.....			
(99) Subtotal (2e1+2e2+2e3+2e4).....	\$	\$	\$
(f) Statutory valuation allowance adjustment.....			
(g) Nonadmitted.....		663,644	(663,644)
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g).....		(663,644)	663,644
(i) Admitted deferred tax assets (2d + 2h).....	\$ 1,376,822	\$ 929,551	\$ 447,271
	(1) 2024	(2) 2023	(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.....	15,471	15,864	(393)
(99) Subtotal (3a1+3a2+3a3+3a4+3a5).....	\$ 15,471	\$ 15,864	\$ (393)
(b) Capital			
(1) Investments.....	\$ 526,980	\$ 202,849	\$ 324,131
(2) Real estate.....			
(3) Other.....			
(99) Subtotal (3b1+3b2+3b3).....	\$ 526,980	\$ 202,849	\$ 324,131
(c) Deferred tax liabilities (3a99 + 3b99).....	\$ 542,451	\$ 218,713	\$ 323,738
4. Net deferred tax assets/liabilities (2i - 3c).....	\$ 834,371	\$ 710,838	\$ 123,533

## Notes to the Financial Statements

### 9. Income Taxes (Continued)

The change in deferred income taxes is comprised of the following (this analysis is exclusive of nonadmitted assets as the Change in Nonadmitted Assets is reported separately from the Change in Net Deferred Income Taxes in the surplus section of the Annual Statement):

	Current Period	Prior Year	Change (Col. 1 - Col. 2)
Adjusted gross deferred tax assets	\$ 1,376,822	\$ 1,593,195	\$ (216,373)
Total deferred tax liabilities	542,451	218,713	323,738
Net deferred tax assets (liabilities)	834,371	1,374,482	(540,111)
Statutory valuation allowance adjustment		663,644	(663,644)
Net deferred tax assets (liabilities) after statutory valuation allowance	834,371	710,838	123,533
Tax effect of unrealized gains (losses)			
Change in net deferred income tax			<u>\$ 123,533</u>

#### D. Among the More Significant Book to Tax Adjustments

Current tax and change in deferred tax at December 31, 2024 are as follows :

	2024	Effective Tax Rate
Provision computed at statutory rate	\$ 153,885	21.000 %
Tax exempt investment income	(14,658)	-2.000 %
Dividends received deduction	(33,000)	-4.503 %
Proration of tax exempt investment income	11,914	1.626 %
Disallowable travel and entertainment	6,503	0.887 %
Accrual adjustment - prior year	86,592	11.817 %
Enacted rate changes		%
Discounted Loss Reserve Restatement	(1,438)	-0.196 %
Other	(101,051)	-13.790 %
<b>Total</b>	<b>\$ 108,747</b>	<b>14.840 %</b>

	2024	Effective Tax Rate
Current year income tax incurred	\$ (86,592)	-11.817 %
Realized Capital Gains Tax	(20,641)	-2.817 %
Change in net deferred income taxes	215,980	29.474 %
<b>Total statutory income taxes</b>	<b>\$ 108,747</b>	<b>14.840 %</b>

	2023	Effective Tax Rate
Provision computed at statutory rate	\$ (1,249,897)	21.000 %
Tax exempt investment income	(19,908)	0.334 %
Dividends received deduction	(29,132)	0.489 %
Proration of tax exempt investment income	12,260	-0.206 %
Disallowable travel and entertainment	5,783	-0.097 %
Accrual adjustment - prior year	2,030	-0.034 %
Enacted rate changes		%
Discounted Loss Reserve Restatement	(1,438)	0.024 %
Other	7,128	-0.120 %
<b>Total</b>	<b>\$ (1,273,174)</b>	<b>21.391 %</b>

	2023	Effective Tax Rate
Current year income tax incurred	\$ (445,207)	7.480 %
Realized Capital Gains Tax	(105,568)	1.774 %
Change in net deferred income taxes	(722,399)	12.137 %
<b>Total statutory income taxes</b>	<b>\$ (1,273,174)</b>	<b>21.391 %</b>

#### E. Operating Loss and Tax Credit Carryforwards

(1) The Company has a 2024 net operating loss carryforward of \$1,233,935 and an associated tax credit carryforward of \$259,126 available to offset future taxable income.

(2) Income tax expense available for recoupment

The Company has income tax expense for 2024 and 2023 of \$0 and \$0, 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

## Notes to the Financial Statements

### **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. Affiliate, Mennonite Mutual Aid Society, merged with Mennonite Mutual Insurance Company in April, 2024.
- 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
- 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 \$1,312,952.

- 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.

## Notes to the Financial Statements

### 14. Liabilities, Contingencies and Assessments (Continued)

- (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

### 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 at reporting date

The following tables provide information as of December 31, 2024 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					
Bond: SVO Identified Funds.....	\$ 2,602,996	\$ .....	\$ .....	\$ .....	\$ 2,602,996
Common Stock: Industrials and Miscellaneous.....	11,532,401	117,723	100	100	11,650,124
Common Stock: Parents, Subsidiaries and Affiliates.....					
Cash & Equivalents: Industrials and Miscellaneous.....	2,914,041				2,914,041
Total assets at fair value/NAV.....	<u>\$ 17,049,438</u>	<u>\$ 117,723</u>	<u>\$ 100</u>	<u>\$ .....</u>	<u>\$ 17,167,261</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 01/01/2024	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2024
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>\$ .....</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>	<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

## Notes to the Financial Statements

### 20. Fair Value Measurements (Continued)

#### 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	\$ 18,476,858	\$ 18,957,647	\$ 18,476,858	\$ -	\$ -	\$ -	\$ -
CMO	4,820,105	4,833,036	4,820,105	-	-	-	-
MBS	364,916	405,911	364,916	-	-	-	-
Common Stock	11,650,224	11,650,224	11,532,401	117,723	100	-	-
Cash & Cash Equivalents	2,914,041	2,914,041	2,914,041	-	-	-	-

#### 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	\$ 2,914,041	3.000 %	12/31/2024	
Total Short Term		%		

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

### 21. Other Items - Not Applicable

### 22. Events Subsequent - Not Applicable

### 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	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
b. All other	19,393	6,788	2,180,873	531,484	(2,161,480)	(524,696)
c. Total (a+b)	\$ 19,393	\$ 6,788	\$ 2,180,873	\$ 531,484	\$ (2,161,480)	\$ (524,696)
d. Direct unearned premium reserve			\$ 22,856,447			

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

Assumed All Other - 35%.

Ceded Other (blended rate) - 24.4%.

(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 - Not Applicable

#### E. Calculation of Nonadmitted Retrospective Premium - Not Applicable

#### 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.

## Notes to the Financial Statements

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

(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

(2) Impact of Risk-Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year - Not Applicable  
(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 - Not Applicable

### 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 12/31/2023 were \$7,823,988. As of 12/31/2024, \$4,119,203 has been paid for incurred losses attributable to insured events of prior years. Reserves remaining for prior years are now \$3,345,223 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been \$359,562 of **favorable** 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

	<b>FIRE</b>	<b>HO / FO</b>	<b>CMP</b>	<b>GL / UMB</b>	<b>CAP / APD</b>
Net unearned premium reserve at 12/31/24	\$ 818,717	\$ 6,364,195	\$ 12,134,517	\$ 469,996	\$ 1,439,025
Anticipated loss and adjusting (5 year average)	(419,270)	(4,636,244)	(7,559,950)	(163,888)	(1,042,631)
Acquisition costs (at renewal)	-	-	-	-	-
Policy maintenance cost (10.0% estimate)	(81,872)	(636,420)	(1,213,452)	(47,000)	(143,903)
Surplus / (Deficiency)	<b>\$ 317,575</b>	<b>\$ 1,091,532</b>	<b>\$ 3,361,116</b>	<b>\$ 259,108</b>	<b>\$ 252,492</b>

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
Net earned premium 2022	1,152	8,065	15,006	344	2,411
Net earned premium 2023	1,164	8,560	14,625	536	2,521
Net earned premium 2024	1,152	9,534	16,088	564	2,500
	<b>\$ 6,071</b>	<b>\$ 39,328</b>	<b>\$ 68,695</b>	<b>\$ 2,234</b>	<b>\$ 11,116</b>

Net incurred loss & lae 2020	264	2,758	6,060	211	1,082
Net incurred loss & lae 2021	830	3,379	8,038	19	1,132
Net incurred loss & lae 2022	589	6,447	8,268	264	1,857
Net incurred loss & lae 2023	959	9,222	11,311	93	2,220
Net incurred loss & lae 2024	467	6,844	9,121	192	1,763
	<b>\$ 3,109</b>	<b>\$ 28,650</b>	<b>\$ 42,798</b>	<b>\$ 779</b>	<b>\$ 8,054</b>

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:..... 12/31/2024.....
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

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MENNONITE MUTUAL INSURANCE COMPANY**  
**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..... Yes [ ] No [ X ]

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. .....

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. .....

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). .....

3.4 By what department or departments? Ohio Department of Insurance..... 12/31/2022

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 [ X ] No [ ]  
 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
Mennonite Mutual Aid Society.....	10279.....	OH.....

6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [ ] No [ X ]

6.2 If yes, give full information .....

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

7.2 If yes,  
 7.21 State the percentage of foreign control .....

7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

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

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 depository institution holding company? 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:

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MENNONITE MUTUAL INSURANCE COMPANY**  
**GENERAL INTERROGATORIES**  
**PART 1 - COMMON INTERROGATORIES**

10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [  ] 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 [  ]

12.11 Name of real estate holding company .....

12.12 Number of parcels involved .....

12.13 Total book/adjusted carrying value \$.....

12.2 If yes, provide explanation

13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [  ] No [  ]

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

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

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 [  ] 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 [  ]

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 [  ]

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

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 [  ]

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	2	3	4
American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Circumstances That Can Trigger the Letter of Credit	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 [  ] 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 [  ] 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 [  ] 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 [  ]

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 [  ]

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 [  ]

22.2 If answer is yes: 22.21 Amount paid as losses or risk adjustment \$.....  
22.22 Amount paid as expenses \$.....  
22.23 Other amounts paid \$.....

23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [  ] No [  ]

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

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 [  ]

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**

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MENNONITE MUTUAL INSURANCE COMPANY**  
**GENERAL INTERROGATORIES**  
**PART 1 - COMMON INTERROGATORIES**

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 [ <input checked="" type="checkbox"/> ] No [ <input type="checkbox"/> ]										
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.	\$.....										
25.05	For the reporting entity's securities lending program, report amount of collateral for other programs.	\$.....										
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 [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ] NA [ <input checked="" type="checkbox"/> ]										
25.07	Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?	Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ] NA [ <input checked="" type="checkbox"/> ]										
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 [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ] NA [ <input checked="" type="checkbox"/> ]										
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 [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]										
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	\$.....										
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:											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; width: 33.33%;">1 Nature of Restriction</th> <th style="text-align: center; width: 33.33%;">2 Description</th> <th style="text-align: center; width: 33.33%;">3 Amount</th> </tr> </thead> </table>			1 Nature of Restriction	2 Description	3 Amount							
1 Nature of Restriction	2 Description	3 Amount										
27.1	Does the reporting entity have any hedging transactions reported on Schedule DB?	Yes [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]										
27.2	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.	Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ] N/A [ <input checked="" type="checkbox"/> ]										
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 [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]										
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 [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]										
27.42	Permitted accounting practice	Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]										
27.43	Other accounting guidance	Yes [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]										
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 [ <input type="checkbox"/> ] No [ <input type="checkbox"/> ]										
	<ul style="list-style-type: none"> <li>• The reporting entity has obtained explicit approval from the domiciliary state.</li> <li>• Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.</li> <li>• 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.</li> <li>• 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.</li> </ul>											
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 [ <input type="checkbox"/> ] No [ <input checked="" type="checkbox"/> ]										
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 <i>Financial Condition Examiners Handbook</i> ?	Yes [ <input checked="" type="checkbox"/> ] No [ <input type="checkbox"/> ]										
29.01	For agreements that comply with the requirements of the NAIC <i>Financial Condition Examiners Handbook</i> , complete the following:											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; width: 33.33%;">1 Name of Custodian(s)</th> <th style="text-align: center; width: 33.33%;">2 Custodian's Address</th> </tr> </thead> <tbody> <tr> <td>Main Street Bank Corp.....</td> <td>Wooster, OH.....</td> </tr> <tr> <td>Federal Home Loan Bank.....</td> <td>Cincinnati, OH.....</td> </tr> <tr> <td>Manufacturers and Traders Trust Co.....</td> <td>Baltimore, MD.....</td> </tr> <tr> <td>Wayne Wealth Management.....</td> <td>Wooster, OH.....</td> </tr> </tbody> </table>			1 Name of Custodian(s)	2 Custodian's Address	Main Street Bank Corp.....	Wooster, OH.....	Federal Home Loan Bank.....	Cincinnati, OH.....	Manufacturers and Traders Trust Co.....	Baltimore, MD.....	Wayne Wealth Management.....	Wooster, OH.....
1 Name of Custodian(s)	2 Custodian's Address											
Main Street Bank Corp.....	Wooster, OH.....											
Federal Home Loan Bank.....	Cincinnati, OH.....											
Manufacturers and Traders Trust Co.....	Baltimore, MD.....											
Wayne Wealth Management.....	Wooster, OH.....											
29.02	For all agreements that do not comply with the requirements of the NAIC <i>Financial Condition Examiners Handbook</i> , provide the name, location and a complete explanation:											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; width: 33.33%;">1 Name(s)</th> <th style="text-align: center; width: 33.33%;">2 Location(s)</th> <th style="text-align: center; width: 33.33%;">3 Complete Explanation(s)</th> </tr> </thead> </table>			1 Name(s)	2 Location(s)	3 Complete Explanation(s)							
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 [ <input checked="" type="checkbox"/> ] No [ <input type="checkbox"/> ]										
29.04	If yes, give full and complete information relating thereto:											
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; width: 25%;">1 Old Custodian</th> <th style="text-align: center; width: 25%;">2 New Custodian</th> <th style="text-align: center; width: 25%;">3 Date of Change</th> <th style="text-align: center; width: 25%;">4 Reason</th> </tr> </thead> <tbody> <tr> <td>Wayne Savings Community Bank.....</td> <td>Main Street Bank Corp.....</td> <td>.06/10/2024.....</td> <td>Bank merger.....</td> </tr> </tbody> </table>			1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason	Wayne Savings Community Bank.....	Main Street Bank Corp.....	.06/10/2024.....	Bank merger.....		
1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason									
Wayne Savings Community Bank.....	Main Street Bank Corp.....	.06/10/2024.....	Bank merger.....									

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MENNONITE MUTUAL INSURANCE COMPANY**  
**GENERAL INTERROGATORIES**  
**PART 1 - COMMON INTERROGATORIES**

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. This includes both primary and sub-advisors. 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.....
Thomas Troyer, CEO, investment account access.....	I.....
Scott Ezzo, VP-Finance, investment account access.....	I.....

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 922908-75-1.....	VANGUARD INDEX FDS.....	1,370,557
30.2002 922908-73-6.....	VANGUARD INDEX FDS.....	1,147,590
30.2003 921908-84-4.....	VANGUARD SPECIALIZED FUNDS DIV AP.....	1,117,602
30.2004 922908-74-4.....	VANGUARD INDEX FDS VALUE ETF.....	1,070,992
30.2005 722005-62-6.....	PIMCO FDS PAC INV MGMT SER.....	1,012,945
30.2006 256206-10-3.....	DODGE & COX FDS.....	844,631
30.2007 922031-73-7.....	VANGUARD FIXED INCOME SECS FD INFL.....	596,035
30.2008 921909-76-8.....	VANGUARD STAR FD.....	578,103
30.2999 TOTAL		7,738,455

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
VANGUARD INDEX FDS.....	Deckers Outdoor Corp.....	6,853	12/31/2024.....
VANGUARD INDEX FDS.....	Apple Inc.....	153,433	12/31/2024.....
VANGUARD SPECIALIZED FUNDS DIV AP.....	Broadcom Inc.....	64,709	12/31/2024.....
VANGUARD INDEX FDS VALUE ETF.....	Berkshire Hathaway Inc. Class B.....	34,165	12/31/2024.....
PIMCO FDS PAC INV MGMT SER.....	US & Global Core Bonds.....	155,284	12/31/2024.....
DODGE & COX FDS.....	Johnson Controls International PLC.....	29,055	12/31/2024.....
VANGUARD FIXED INCOME SECS FD INFL.....	United States Treasury Inflation Indexed Bonds.....	576,128	12/31/2024.....
VANGUARD STAR FD.....	Taiwan Semiconductor Manufacturing Co Ltd.....	14,279	12/31/2024.....

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.....	24,196,594	23,661,879
31.2 Preferred Stocks.....	0	0
31.3 Totals	24,196,594	(534,715)

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

FIS Global Insurance.....

Yes [ X ] No [ ]

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 [ X ] 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 [ X ] 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 [ X ] 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 [ X ]

35. By self-designating PLGI securities, the reporting entity is certifying its compliance with the requirements as specified in the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* (P&P Manual) for private letter rating (PLR) securities and the following elements of each self-designated PLGI security:

a. The security was either:

i. issued prior to January 1, 2018 (which is exempt from PLR filing requirements pursuant to the P&P Manual), or  
ii. issued from January 1, 2018 to December 31, 2021 and subject to a confidentiality agreement executed prior to January 1, 2022

**ANNUAL STATEMENT FOR THE YEAR 2024 OF THE MENNONITE MUTUAL INSURANCE COMPANY  
GENERAL INTERROGATORIES**  
**PART 1 - COMMON INTERROGATORIES**

which confidentiality agreement remains in force, for which an insurance company cannot provide a copy of a private letter rating rationale report to the SVO due to confidentiality or other contractual reasons ("waived submission PLR securities").

b. The reporting entity is holding capital commensurate with the NAIC Designation and NAIC Designation Category reported for the security.

c. The NAIC Designation and NAIC Designation Category were 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, dated during the financial statement year, held by the insurer and available for examination by state insurance regulators.

d. Other than for waived submission PLR securities, defined above, on or after January 1, 2024 for any PLR securities issued on or after January 1, 2022, if the reporting entity is not permitted to share this private credit rating or the private rating letter rationale report of the PL security with the SVO, it certifies that it is reporting it as an NAIC 5.B GI and may not assign any other self-designation.

Has the reporting entity self-designated PLGI to securities, all of which meet the above requirement and as specified in the P&P Manual?

Yes [ ] No [ X ]

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 [ X ]

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 [ X ]

38.1 Does the reporting entity directly hold cryptocurrencies?

Yes [ ] No [ X ]

38.2 If the response to 38.1 is yes, on what schedule are they reported? .....

39.1 Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies?

Yes [ ] No [ X ]

39.2 If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?

39.21 Held directly

Yes [ ] No [ ]

39.22 Immediately converted to U.S. dollars

Yes [ ] No [ ]

39.3 If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

1 Name of Cryptocurrency	2 Immediately Converted to USD, Directly Held, or Both	3 Accepted for Payment of Premiums

**OTHER**

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

40.2 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.....	\$.....101,430

41.1 Amount of payments for legal expenses, if any? \$ .....431,899

41.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
Reminger Co., LPA.....	\$.....168,371
Fisher Maas Howard Lloyd & Wheeler, P.C.....	\$.....130,757

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

42.2 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 2024 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	\$ ..... 29,838,051	\$ ..... 27,406,086
2.3 Premium Ratio (2.1/2.2)	.....0.000	.....0.000
2.4 Reserve Numerator	\$ ..... 0	\$ ..... 0
2.5 Reserve Denominator	\$ ..... 29,625,718	\$ ..... 26,523,739
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 2024 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's Computer Modeling - AIR Touchstone Version 9.....

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 [ ]

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 2024 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):..... \$..... 2,500,000  
 13.2 Does any reinsurance contract considered in the calculation of this amount include an aggregate limit of recovery without also including a reinstatement provision?..... Yes [ ] No [ X ]  
 13.3 State the number of reinsurance contracts (excluding individual facultative risk certificates, but including facultative programs, automatic facilities or facultative obligatory contracts) considered in the calculation of the amount. .... 1

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 2024 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:

	Gross amount of unauthorized reinsurance in Schedule F – Part 3 exempt from the statutory provision for unauthorized reinsurance..... \$.....
17.11	\$.....
17.12	\$.....
17.13	\$.....
17.14	\$.....
17.15	\$.....
17.16	\$.....
17.17	\$.....

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 2024 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 2024	2 2023	3 2022	4 2021	5 2020
<b>Gross Premiums Written</b> (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) .....	4,197,338	4,328,135	4,036,215	3,486,400	2,969,150
2. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	2,886,332	2,828,436	2,483,227	2,235,747	2,084,811
3. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	40,435,852	35,059,442	29,749,037	25,927,922	22,393,066
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) .....	47,519,522	42,216,013	36,268,479	31,650,069	27,447,027
<b>Net Premiums Written</b> (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) .....	2,232,392	2,319,148	2,406,388	1,980,085	1,709,794
8. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	1,987,820	2,061,971	1,986,060	1,834,825	1,858,343
9. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	28,144,539	25,649,777	23,920,649	21,006,138	18,178,594
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) .....	32,364,751	30,030,896	28,313,097	24,821,048	21,746,731
<b>Statement of Income</b> (Page 4)					
13. Net underwriting gain (loss) (Line 8) .....	(316,106)	(6,235,017)	(879,102)	(102,302)	2,377,456
14. Net investment gain (loss) (Line 11) .....	1,028,278	348,574	837,570	1,681,282	716,760
15. Total other income (Line 15) .....	41,256	40,123	48,663	39,338	81,681
16. Dividends to policyholders (Line 17) .....	0	0	0	0	0
17. Federal and foreign income taxes incurred (Line 19) .....	(86,592)	(445,207)	(18,448)	194,243	704,197
18. Net income (Line 20) .....	840,020	(5,401,113)	25,580	1,424,075	2,471,700
<b>Balance Sheet Lines</b> (Pages 2 and 3)					
19. Total admitted assets excluding protected cell business (Page 2, Line 26, Col. 3) .....	54,815,079	48,431,066	47,320,992	47,684,973	42,514,505
20. Premiums and considerations (Page 2, Col. 3)					
20.1 In course of collection (Line 15.1) .....	81,744	133,483	121,853	56,243	73,548
20.2 Deferred and not yet due (Line 15.2) .....	12,823,899	11,370,641	9,865,358	8,603,898	7,809,451
20.3 Accrued retrospective premiums (Line 15.3) .....	0	0	0	0	0
21. Total liabilities excluding protected cell business (Page 3, Line 26) .....	33,943,640	30,148,919	25,452,341	23,629,054	19,977,166
22. Losses (Page 3, Line 1) .....	6,917,967	6,552,896	4,578,701	4,925,490	2,608,468
23. Loss adjustment expenses (Page 3, Line 3) .....	1,481,301	1,271,093	1,234,950	713,331	611,330
24. Unearned premiums (Page 3, Line 9) .....	21,226,450	18,699,750	16,074,940	14,739,853	12,990,224
25. Capital paid up (Page 3, Lines 30 & 31) .....	0	0	0	0	0
26. Surplus as regards policyholders (Page 3, Line 37) .....	20,871,439	18,282,147	21,868,651	24,055,919	22,537,339
<b>Cash Flow</b> (Page 5)					
27. Net cash from operations (Line 11) .....	3,697,789	45,722	(60,945)	(118,817)	3,842,496
<b>Risk-Based Capital Analysis</b>					
28. Total adjusted capital .....	20,871,439	18,282,147	21,868,651	24,055,919	22,537,339
29. Authorized control level risk-based capital .....	2,893,735	2,666,746	2,174,617	2,197,985	2,134,915
<b>Percentage Distribution of Cash, Cash Equivalents and Invested Assets</b>					
(Page 2, Col. 3)(Item divided by Page 2, Line 12, Col. 3) x 100.0					
30. Bonds (Line 1) .....	61.5	59.2	59.2	53.6	48.1
31. Stocks (Lines 2.1 & 2.2) .....	29.6	38.2	33.3	33.9	32.7
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) .....	1.3	1.6	1.7	1.7	1.9
34. Cash, cash equivalents and short-term investments (Line 5) .....	7.4	1.0	5.8	10.9	17.3
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) .....	0.1	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
<b>Investments in Parent, Subsidiaries and Affiliates</b>					
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 .....					
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 2024 OF THE MENNONITE MUTUAL INSURANCE COMPANY**

**FIVE-YEAR HISTORICAL DATA**

**(Continued)**

	1 2024	2 2023	3 2022	4 2021	5 2020
<b>Capital and Surplus Accounts (Page 4)</b>					
51. Net unrealized capital gains (losses) (Line 24) .....	1,219,351	1,540,788	(2,137,935)	(25,298)	744,276
52. Dividends to stockholders (Line 35) .....	0	0	0	0	0
53. Change in surplus as regards policyholders for the year (Line 38) .....	2,589,292	(3,586,504)	(2,187,268)	1,518,580	3,393,873
<b>Gross Losses Paid (Page 9, Part 2, Cols. 1 &amp; 2)</b>					
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) .....	544,890	774,267	1,183,932	200,485	237,050
55. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	1,532,912	2,208,805	1,292,142	1,411,861	783,321
56. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	20,180,873	28,982,159	18,830,949	13,577,414	6,855,762
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) .....	22,258,675	31,965,231	21,307,023	15,189,760	7,876,133
<b>Net Losses Paid (Page 9, Part 2, Col. 4)</b>					
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) .....	544,890	774,267	1,183,932	200,485	237,050
61. Property lines (Lines 1, 2, 9, 12, 21 & 26) .....	1,457,816	2,197,394	1,282,921	1,411,861	693,866
62. Property and liability combined lines (Lines 3, 4, 5, 8, 22 & 27) .....	12,849,250	15,762,954	13,548,562	8,170,059	6,381,221
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) .....	14,851,956	18,734,615	16,015,415	9,782,405	7,312,137
<b>Operating Percentages (Page 4)</b> (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) .....	51.0	75.6	58.1	52.4	35.7
68. Loss expenses incurred (Line 3) .....	9.4	8.8	9.8	9.6	10.9
69. Other underwriting expenses incurred (Line 4) .....	40.6	38.4	35.4	38.4	41.7
70. Net underwriting gain (loss) (Line 8) .....	(1.1)	(22.8)	(3.3)	(0.4)	11.8
<b>Other Percentages</b>					
71. Other underwriting expenses to net premiums written (Page 4, Lines 4 + 5 - 15 divided by Page 8, Part 1B, Col. 6, Line 35 x 100.0) .....	37.3	34.9	33.5	35.5	38.2
72. Losses and loss expenses incurred to premiums earned (Page 4, Lines 2 + 3 divided by Page 4, Line 1 x 100.0) .....	60.4	84.4	67.9	62.0	46.5
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) .....	155.1	164.3	129.5	103.2	96.5
<b>One Year Loss Development (\$000 omitted)</b>					
74. Development in estimated losses and loss expenses incurred prior to current year (Schedule P, Part 2-Summary, Line 12, Col. 11) .....	(175)	(841)	(294)	676	(144)
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) .....	(1.0)	(3.8)	(1.2)	3.0	(0.8)
<b>Two Year Loss Development (\$000 omitted)</b>					
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) .....	(624)	(88)	530	(17)	(635)
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) .....	(2.9)	(0.4)	2.4	(0.1)	(3.6)

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 [ X ]

If no, please explain

Immaterial

**ANNUAL STATEMENT FOR THE YEAR 2024 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. 2015	15,113	2,979	12,134	4,183	91	65	0	1,067	0	88	5,224	XXX	
3. 2016	16,278	3,515	12,763	4,455	311	48	0	1,343	0	200	5,535	XXX	
4. 2017	17,971	3,480	14,491	9,190	3,334	112	0	1,475	0	216	7,443	XXX	
5. 2018	20,141	4,492	15,649	5,647	1,581	120	0	1,435	0	180	5,621	XXX	
6. 2019	22,773	5,000	17,773	8,694	116	321	0	1,594	0	508	10,493	XXX	
7. 2020	25,851	5,700	20,151	9,295	1,178	370	0	1,885	0	80	10,372	XXX	
8. 2021	29,829	6,758	23,071	20,439	9,117	517	0	1,392	0	437	13,231	XXX	
9. 2022	34,041	7,063	26,978	24,809	10,505	496	0	1,732	0	338	16,532	XXX	
10. 2023	39,388	11,982	27,406	27,281	8,092	521	0	1,812	0	126	21,522	XXX	
11. 2024	45,037	15,199	29,838	13,515	2,120	257	0	1,682	0	134	13,334	XXX	
12. Totals	XXX	XXX	XXX	127,508	36,445	2,827	0	15,417	0	2,307	109,307	XXX	

	Losses Unpaid				Defense and Cost Containment Unpaid				Adjusting and Other Unpaid		23 Salvage and Subrogation Anticipated	24 Total Net Losses and Expenses Unpaid	25 Number of Claims Outstanding Direct and Assumed			
	Case Basis		Bulk + IBNR		Case Basis		Bulk + IBNR		21 Direct and Assumed	22 Ceded						
	13 Direct and Assumed	14 Ceded	15 Direct and Assumed	16 Ceded	17 Direct and Assumed	18 Ceded	19 Direct and Assumed	20 Ceded								
1.	0	0	0	0	0	0	0	0	0	0	0	0	0			
2.	0	22	0	0	0	22	0	0	0	0	0	0	1			
3.	0	0	0	0	0	0	0	0	0	0	0	0	0			
4.	0	0	0	0	0	0	0	0	0	0	0	0	0			
5.	0	0	0	0	0	0	0	0	0	0	0	0	0			
6.	0	0	0	0	0	0	0	0	0	0	0	0	0			
7.	0	0	0	2	0	0	0	0	1	0	0	0	3			
8.	397	350	66	0	11	0	0	0	43	0	0	0	167			
9.	1,646	1,225	174	0	184	0	0	0	114	0	0	0	893			
10.	1,725	214	363	0	176	0	0	0	233	0	0	0	2,283			
11.	4,610	1,068	2,814	2,000	176	0	0	0	521	0	0	0	5,053			
12.	8,378	2,879	3,419	2,000	569	0	0	0	912	0	0	0	188			

	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	Reserves After Discount	Reserves After Discount		
1.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	0	0	0
2.	5,337	113	5,224	35.3	3.8	43.1	0	0	0	(22)	0	22
3.	5,846	311	5,535	35.9	8.8	43.4	0	0	0	0	0	0
4.	10,777	3,334	7,443	60.0	95.8	51.4	0	0	0	0	0	0
5.	7,202	1,581	5,621	35.8	35.2	35.9	0	0	0	0	0	0
6.	10,609	116	10,493	46.6	2.3	59.0	0	0	0	0	0	0
7.	11,553	1,178	10,375	44.7	20.7	51.5	0	0	0	0	0	0
8.	22,865	9,467	13,398	76.7	140.1	58.1	0	0	0	0	0	0
9.	29,155	11,730	17,425	85.6	166.1	64.6	0	0	0	0	0	0
10.	32,111	8,306	23,805	81.5	69.3	86.9	0	0	0	0	0	0
11.	23,575	5,188	18,387	52.3	34.1	61.6	0	0	0	0	4,356	697
12.	XXX	XXX	XXX	XXX	XXX	XXX	0	0	XXX	6,918	0	1,481

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 2024 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 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	11 One Year	12 Two Year
1. Prior	364	493	920	985	755	784	769	758	758	758	0	0
2. 2015	4,380	4,009	4,047	4,022	3,932	3,963	3,974	3,957	3,957	4,157	200	200
3. 2016	XXX	4,531	4,500	4,152	4,139	4,155	4,192	4,192	4,192	4,192	0	0
4. 2017	XXX	XXX	5,968	6,232	6,066	6,057	6,003	5,980	5,975	5,968	(7)	(12)
5. 2018	XXX	XXX	XXX	4,645	4,623	4,442	4,218	4,207	4,189	4,186	(3)	(21)
6. 2019	XXX	XXX	XXX	XXX	8,923	8,893	9,265	8,945	8,928	8,899	(29)	(46)
7. 2020	XXX	XXX	XXX	XXX	XXX	7,700	8,249	8,485	8,399	8,489	90	4
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	11,802	11,654	11,986	11,963	(23)	309
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,637	15,590	15,579	(11)	(1,058)
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	22,152	21,760	(392)	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	16,184	XXX	XXX
											12. Totals	(175)
												(624)

**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 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024		
1. Prior	000	166	884	647	738	751	758	758	758	758	XXX	XXX
2. 2015	2,926	3,349	3,881	3,886	3,889	3,958	3,957	3,957	3,957	4,157	XXX	XXX
3. 2016	XXX	3,330	4,280	4,109	4,113	4,127	4,159	4,192	4,192	4,192	XXX	XXX
4. 2017	XXX	XXX	4,301	5,887	5,960	6,007	5,974	5,975	5,973	5,968	XXX	XXX
5. 2018	XXX	XXX	XXX	3,546	3,785	3,933	4,186	4,186	4,186	4,186	XXX	XXX
6. 2019	XXX	XXX	XXX	XXX	6,978	8,482	8,646	8,913	8,907	8,899	XXX	XXX
7. 2020	XXX	XXX	XXX	XXX	XXX	5,893	7,285	8,233	8,329	8,487	XXX	XXX
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	8,364	10,819	11,322	11,839	XXX	XXX
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	12,728	14,253	14,800	XXX	XXX
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	17,195	19,710	XXX	XXX
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	11,652	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 2024
	1 2015	2 2016	3 2017	4 2018	5 2019	6 2020	7 2021	8 2022	9 2023	10 2024	
1. Prior	143	82	.15	.92	.0	.22	.7	0	0	0	0
2. 2015	414	147	.67	.37	1	.4	16	0	0	0	0
3. 2016	XXX	347	147	13	.4	.8	.9	0	0	0	0
4. 2017	XXX	XXX	347	124	.21	.24	16	3	0	0	0
5. 2018	XXX	XXX	XXX	324	.320	.72	29	.19	.3	0	0
6. 2019	XXX	XXX	XXX	XXX	.420	129	120	.20	.21	0	0
7. 2020	XXX	XXX	XXX	XXX	XXX	428	151	112	32	2	2
8. 2021	XXX	XXX	XXX	XXX	XXX	XXX	.561	173	136	.66	.66
9. 2022	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.669	.286	.174	.174
10. 2023	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	.653	.363	.363
11. 2024	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	814	

**ANNUAL STATEMENT FOR THE YEAR 2024 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	20,271,731	19,555,920	0	10,659,301	11,119,998	7,319,350	28,257
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	27,199,339	25,420,463	0	11,569,679	8,078,170	4,408,738	37,913
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	47,471,070	44,976,384	0	22,228,980	19,198,168	11,728,088	66,170

**(a) Active Status Counts**

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	0
58999. Totals (Lines 58001 through 58003 + 58998) (Line 58 above)	XXX	0	0	0	0	0	0	0	0

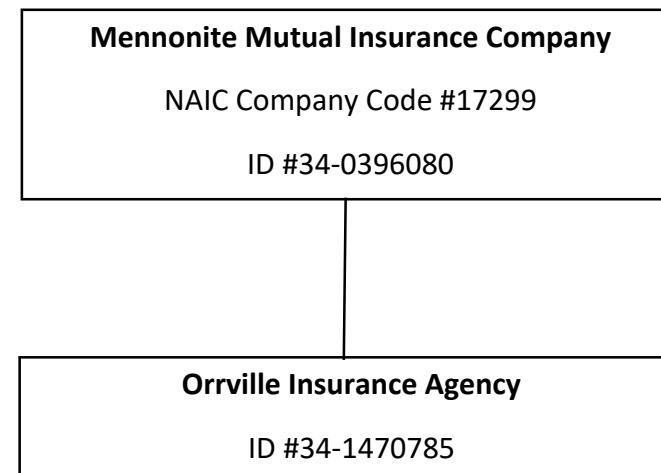
**(b) Explanation of basis of allocation of premiums by states, etc.**

All premiums are allocated to the state in which the property or insured is located. Losses are allocated to the state in which the claim took place.

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

**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.