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HEALTH QUARTERLY STATEMENT

As of March 31, 2011
of the Condition and Affairs of the

Ohio Bankers Benefits Trust

NAIC Group Code.N/A.... , (Current Period) (Prior Period) NAIC Company Code.N/A.... Employer's ID Number..... 31-6172509

Organized under the Laws of Ohio — State of Domicile or Port of Entry Ohio — Country of Domicile USA

Licensed as Business Type MEWA — Is HMO Federally Qualified? Yes [ ] No [ ][N/A]

Incorporated/Organized..... — Commenced Business.....

Statutory Home Office ...4249 Easton Way.. ..Columbus... ..OH 43219...
(Street and Number) (City or Town, State and Zip Code)

KRK/GAH

Main Administrative Office ...Same.. 614-340-7595
(Street and Number) (City or Town, State and Zip Code) (Area Code) (Telephone Number)

Mail Address ...Same.. ....
(Street and Number or P. O. Box) (City or Town, State and Zip Code)

109

Primary Location of Books and Records ...Same.. 614-340-7595
(Street and Number) (City or Town, State and Zip Code) (Area Code) (Telephone Number)

MEWA

Internet Web Site Address

Statutory Statement Contact Wendy Hench 614-340-7617
(Name) (Area Code) (Telephone Number) (Extension)
whench@ohiobankersleague.com 614-340-7599
(E-Mail Address) (Fax Number)

OFFICERS

Name	Title	Name	Title
1.		2.	
3.		4.	

OTHER

DIRECTORS OR TRUSTEES

Courtney Haning
John Malanowski
Thomas Moore
Paul Reed
Judy Root
Thomas Will

RECEIVED
MAY 13 2011
By________

State of.Ohio.......
County of.Franklin....

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.

Jeffrey D. Quayle	Wendy Hench	
(Signature)	(Signature)	(Signature)
Jeffrey D. Quayle	Wendy Hench	
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
~~Trustee~~ Exec. Director	~~Trustee~~ Plan Administrator	Trustee
(Title)	(Title)	(Title)

Subscribed and sworn to before me

This 13 day of May, 2011

Lynn K Moore

a. Is this an original filing? Yes [X] No [ ]

b. If no: 1. State the amendment number ________

2. Date filed ________

3. Number of pages attached ________

NOTARIAL SEAL ★ STATE OF OHIO ★

Lynn K. Moore,
Notary Public, State of Ohio
My Commission Expires 06-10-2011

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ASSETS

	Current Statement Date			4
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1. Bonds	3,357,426		3,357,426	3,158,537
2. Stocks:				
2.1 Preferred stocks			0	
2.2 Common stocks	232,084		232,084	415,386
3. Mortgage loans on real estate:				
3.1 First liens			0	
3.2 Other than first liens			0	
4. Real estate:				
4.1 Properties occupied by the company (less $..........0 encumbrances)			0	
4.2 Properties held for the production of income (less $..........0 encumbrances)			0	
4.3 Properties held for sale (less $..........0 encumbrances)			0	
5. Cash ($.....13,966), cash equivalents ($..........0) and short-term investments ($..........0)	13,966		13,966	277,805
6. Contract loans (including $..........0 premium notes)			0	
7. Derivatives			0	
8. Other invested assets	600,000		600,000	600,000
9. Receivables for securities			0	
10. Securities lending reinvested collateral assets			0	
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	4,203,476	0	4,203,476	4,451,728
13. Title plants less $..........0 charged off (for Title insurers only)			0	
14. Investment income due and accrued	16,721		16,721	18,823
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	3,876		3,876	679
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including $..........0 earned but unbilled premiums)			0	
15.3 Accrued retrospective premiums			0	
16. Reinsurance:				
161. Amounts recoverable from reinsurers	159,335		159,335	
16.2 Funds held by or deposited with reinsured companies			0	
16.3 Other amounts receivable under reinsurance contracts			0	
17. Amounts receivable relating to uninsured plans			0	
18.1 Current federal and foreign income tax recoverable and interest thereon			0	
18.2 Net deferred tax asset			0	
19. Guaranty funds receivable or on deposit			0	
20. Electronic data processing equipment and software			0	
21. Furniture and equipment, including health care delivery assets ($..........0)			0	
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	
23. Receivables from parent, subsidiaries and affiliates			0	
24. Health care ($..........0) and other amounts receivable			0	
25. Aggregate write-ins for other than invested assets	0	0	0	8,751
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25)	4,383,408	0	4,383,408	4,479,981
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	
28. Total (Lines 26 and 27)	4,383,408	0	4,383,408	4,479,981

DETAILS OF WRITE-INS

	1	2	3	4
1101.			0	
1102.			0	
1103.			0	
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)	0	0	0	0
2501. Prepaid expenses			0	8,751
2502.			0	
2503.			0	
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)	0	0	0	8,751

LIABILITIES, CAPITAL AND SURPLUS

	Current Period 1 Covered	Current Period 2 Uncovered	Current Period 3 Total	Prior Year 4 Total
1. Claims unpaid (less $..........0 reinsurance ceded)	1,683,000		1,683,000	1,890,000
2. Accrued medical incentive pool and bonus amounts			0	
3. Unpaid claims adjustment expenses	321,000		321,000	360,000
4. Aggregate health policy reserves			0	
5. Aggregate life policy reserves			0	
6. Property/casualty unearned premium reserve			0	
7. Aggregate health claim reserves			0	
8. Premiums received in advance	4,007		4,007	3,526
9. General expenses due or accrued	52,908		52,908	107,813
10.1 Current federal and foreign income tax payable and interest thereon (including $..........0 on realized gains (losses))			0	
10.2 Net deferred tax liability			0	
11. Ceded reinsurance premiums payable			0	
12. Amounts withheld or retained for the account of others			0	
13. Remittances and items not allocated			0	
14. Borrowed money (including $..........0 current) and interest thereon $..........0 (including $..........0 current)			0	
15. Amounts due to parent, subsidiaries and affiliates			0	
16. Derivatives			0	
17. Payable for securities			0	
18. Payable for securities lending			0	
19. Funds held under reinsurance treaties with ($..........0 authorized reinsurers and $..........0 unauthorized reinsurers)			0	
20. Reinsurance in unauthorized companies			0	
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	
22. Liability for amounts held under uninsured plans			0	
23. Aggregate write-ins for other liabilities (including $..........0 current)	0	0	0	0
24. Total liabilities (Lines 1 to 23)	2,060,915	0	2,060,915	2,361,339
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. Common capital stock	XXX	XXX		
27. Preferred capital stock	XXX	XXX		
28. Gross paid in and contributed surplus	XXX	XXX		
29. Surplus notes	XXX	XXX		
30. Aggregate write-ins for other than special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	2,322,493	2,118,642
32. Less treasury stock, at cost:				
32.1 .....0.000 shares common (value included in Line 26 $..........0)	XXX	XXX		
32.2 .....0.000 shares preferred (value included in Line 27 $..........0)	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	2,322,493	2,118,642
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	4,383,408	4,479,981

DETAILS OF WRITE-INS

	1	2	3	4
2301.			0	
2302.			0	
2303.			0	
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above)	0	0	0	0
2501.				
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above)	XXX	XXX	0	0
3001.				
3002.				
3003.				
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098) (Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date 1 Uncovered	Current Year To Date 2 Total	Prior Year To Date 3 Total	Prior Year Ended December 31 4 Total
1. Member months	XXX	5,078	6,169	24,563
2. Net premium income (including $.........0 non-health premium income)	XXX	4,395,589	4,365,802	18,457,404
3. Change in unearned premium reserves and reserve for rate credits	XXX			
4. Fee-for-service (net of $.........0 medical expenses)	XXX			
5. Risk revenue	XXX			
6. Aggregate write-ins for other health care related revenues	XXX	0	0	0
7. Aggregate write-ins for other non-health revenues	XXX	0	0	0
8. Total revenues (Lines 2 to 7)	XXX	4,395,589	4,365,802	18,457,404
Hospital and Medical:				
9. Hospital/medical benefits		3,096,764	3,956,904	13,275,757
10. Other professional services		335,071		1,437,616
11. Outside referrals				
12. Emergency room and out-of-area		95,231		411,502
13. Prescription drugs		656,256	735,112	2,939,251
14. Aggregate write-ins for other hospital and medical	0	(207,000)	120,000	(62,000)
15. Incentive pool, withhold adjustments and bonus amounts				
16. Subtotal (Lines 9 to 15)	0	3,976,322	4,812,016	18,002,126
Less:				
17. Net reinsurance recoveries		159,335		
18. Total hospital and medical (Lines 16 minus 17)	0	3,816,987	4,812,016	18,002,126
19. Non-health claims (net)				
20. Claims adjustment expenses, including $.....51,589 cost containment expenses		380,841	592,205	2,175,030
21. General administrative expenses		11,085	11,926	111,010
22. Increase in reserves for life and accident and health contracts (including $.........0 increase in reserves for life only)				
23. Total underwriting deductions (Lines 18 through 22)	0	4,208,913	5,416,147	20,288,166
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	186,676	(1,050,345)	(1,830,762)
25. Net investment income earned		17,175	15,322	71,411
26. Net realized capital gains (losses) less capital gains tax of $.........0			1,507	14,176
27. Net investment gains or (losses) (Lines 25 plus 26)	0	17,175	16,829	85,587
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered $.........0) (amount charged off $.........0)]				
29. Aggregate write-ins for other income or expenses	0	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	203,851	(1,033,516)	(1,745,175)
31. Federal and foreign income taxes incurred	XXX			
32. Net income (loss) (Lines 30 minus 31)	XXX	203,851	(1,033,516)	(1,745,175)

DETAILS OF WRITE-INS

	1	2	3	4
0601.	XXX			
0602.	XXX			
0603.	XXX			
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX	0	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	XXX	0	0	0
0701.	XXX			
0702.	XXX			
0703.	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799. Totals (Lines 0701 thru 0703 plus 0798) (Line 7 above)	XXX	0	0	0
1401. change in IBNR		(207,000)	120,000	(62,000)
1402.				
1403.				
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above)	0	(207,000)	120,000	(62,000)
2901.				
2902.				
2903.				
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above)	0	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

CAPITAL AND SURPLUS ACCOUNT	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
33. Capital and surplus prior reporting year	2,118,642	3,663,817	3,663,817
34. Net income or (loss) from Line 32	203,851	(1,033,516)	(1,745,175)
35. Change in valuation basis of aggregate policy and claim reserves			
36. Change in net unrealized capital gains (losses) less capital gains tax of $ 0			
37. Change in net unrealized foreign exchange capital gain or (loss)			
38. Change in net deferred income tax			
39. Change in nonadmitted assets			
40. Change in unauthorized reinsurance			
41. Change in treasury stock			
42. Change in surplus notes			
43. Cumulative effect of changes in accounting principles			
44. Capital changes:			
44.1 Paid in			200,000
44.2 Transferred from surplus (Stock Dividend)			
44.3 Transferred to surplus			
45. Surplus adjustments:			
45.1 Paid in			
45.2 Transferred to capital (Stock Dividend)			
45.3 Transferred from capital			
46. Dividends to stockholders			
47. Aggregate write-ins for gains or (losses) in surplus	0	0	0
48. Net change in capital and surplus (Lines 34 to 47)	203,851	(1,033,516)	(1,545,175)
49. Capital and surplus end of reporting period (Line 33 plus 48)	2,322,493	2,630,301	2,118,642

DETAILS OF WRITE-INS

4701.			
4702.			
4703.			
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799. Totals (Lines 4701 thru 4703 plus 4798) (Line 47 above)	0	0	0

CASH FLOW

		1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
	CASH FROM OPERATIONS			
1.	Premiums collected net of reinsurance	4,392,873	4,384,519	18,478,968
2.	Net investment income	21,017	32,432	96,465
3.	Miscellaneous income			
4.	Total (Lines 1 through 3)	4,413,890	4,416,951	18,575,433
5.	Benefit and loss related payments	4,660,402	5,181,034	20,019,098
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions			
8.	Dividends paid to policyholders			
9.	Federal and foreign income taxes paid (recovered) net of $..........0 tax on capital gains (losses)			
10.	Total (Lines 5 through 9)	4,660,402	5,181,034	20,019,098
11.	Net cash from operations (Line 4 minus Line 10)	(246,512)	(764,083)	(1,443,665)
	CASH FROM INVESTMENTS			
12.	Proceeds from investments sold, matured or repaid:			
	12.1 Bonds		553,666	1,015,709
	12.2 Stocks	204,035	772,978	1,733,614
	12.3 Mortgage loans			
	12.4 Real estate			
	12.5 Other invested assets		350,000	900,000
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			
	12.7 Miscellaneous proceeds			
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	204,035	1,676,644	3,649,323
13.	Cost of investments acquired (long-term only):			
	13.1 Bonds	200,630		
	13.2 Stocks	20,732	704,456	1,780,011
	13.3 Mortgage loans			
	13.4 Real estate			
	13.5 Other invested assets			
	13.6 Miscellaneous applications			
	13.7 Total investments acquired (Lines 13.1 to 13.6)	221,362	704,456	1,780,011
14.	Net increase (decrease) in contract loans and premium notes			
15.	Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(17,327)	972,188	1,869,312
	CASH FROM FINANCING AND MISCELLANEOUS SOURCES			
16.	Cash provided (applied):			
	16.1 Surplus notes, capital notes			
	16.2 Capital and paid in surplus, less treasury stock			200,000
	16.3 Borrowed funds			
	16.4 Net deposits on deposit-type contracts and other insurance liabilities			
	16.5 Dividends to stockholders			
	16.6 Other cash provided (applied)			
17.	Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6)	0	0	200,000
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18.	Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17)	(263,839)	208,105	625,647
19.	Cash, cash equivalents and short-term investments:			
	19.1 Beginning of year	277,805	(347,842)	(347,842)
	19.2 End of period (Line 18 plus Line 19.1)	13,966	(139,737)	277,805

Note: Supplemental disclosures of cash flow information for non-cash transactions:

20.0001			

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other
Total Members at End of:										
1. Prior Year	2,011	2,011								
2. First Quarter	1,685	1,685								
3. Second Quarter	0									
4. Third Quarter	0									
5. Current Year	0									
6. Current Year Member Months	5,078	5,078								
Total Member Ambulatory Encounters for Period:										
7. Physician	0									
8. Non-Physician	0									
9. Total	0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred	0									
11. Number of Inpatient Admissions	0									
12. Health Premiums Written (a)	4,395,589	4,395,589								
13. Life Premiums Direct	0									
14. Property/Casualty Premiums Written	0									
15. Health Premiums Earned	4,395,589	4,395,589								
16. Property/Casualty Premiums Earned	0									
17. Amount Paid for Provision of Health Care Services	4,660,402	4,660,402								
18. Amount Incurred for Provision of Health Care Services	4,208,913	4,208,913								

(a) For health premiums written: Amount of Medicare Title XVIII exempt from state taxes or fees $..........0.

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total

UNDERWRITING AND INVESTMENT EXHIBIT

Analysis of Claims Unpaid - Prior Year - Net of Reinsurance

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5	6
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid December 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical)	1,650,780	2,373,207	239,220	1,443,780	1,890,000	1,890,000
2. Medicare Supplement					0	
3. Dental only					0	
4. Vision only					0	
5. Federal Employees Health Benefits Plan					0	
6. Title XVIII - Medicare					0	
7. Title XIX - Medicaid					0	
8. Other health					0	
9. Health subtotal (Lines 1 to 8)	1,650,780	2,373,207	239,220	1,443,780	1,890,000	1,890,000
10. Healthcare receivables (a)					0	
11. Other non-health					0	
12. Medical incentive pools and bonus amounts					0	
13. Totals (Lines 9-10+11+12)	1,650,780	2,373,207	239,220	1,443,780	1,890,000	1,890,000

(a) Excludes $..........0 loans or advances to providers not yet expensed.

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NOTES TO FINANCIAL STATEMENTS

Note 1 - Summary of Significant Accounting Policies

Basis of Accounting

These financial statements have been prepared on the statutory basis of accounting as prescribed by the State of Ohio Department of Insurance. Purchases and sales of securities reflected on the settlement date. Investment income is reflected when earned. Interest income includes the amortization of bond and note premiums and discounts.

Estimates

The preparation of financial statements in conformity with the statutory basis of accounting requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures, primarily unpaid claims and claim adjustment expenses. Accordingly, actual results may differ from those estimates.

Valuation of Investments

The statement of admitted assets, liabilities and surplus - statutory basis includes investments valued as follows: investments in common stocks and mutual funds traded on a national securities exchange are valued at the last reported sales price at the last business day of the year; securities traded in the over-the-counter market and listed securities for which no sale was reported on that date are valued at the last reported bid price. Bonds and fixed income securities are valued at amortized cost. Any discounts or premiums are amortized over the remaining live of the underlying debt instrument. Short term commercial papers is valued at cost. Interest earned on short term investments from date of purchase thorough year end is included in accrued interest.

Any fixed income security whose value is significantly less than cost or amortized cost due to the financial difficulties of the issuer, is valued at its net realizable value.

The statement of income and changes in surplus - statutory basis includes unrealized gains and losses on investments in common stocks and mutual funds. The unrealized gain (loss) on these investments represents the change in the difference between cost and market at the beginning and end of the year.

Note 2 - Accounting Changes and Corrections of Errors

No significant change.

Note 3 - Business Combinations and Goodwill

No significant change.

Note 4 - Discontinued Operations

No significant change.

Note 5 - Investments

Investments consist of a money market mutual fund ($232,084), federally insured bank certificates of deposit ($600,000), and federal government and federally guaranteed agency bonds ($3,357,426).

Note 6 - Joint Ventures, Partnerships and Limited Liability Companies

No significant change.

Note 7 - Investment Income

No significant change.

Note 8 - Derivative Instruments

No significant change.

Note 9 - Income Taxes

No significant change.

Note 10 - Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

No significant change.

NOTES TO FINANCIAL STATEMENTS

Note 11 - Debt

No significant change.

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

No significant change.

Note 13 - Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

No significant change.

Note 14 - Contingencies

No significant change.

Note 15 - Leases

No significant change.

Note 16 - Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

No significant change.

Note 17 - Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

See pages QS101, QS102, QE02, QE04, and QE05.

Note 18 - Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

No significant change.

Note 19 - Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

No significant change.

Note 20 - Other Items

No significant change.

Note 21 - Events Subsequent

No significant change.

Note 22 - Reinsurance

No significant change.

Note 23 - Retrospectively Rated Contracts & Contracts Subject to Redetermination

No significant change.

Note 24 - Change in Incurred Losses and Loss Adjustment Expenses

The amount of incurred but unpaid claims reserve as of March 31, 2011 is based on a study completed by the Plan's actuary and includes decreases in estimated IBNR of $207,000 and $39,000 for LAE.

Note 25 - Intercompany Pooling Arrangements

No significant change.

NOTES TO FINANCIAL STATEMENTS

Note 26 - Structured Settlements

Not applicable.

Note 27 - Health Care Receivables

No significant change.

Note 28 - Participating Policies

No significant change.

Note 29 - Premium Deficiency Reserves

No significant change.

Note 30 - Anticipated Salvage and Subrogation

No significant change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes [ ] No [X]

1.2 If yes, has the report been filed with the domiciliary state? Yes [ ] No [ ]

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. Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [ ] No [X]
If yes, complete the Schedule Y-Part 1 - Organizational chart.

4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [ ] No [X]

4.2 If yes, provide name of 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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? Yes [ ] No [ ] N/A [X]
If yes, attach an explanation.

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2009.......................

6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2009.......................

6.3 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). 5/31/2010.........................

6.4 By what department or departments?
Ohio Dept of Insurance

6.5 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 [ ]

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

7.1 Has this 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]

7.2 If yes, give full information:

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [ ] No [X]

8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [ ] No [X]

8.4 If the response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Office of Thrift Supervision (OTS), 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 OTS	6 FDIC	7 SEC

9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No [ ]
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
(c) Compliance with applicable governmental laws, rules and regulations;
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
(e) Accountability for adherence to the code.

9.11 If the response to 9.1 is No, please explain:

9.2 Has the code of ethics for senior managers been amended? Yes [ ] No [X]

9.21 If the response to 9.2 is Yes, provide information related to amendment(s).

9.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [ ] No [X]

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

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

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

INVESTMENT

11.1 Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.) Yes [ ] No [X]

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

12. Amount of real estate and mortgages held in other invested assets in Schedule BA: $.....0

13. Amount of real estate and mortgages held in short-term investments: $.....0

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates? Yes [ ] No [X]

14.2 If yes, please complete the following:

	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	$ 0	$ 0
14.22 Preferred Stock	$ 0	$ 0
14.23 Common Stock	$ 0	$ 0
14.24 Short-Term Investments	$ 0	$ 0
14.25 Mortgage Loans on Real Estate	$ 0	$ 0
14.26 All Other	$ 0	$ 0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	$ 0	$ 0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	$ 0	$ 0

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB? Yes [ ] No [X]

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [ ] No [ ]
If no, attach a description with this statement.

16. 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 3, III. Conducting Examinations, F-Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [ ] No [X]

16.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian Address

16.2 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation.

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

16.3 Have there been any changes, including name changes, in the custodian(s) identified in 16.1 during the current quarter? Yes [ ] No [ ]

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

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

16.5 Identify all investment advisors, broker/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository	2 Name(s)	3 Address

17.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed? Yes [X] No [ ]

17.2 If no, list exceptions:

GENERAL INTERROGATORIES (continued)

PART 2 - HEALTH

1.	Operating Percentages:	
1.1	A&H loss percent	0.0 %
1.2	A&H cost containment percent	0.0 %
1.3	A&H expense percent excluding cost containment expenses	0.0 %
2.1	Do you act as a custodian for health savings accounts?	Yes [ ] No [X]
2.2	If yes, please provide the amount of custodial funds held as of the reporting date.	0
2.3	Do you act as an administrator for health savings accounts?	Yes [ ] No [X]
2.4	If yes, please provide the amount of funds administered as of the reporting date.	0

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Is Insurer Authorized? (YES or NO)
A&H Non-Affiliates						
60895.................	35-01485825........	01/01/2011	American United Life Insurance Company............................	Indianapolis, IN..	stop loss.......	Yes..................

Statement as of March 31, 2011 of the **Ohio Bankers Benefits Trust**

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

	1	Direct Business Only							
		2	3	4	5	6	7	8	9
State, Etc.	Active Status	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums and Other Considerations	Property/ Casualty Premiums	Total Columns 2 through 7	Deposit-Type Contracts
1. Alabama AL	N							0	
2. Alaska AK	N							0	
3. Arizona AZ	N							0	
4. Arkansas AR	N							0	
5. California CA	N							0	
6. Colorado CO	N							0	
7. Connecticut CT	N							0	
8. Delaware DE	N							0	
9. District of Columbia DC	N							0	
10. Florida FL	N							0	
11. Georgia GA	N							0	
12. Hawaii HI	N							0	
13. Idaho ID	N							0	
14. Illinois IL	N							0	
15. Indiana IN	N							0	
16. Iowa IA	N							0	
17. Kansas KS	N							0	
18. Kentucky KY	N							0	
19. Louisiana LA	N							0	
20. Maine ME	N							0	
21. Maryland MD	N							0	
22. Massachusetts MA	N							0	
23. Michigan MI	N							0	
24. Minnesota MN	N							0	
25. Mississippi MS	N							0	
26. Missouri MO	N							0	
27. Montana MT	N							0	
28. Nebraska NE	N							0	
29. Nevada NV	N							0	
30. New Hampshire NH	N							0	
31. New Jersey NJ	N							0	
32. New Mexico NM	N							0	
33. New York NY	N							0	
34. North Carolina NC	N							0	
35. North Dakota ND	N							0	
36. Ohio OH	L	4,395,589						4,395,589	
37. Oklahoma OK	N							0	
38. Oregon OR	N							0	
39. Pennsylvania PA	N							0	
40. Rhode Island RI	N							0	
41. South Carolina SC	N							0	
42. South Dakota SD	N							0	
43. Tennessee TN	N							0	
44. Texas TX	N							0	
45. Utah UT	N							0	
46. Vermont VT	N							0	
47. Virginia VA	N							0	
48. Washington WA	N							0	
49. West Virginia WV	N							0	
50. Wisconsin WI	N							0	
51. Wyoming WY	N							0	
52. American Samoa AS	N							0	
53. Guam GU	N							0	
54. Puerto Rico PR	N							0	
55. U.S. Virgin Islands VI	N							0	
56. Northern Mariana Islands MP	N							0	
57. Canada CN	N							0	
58. Aggregate Other alien OT	XXX	0	0	0	0	0	0	0	0
59. Subtotal	XXX	4,395,589	0	0	0	0	0	4,395,589	0
60. Reporting entity contributions for Employee Benefit Plans	XXX							0	
61. Total (Direct Business)	(a) 1	4,395,589	0	0	0	0	0	4,395,589	0

DETAILS OF WRITE-INS

		2	3	4	5	6	7	8	9
5801.								0	
5802.								0	
5803.								0	
5898. Summary of remaining write-ins for line 58 from overflow page		0	0	0	0	0	0	0	0
5899. Total (Lines 5801 thru 5803 plus 5898) (Line 58 above)		0	0	0	0	0	0	0	0

(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer;
(E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) - None of the above - Not allowed to write business in the state.
(a) Insert the number of L responses except for Canada and Other Alien.

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

NONE

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

	Response
1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?	NO

Explanation:

1.

Bar Code:

* 0 2 0 1 1 3 6 5 0 0 0 0 1 *

Overflow Page for Write-Ins

SCHEDULE A - PART 2

Showing all Real Estate ACQUIRED AND ADDITIONS MADE During the Current Quarter

1	Location		4	5	6	7	8	9
	2	3						
Description of Property	City	State	Date Acquired	Name of Vendor	Actual Cost at Time of Acquisition	Amount of Encumbrances	Book/Adjusted Carrying Value Less Encumbrances	Additional Investment Made After Acquisition

SCHEDULE A - PART 3

Showing all Real Estate DISPOSED During the Quarter, Including Payments During the Final Year on "Sales Under Contract "

1	Location		4	5	6	7	8	Change in Book/Adjusted Carrying Value Less Encumbrances					14	15	16	17	18	19	20
	2	3						9	10	11	12	13							
Description of Property	City	State	Disposal Date	Name of Purchaser	Actual Cost	Expended for Additions, Permanent Improvements and Changes in Encumbrances	Book/Adjusted Carrying Value Less Encumbrances Prior Year	Current Year's Depreciation	Current Year's Other Than Temporary Impairment Recognized	Current Year's Change in Encumbrances	Total Change in B./A.C.V. (11 - 9 - 10)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value Less Encumbrances on Disposal	Amounts Received During Year	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Gross Income Earned Less Interest Incurred on Encumbrances	Taxes, Repairs, and Expenses Incurred

SCHEDULE B - PART 2

Showing all Mortgage Loans ACQUIRED AND ADDITIONS MADE During the Current Quarter

1	Location		4	5	6	7	8	9
	2	3						
Loan Number	City	State	Loan Type	Date Acquired	Rate of Interest	Actual Cost at Time of Acquisition	Additional Investment Made After Acquisition	Value of Land and Buildings

SCHEDULE B - PART 3

Showing all Mortgage Loans DISPOSED, Transferred or Repaid During the Current Quarter

1	Location		4	5	6	7	Change in Book Value/Recorded Investment						14	15	16	17	18
	2	3					8	9	10	11	12	13					
Loan Number	City	State	Loan Type	Date Acquired	Disposal Date	Book Value/ Recorded Investment Excluding Accrued Interest Prior Year	Unrealized Valuation Increase (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Capitalized Deferred Interest and Other	Total Change in Book Value (8+9-10+11)	Total Foreign Exchange Change in Book Value	Book Value/ Recorded Investment Excluding Accrued Interest on Disposal	Consideration	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal

SCHEDULE BA - PART 2

Showing Other Long-Term Invested Assets ACQUIRED AND ADDITIONS MADE During the Current Quarter

1	2	Location		5	6	7	8	9	10	11	12	13
		3	4									
CUSIP Identification	Name or Description	City	State	Name of Vendor or General Partner	NAIC Desig-nation	Date Originally Acquired	Type and Strategy	Actual Cost at Time of Acquisition	Additional Investment Made After Acquisition	Amount of Encumbrances	Commitment for Additional Investment	Percentage of Ownership

SCHEDULE BA - PART 3

Showing Other Long-Term Invested Assets DISPOSED, Transferred or Repaid During the Current Quarter

1	2	Location		5	6	7	8	Changes in Book/Adjusted Carrying Value						15	16	17	18	19	20
		3	4					9	10	11	12	13	14						
CUSIP Identification	Name or Description	City	State	Name of Purchaser or Nature of Disposal	Date Originally Acquired	Disposal Date	Book/Adjusted Carrying Value Less Encumbrances, Prior Year	Unrealized Valuation Increase (Decrease)	Current Year's (Depreciation) or (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Capitalized Deferred Interest and Other	Total Change in B./A.C.V (9+10-11+12)	Total Foreign Exchange Change in B./A.C.V.	Book/Adjusted Carrying Value Less Encumbrances on Disposal	Consideration	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Investment Income

SCHEDULE D - PART 3

Show all Long-Term Bonds and Stock Acquired During the Current Quarter

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation or Market Indicator (a)
Bonds - U.S. Government									
	FNMA, 200,000, 1.00% due 9/23/13		01/31/2011	First Merit		200,630	200,000	711	
0599999.	Total - Bonds - U.S. Government					200,630	200,000	711	XXX
8399997.	Total - Bonds - Part 3					200,630	200,000	711	XXX
8399999.	Total - Bonds					200,630	200,000	711	XXX
Common Stocks - Money Market Mutual Funds									
	Federated Prime Obligations Fund		various	First Merit	20,732.000	20,732	XXX		
9399999.	Total - Common Stocks - Money Market Mutual Funds					20,732	XXX	0	XXX
9799997.	Total - Common Stocks - Part 3					20,732	XXX	0	XXX
9799999.	Total - Common Stocks					20,732	XXX	0	XXX
9899999.	Total - Preferred and Common Stocks					20,732	XXX	0	XXX
9999999.	Total - Bonds, Preferred and Common Stocks					221,362	XXX	711	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues: 0

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Statement as of March 31, 2011 of the **Ohio Bankers Benefits Trust**

SCHEDULE D - PART 4

Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value					16	17	18	19	20	21	22
										11	12	13	14	15							
CUSIP Identification	Description	Foreign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Total Change in B./A.C.V. (11+12-13)	Total Foreign Exchange Change in B./A.C.V.	Book/ Adjusted Carrying Value At Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest/ Stock Dividends Received During Year	Maturity Date	NAIC Designation or Market Indicator (a)
Common Stocks - Money Market Mutual Funds																					
	Federated Prime Obligations Fund		various	First Merit	204,035.000	204,035	XXX	204,035					0		204,035			0		XXX	
9399999.	Total - Common Stocks - Money Market Mutual Funds					204,035	XXX	204,035	0	0	0	0	0	0	204,035	0	0	0	0	XXX	XXX
9799997	Total - Common Stocks - Part 4					204,035	XXX	204,035	0	0	0	0	0	0	204,035	0	0	0	0	XXX	XXX
9799999.	Total - Common Stocks					204,035	XXX	204,035	0	0	0	0	0	0	204,035	0	0	0	0	XXX	XXX
9899999.	Total - Preferred and Common Stocks					204,035	XXX	204,035	0	0	0	0	0	0	204,035	0	0	0	0	XXX	XXX
9999999.	Total - Bonds, Preferred and Common Stocks					204,035	XXX	204,035	0	0	0	0	0	0	204,035	0	0	0	0	XXX	XXX

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues: 0.

SCHEDULE DB - PART A - SECTION 1

Showing all Options, Caps, Floors, Collars, Swaps and Forwards Open as of Current Statement Date

1 Description	2 Description of Items Hedged or Used for Income Generation	3 Schedule /Exhibit Identifier	4 Type(s) of Risk	5 Exchange or Counterparty	6 Trade Date	7 Date of Maturity or Expiration	8 Number of Contracts	9 Notional Amount	10 Strike Price, Rate of Indexed Received (Paid)	11 Prior Year Initial Cost of Premium (Received) Paid	12 Current Year Initial Cost of Premium (Received) Paid	13 Current Year Income	14 Book/ Adjusted Carrying Value	15 Code	16 Fair Value	17 Unrealized Valuation Increase (Decrease)	18 Total Foreign Exchange Change in B./A.C.V.	19 Current Year's (Amortization) Accretion	20 Adjustment to Carrying Value of Hedged Items	21 Potential Exposure	22 Credit Quality of Reference Entity	23 Hedge Effectiveness at Inception and at Quarter-end (a)

(a)

Code	Financial or Economic Impact of the Hedge at the End of the Reporting Period

SCHEDULE DB - PART B - SECTION 1

Futures Contracts Open as of Current Statement Date

1	2	3	4	5	6	7	8	9	10	11	12	13	14	Change in Variation Margin				19	20
														15	16	17	18		
Ticker Symbol	Number of Contracts	Notional Amount	Description	Description of Hedged Item(s)	Schedule/ Exhibit Identifier	Type(s) of Risk	Date of Maturity or Expiration	Exchange	Trade Date	Transaction Price	Reporting Date Price	Fair Value	Book/ Adjusted Carrying Value	Cumulative	Gain (Loss) Recognized in Current Year	Gain (Loss) Used to Adjust Basis of Hedged Item	Deferred	Potential Exposure	Hedge Effectiveness at Inception and at Quarter-end (a)

(a) Code	Financial or Economic Impact of the Hedge at the End of the Reporting Period

Broker Name	Net Cash Deposits
Brokers	
Total Net Cash Deposits	0

SCHEDULE DB - PART D

Showing Counterparty Exposure for Derivative Instruments Open as of Current Statement Date

1	2	3	4	Book Adjusted Carrying Value			Fair Value			11	12
				5	6	7	8	9	10		
Description Counterparty or Exchange Traded	Master Agreement (Y or N)	Credit Support Annex (Y or N)	Fair Value of Acceptable Collateral	Contracts With Book Adjusted Carrying Value > 0	Contracts With Book Adjusted Carrying Value < 0	Exposure Net of Collateral	Contracts Fair Value > 0	Contracts Fair Value < 0	Exposure Net of Collateral	Potential Exposure	Off-Balance Sheet Exposure

SCHEDULE DL - PART 1
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

1 CUSIP Identification	2 Description	3 NAIC Designation /Market Indicator	4 Fair Value	5 Book/Adjusted Carrying Value	6 Maturity Dates

General Interrogatory:

1. The activity for the year to date: Fair Value $..........0 Book/Adjusted Carrying Value $..........0
2. Average balance for the year to date: Fair Value $..........0 Book/Adjusted Carrying Value $..........0
3. Reinvested securities lending collateral assets book/adjusted carrying value included in this schedule by NAIC designation:
   NAIC 1: $..........0 NAIC 2: $..........0 NAIC 3: $..........0 NAIC 4: $..........0 NAIC 5: $..........0 NAIC 6: $..........0

SCHEDULE DL - PART 2
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

1 CUSIP Identification	2 Description	3 NAIC Designation /Market Indicator	4 Fair Value	5 Book/Adjusted Carrying Value	6 Maturity Dates

General Interrogatory:

1. The activity for the year to date: Fair Value $..........0 Book/Adjusted Carrying Value $..........0
2. Average balance for the year to date: Fair Value $..........0 Book/Adjusted Carrying Value $..........0
3. Grand Total Schedule DL Part 1 and Part 2: Fair Value $..........0 Book/Adjusted Carrying Value $..........0

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
		Rate	Amount of Interest	Amount of Interest Accrued	6	7	8	
Depository	Code	of Interest	Received During Current Quarter	at Current Statement Date	First Month	Second Month	Third Month	*
Open Depositories								
Huntington National Bank............ Columbus, OH............	....	varies..........	210	....	583,544	40,256	13,966	XXX..
0199999. Total Open Depositories..........	....XXX......	......XXX......	210	0	583,544	40,256	13,966	XXX..
0399999. Total Cash on Deposit..........	....XXX......	......XXX......	210	0	583,544	40,256	13,966	XXX..
0599999. Total Cash..........	....XXX......	......XXX......	210	0	583,544	40,256	13,966	XXX..

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 Description	2 Code	3 Date Acquired	4 Rate of Interest	5 Maturity Date	6 Book/Adjusted Carrying Value	7 Amount of Interest Due & Accrued	8 Amount Received During Year

SCHEDULE A - VERIFICATION

Real Estate

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Current year change in encumbrances		
4. Total gain (loss) on disposals		
5. Deduct amounts received on disposals		
6. Total foreign exchange change in book/adjusted carrying value		
7. Deduct current year's other than temporary impairment recognized		
8. Deduct current year's depreciation		
9. Book/adjusted carrying value at end of current period (Lines 1+2+3+4-5+6-7-8)	0	0
10. Deduct total nonadmitted amounts		
11. Statement value at end of current period (Line 9 minus Line 10)	0	0

SCHEDULE B - VERIFICATION

Mortgage Loans

	1 Year to Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year	0	
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase (decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium and mortgage interest points and commitment fees		
9. Total foreign exchange change in book value/recorded investment excluding accrued interest		
10. Deduct current year's other than temporary impairment recognized		
11. Book value/recorded investment excluding accrued interest at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	0	0
12. Total valuation allowance		
13. Subtotal (Line 11 plus Line 12)	0	0
14. Deduct total nonadmitted amounts		
15. Statement value at end of current period (Line 13 minus Line 14)	0	0

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	600,000	1,500,000
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase (decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		900,000
8. Deduct amortization of premium and depreciation		
9. Total foreign exchange change in book/adjusted carrying value		
10. Deduct current year's other than temporary impairment recognized		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	600,000	600,000
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)	600,000	600,000

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	3,573,923	4,536,447
2. Cost of bonds and stocks acquired	221,362	1,780,011
3. Accrual of discount	47	619
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals		14,176
6. Deduct consideration for bonds and stocks disposed of	204,035	2,749,323
7. Deduct amortization of premium	1,787	8,007
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	3,589,510	3,573,923
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	3,589,510	3,573,923

SCHEDULE D - PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity

During the Current Quarter for all Bonds and Preferred Stock by Rating Class

	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. Class 1 (a)	3,158,537	200,630		(1,741)	3,357,426			3,158,537
2. Class 2 (a)								
3. Class 3 (a)								
4. Class 4 (a)								
5. Class 5 (a)								
6. Class 6 (a)								
7. Total Bonds	3,158,537	200,630	0	(1,741)	3,357,426	0	0	3,158,537
PREFERRED STOCK								
8. Class 1								
9. Class 2								
10. Class 3								
11. Class 4								
12. Class 5								
13. Class 6								
14. Total Preferred Stock	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock	3,158,537	200,630	0	(1,741)	3,357,426	0	0	3,158,537

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation:
NAIC 1 $..........0; NAIC 2 $..........0; NAIC 3 $..........0; NAIC 4 $..........0; NAIC 5 $..........0; NAIC 6 $..........0.

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SCHEDULE DA - PART 1

Short-Term Investments

	1 Book/Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
9199999. Totals		XXX			

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	
2. Cost of short-term investments acquired		
3. Accrual of discount		
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals		
6. Deduct consideration received on disposals		
7. Deduct amortization of premium		
8. Total foreign exchange change in book/adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	0	0
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	0	0

SCHEDULE DB - PART A - VERIFICATION

Options, Caps, Floors, Collars, Swaps and Forwards

1.	Book/Adjusted Carrying Value, December 31, prior year (Line 9, prior year)	
2.	Cost paid/(consideration received) on additions	
3.	Unrealized valuation increase (decrease)	
4.	Total gain (loss) on termination recognized	
5.	Considerations received (paid) on terminations	
6.	Amortization	
7.	Adjustment to the Book/Adjusted Carrying Value of hedge item	
8.	Total foreign exchange change in Book/Adjusted Carrying Value	
9.	Book/Adjusted Carrying Value, December 31, current year (Lines 1 + 2 + 3 + 4 - 5 + 6 + 7 + 8)	0
10.	Deduct nonadmitted assets	
11.	Statement value at end of current period (Line 9 minus Line 10)	0

SCHEDULE DB - PART B - VERIFICATION

Futures Contracts

1.	Book/Adjusted Carrying Value, December 31, prior year				
2.	Net cash deposits (Section 1, Broker Name/Net Cash Deposits footnote)				
3.1	Change in variation margin on open contracts				
3.2	Add:				
	Change in adjustment to basis of hedged item:				
3.21	Section 1, Column 17, current year to date minus				
3.22	Section 1, Column 17, prior year		0		
	Change in amount recognized:				
3.23	Section 1, Column 16, current year to date minus				
3.24	Section 1, Column 16, prior year		0	0	
3.3	Subtotal (line 3.1 minus Line 3.2)				0
4.1	Variation margin on terminated contracts during the year				
4.2	Less:				
4.21	Amount used to adjust basis of hedged item				
4.22	Amount recognized		0		
4.3	Subtotal (line 4.1 minus Line 4.2)				0
5.	Dispositions gains (losses) on contracts terminated in prior year:				
5.1	Recognized				
5.2	Used to adjust basis of hedged items				
6.	Book/Adjusted Carrying Value at end of current period (Lines 1 + 2 + 3.3 - 4.3 - 5.1 - 5.2)				0
7.	Deduct nonadmitted assets				
8.	Statement value at end of current period (Line 6 minus Line 7)				0

SCHEDULE DB - PART C - SECTION 1

Replicated (Synthetic) Assets Open as of Current Statement Date

Replicated (Synthetic) Asset								Components of the Replicated (Synthetic) Asset							
								Derivative Instruments Open			Cash Instrument(s) Held				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Number	Description	NAIC Designation or Other Description	Notional Amount	Book/Adjusted Carrying Value	Fair Value	Effective Date	Maturity Date	Description	Book/Adjusted Carrying Value	Fair Value	CUSIP	Description	NAIC Desig. or Other Description	Book/Adjusted Carrying Value	Fair Value

SCHEDULE DB - PART C - SECTION 2

Reconciliation of Replicated (Synthetic) Assets Open

	First Quarter		Second Quarter		Third Quarter		Fourth Quarter		Year-To-Date	
	1 Number of Positions	2 Total Replicated (Synthetic) Assets Statement Value	3 Number of Positions	4 Total Replicated (Synthetic) Assets Statement Value	5 Number of Positions	6 Total Replicated (Synthetic) Assets Statement Value	7 Number of Positions	8 Total Replicated (Synthetic) Assets Statement Value	9 Number of Positions	10 Total Replicated (Synthetic) Assets Statement Value
1. Beginning Inventory			0	0	0	0	0	0	0	0
2. Add: Opened or Acquired Transactions									0	0
3. Add: Increases in Replicated Asset Statement Value	XXX		XXX		XXX		XXX		XXX	0
4. Less: Closed or Disposed of Transactions									0	0
5. Less: Positions Disposed of for Failing Effectiveness Criteria									0	0
6. Less: Decreases in Replicated (Synthetic) Asset Statement Value	XXX		XXX		XXX		XXX		XXX	0
7. Ending inventory	0	0	0	0	0	0	0	0	0	0

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SCHEDULE DB - VERIFICATION

Verification of Book/Adjusted Carrying Value, Fair Value and Potential Exposure of all Open Derivative Contracts

			Book/Adjusted Carrying Value Check
1.	Part A, Section 1, Column 14		
2.	Part B, Section 1, Column 14		
3.	Total (Line 1 plus Line 2)		0
4.	Part D, Column 5		
5.	Part D, Column 6		
6.	Total (Line 3 minus Line 4 minus Line 5)		0
			Fair Value Check
7.	Part A, Section 1, Column 16		
8.	Part B, Section 1, Column 13		
9.	Total (Line 7 plus Line 8)		0
10.	Part D, Column 8		
11.	Part D, Column 9		
12.	Total (Line 9 minus Line 10 minus Line 11)		0
			Potential Exposure Check
13.	Part A, Section 1, Column 21		
14.	Part B, Section 1, Column 19		
15.	Part D, Column 11		
16.	Total (Line 13 plus Line 14 minus Line 15)		0

SCHEDULE E- VERIFICATION

Cash Equivalents

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	
2. Cost of cash equivalents acquired		
3. Accrual of discount		
4. Unrealized valuation increase (decrease)		
5. Total gain (loss) on disposals		
6. Deduct consideration received on disposals		
7. Deduct amortization of premium		
8. Total foreign exchange change in book/ adjusted carrying value		
9. Deduct current year's other than temporary impairment recognized		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	0	0
11. Deduct total nonadmitted amounts		
12. Statement value at end of current period (Line 10 minus Line 11)	0	0

These RBC pages are provided as an analysis feature only. They are using the 2010 formulas and are not intended to provide any definitive projections nor intended to be filed with any government agency.

COMPANY INFORMATION PAGE (JURAT)
Health Risk-Based Capital
For the Year Ending December 31, 2011

(A) Company Name: Ohio Bankers Benefits Trust

(B) NAIC Group Code: ______ (C) NAIC Company Code: ______ (D) Employer's ID Number: 31-6172509

(E) Organized under the Laws of the State of: ______

Contact Person for Health Risk-Based Capital:

(F) First Name: Wendy (G) Middle: ______ (H) Last Name: Hench

(I) Mail Address of Contact Person: 4249 Easton Way, Suite 150
(Street and Number of P.O. Box)

(J) City: Columbus (K) State: Oh (L) Zip: 43219

(M) Phone Number of RBC Contact Person: 614-340-7617 Extension: ______

(N) Email Address of RBC Contact Person: whench@ohiobankersleague.com

(O) Date Prepared: ______

(P) Preparer (if different than Contact): Hirth, Norris & Garrison, LLP
First ______ Middle ______ Last ______

XR001

(Q) Is this filing an Original, Amended or Refiling (O,A,R): O

(Q1) If Amended, Amendment Number: ______

(R) Were any items that come directly from the annual statement entered manually to prepare this filing? (Yes or No): YES

(S) Was this entity in business for the entire reporting year?: ______

Officers: Name: ______ ______ ______

Title: ______ ______ ______

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Each says that they are the above described officers of the said insurer, and that this risk-based capital report is a true and fair representation of the company's affairs and has been completed in accordance with the NAIC instructions according to the best of their information, knowledge and belief, respectively.

______ (Signature) ______ (Signature) ______ (Signature)

AFFILIATED COMPANIES RISK - DETAILS

	1 Name of Affiliate	2 Affil Type Code	3 NAIC Company Code or Alien ID Number	4 Affiliate's RBC After Covariance	5 Book/ Adjusted Carrying Value of Affiliate's Common Stock	6 Valuation Basis of Col (5) F - Fair A - All Other	7 Total Value of Affiliate's Outstanding Common Stock	8 Total Statutory Surplus of Affiliate Subject to RBC	9 Book/ Adjusted Carrying Value of Affiliate's Preferred Stock	10 Total Value of Affiliate's Outstanding Preferred Stock	11 Percent Owned (Cols. 5 + 9) / (Cols. 7 + 10)	12 H0 Component RBC Required	13 H1 Component RBC Required
Affiliated Investments													
1.											0.0	0	0
9999999. Total		XXX	XXX	0	0	XXX	0	0	0	0	XXX	0	0

Logic
If Col (6) = F and Col (4) > 0, do calculation
Calculation
Col (12) = Min [Col (8) x Col (11), Col (4) x Col 11]
If [Col (4) x Col (11)] > [Col (5) + Col (9)] then
Col (13) = [Col (5) + Col (9) - Col (12)]
If [Col (4) x Col (11)] <= [Col (5) + Col (9)] then
Col (13) = Max {[Col (5) + Col (9) - Col (8) x Col (11)] x .225, [(Col (4) x Col (11)) - Col (12)]}
Col (13) cannot be less than 0

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AFFILIATED COMPANIES RISK

	Type of Affiliate	Type Code	Basis	1 RBC	2 Count
1	Directly Owned Insurer Subject to RBC	1	Affiliate's RBC *	0	0
2	Indirectly Owned Insurer Subject to RBC	2	Affiliate's RBC *	0	0
3	Directly Owned MCO Subject to RBC	3	Affiliate's RBC *	0	0
4	Indirectly Owned MCO Subject to RBC	4	Affiliate's RBC *	0	0
5	Investment Subsidiary	5	Affiliate's RBC *	0	0
6	Holding Company Excess of Subsidiaries	6	0.300	0	0
7	Directly Owned Alien Insurer	7	1.000	0	0
8	Indirectly Owned Alien Insurer	8	1.000	0	0
9	Investment in Parent	9	0.300	0	0
10	Other Affiliates	10	0.300	0	0
11	Fair Value Excess Affiliate Common Stock	11	Total of Type Codes 1 through 5 of XR002, Col. 13	0	0

* Capped at carrying value on the parent's statement

RBC Estimates (based on the 2010 Formulas) as of March 31, 2011 of the **Ohio Bankers Benefits Trust**

CROSS-CHECKING FOR AFFILIATED INVESTMENTS

Schedule D, Part 6, Section 1

		Preferred Stock			
		Line Number	1 Total Preferred Stock	2 Total From RBC Report	3 Difference
1	Parent	0199999		0	0
2	U.S. P&C Insurers	0299999		XXX	XXX
3	U.S. Life Insurers	0399999		XXX	XXX
4	U.S. Health Entity	0499999		XXX	XXX
5	Total P&C, Life and Health Insurers		0	0	0
6	Alien Insurer	0599999		0	0
7	Non-Insurer Which controls Insurers	0699999		0	0
8	Investment Subsidiary	0799999		0	0
9	Other Affiliates	0899999		0	0
10	Subtotal	0999999	0	0	0

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		Common Stock			
		Line Number	1 Total Common Stock	2 Total From RBC Report	3 Difference
11	Parent	1099999		0	0
12	U.S. P&C Insurers	1199999		XXX	XXX
13	U.S. Life Insurers	1299999		XXX	XXX
14	U.S. Health Entity	1399999		XXX	XXX
15	Total P&C, Life and Health Insurers		0	0	0
16	Alien Insurer	1499999		0	0
17	Non-Insurer Which controls Insurers	1599999		0	0
18	Investment Subsidiary	1699999		0	0
19	Other Affiliates	1799999		0	0
20	Subtotal	1899999	0	0	0

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AFFILIATES RISK

	OFF-BALANCE SHEET RISK (See Instructions for Explanation)	Source	1 Book/Adjusted Carrying Value	Factor	2 RBC Requirement
(1)	Loaned to Others - Conforming Securities Lending Program	General Interrogatories Part 1 Lines 23.5		0.002	0
(2)	Loaned to Others - Securities Lending Programs - Other	General Interrogatories Part 1 Lines 23.6		0.010	0
(3)	Subject to Repurchase Agreements	General Interrogatories Part 1 Lines 24.21		0.010	0
(4)	Subject to Reverse Repurchase Agreements	General Interrogatories Part 1 Lines 24.22		0.010	0
(5)	Subject to Dollar Repurchase Agreements	General Interrogatories Part 1 Lines 24.23		0.010	0
(6)	Subject to Dollar Reverse Repurchase Agreements	General Interrogatories Part 1 Lines 24.24		0.010	0
(7)	Pledged as Collateral	General Interrogatories Part 1 Lines 24.25		0.010	0
(8)	Assets Placed Under Option Agreements	General Interrogatories Part 1 Lines 24.26		0.010	0
(9)	Letter Stock or Other Securities Restricted	General Interrogatories Part 1 Lines 24.27		0.010	0
(10)	On Deposit with State or Other Regulatory Body	General Interrogatories Part 1 Lines 24.28		0.010	0
(11)	Other	General Interrogatories Part 1 Lines 24.29		0.010	0
(12)	Total Non-Controlled Assets	Sum of Lines (1) through (11)	0		0
(13)	Guarantees for Affiliates	Notes to Financial Statements 10E		0.010	0
(14)	Contingent Liabilities	Notes to Financial Statements 14A01		0.010	0
(15)	Total Miscellaneous Off-Balance Sheet Items	L(12) + L(13) + L(14)	0		0

OFF-BALANCE SHEET COLLATERAL

(Including Schedule DL, Part 1 Assets)

		Source	1 Book/Adjusted Carrying Value	Factor	2 RBC Requirement
	Asset Category				
	Fixed Income Assets				
	Bonds				
(1)	Class 01 - U.S. Government - Direct and Guaranteed	Company Records		0.000	0
(2)	Other Class 01 Bonds	Company Records		0.003	0
(3)	Total Class 0 Bonds	Line (1) + Line (2)	0		0
(4)	Total Class 02 Bonds	Company Records		0.010	0
(5)	Total Class 03 Bonds	Company Records		0.020	0
(6)	Total Class 04 Bonds	Company Records		0.045	0
(7)	Total Class 05 Bonds	Company Records		0.100	0
(8)	Total Class 06 Bonds	Company Records		0.300	0
(9)	Total Bonds	L(3)+L(4)+L(5)+L(6)+L(7)+L(8)	0		0
	Equity Assets				
	Preferred Stock - Unaffiliated				
(10)	Class 01 Unaffiliated Preferred Stock	Company Records		0.003	0
(11)	Class 02 Unaffiliated Preferred Stock	Company Records		0.010	0
(12)	Class 03 Unaffiliated Preferred Stock	Company Records		0.020	0
(13)	Class 04 Unaffiliated Preferred Stock	Company Records		0.045	0
(14)	Class 05 Unaffiliated Preferred Stock	Company Records		0.100	0
(15)	Class 06 Unaffiliated Preferred Stock	Company Records		0.300	0
(16)	Total Unaffiliated Preferred Stock	L(10)+L(11)+L(12)+L(13)+L(14)+L(15)	0		0
(17)	Common Stock	Company Records		0.150	0
(18)	Property & Equipment Assets	Company Records		0.100	0
(19)	Other Invested Assets	Company Records		0.200	0
(20)	Total	L(9)+L(16)+L(17)+L(18)+L(19)	0		0

OFF-BALANCE SHEET COLLATERAL

(Including Schedule DL, Part 1 Assets)

			1 Book/Adjusted Carrying Value	Factor	2 RBC Requirement
	Asset Category	Source			
	Fixed Income Assets				
	Bonds				
(1)	Class 01 - U.S. Government - Direct and Guaranteed	Company Records		0.000	0
(2)	Other Class 01 Bonds	Company Records		0.003	0
(3)	Total Class 0 Bonds	Line (1) + Line (2)	0		0
(4)	Total Class 02 Bonds	Company Records		0.010	0
(5)	Total Class 03 Bonds	Company Records		0.020	0
(6)	Total Class 04 Bonds	Company Records		0.045	0
(7)	Total Class 05 Bonds	Company Records		0.100	0
(8)	Total Class 06 Bonds	Company Records		0.300	0
(9)	Total Bonds	L(3)+L(4)+L(5)+L(6)+L(7)+L(8)	0		0
	Equity Assets				
	Preferred Stock - Unaffiliated				
(10)	Class 01 Unaffiliated Preferred Stock	Company Records		0.003	0
(11)	Class 02 Unaffiliated Preferred Stock	Company Records		0.010	0
(12)	Class 03 Unaffiliated Preferred Stock	Company Records		0.020	0
(13)	Class 04 Unaffiliated Preferred Stock	Company Records		0.045	0
(14)	Class 05 Unaffiliated Preferred Stock	Company Records		0.100	0
(15)	Class 06 Unaffiliated Preferred Stock	Company Records		0.300	0
(16)	Total Unaffiliated Preferred Stock	L(10)+L(11)+L(12)+L(13)+L(14)+L(15)	0		0
(17)	Common Stock	Company Records		0.150	0
(18)	Property & Equipment Assets	Company Records		0.100	0
(19)	Other Invested Assets	Company Records		0.200	0
(20)	Total	L(9)+L(16)+L(17)+L(18)+L(19)	0		0

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FIXED INCOME ASSETS

		Source	1 Book/Adjusted Carrying Value	Factor	2 RBC Requirement
BONDS					
(1)	Class 01 - U.S. Government - Direct and Guaranteed	Sch D, Pt 1A, Sn 1, Col 6, Line 1.1	3,357,426		
(2)	Total Class 01 Bonds	Sch D, Pt 1A, Sn 1, Col 6, Line 10.1 - Line 8.1	3,357,426		
(3)	Other Class 01 Bonds	L(2) - L(1)	0	0.003	0
(4)	Total Class 02 Bonds	Sch D, Pt 1A, Sn 1, Col 6, Line 10.2 - Line 8.2		0.010	0
(5)	Total Class 03 Bonds	Sch D, Pt 1A, Sn 1, Col 6, Line 10.3 - Line 8.3		0.020	0
(6)	Total Class 04 Bonds	Sch D, Pt 1A, Sn 1, Col 6, Line 10.4 - Line 8.4		0.045	0
(7)	Total Class 05 Bonds	Sch D, Pt 1A, Sn 1, Col 6, Line 10.5 - Line 8.5		0.100	0
(8)	Total Class 06 Bonds	Sch D, Pt 1A, Sn 1, Col 6, Line 10.6 - Line 8.6		0.300	0
(9)	Total Bonds		3,357,426		0

		Source	1 Book/Adjusted Carrying Value	Factor	2 RBC Requirement
MISCELLANEOUS FIXED INCOME ASSETS					
(10)	Cash	Page 2, Line 5, inside amount 1	613,966	0.003	1,842
(11)	Cash Equivalents	Page 2, Line 5, inside amount 2			
(12)	Less: Cash Equivalents, Bonds included in Schedule D, Part 1A	Sch E, Pt 2, C6 Line 8399999 in part			
(13)	Net Cash Equivalents	L(11) - L(12)	0	0.003	0
(14)	Short-Term Investments	Page 2, Line 5, inside amount 3			
(15)	Short-Term Bonds*	Sch DA, Pt 1, Col 7, Line 8399999			
(16)	Exempt Money Market Mutual Funds*	Sch DA, Pt 1, Col 7, Line 8899999			
(17)	Class One Money Market Mutual Funds*	Sch DA, Pt 1, Col 7, Line 8999999			
(18)	Total Short-Term Investments	L(14) - L(15) - L(16) - L(17)	0	0.003	0
(19)	Mortgage Loans - First Liens	Page 2, Col 3, Line 3.1		0.050	0
(20)	Mortgage Loans - Other Than First Liens	Page 2, Col 3, Line 3.2		0.050	0
(21)	Receivable for Securities	Page 2, Col 3, Line 9		0.050	0
(22)	Aggregate Write-ins for Invested Assets	Page 2, Col 3, Line 11		0.050	0
(23)	Collateral Loans	Included in Page 2, Col 3, Line 8		0.050	0
(24)	Other Long-Term Invested Assets	Included in Page 2, Col 3, Line 8		0.200	0
(25)	Total Other Long-Term Invested Assets (Page 2, Col 3, Line 7)	L(23)+L(24)	0		
(26)	Derivatives	Page 2, Col 3, Line 7		0.500	0
(27)	Total Fixed Income Assets RBC	L(9) + L(10) + L(13) + L(18) + L(19) + L(20) + L(21) + L(22) + L(23) + L(24) + L(26)			1,842

* These bonds appear in Schedule D Part 1A Section 1 and are already recognized in the Bond portion of the formula.

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REPLICATION (SYNTHETIC ASSET) TRANSACTIONS AND MANDATORILY CONVERTIBLE SECURITIES

	1 RSAT Number	2 Type	3 CUSIP	4 Description of Assets	5 NAIC Designation or Other Description of Asset	6 Value of Asset	7 RBC Requirement
Replication Transactions							
1.							
9999999. Total						0	0

RBC Estimates (based on the 2010 Formulas) as of March 31, 2011 of the **Ohio Bankers Benefits Trust**

EQUITY ASSETS

		Annual Statement Source	1 Book/Adjusted Carrying Value	Factor	2 RBC Requirement
PREFERRED STOCK - UNAFFILIATED					
(1)	Class 01 Unaffiliated Preferred Stock (excluding Hybrids)	Included in Sch. D, Part 2, Sn 1		0.003	0
(2)	Class 02 Unaffiliated Preferred Stock (excluding Hybrids)	Included in Sch. D, Part 2, Sn 1		0.010	0
(3)	Class 03 Unaffiliated Preferred Stock (excluding Hybrids)	Included in Sch. D, Part 2, Sn 1		0.020	0
(4)	Class 04 Unaffiliated Preferred Stock (excluding Hybrids)	Included in Sch. D, Part 2, Sn 1		0.045	0
(5)	Class 05 Unaffiliated Preferred Stock (excluding Hybrids)	Included in Sch. D, Part 2, Sn 1		0.100	0
(6)	Class 06 Unaffiliated Preferred Stock (excluding Hybrids)	Included in Sch. D, Part 2, Sn 1		0.300	0
(7)	Subtotal - Unaffiliated Preferred Stock (Should equal Page 2, Col 3, Line 2.1 less Sch D Sum, Col 1 Line 18)	Sum of Lines (1) through (6)	0		0
HYBRID SECURITIES - UNAFFILIATED					
(8)	Class 01 Hybrids Securities	Sch D, Pt 1A, Sn 1, Col 6, Line 8.1		0.003	0
(9)	Class 02 Hybrids Securities	Sch D, Pt 1A, Sn 1, Col 6, Line 8.2		0.010	0
(10)	Class 03 Hybrids Securities	Sch D, Pt 1A, Sn 1, Col 6, Line 8.3		0.020	0
(11)	Class 04 Hybrids Securities	Sch D, Pt 1A, Sn 1, Col 6, Line 8.4		0.045	0
(12)	Class 05 Hybrids Securities	Sch D, Pt 1A, Sn 1, Col 6, Line 8.5		0.100	0
(13)	Class 06 Hybrids Securities	Sch D, Pt 1A, Sn 1, Col 6, Line 8.6		0.300	0
(14)	Subtotal - Hybrid Securities	Sum of Lines (8) through (13)	0		0
(15)	Total Unaffiliated Preferred Stock and Hybrids	Line (7) + Line (14)	0		0
COMMON STOCK - UNAFFILIATED					
(16)	Federal Home Loan Bank stock	Company Records		0.023	0
(17)	Non-government money market funds	Sch D Pt 2 Sn 2 Col 6 Line 9399999		0.003	0
(18)	Total Common Stock	Sch D, Summary, Col 1, Line 25	232,084		
(19)	Affiliated Common Stock	Sch D, Summary, Col 1, Line 24			
(20)	Other Unaffiliated Common Stock	L(18) - L(16) - L(17) - L(19)	232,084	0.150	34,813
(21)	Total Unaffiliated Common Stock	L(16) + L(17) + L(20)	232,084		34,813

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PROPERTY & EQUIPMENT ASSETS

		Source	1 Book/Adjusted Carrying Value	Factor	2 RBC Requirement
(1)	Properties occupied by the company	Page 2, Col 3, Line 4.1		0.100	0
(2)	Encumbrances (Property occupied by the company)	Page 2, Line 4.1, inside amount		0.100	0
(3)	Properties held for the production of income	Page 2, Col 3, Line 4.2		0.100	0
(4)	Encumbrances (Property held for production of income)	Page 2, Line 4.2, inside amount		0.100	0
(5)	Properties held for sale	Page 2, Col 3, Line 4.3		0.100	0
(6)	Encumbrances (Property held for sale)	Page 2, Line 4.3, inside amount		0.100	0
(7)	Furniture and equipment	L(7.1) + L(7.2) (should equal Page 2, Col 3, Line 21)	0		
(7.1)	HC delivery subject to statutory acctg depreciation limits	Company Records		0.100	0
(7.2)	All other furniture and equipment	Company Records		0.100	0
(8)	EDP equipment and software	Page 2, Col 3, Line 20		0.100	0
(9)	Total Property & Equipment	L(1) + L(2) + L(3) + L(4) + L(5) + L(6) + L(7.1) + L(7.2) + L(8)	0		0

ASSET CONCENTRATION

	1		2 Book/Adjusted Carrying Value	Factor	3 Additional RBC
	ISSUER NAME #1				
(1)	Class 2 Unaffiliated Bonds			0.010	0
(2)	Class 3 Unaffiliated Bonds			0.020	0
(3)	Class 4 Unaffiliated Bonds			0.045	0
(4)	Class 5 Unaffiliated Bonds			0.100	0
(5)	Collateral Loans			0.050	0
(6)	Mortgages			0.050	0
(7)	Class 2 Preferred Stock			0.010	0
(8)	Class 3 Preferred Stock			0.020	0
(9)	Class 4 Preferred Stock			0.045	0
(10)	Class 5 Preferred Stock			0.100	0
(11)	Class 2 Hybrid Securities			0.010	0
(12)	Class 3 Hybrid Securities			0.020	0
(13)	Class 4 Hybrid Securities			0.045	0
(14)	Class 5 Hybrid Securities			0.100	0
(15)	Other Long-Term Invested Assets			0.100	0
(16)	Unaffiliated Common Stock			0.150	0
(17)	Total of Issuer = Lines (1) through (16)		0		0

ASSET CONCENTRATION

	1		2 Book/Adjusted Carrying Value	Factor	3 Additional RBC
	ISSUER NAME #2				
(1)	Class 2 Unaffiliated Bonds			0.010	0
(2)	Class 3 Unaffiliated Bonds			0.020	0
(3)	Class 4 Unaffiliated Bonds			0.045	0
(4)	Class 5 Unaffiliated Bonds			0.100	0
(5)	Collateral Loans			0.050	0
(6)	Mortgages			0.050	0
(7)	Class 2 Preferred Stock			0.010	0
(8)	Class 3 Preferred Stock			0.020	0
(9)	Class 4 Preferred Stock			0.045	0
(10)	Class 5 Preferred Stock			0.100	0
(11)	Class 2 Hybrid Securities			0.010	0
(12)	Class 3 Hybrid Securities			0.020	0
(13)	Class 4 Hybrid Securities			0.045	0
(14)	Class 5 Hybrid Securities			0.100	0
(15)	Other Long-Term Invested Assets			0.100	0
(16)	Unaffiliated Common Stock			0.150	0
(17)	Total of Issuer = Lines (1) through (16)		0		0

ASSET CONCENTRATION

	1		2 Book/Adjusted Carrying Value	Factor	3 Additional RBC
	ISSUER NAME #3				
(1)	Class 2 Unaffiliated Bonds			0.010	0
(2)	Class 3 Unaffiliated Bonds			0.020	0
(3)	Class 4 Unaffiliated Bonds			0.045	0
(4)	Class 5 Unaffiliated Bonds			0.100	0
(5)	Collateral Loans			0.050	0
(6)	Mortgages			0.050	0
(7)	Class 2 Preferred Stock			0.010	0
(8)	Class 3 Preferred Stock			0.020	0
(9)	Class 4 Preferred Stock			0.045	0
(10)	Class 5 Preferred Stock			0.100	0
(11)	Class 2 Hybrid Securities			0.010	0
(12)	Class 3 Hybrid Securities			0.020	0
(13)	Class 4 Hybrid Securities			0.045	0
(14)	Class 5 Hybrid Securities			0.100	0
(15)	Other Long-Term Invested Assets			0.100	0
(16)	Unaffiliated Common Stock			0.150	0
(17)	Total of Issuer = Lines (1) through (16)		0		0

ASSET CONCENTRATION

		1	2 Book/Adjusted Carrying Value	Factor	3 Additional RBC
	ISSUER NAME #4				
(1)	Class 2 Unaffiliated Bonds			0.010	0
(2)	Class 3 Unaffiliated Bonds			0.020	0
(3)	Class 4 Unaffiliated Bonds			0.045	0
(4)	Class 5 Unaffiliated Bonds			0.100	0
(5)	Collateral Loans			0.050	0
(6)	Mortgages			0.050	0
(7)	Class 2 Preferred Stock			0.010	0
(8)	Class 3 Preferred Stock			0.020	0
(9)	Class 4 Preferred Stock			0.045	0
(10)	Class 5 Preferred Stock			0.100	0
(11)	Class 2 Hybrid Securities			0.010	0
(12)	Class 3 Hybrid Securities			0.020	0
(13)	Class 4 Hybrid Securities			0.045	0
(14)	Class 5 Hybrid Securities			0.100	0
(15)	Other Long-Term Invested Assets			0.100	0
(16)	Unaffiliated Common Stock			0.150	0
(17)	Total of Issuer = Lines (1) through (16)		0		0

ASSET CONCENTRATION

	1	2 Book/Adjusted Carrying Value	Factor	3 Additional RBC
	ISSUER NAME #5			
(1)	Class 2 Unaffiliated Bonds		0.010	0
(2)	Class 3 Unaffiliated Bonds		0.020	0
(3)	Class 4 Unaffiliated Bonds		0.045	0
(4)	Class 5 Unaffiliated Bonds		0.100	0
(5)	Collateral Loans		0.050	0
(6)	Mortgages		0.050	0
(7)	Class 2 Preferred Stock		0.010	0
(8)	Class 3 Preferred Stock		0.020	0
(9)	Class 4 Preferred Stock		0.045	0
(10)	Class 5 Preferred Stock		0.100	0
(11)	Class 2 Hybrid Securities		0.010	0
(12)	Class 3 Hybrid Securities		0.020	0
(13)	Class 4 Hybrid Securities		0.045	0
(14)	Class 5 Hybrid Securities		0.100	0
(15)	Other Long-Term Invested Assets		0.100	0
(16)	Unaffiliated Common Stock		0.150	0
(17)	Total of Issuer = Lines (1) through (16)	0		0

ASSET CONCENTRATION

		1	2 Book/Adjusted Carrying Value	Factor	3 Additional RBC
	ISSUER NAME #6				
(1)	Class 2 Unaffiliated Bonds			0.010	0
(2)	Class 3 Unaffiliated Bonds			0.020	0
(3)	Class 4 Unaffiliated Bonds			0.045	0
(4)	Class 5 Unaffiliated Bonds			0.100	0
(5)	Collateral Loans			0.050	0
(6)	Mortgages			0.050	0
(7)	Class 2 Preferred Stock			0.010	0
(8)	Class 3 Preferred Stock			0.020	0
(9)	Class 4 Preferred Stock			0.045	0
(10)	Class 5 Preferred Stock			0.100	0
(11)	Class 2 Hybrid Securities			0.010	0
(12)	Class 3 Hybrid Securities			0.020	0
(13)	Class 4 Hybrid Securities			0.045	0
(14)	Class 5 Hybrid Securities			0.100	0
(15)	Other Long-Term Invested Assets			0.100	0
(16)	Unaffiliated Common Stock			0.150	0
(17)	Total of Issuer = Lines (1) through (16)		0		0

ASSET CONCENTRATION

	1		2 Book/Adjusted Carrying Value	Factor	3 Additional RBC
	ISSUER NAME #7				
(1)	Class 2 Unaffiliated Bonds			0.010	0
(2)	Class 3 Unaffiliated Bonds			0.020	0
(3)	Class 4 Unaffiliated Bonds			0.045	0
(4)	Class 5 Unaffiliated Bonds			0.100	0
(5)	Collateral Loans			0.050	0
(6)	Mortgages			0.050	0
(7)	Class 2 Preferred Stock			0.010	0
(8)	Class 3 Preferred Stock			0.020	0
(9)	Class 4 Preferred Stock			0.045	0
(10)	Class 5 Preferred Stock			0.100	0
(11)	Class 2 Hybrid Securities			0.010	0
(12)	Class 3 Hybrid Securities			0.020	0
(13)	Class 4 Hybrid Securities			0.045	0
(14)	Class 5 Hybrid Securities			0.100	0
(15)	Other Long-Term Invested Assets			0.100	0
(16)	Unaffiliated Common Stock			0.150	0
(17)	Total of Issuer = Lines (1) through (16)		0		0

ASSET CONCENTRATION

		1	2 Book/Adjusted Carrying Value	Factor	3 Additional RBC
	ISSUER NAME #8				
(1)	Class 2 Unaffiliated Bonds			0.010	0
(2)	Class 3 Unaffiliated Bonds			0.020	0
(3)	Class 4 Unaffiliated Bonds			0.045	0
(4)	Class 5 Unaffiliated Bonds			0.100	0
(5)	Collateral Loans			0.050	0
(6)	Mortgages			0.050	0
(7)	Class 2 Preferred Stock			0.010	0
(8)	Class 3 Preferred Stock			0.020	0
(9)	Class 4 Preferred Stock			0.045	0
(10)	Class 5 Preferred Stock			0.100	0
(11)	Class 2 Hybrid Securities			0.010	0
(12)	Class 3 Hybrid Securities			0.020	0
(13)	Class 4 Hybrid Securities			0.045	0
(14)	Class 5 Hybrid Securities			0.100	0
(15)	Other Long-Term Invested Assets			0.100	0
(16)	Unaffiliated Common Stock			0.150	0
(17)	Total of Issuer = Lines (1) through (16)		0		0

ASSET CONCENTRATION

	1		2 Book/Adjusted Carrying Value	Factor	3 Additional RBC
	ISSUER NAME #9				
(1)	Class 2 Unaffiliated Bonds			0.010	0
(2)	Class 3 Unaffiliated Bonds			0.020	0
(3)	Class 4 Unaffiliated Bonds			0.045	0
(4)	Class 5 Unaffiliated Bonds			0.100	0
(5)	Collateral Loans			0.050	0
(6)	Mortgages			0.050	0
(7)	Class 2 Preferred Stock			0.010	0
(8)	Class 3 Preferred Stock			0.020	0
(9)	Class 4 Preferred Stock			0.045	0
(10)	Class 5 Preferred Stock			0.100	0
(11)	Class 2 Hybrid Securities			0.010	0
(12)	Class 3 Hybrid Securities			0.020	0
(13)	Class 4 Hybrid Securities			0.045	0
(14)	Class 5 Hybrid Securities			0.100	0
(15)	Other Long-Term Invested Assets			0.100	0
(16)	Unaffiliated Common Stock			0.150	0
(17)	Total of Issuer = Lines (1) through (16)		0		0

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ASSET CONCENTRATION

		1	2 Book/Adjusted Carrying Value	Factor	3 Additional RBC
	ISSUER NAME #10				
(1)	Class 2 Unaffiliated Bonds			0.010	0
(2)	Class 3 Unaffiliated Bonds			0.020	0
(3)	Class 4 Unaffiliated Bonds			0.045	0
(4)	Class 5 Unaffiliated Bonds			0.100	0
(5)	Collateral Loans			0.050	0
(6)	Mortgages			0.050	0
(7)	Class 2 Preferred Stock			0.010	0
(8)	Class 3 Preferred Stock			0.020	0
(9)	Class 4 Preferred Stock			0.045	0
(10)	Class 5 Preferred Stock			0.100	0
(11)	Class 2 Hybrid Securities			0.010	0
(12)	Class 3 Hybrid Securities			0.020	0
(13)	Class 4 Hybrid Securities			0.045	0
(14)	Class 5 Hybrid Securities			0.100	0
(15)	Other Long-Term Invested Assets			0.100	0
(16)	Unaffiliated Common Stock			0.150	0
(17)	Total of Issuer = Lines (1) through (16)		0		0

ASSET CONCENTRATION

	1		2 Book/Adjusted Carrying Value	Factor	3 Additional RBC
	ISSUER NAME GRAND TOTAL	GRAND TOTAL			
(1)	Class 2 Unaffiliated Bonds		0	0.010	0
(2)	Class 3 Unaffiliated Bonds		0	0.020	0
(3)	Class 4 Unaffiliated Bonds		0	0.045	0
(4)	Class 5 Unaffiliated Bonds		0	0.100	0
(5)	Collateral Loans		0	0.050	0
(6)	Mortgages		0	0.050	0
(7)	Class 2 Preferred Stock		0	0.010	0
(8)	Class 3 Preferred Stock		0	0.020	0
(9)	Class 4 Preferred Stock		0	0.045	0
(10)	Class 5 Preferred Stock		0	0.100	0
(11)	Class 2 Hybrid Securities		0	0.010	0
(12)	Class 3 Hybrid Securities		0	0.020	0
(13)	Class 4 Hybrid Securities		0	0.045	0
(14)	Class 5 Hybrid Securities		0	0.100	0
(15)	Other Long-Term Invested Assets		0	0.100	0
(16)	Unaffiliated Common Stock		0	0.150	0
(17)	Total of Issuer = Lines (1) through (16)		0		0

RBC Estimates (based on the 2010 Formulas) as of March 31, 2011 of the **Ohio Bankers Benefits Trust**

UNDERWRITING RISK

Experience Fluctuation Risk

	Line of Business	1 Comprehensive Medical	2 Medicare Supplement	3 Dental & Vision	4 Stand-Alone Medicare Part D Coverage	5 Other	6 TOTAL
(1) †	Premium	4,395,989					4,395,989
(2) †	Title XVIII - Medicare		XXX	XXX	XXX	XXX	0
(3) †	Title XIX - Medicaid		XXX	XXX	XXX	XXX	0
(4) †	Other Health Risk Revenue		XXX				0
(5)	Underwriting Risk Revenue = L(1) + L(2) + L(3) + L(4)	4,395,989	0	0	0	0	4,395,989
(6) †	Net Incurred Claims	3,816,987					3,816,987
(7) †	Fee-for-Service Offset		XXX				0
(8)	Underwriting Risk Incurred Claims = L(6) - L(7)	3,816,987	0	0	0	0	3,816,987
(9)	Underwriting Risk Claims Ratio = L(8) / L(5)	0.868	0.000	0.000	0.000	0.000	0.868
(10)	Underwriting Risk Factor *	0.150	0.105	0.120	0.251	0.130	XXX
(11)	Base Underwriting Risk RBC = L(5) x L(9) x (L10)	572,358	0	0	0	0	572,358
(12)	Managed Care Discount Factor	1.000	1.000	1.000	1.000	1.000	XXX
(13)	RBC After Managed Care Discount = L(11) x L(12)	572,358	0	0	0	0	572,358
(14) †	Maximum Per-Individual Risk After Reinsurance	225,000					XXX
(15)	Alternate Risk Charge **	450,000	0	0	0	0	XXX
(16)	Alternate Risk Adjustment	0	0	0	0	0	XXX
(17)	Net Alternate Risk Charge ***	450,000	0	0	0	0	450,000
(18)	Net Underwriting Risk RBC (Max(L(13), L(17)))	572,358	0	0	0	0	572,358

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* TIERED RBC FACTORS

	Comprehensive Medical	Medicare Supplement	Dental & Vision	Stand-Alone Medicare Part D Coverage	Other
$0 - $3 MILLION	0.150	0.105	0.120	0.251	0.130
$3 - $25 MILLION	0.150	0.067	0.076	0.251	0.130
OVER $25 MILLION	0.090	0.067	0.076	0.151	0.130

** ALTERNATE RISK CHARGE

	**The Line (15) Alternate Risk Charge is calculated as follows:				
LESSER OF:	$1,500,000 or 2 x Maximum Individual Risk	$50,000 or 2 x Maximum Individual Risk	$50,000 or 2 x Maximum Individual Risk	$150,000 or 6 x Maximum Individual Risk	$50,000 or 2 x Maximum Individual Risk

† The Annual Statement Sources are found on Page XR013.

* This column is for a single result for the Comprehensive Medical & Hospital, Medicare Supplement and Dental/Vision managed care discount factor.

*** Limited to the largest of the applicable alternate risk adjustments, prorated if necessary.

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UNDERWRITING RISK

† Annual Statement Source

	Line of Business	1 Comprehensive Medical	2 Medicare Supplement	3 Dental & Vision	4 Stand-Alone Medicare Part D Coverage	5 Other	6 Total
(1)	Premium	P7, C2, L1 + L2	P7, C3, L1 + L2	P7, C4 & C5, L1 + L2	Manual Input	Manual Input	
(2)	Title XVIII - Medicare	P7, C7, L1 + L2	XXX	XXX	XXX	XXX	P7, C7, L1 + L2
(3)	Title XIX - Medicaid	P7, C8, L1 + L2	XXX	XXX	XXX	XXX	P7, C8, L1 + L2
(4)	Other Health Risk Revenue	P7, C2, L4	XXX	P7, C4 & C5, L4	Manual Input	Manual Input	
(6)	Net Incurred Claims	P7, L17, C2 + C7 + C8	P7, C3, L17	P7, C4 & C5, L17	Manual Input	Manual Input	
(7)	Fee-for-Service Offset	P7, C2, L3	XXX	P7, C4 & C5, L3	Manual Input	Manual Input	
(14)	Maximum Per-Individual Risk After Reinsurance	Gen Int Pt 2 5.31 + 5.32	Gen Int Pt 2 5.33	Gen Int Pt 2 5.34	Manual Input	Manual Input	XXX

UNDERWRITING RISK

		Annual Statement Source	1 Amount	Factor	2 RBC Requirement
Other Underwriting Risk					
(19)	Business with Rate Guarantees Between 15-36 Months - Direct Premium Earned	Gen Int Pt 2, Line 9.21		0.024	0
(20)	Business with Rate Guarantees Over 36 Months - Direct Premium Earned	Gen Int Pt 2, Line 9.22		0.064	0
(21)	FEHBP and TRICARE Claims Incurred	UI Pt2, Col 6, Line 12.4		0.020	0
(22)	Stop Loss and Minimum Premium	Company Records		0.250	0
(22.1)	Supplemental Benefits within Stand-Alone Medicare Part D Coverage	Company Records		0.350	0
(22.2)	Total Other Underwriting Risk	Sum of lines (19) through (22.1)			0
Disability Income Premium					
(23)	Noncancelable Disability Income - Individual Morbidity	Company Records			
(23.1)	First $50 Million Earned Premium of L(23)		0	0.350	0
(23.2)	Over $50 Million Earned Premium of L(23)		0	0.150	0
(23.3)	Total Noncancelable Disability Income - Individual Morbidity	L(23.1) + L(23.2)			0
(24)	Other Disability Income - Individual Morbidity	Company Records			
(24.1)	Earned premium in L(24) [up to $50 million less premium in L(23.1)]		0	0.250	0
(24.2)	Earned Premium in L(24) Not Included in L(24.1)		0	0.070	0
(24.3)	Total Other Disability Income - Individual Morbidity	L(24.1) + L(24.2)			0
(25)	Disability Income - Credit Monthly Balance Plans	Company Records			
(25.1)	First $50 Million Earned Premium of L(25)		0	0.200	0
(25.2)	Over $50 Million Earned Premium of L(25)		0	0.030	0
(25.3)	Total Disability Income - Credit Morbidity	L(25.1) + L(25.2)			0
(26)	Disability Income - Group Long-term	Company Records			
(26.1)	Earned Premium in L(26) [up to $50 million less premium in L(25.1)]		0	0.150	0
(26.2)	Earned Premium in L(26) Not Included in L(26.1)		0	0.030	0
(26.3)	Total Disability Income - Group Long-term	L(26.1) + L(26.2)			0
(27)	Disability Income - Credit Single Premium with Additional Reserves	Company Records			
(27.1)	Additional Reserves for Credit Disability Plans	Company Records			
(27.2)	Additional Reserves for Credit Disability Plans, prior year	Company Records			
(27.3)	Subtotal Disability Income - Credit Single Premium with Additional Reserves	L(27) - L(27.1) + (L27.2)	0		
(27.4)	Earned Premium in L(27.3) [up to $50 million less premium in L(25.1)+(26.1)]		0	0.100	0
(27.5)	Earned Premium in L(27.3) Not Included in L(27.4)		0	0.030	0
(27.5	Total Disability Income - Credit Single Premium with Additional Reserves	L(27.4) + L(27.5)			0
(28)	Disability Income - Credit Single Premium without Additional Reserves	Company Records			
(28.1)	Earned Premium in L(28) [up to $50 million less prem in L(25.1)+(26.1)+(27.4)]		0	0.150	0
(28.2)	Earned Premium in L(28) not included in L(28.1)		0	0.030	0
(28.3)	Total Disability Income - Credit Single Premium without Additional Reserves	L(28.1) + (L28.2)			0
(29)	Disability Income - Group Short-term	Company Records			
(29.1)	Earned Premium in L(29) [up to $50 million less prem in L(25.1)+(26.1)+ (27.4)+(28.1)]		0	0.050	0
(29.2)	Earned Premium in L(29) not included in L(29.1)		0	0.030	0
(29.3)	Total Disability Income - Group Short-term	L(29.1) + L(29.2)			0

UNDERWRITING RISK

		Annual Statement Source	1 Amount	Factor	2 RBC Requirement
Long-Term Care (LTC) Insurance Premium					
(30)	Noncancelable LTC Premium - Rate Risk	Company Records		* 0.100	0
(31)	All LTC Premium - Morbidity Risk (to $50 million)	Line (34.1) Column (1) up to 50 million	0	0.100	0
(32)	LTC Premium (over $50 million) - Morbidity Risk	Remainder of Line (34.1) Column (1) over 50 million	0	0.030	0
(33)	Premium-based RBC	Col (2), Line (30) + Line (31) + Line (32)			0

		Annual Statement Source	1 Premiums	2 Incurred Claims	3 Col. (2)/(1) Loss Ratio §	4 RBC Requirement
Historical Loss Ratio Experience						
(34.1)	Current Year	Company Records			0.000	
(34.2)	Immediate Prior Year	Company Records			0.000	
(34.3)	Average Loss Ratio	If loss ratios are used, [Column (3), Line (34.1) + Line (34.2) / 2, otherwise zero]			0.000	
(35)	Adjusted LTC Claims for RBC	If Column (3) Line (34.3) <> 0, then [Columns (1), Line (31) + Line (32)] x Column (3), Line (34.3), else Column (2), Line (34.1)		0		
(35.1)	Claims (to $35 million) - Morbidity Risk	Lower of Col. (2), Line (35) and $35 million		0	† 0.000	0
(35.2)	Claims (over $35 million) - Morbidity Risk	Excess of Col. (2), Line (35) over $35 million		0	‡ 0.000	0
(36)	LTC Claims Reserves	Company Records			0.000	0
(37)	Claims-based RBC	Col. (4), Line (35.1) + Line (35.2)				0
(38)	LTC RBC	Col. (2), Line (33) + Col. (4), Line (36) + Line (37)				0

* The factor applies to all Noncancelable premium.

† If Column (1), Line (34.1) is positive, then a factor of 0.250 is used. Otherwise, a higher factor of 0.370 is used.

‡ If Column (1), Line (34.1) is positive, then a factor of 0.080 is used. Otherwise, a higher factor of 0.120 is used.

§ If Column (1), Line (34.1) or (34.2) are less than or equal to zero or if Column (2), Line (34.1) or (34.2) are less than zero, the loss ratios are not used and Column (3), Line (34.3) is set to zero.

UNDERWRITING RISK

		Annual Statement Source	1 Amount	Factor *	2 RBC Requirement
Limited Benefit Plans (Individual and Group Combined)					
(39)	Hospital Indemnity and Specified Disease	Included in Page 7, Col 9, Line 1 and 2, in part		0.035	0
(39.1)	50,000 if L(39) is greater than zero				0
(39.2)	Total Hospital Indemnity and Specified Disease	L(39) + L(39.1)			0
(40)	Accidental Death & Dismemberment	Included in Page 7, Col 9, Line 1 and 2, in part			
(40.1)	First 10 Million Earned Premium of L(40)		0	0.055	0
(40.2)	Over 10 Million Earned Premium of L(40)		0	0.015	0
(40.3)	Maximum Retained Risk for any single claim	Company Records			
(40.4)	Three times L(40.3)		0		
(40.5)	Lesser of L(40.4) or $300,000				0
(40.6)	Total AD&D	L(40.1) + L(40.2) + L(40.5)			0
(41)	Other Accident	Included in Page 7, Col 9, Line 1 and 2, in part		0.050	0
(42)	Premium Stabilization Reserves	Included in U&I, Part 2D, Col 1, Line 4	0	(0.500)	‡‡ 0
(43)	Total, Other Underwriting Risk	L(22.2) + L(23.3) + L(24.3) + L(25.3) + L(26.3) + L(27.6) + L(28.3) + L(29.3) + L(38) + L(39.2) + L(40.6) + L(41) + L(42)			0

‡‡ This is limited to the total Net Underwriting RBC on XR012, Col (6), Line (18) less Col (4) and XR014, Col. (2), Lines (22.2), (23.3), (24.3), (25.3), (26.3), (27.6), (28.3), (29.3), and XR015, Col. (2), Line (33), and XR016 Col. (2), Line (39.2), (40.6) and (41).

UNDERWRITING RISK - MANAGED CARE CREDIT CALCULATION

	Managed Care Claims Payments	Annual Statement Source	1 Factor	2 Paid Claims	3 Weighted Claims †	4 Part D Weighted Claims ††
(1)	Category 0 - Arrangements not Included in Other Categories	Exhibit 7, Pt 1,Col 1, Line 5, in part §	0.000		0	
(2)	Category 1 - Payments Made According to Contractual Arrangements	Exhibit 7, Pt 1,Col 1, Line 6, in part §	0.150		0	
(3)	Category 2a - Subj to Withholds or Bonuses - Otherwise Category 0	Exhibit 7, Pt 1,Col 1, Line 7, in part §	* 0.000		0	
(4)	Category 2b - Subj to Withholds or Bonuses - Otherwise Category 1	Exhibit 7, Pt 1,Col 1, Line 8, in part §	* 0.150		0	
(5)	Category 3a - Capitated Payments Directly to Providers		0.600	0	0	
(5.1)	Capitation Payments - Medical Group - Category 3a	Exhibit 7, Pt 1, Col 1, Line 1, in part §				
(5.2)	Capitation Payments - All Other Providers - Category 3a	Exhibit 7, Pt 1, Col 1, Line 3, in part §				
(6)	Category 3b - Capitated Payments to Regulated Intermediaries	Included in Exhibit 7, Pt 1, Col 1, Line 2 §	0.600		0	
(7)	Category 3c - Capitated Payments to Non-Regulated Intermediaries	Included in Exhibit 7, Pt 1, Col 1, Line 2 §	0.600		0	
(8)	Category 4 - Medical & Hospital Expense Paid as Salary to Providers		0.750	0	0	
(8.1)	Non-contingent Salaries - Category 4	Exhibit 7, Pt 1, Col 1, Line 9, in part §				
(8.2)	Aggregate Cost Arrangements - Category 4	Exhibit 7, Pt 1, Col 1, Line 10, in part §				
(8.3)	Less Fee For Service revenue from ASC or ASO	Company Records				
(9)	Sub-total Paid Claims	Exhibit 7, Pt 1, Col 1, Line 13 - Line 11 - Line (8.3) - Line (12) - Line (13)		0	0	
	Stand-Alone Medicare Part D Coverage Claims Payments					
(10)	Category 0 - No Federal Reinsurance or Risk Corridor Protection	Company Records	XXX	XXX		XXX
(11)	Category 1 - Federal Reinsurance but no Risk Corridor Protection	Company Records	XXX	XXX		XXX
(12)	Category 2a - No Federal Reinsurance but Risk Corridor Protection	Company Records	0.667			0
(13)	Category 3a - Federal Reinsurance and Risk Corridor Protection Apply	Company Records	0.767			0
(14)	Sub-total Paid Claims	Sum of Lines (10) through (13)		0		0
(15)	Total Paid Claims	Sum of Lines (9) and (14)		0		
(16)	Weighted Average Managed Care Discount				0.000	0.000
(17)	Weighted Average Managed Care Risk Adjustment Factor				1.000	1.000

† This column is for a single result for the Comprehensive Medical & Hospital, Medicare Supplement and Dental managed care discount factor.
†† This column is for the Medicare Part D managed care discount factor.
§ Stand-Alone Medicare Part D Business reported in Lines (10) through (13) should be excluded from these amounts.
* The factor is calculated on Page XR018.

UNDERWRITING RISK - MANAGED CARE CREDIT CALCULATION

	* Calculation of Category 2 Managed Care Factor	Annual Statement Source	1 Amount
(18)	Withhold & bonus payments, prior year	Company Records	
(19)	Withhold & bonuses available, prior year	Company Records	
(20)	MCC Multiplier - average withhold returned [L(18)/L(19)]		0.000
(21)	Withholds & bonuses available, prior year	Company Records	0
(22)	Claims payments subject to withhold, prior year	Company Records	
(23)	Average withhold rate, prior year [L(21)/L(22)]		0.000
(24)	MCC Discount Factor, Category 2 Min{.25,[L(20) x L(23)]}		0.000

* The factor is pulled into Lines (3) and (4) on Page XR017.

RBC Estimates (based on the 2010 Formulas) as of March 31, 2011 of the **Ohio Bankers Benefits Trust**

CREDIT RISK

		Source	1 Amount	Factor	2 RBC Requirement
Reinsurance Ceded					
(1)	Recoverables on Paid Losses - 100% owned affiliates	Included in Sch S, Pt 2, Col 6, Line 0499999			
(2)	Recoverables on Paid Losses - other affiliates	Included in Sch S, Pt 2, Col 6, Line 0499999		0.005	0
(3)	Recoverables on Paid Losses - Non-affiliates	Sch S, Pt 2, Col 6, Line 0599999		0.005	0
(4)	Total Recoverables on Paid Losses	Lines (1) + (2) + (3) (Sch S, Pt 2, Col 6, Line 0699999)	0		0
(5)	Recoverables on Unpaid Losses - 100% owned affiliates	Included in Sch S, Pt 2, Col 7, Line 0499999			
(6)	Recoverables on Unpaid Losses - other affiliates	Included in Sch S, Pt 2, Col 7, Line 0499999		0.005	0
(7)	Recoverables on Unpaid Losses - Non-affiliates	Sch S, Pt 2, Col 7, Line 0599999		0.005	0
(8)	Total Recoverables on Unpaid Losses	Line (5) + (6) + (7) (Sch S, Pt 2, Col 7, Line 0699999)	0		0
(9)	Unearned premiums - 100% owned affiliates	Included in Sch S, Pt 3, Sn 2, Col 8, Line 0199999 + Line 0499999			
(10)	Unearned premiums - other affiliates	Included in Sch S, Pt 3, Sn 2, Col 8, Line 0199999 + Line 0499999		0.005	0
(11)	Unearned premiums - Non-affiliates	Included in Sch S, Pt 3, Sn 2, Col 8, Line 0299999 + Line 0599999		0.005	0
(12)	Total unearned premiums	Lines (9) + (10) + (11)	0		0
(13)	Other Reserve Credits - 100% owned affiliates	Included in Sch S, Pt 3, Sn 2, Col 9, Line 0199999 + Line 0499999			
(14)	Other Reserve Credits - other affiliates	Included in Sch S, Pt 3, Sn 2, Col 9, Line 0199999 + Line 0499999		0.005	0
(15)	Other Reserve Credits - Non-affiliates	Included in Sch S, Pt 3, Sn 2, Col 9, Line 0299999 + Line 0599999		0.005	0
(16)	Total Other Reserve Credits	Lines (13) + (14) + (15)	0		0
(17)	Total Reinsurance RBC	L(4) + L(8) + L(12) + L(16)			0
Capitations to Intermediaries					
(18)	Total Capitations Paid Directly to Providers	XR017, Col (2), Line (5)			
(19)	Less Secured Capitations to Providers	Company Records	0		
(20)	Capitation to Providers Subject to Credit Risk Charge	Line (18) - Line (19)	0	0.020	0
(21)	Total Capitations to Intermediaries	XR017, Col (2) Line (6) + Line (7)			
(22)	Less Secured Capitations to Intermediaries	Company Records	0		
(23)	Capitations to Intermediaries Subject to Credit Risk Charge	Line (21) - Line (22)	0	0.040	0
(24)	Capitation Credit Risk RBC	Line (20) + Line (23)			0

CREDIT RISK

		Source	1 Amount	Factor	2 RBC Requirement
Other Receivables					
(25)	Investment Income Receivable	Page 2, Col 3, Line 14	16,721	0.010	167
(26)	Health Care Receivables	Exhibit 3, Col 7, Line 0799999	3,876		
(26.1)	Pharmaceutical Rebate Receivables	Exhibit 3, Col 7, Line 0199999		0.050	0
(26.2)	Claim Overpayment Receivables	Exhibit 3, Col 7, Line 0299999		0.050	0
(26.3)	Loan and Advances to Providers	Exhibit 3, Col 7, Line 0399999		0.050	0
(26.4)	Capitation Arrangement Receivables	Exhibit 3, Col 7, Line 0499999		0.050	0
(26.5)	Risk Sharing Receivables	Exhibit 3, Col 7, Line 0599999		0.050	0
(26.6)	Other Health Care Receivables	Exhibit 3, Col 7, Line 0699999	3,876	0.050	194
(27)	Amounts Receivable Relating to Uninsured A&H Plans	Included in Page 2, Col 3, Line 17		0.050	0
(28)	Amounts Due From Parent, Subs and Affiliates	Page 2, Col 3, Line 23		0.050	0
(29)	Aggregate Write-ins for other than invested assets	Page 2, Col 3, Line 25		0.050	0
(30)	Total Other Receivables RBC	Sum L(25) + L(26.1) through L(29)			361
(31)	TOTAL CREDIT RBC	L(17) + L(24) + L(30)			361

BUSINESS RISK

		Source	1 Amount	Factor	2 RBC Requirement
Administrative Expense Risk					
(1)	Claims Adjustment Expenses	Page 4, Col 2, Line 20	380,841		
(2)	General Administrative Expenses	Page 4, Col 2, Line 21	11,085		
(3)	Less the Net amount of ASC Revenue and Expenses included in Line 1 and 2	Company Records			
(4)	Less the Net amount of ASO Revenue and Expenses included in Line 1 and 2	Company Records			
(5)	Less Admin Expenses for Commission & Premium Taxes	Underwriting & Investment Exhibit Part 3, Line 3, in part			
(6)	Administrative Expenses Base RBC	L(1) + L(2) - L(3) - L(4) - L(5)	391,926	* 0.070	27,435
(7)	Proration of Admin Expense to Experience Fluctuation Risk	L(6) * L(20) / (L(21) + L(22))			27,435
Non-Underwritten and Limited-Risk					
(8)	Administrative expenses for ASC arrangements	Company Records		0.020	0
(9)	Administrative expenses for ASO arrangements	Company Records		0.020	0
(10)	Medical costs paid through ASC arrangements (Including Fee-for-service received from other health entities)	Company Records		0.010	0
(11)	Non-Underwritten and Limited Risk Business RBC		0		0
Guaranty Fund Assessment Risk					
(12)	Premiums Subject to Guaranty Fund Assessment	Included in Sch T - Company Records		0.005	0
Excessive Growth Risk					
(13)	Underwriting Risk Revenue, Prior Year	2010 XR012 Col (6) Line (5) (manual entry)	4,365,802		
(14)	Underwriting Risk Revenue, Current Year	2011 XR012 Col (6) Line (5)	4,395,989		
(15)	Net Underwriting Risk RBC, Prior Year	2010 XR012 Col (6) Line (18) (manual entry)	674,849		
(16)	Net Underwriting Risk RBC, Current Year	2011 XR012 Col (6) Line (18)	572,358		
(17)	RBC Growth Safe Harbor	[L(14) / L(13) + 0.10] * L(15)	747,000		
(18)	Excess of RBC Growth Over Safe Harbor	Max{0, L(16) - L(17)}	0		
(19)	Excessive Growth Risk RBC	0.5 * L(18)			0

* The factor for the Administrative Expenses Base RBC is calculated as a weighted average, based on premium volume from XR012.

			Premium	Weight	Weighted Premium
(20)	Experience Fluctuation Risk Revenue	XR012, Col (6), Line (5)	4,395,989		
(21)	Premiums Earned	Page 4, Col 2, Line 2 + 3	4,395,989		
(22)	Risk Revenue	Page 4, Col 2, Line 5			
(23)	Tier 1 - $0 to $25 Million of Line (20)		4,395,989	0.070	307,719
(24)	Tier 2 - Amount over $25 Million of Line (20)		0	0.040	0
(25)	Total Experience Fluctuation Risk Revenue	L(23) + L(24)	4,395,989		307,719
(26)	Administrative Expenses Base RBC Factor	Col (2), Line (25) / Col (1), Line (25)			0.070

RBC Estimates (based on the 2010 Formulas) as of March 31, 2011 of the **Ohio Bankers Benefits Trust**

CALCULATION OF TOTAL RISK-BASED CAPITAL AFTER COVARIANCE

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			1 RBC Amount
H0 - ASSET RISK - AFFILIATES W/RBC			
(1)	Off-Balance Sheet Items	XR005, Off-Balance Sheet Page - L(15)	
(2)	Directly Owned Insurer Subject to RBC	XR003, Affiliates Page - L(1)	
(3)	Indirectly Owned Insurer Subject to RBC	XR003, Affiliates Page - L(2)	
(4)	Directly Owned MCO Subject to RBC	XR003, Affiliates Page - L(3)	
(5)	Indirectly Owned MCO Subject to RBC	XR003, Affiliates Page - L(4)	
(6)	Directly Owned Alien Insurer	XR003, Affiliates Page - L(7)	
(7)	Indirectly Owned Alien Insurer	XR003, Affiliates Page - L(8)	
(8)	Total H0	Sum L(1) through L(7)	(
H1 - ASSET RISK - OTHER			
(9)	Investment Subsidiary	XR003, Affiliates Page - L(5)	
(10)	Holding Company Excess of Subsidiaries	XR003, Affiliates Page - L(6)	
(11)	Investment in Parent	XR003, Affiliates Page - L(9)	
(12)	Other Affiliates	XR003, Affiliates Page - L(10)	
(13)	Fair Value Excess Affiliate Common Stock	XR003, Affiliates Page - L(11)	
(14)	Fixed Income Assets	XR006, Off-Balance Sheet Collateral L(9)+L(19) + XR007, Fixed Income Assets Page - L(27)	1,84:
(15)	Replication & Mandatorily Convertible Securities	XR008, Replication/MCS Page - L(9999999)	
(16)	Unaffiliated Preferred Stock and Hybrid Securities	XR006, Off-Balance Sheet Collateral L(16) + XR009, Equity Assets Page L(15)	
(17)	Unaffiliated Common Stock	XR006, Off-Balance Sheet Collateral L(17) + XR009, Equity Assets Page L(21)	34,81:
(18)	Property & Equipment	XR006, Off-Balance Sheet Collateral L(18) + XR010, Prop/Equip Assets Page - L(9))	
(19)	Asset Concentration	XR011, Grand Total, Asset Concentration Page - L(17)	
(20)	Total H1	Sum L(9) through L(19)	36,65:
H2 - UNDERWRITING RISK			
(21)	Net Underwriting Risk	XR012, Underwriting Risk Page - L(18)	572,35:
(22)	Other Underwriting Risk	XR014, Underwriting Risk Page - L(22.2)	
(23)	Disability Income	XR014, Underwriting Risk Page - L(23.3)+L(24.3)+L(25.3)+L(26.3)+L(27.6)+L(28.3)+L(29.3)	
(24)	Long-Term Care	XR015, Underwriting Risk Page - L(38)	
(25)	Limited Benefit Plans	XR016, Underwriting Risk Page - L(39.2) + L(40.6) + L(41)	
(26)	Premium Stabilization Reserve	XR016, Underwriting Risk Page - L(42)	
(27)	Total H2	Sum L(21) through L(26)	572,35:

CALCULATION OF TOTAL RISK-BASED CAPITAL AFTER COVARIANCE

			1 RBC Amount
H3 - CREDIT RISK			
(28)	Total Reinsurance RBC	XR019, Credit Risk Page - L(17)	
(29)	Intermediaries Credit Risk RBC	XR019, Credit Risk Page - L(24)	
(30)	Total Other Receivables RBC	XR020, Credit Risk Page - L(30)	
(31)	Total H3	Sum L(28) through L(30)	0
H4 - BUSINESS RISK			
(32)	Administrative Expense RBC	XR021, Business Risk Page - L(7)	27,435
(33)	Non-Underwritten and Limited Risk Business RBC	XR021, Business Risk Page - L(11)	
(34)	Premiums Subject to Guaranty Fund Assessments	XR021, Business Risk Page - L(12)	
(35)	Excessive Growth RBC	XR021, Business Risk Page - L(19)	
(36)	Total H4	Sum L(32) through L(35)	27,435
(37)	RBC After Covariance	H0+Square Root of (H1^2+H2^2+H3^2+H4^2)	574,186
(38)	Authorized Control Level RBC	0.50 * RBC AFTER COVARIANCE	287,093

RBC Estimates (based on the 2010 Formulas) as of March 31, 2011 of the **Ohio Bankers Benefits Trust**

CALCULATION OF TOTAL ADJUSTED CAPITAL

		Annual Statement Source	1 Amount	Factor	2 Adjusted Capital
Company Amounts					
(1)	Capital and Surplus	Page 3, Col 3, Line 33	2,322,493	1.000	2,322,493
Subsidiary Adjustments					
(2)	AVR - Life Subsidiaries	Affiliate's statement		1.000	0
(3)	Dividend Liability - Life Subsidiaries	Affiliate's statement		0.500	0
(4)	Tabular Discounts - P&C Subsidiaries	Affiliate's statement		(1.000)	0
(5)	Non-Tabular Discounts - P&C Subsidiaries	Affiliate's statement		(1.000)	0
(6)	Total Adjusted Capital, Post-Deferred Tax				2,322,493
Sensitivity Test					
(7)	DTA Value for Company	Page 2, Col 3, Line 18.2		1.000	0
(8)	DTL Value for Company	Page 3, Col 3, Line 10.2		1.000	0
(9)	DTA Value for Insurance Subsidiaries	Company Records		1.000	0
(10)	DTL Value for Insurance Subsidiaries	Company Records		1.000	0
(11)	Total Adjusted Capital, Pre-Deferred Tax (Sensitivity)	L(6) - L(7) + L(8) - L(9) + L(10)			2,322,493
	Expanded DTA Sensitivity Test				
(12)	Expanded Deferred Tax Asset	Page 2, Column 3 Line 18.2 in part		1.000	0
(13)	Total Adjusted Capital Less Expanded Deferred Tax Asset	Line (6) less Line (12)			2,322,493
(14)	Authorized Control Level RBC	XR025 Comparison of Total Adjusted Capital to RBC Capital Line (4)			287,093
(15)	RBC% Without Expanded Deferred Tax Asset	Line (13) / Line (14)			809

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RBC Estimates (based on the 2010 Formulas) as of March 31, 2011 of the **Ohio Bankers Benefits Trust**

COMPARISON OF TOTAL ADJUSTED CAPITAL TO RISK-BASED CAPITAL

		Abbreviation	1 Amount
(1)	Total Adjusted Capital, Post-Tax		2,322,493
(2)	Company Action Level=200% of Authorized Control Level	CAL	574,186
(3)	Regulatory Action Level=150% of Authorized Control Level	RAL	430,640
(4)	Authorized Control Level=100% of Authorized Control Level	ACL	287,093
(5)	Mandatory Control Level=70% of Authorized Control Level	MCL	200,965
(6)	Level of Action, if Any		NONE

THE FOLLOWING NUMBERS MUST BE REPORTED IN THE FIVE YEAR HISTORY ON THE INDICATED LINE

Total Adjusted Capital on Line 14 of the Five Year Historical Data Page	2,322,493
Authorized Control Level Risk-Based Capital on Line 15 of the Five Year Historical Data Page	287,093

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TREND TEST

		Annual Statement Source	Amount	Result
(7)	Total Revenue	Page 4, Line 8	4,395,589	
(8)	Underwriting Deductions	Page 4, Line 23	4,208,913	
(9)	Combined Ratio	Line (8)/Line (7)	95.75	
(10)	RBC Ratio	Line (1)/Line (4)	808.969	
(11)	Trend Test Result	If Line (10) is between 200% and 300% and Line (9) > 105%, then "Yes", otherwise "No"		No
(12)	Level of Action, if any, including Trend Test		NONE	

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