



HEALTH QUARTERLY STATEMENT

As of March 31, 2012
of the Condition and Affairs of the

Molina Healthcare of Ohio, Inc.

NAIC Group Code.....1531, 1531 (Current Period) (Prior Period)	NAIC Company Code..... 12334	Employer's ID Number..... 20-0750134
Organized under the Laws of OH	State of Domicile or Port of Entry OH	Country of Domicile US
Licensed as Business Type Health Maintenance Organization	Is HMO Federally Qualified? Yes [] No [X]	
Incorporated/Organized..... November 19, 2003	Commenced Business..... October 24, 2005	
Statutory Home Office	8101 North High Street, Suite 180..... Columbus OH 43235 (Street and Number) (City or Town, State and Zip Code)	
Main Administrative Office	8101 North High Street, Suite 180..... Columbus OH 43235 (Street and Number) (City or Town, State and Zip Code)	614-781-4300 (Area Code) (Telephone Number)
Mail Address	8101 North High Street, Suite 180..... Columbus OH 43235 (Street and Number or P. O. Box) (City or Town, State and Zip Code)	
Primary Location of Books and Records	8101 North High Street, Suite 180..... Columbus OH 43235 (Street and Number) (City or Town, State and Zip Code)	614-781-4300 (Area Code) (Telephone Number)
Internet Web Site Address	www.molinahealthcare.com	
Statutory Statement Contact	Benjamin Sargent Orris (Name) benjamin.orris@molinahealthcare.com (E-Mail Address)	614-781-4300 (Area Code) (Telephone Number) (Extension) 614-781-1410 (Fax Number)

OFFICERS

Name	Title	Name	Title
1. Amy Schultz Clubbs	President	2. Benjamin Sargent Orris	Treasurer/VP
3. Jeffrey Don Barlow	Secretary	4.	

OTHER

DIRECTORS OR TRUSTEES

Amy Schultz ClubbsTeri Daly LauensteinJames Dwight Forshee MD

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.

(Signature) Amy Schultz Clubbs 1. (Printed Name) President (Title)	(Signature) Benjamin Sargent Orris 2. (Printed Name) Treasurer/VP (Title)	(Signature) Jeffrey Don Barlow 3. (Printed Name) Secretary (Title)
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Subscribed and sworn to before me	a. Is this an original filing?	Yes [X] No []
This day of	b. If no:	
	1. State the amendment number	
	2. Date filed	
	3. Number of pages attached	

ASSETS

	Current Statement Date			4
	1	2	3	
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1. Bonds.....	59,628,402		59,628,402	64,626,405
2. Stocks:				
2.1 Preferred stocks.....			.0	
2.2 Common stocks.....			.0	
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 (\$.....(10,518,938)), cash equivalents (\$.....52,755,926) and short-term investments (\$.....71,014,452).....	113,251,439		113,251,439	120,615,257
6. Contract loans (including \$.....0 premium notes).....			.0	
7. Derivatives.....			.0	
8. Other invested assets.....			.0	
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).....	172,879,841	0	172,879,841	185,241,662
13. Title plants less \$.....0 charged off (for Title insurers only).....			.0	
14. Investment income due and accrued.....	438,708		438,708	730,091
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	13,448,442		13,448,442	11,390,152
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.....	2,350		2,350	2,350
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	35,302		35,302	
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.....	70,650		70,650	70,650
18.1 Current federal and foreign income tax recoverable and interest thereon.....	2,608,908		2,608,908	
18.2 Net deferred tax asset.....	1,849,601	179,016	1,670,585	1,203,705
19. Guaranty funds receivable or on deposit.....			.0	
20. Electronic data processing equipment and software.....	5,623		5,623	6,615
21. Furniture and equipment, including health care delivery assets (\$.....0).....	762,366	762,366	.0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			.0	
23. Receivables from parent, subsidiaries and affiliates.....	870,155		870,155	
24. Health care (\$.....16,917,354) and other amounts receivable.....	18,098,552	1,181,198	16,917,354	15,966,675
25. Aggregate write-ins for other than invested assets.....	235,148	235,148	.0	7,424
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	211,305,646	2,357,728	208,947,918	214,619,324
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			.0	
28. Total (Lines 26 and 27).....	211,305,646	2,357,728	208,947,918	214,619,324

DETAILS OF WRITE-INS

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. Prepayments and Other Receivables.....	235,148	235,148	.0	7,424
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).....	235,148	235,148	.0	7,424

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$.....0 reinsurance ceded).....	63,880,010		63,880,010	73,485,008
2. Accrued medical incentive pool and bonus amounts.....			0	
3. Unpaid claims adjustment expenses.....	1,060,450		1,060,450	981,265
4. Aggregate health policy reserves, including the liability of \$.....0 for medical loss ratio rebate per the Public Health Service Act.....			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.....	202,692		202,692	
9. General expenses due or accrued.....	22,210,172		22,210,172	20,362,696
10.1 Current federal and foreign income tax payable and interest thereon (including \$.....0 on realized gains (losses)).....			0	357,436
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	288,671
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).....	592,046	0	592,046	3,378,324
24. Total liabilities (Lines 1 to 23).....	87,945,370	0	87,945,370	98,853,400
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	0	0
26. Common capital stock.....	XXX	XXX	1,500	1,500
27. Preferred capital stock.....	XXX	XXX		
28. Gross paid in and contributed surplus.....	XXX	XXX	82,888,500	82,888,500
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	38,112,548	32,875,924
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	121,002,548	115,765,924
34. Total liabilities, capital and surplus (Lines 24 and 33).....	XXX	XXX	208,947,918	214,619,324

DETAILS OF WRITE-INS

2301. Amounts Due to State.....	592,046		592,046	3,378,324
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).....	592,046	0	592,046	3,378,324
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		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member months.....	XXX.....	745,500.....	736,428.....	2,966,124.....
2. Net premium income (including \$.....0 non-health premium income).....	XXX.....	291,474,026.....	228,891,126.....	998,772,343.....
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.....	3,643,785.....	511,155.....	1,682,964.....
7. Aggregate write-ins for other non-health revenues.....	XXX.....	0.....	0.....	0.....
8. Total revenues (Lines 2 to 7).....	XXX.....	295,117,811.....	229,402,281.....	1,000,455,307.....
Hospital and Medical:				
9. Hospital/medical benefits.....	.....	137,562,485.....	127,646,647.....	566,245,814.....
10. Other professional services.....	.....	24,431,457.....	21,444,528.....	64,176,180.....
11. Outside referrals.....	.....	.....	.....	.....
12. Emergency room and out-of-area.....	.....	20,709,818.....	17,334,182.....	77,605,277.....
13. Prescription drugs.....	.....	52,166,230.....	790,783.....	53,574,204.....
14. Aggregate write-ins for other hospital and medical.....	0.....	787,507.....	857,710.....	3,941,892.....
15. Incentive pool, withhold adjustments and bonus amounts.....	.....	79,200.....	.....	.....
16. Subtotal (Lines 9 to 15).....	0.....	235,736,697.....	168,073,850.....	765,543,367.....
Less:				
17. Net reinsurance recoveries.....	.....	1,533,243.....	544,486.....	1,811,341.....
18. Total hospital and medical (Lines 16 minus 17).....	0.....	234,203,454.....	167,529,364.....	763,732,026.....
19. Non-health claims (net).....	.....	.....	.....	.....
20. Claims adjustment expenses, including \$.....5,353,154 cost containment expenses.....	.....	6,711,811.....	5,629,959.....	22,781,732.....
21. General administrative expenses.....	.....	44,718,046.....	33,375,487.....	145,466,426.....
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.....	285,633,311.....	206,534,810.....	931,980,184.....
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	XXX.....	9,484,500.....	22,867,471.....	68,475,123.....
25. Net investment income earned.....	.....	284,754.....	313,974.....	1,090,220.....
26. Net realized capital gains (losses) less capital gains tax of \$.....0.....	.....	.....	.....	102,176.....
27. Net investment gains or (losses) (Lines 25 plus 26).....	0.....	284,754.....	313,974.....	1,192,396.....
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.....	9,769,254.....	23,181,445.....	69,667,519.....
31. Federal and foreign income taxes incurred.....	XXX.....	3,565,573.....	13,106,753.....	24,324,454.....
32. Net income (loss) (Lines 30 minus 31).....	XXX.....	6,203,681.....	10,074,692.....	45,343,065.....

DETAILS OF WRITE-INS

0601. Performance Revenue.....	XXX.....	3,643,785.....	511,155.....	1,682,964.....
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.....	3,643,785.....	511,155.....	1,682,964.....
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. Transportation Costs.....	.....	787,507.....	857,710.....	3,941,892.....
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.....	787,507.....	857,710.....	3,941,892.....
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.....	115,765,925	98,938,636	98,938,636
34. Net income or (loss) from Line 32.....	6,203,681	10,074,692	45,343,065
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.....			110,411
37. Change in net unrealized foreign exchange capital gain or (loss).....			
38. Change in net deferred income tax.....	645,895	4,982,332	(71,021)
39. Change in nonadmitted assets.....	(1,612,953)	139,252	444,834
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.....			
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.....			(29,000,000)
47. Aggregate write-ins for gains or (losses) in surplus.....	0	35,031	0
48. Net change in capital and surplus (Lines 34 to 47).....	5,236,623	15,231,307	16,827,289
49. Capital and surplus end of reporting period (Line 33 plus 48).....	121,002,548	114,169,943	115,765,925

DETAILS OF WRITE-INS

4701. Change in Unrealized Gain / Loss.....		35,031	
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	35,031	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.....	289,618,428	301,956,974	995,462,374
2. Net investment income.....	855,669	782,852	2,585,742
3. Miscellaneous income.....	3,643,785	511,155	1,682,964
4. Total (Lines 1 through 3).....	294,117,882	303,250,981	999,731,080
5. Benefit and loss related payments.....	245,937,957	176,762,047	750,777,166
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....	52,289,474	42,754,697	170,251,610
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	6,531,917	5,431,987	29,411,760
10. Total (Lines 5 through 9).....	304,759,348	224,948,731	950,440,536
11. Net cash from operations (Line 4 minus Line 10).....	(10,641,466)	78,302,250	49,290,544
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	8,947,657	4,241,000	25,945,349
12.2 Stocks.....			16,000,594
12.3 Mortgage loans.....			
12.4 Real estate.....			
12.5 Other invested assets.....			
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).....	8,947,657	4,241,000	41,945,942
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	4,229,185	3,224,460	27,474,642
13.2 Stocks.....			16,000,594
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).....	4,229,185	3,224,460	43,475,236
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).....	4,718,471	1,016,540	(1,529,293)
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.....			
16.3 Borrowed funds.....			
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....			
16.5 Dividends to stockholders.....			29,000,000
16.6 Other cash provided (applied).....	(1,440,823)	(1,302,267)	(2,689,739)
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	(1,440,823)	(1,302,267)	(31,689,739)
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).....	(7,363,818)	78,016,523	16,071,512
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	120,615,257	104,543,745	104,543,745
19.2 End of period (Line 18 plus Line 19.1).....	113,251,439	182,560,268	120,615,257

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

20.0001			
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EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at End of:										
1. Prior Year.....	248,004							170	247,834	
2. First Quarter.....	248,950							183	248,767	
3. Second Quarter.....	0									
4. Third Quarter.....	0									
5. Current Year.....	0									
6. Current Year Member Months.....	745,500							527	744,973	
Total Member Ambulatory Encounters for Period:										
7. Physician.....	334,964							462	334,502	
8. Non-Physician.....	472,922							497	472,425	
9. Total.....	807,886	0	0	0	0	0	0	959	806,927	0
10. Hospital Patient Days Incurred.....	33,098							72	33,026	
11. Number of Inpatient Admissions.....	7,819							17	7,802	
12. Health Premiums Written (a).....	292,426,841							586,749	291,840,092	
13. Life Premiums Direct.....	0									
14. Property/Casualty Premiums Written.....	0									
15. Health Premiums Earned.....	292,426,841							586,749	291,840,092	
16. Property/Casualty Premiums Earned.....	0									
17. Amount Paid for Provision of Health Care Services.....	245,937,960							258,553	245,679,407	
18. Amount Incurred for Provision of Health Care Services.....	235,736,697							422,708	235,313,989	

(a) For health premiums written: Amount of Medicare Title XVIII exempt from state taxes or fees \$.....586,749.

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

Aging Analysis of Unpaid Claims						
1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims Unpaid (Reported)						
CVS Caremark Cop.....	10,955,111					10,955,111
0199999. Individually Listed Claims Unpaid.....	10,955,111	0	0	0	0	10,955,111
0399999. Aggregate Accounts Not Individually Listed-Covered.....	962,831					962,831
0499999. Subtotals.....	11,917,942	0	0	0	0	11,917,942
0599999. Unreported Claims and Other Claim Reserves.....						51,962,068
0799999. Total Claims Unpaid.....						63,880,010

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 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	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		
1. Comprehensive (hospital and medical).....					0	
2. Medicare Supplement.....					0	
3. Dental only.....					0	
4. Vision only.....					0	
5. Federal Employees Health Benefits Plan.....					0	
6. Title XVIII - Medicare.....	80,364	178,189		323,614	80,364	299,995
7. Title XIX - Medicaid.....	68,778,934	176,900,473	210,862	63,345,533	68,989,796	73,185,014
8. Other health.....					0	
9. Health subtotal (Lines 1 to 8).....	68,859,298	177,078,662	210,862	63,669,147	69,070,160	73,485,009
10. Healthcare receivables (a).....				18,096,181	0	15,966,676
11. Other non-health.....					0	
12. Medical incentive pools and bonus amounts.....					0	
13. Totals (Lines 9-10+11+12).....	68,859,298	177,078,662	210,862	45,572,966	69,070,160	57,518,333

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

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies

A. Accounting Practices

The financial statements of Molina Healthcare of Ohio, Inc. (the “Company”) are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance.

The Ohio Department of Insurance (ODI) recognizes only statutory accounting practices prescribed or permitted by the state of Ohio for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Ohio insurance law. The National Association of Insurance Commissioners’ *Accounting Practices and Procedures Manual* (the “Manual”) has been adopted as a component of prescribed or permitted practices by the state of Ohio.

The state has adopted certain prescribed accounting practices that differ from those found in the Manual. Specifically,

- (1) Provides limitations on investments that are outside the scope of the Manual.
- (2) Provides for establishment of statutory premium reserve - provides a calculation method that differs from the Manual.

Such prescribed accounting practices have no significant effect on the Company’s statutory-basis financial statements for the periods presented.

2. Accounting Changes and Corrections of Errors

None

3. Business Combinations and Goodwill

None

4. Discontinued Operations

None

5. Investments

D. Loan-Backed Securities:

As of March 31, 2012, \$7,550,000 of the Company’s investments in bonds consisted of auction rate securities (loan-backed securities).

- (1) Prepayment assumptions for auction rate securities are included in the broker-dealer's valuation model.
- (2),(3) No OTTI recognized
- (4) a.,b. As of March 31, 2012, these securities had a fair value of \$6,606,590, for an aggregate total of \$943,410 in unrealized losses; such securities have been in a continuous loss position for 12 months or longer.
- (5) Due to events in the credit markets, these auction rate securities experienced failed auctions beginning in the first quarter of 2008. As such, quoted prices in active markets were not readily available during the majority of 2008, all of 2009, 2010 and 2011, and continued to be unavailable as of March 31, 2012. To estimate the fair value of these securities, the Company uses valuations from third party pricing models that include factors such as the collateral underlying the securities, the creditworthiness of the counterparty, the timing of expected future cash flows, and the expectation of the next time the security would have a successful auction. To validate the reasonableness of these valuations, the Company compares such valuations to other third party valuations that provide a range of prices representing indicative bids from potential buyers. The Company concluded that these estimates, given the lack of market available pricing, provided a reasonable basis for determining fair value of the auction rate securities as of March 31, 2012.

The Company attributes the decline in market value of these loan-backed securities to liquidity issues, as a result of the failed auction market, rather than to credit issues. Because the decline in market value is not due to the credit quality of the issuers, and because the Company does not intend to sell, nor is it more likely than not that the Company will be required to sell, these investments before recovery of their cost, the Company does not consider the auction rate securities that are designated as available-for-sale to be other-than-temporarily impaired at March 31, 2012.

NOTES TO FINANCIAL STATEMENTS

6. Joint Ventures, Partnerships and Limited Liability Companies

None

7. Investment Income

The Company had no investment income that was excluded in 2012 or 2011. All of the Company’s investments and the income derived from such investments meet the criteria for admitted receivables.

8. Derivative Instruments

None

9. Income Taxes

A.(1) The Company’s net deferred tax asset (all ordinary) is reflected on the following schedule:

		03/31/12	12/31/11
	Total of all deferred tax assets	\$1,908,226	\$1,423,151
	Statutory valuation allowance		
	Adjusted gross deferred tax assets	1,908,226	1,423,151
	Total of all deferred tax liabilities	(58,625)	(219,446)
	Net deferred tax asset(liability) before admissibility test	1,849,601	1,203,705
	Total deferred tax assets non-admitted	179,016	-
	Net admitted DTA or DTL	1,670,585	1,203,705

(2) Not applicable

(3) Not applicable

(4) Admission calculation components are as follows:

		03/31/12	12/31/11
	Admitted pursuant to par. 11.a.	\$1,670,585	\$1,203,705
	Admitted pursuant to par, 11.b. (lesser of 11.b.ii. below)	-	-
	Par 11.b.i.	-	-
	Par 11.b.ii.	17,898,951	10,300,006
	Admitted pursuant to 11.c.	58,625	219,446
	Admitted deferred tax assets	1,729,210	\$1,423,151

ExDTA ACL RBC Ratio 453% 435%

(5) Not applicable

(6) Not applicable

B. All deferred federal tax liabilities were recognized as an offset to deferred tax assets.

C. Current Tax and Change in Deferred Tax.

Current income taxes incurred consist of the following major components:

	03/31/12	12/31/11
Current income tax expense (benefit)	\$3,561,741	\$24,705,565
Tax on capital gains	3,915	35,762
Prior year under accrual (over accrual)	(83)	(416,872)
Federal income tax expense (benefit)	\$3,565,573	\$24,324,455

The tax effects of temporary differences that give rise to significant portions of the deferred tax assets and liabilities are as follows:

NOTES TO FINANCIAL STATEMENTS

		03/31/12	12/31/11	Change	Character
Deferred tax assets:					
Discounting of unpaid losses		\$393,268	\$497,479	(\$104,211)	ordinary
Unearned premium reserve		14,188	-	14,188	ordinary
Fixed assets		280,023	179,305	100,718	ordinary
Compensation and benefits accrual		172,863	149,196	23,667	ordinary
Other		1,047,884	597,171	450,713	ordinary
Total deferred tax assets		1,908,226	1,423,151	485,075	
Non-admitted deferred tax assets		(179,016)	-	(179,016)	
Admitted deferred tax assets		1,729,210	1,423,151	306,059	
Deferred tax liabilities:					
Other		(58,625)	(219,446)	160,821	ordinary
Total deferred tax liabilities		(58,625)	(219,446)	160,821	
Non-admitted deferred tax liabilities		-	-	-	
Admitted deferred tax liabilities		(58,625)	(219,446)	160,821	
Net admitted deferred tax assets		\$1,670,585	\$1,203,705	\$466,880	

The change in net deferred income taxes is comprised of the following (this analysis is exclusive of non-admitted assets as the Change in Non-Admitted Assets is reported separately from the Change in Deferred Income taxes in the surplus section of the Annual Statement):

	2012	2011	Change
Total deferred tax assets	\$1,908,226	\$1,423,151	\$485,075
Total deferred tax liabilities	(58,625)	(219,446)	160,821
Net deferred tax asset (liability)	1,849,601	1,203,705	645,896
Tax effect of unrealized (gains)/losses			-
Change in net deferred income tax assets-increase (decrease)			\$ 645,896

The Company is subject to taxation in the United States. With few exceptions, the Company is no longer subject to U.S. federal tax examination for tax years before 2008.

D. The provision for federal and foreign income taxes incurred is different from that which would be obtained by applying the statutory federal tax rate to income before income taxes. The significant items causing this difference are as follows:

	Amount	Tax Effect	Effective Tax Rate
Taxes on income at federal statutory tax rate	\$9,769,254	\$3,419,239	35.00%
Changes in nonadmitted assets	(1,435,463)	(502,412)	-5.14%
Meals and entertainment	2,586	905	0.01%
Other, including Prior Year True-up	5,557	1,945	0.02%
Reported tax expense	\$8,341,934	\$2,919,677	29.89%

Federal and foreign income taxes incurred	\$3,565,573	36.50%
Change in net deferred income taxes	(645,896)	-6.61%
Total statutory income taxes	2,919,677	29.89%

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

A.- D. No significant change.

E. On September 9, 2011, the Parent entered into a credit agreement for a \$170.0 million revolving Credit Facility with various lenders to be used for general corporate purposes. The Credit Facility is collateralized by the Company's common stock , as well as the common stock of other subsidiaries of the Parent. \$10.0 million was outstanding under this Credit Facility as of March 31, 2012. As of March 31, 2012, the Parent was in compliance with all financial covenants under the Credit Facility.

F. - L. No significant change.

11. Debt

None

NOTES TO FINANCIAL STATEMENTS

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

No significant change.

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

No significant change.

14. Contingencies

- A. Contingent Commitments: As described in Note 10.E. above, the Parent has entered into a credit facility, which is collateralized by the Company’s common stock, as well as the common stock of other subsidiaries of the Parent. \$10.0M was outstanding under this Credit Facility at March 31, 2012.
- B. - E. No significant change

15. Leases

No significant change.

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

No significant change.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

- C. There were no wash sales during the period ended March 31, 2012.

18. Gain or Loss to the Reporting Entity from Uninsured Accident and Health Plans and the Uninsured Portion of Partially Insured Plans

None

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

None

20. Fair Value Measurements

- A. (1) Assets Measured at Fair Value on a Recurring Basis: The Company’s assets measured at fair value on a recurring basis include primarily short-term money market funds, which are classified as short-term investments. The Plan receives monthly statements from investment brokers that provide market pricing.

(1)	(2)	(3)	(4)	(5)
Description	(Level 1)	(Level 2)	(Level 3)	Total
a.Assets at fair value				
Money market funds	\$ 67,743,996	\$ 3,270,456		\$71,014,452
Total assets at fair value	\$ 67,743,996	\$ 3,270,456		\$71,014,452
b.Liabilities at fair value				
None (see (3) below)				

In prior periods the Company reported its investments in corporate debt securities, municipal securities and certificates of deposit in Level 1. As a result of analysis of the characteristics of the financial instruments, the Company determined that these investments should be reported in Level 2, and have reclassified the tabular disclosure accordingly.

- (2) None
- (3) None
- (4) Level 2 financial instruments consist of investments including corporate debt securities, municipal securities, and certificates of deposit, which are classified as short-term investments. The financial instruments classified as Level 2 are traded frequently though not necessarily daily. Fair value for these securities is determined

NOTES TO FINANCIAL STATEMENTS

using a market approach based on quoted prices for similar securities in active markets or quoted prices for identical securities in inactive markets.

(5) None

B. - C.

(1)	(2)	(3)	(4)	(5)	(6)
Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)
Bonds	\$ 59,628,402	\$ 59,628,402			\$ 59,628,402
Investment income receivable	438,708	438,708			438,708
Uncollected premiums	13,448,442	13,448,442			13,448,442
Amounts receivable related to uninsured plans	70,650	70,650			70,650
Receivables from parent, subsidiaries and affiliates	870,155	870,155			870,155
Health care and other receivables	16,917,354	16,917,354			16,917,354
Total	\$ 91,373,711	\$ 91,373,711			\$ 91,373,711

The Company's statutory-basis balance sheets include the following financial instruments: bonds (stated at amortized cost), investment income due and accrued, and receivables. The Company believes the carrying amounts of current assets and current liabilities in the statutory-basis financial statements approximate the fair value of these financial instruments because of the relatively short period of time between the origination of the instruments and their expected realization or payment.

21. Other Items

C. Other Disclosures: None.

22. Events Subsequent

On April 6, 2012, the Ohio Department of Jobs and Family Services notified the Plan that it had not been selected to participate under the recently issued Ohio Medicaid Managed Care Plan Request for Applications, or RFA. As a result of the Plan not being selected in the RFA process, its existing Medicaid contract with the state will expire without renewal on December 31, 2012. The Plan appealed the outcome of the RFA process on April 16, 2012. The Plan's Medicaid contract comprises nearly all of its revenue and expenses; therefore should the Plan's appeal be unsuccessful most of its business activities will be suspended effective January 1, 2013. The Plan intends to continue serving members under its Medicare Advantage contract subsequent to December 31, 2012, and will also pursue other business opportunities. With statutory net worth in excess of \$121 million at March 31, 2012 the Plan believes that it has adequate resources to operate indefinitely in the absence of its Medicaid contract.

23. Reinsurance

No significant change

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

No significant change.

25. Change in Incurred Claims and Claim Adjustment Expenses

The change in prior year estimated claims reserves represents favorable development in claims experience. Original estimates are increased or decreased as additional information becomes known regarding incurred reported claims.

Claims unpaid activity as of March 31, and for the year then ended, is summarized as follows:

	2012	2011
Unpaid claims liabilities and claims adjustment expenses, beginning of year	\$ 74,466,273	\$ 53,846,269
Add provision for claims, net of reinsurance:		
Current year	235,504,672	772,361,824
Prior years	(1,301,218)	(8,629,798)
Net incurred claims during the current year	234,203,454	763,732,026

NOTES TO FINANCIAL STATEMENTS

Deduct paid claims, net of reinsurance:		
Current year	\$ 177,078,661	\$ 700,778,252
Prior years	68,859,297	44,772,108
Net paid claims during the current year	245,937,958	745,550,360
Current year change in claims adjustment expenses	79,186	(25,223)
Current year change in health care receivables	2,094,203	2,947,167
Current year change in amounts due from reinsurers	35,302	(483,606)
Unpaid claims liabilities and claims adjustment expenses, end of year	\$ 64,940,460	\$ 74,466,273

The change in prior year estimated claims reserves represents favorable development in claims experience. Original estimates are increased or decreased as additional information becomes known regarding incurred reported claims.

26. Intercompany Pooling Arrangements

None

27. Structured Settlements

None

28. Health Care Receivables

No significant change.

29. Participating Policies

None

30. Premium Deficiency Reserves

None

31. Anticipated Salvage and Subrogation

None

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?
If yes, complete the Schedule Y-Part 1 - Organizational chart.

Yes [☒ X]

No [☐]

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	2	3
Name of Entity	NAIC Company Code	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?
If yes, attach an explanation.

Yes [☐]

No [☒ X]

N/A [☐]

6.1

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/31/2006.....

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.

12/31/2006.....

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).

4/10/2008.....

6.4

By what department or departments?
Ohio Department 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 [☒ X]

No [☐]

N/A [☐]

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 Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator].

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	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?
(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.

Yes [☒ X]

No [☐]

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]

Q11

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES - GENERAL

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

PART 1 - FINANCIAL

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

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$.....870,155

PART 1 - 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	2
	Prior Year-End	Current Quarter
	Book/Adjusted Carrying Value	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 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []

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

1	2
Name of Custodian(s)	Custodian Address
US Bank	60 Livingston Ave, St Paul , MN 55107
Citi Group	333 W. 34th St., NY, NY 10001

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	2	3
Name(s)	Location(s)	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 [X]

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

1	2	3	4
Old Custodian	New Custodian	Date of Change	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	2	3
Central Registration Depository	Name(s)	Address
149777	Morgan Stanley Smith Barney	555 California Str 35th Fl, San Francisco, CA 94104

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		82.7 %
1.2	A&H cost containment percent		1.8 %
1.3	A&H expense percent excluding cost containment expenses		15.8 %
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						
93572.....	43-1235868.....	01/01/2012	RGA Reinsurance Company.....	MO.....	SSL/G.....	YES.....

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.....		586,749	291,840,092				292,426,841	
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.....	0	586,749	291,840,092	0	0	0	292,426,841	0
60.	Reporting entity contributions for Employee Benefit Plans.....	...XXX.....							0	
61.	Total (Direct Business).....	(a).....1	0	586,749	291,840,092	0	0	0	292,426,841	0

DETAILS OF WRITE-INS

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
5899.	Total (Lines 5801 thru 5803 plus 5898) (Line 58 above).....		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

Q15

01531	DE	13-4204626	Molina Healthcare, Inc.
|-00000	CA	33-0342719	Molina Healthcare of California
|-52630	MI	38-3341599	Molina Healthcare of Michigan, Inc.
|-95502	UT	33-0617992	Molina Healthcare of Utah, Inc.
|-96270	WA	91-1284790	Molina Healthcare of Washington, Inc.
|-95739	NM	85-0408506	Molina Healthcare of New Mexico, Inc
|-10757	TX	20-1494502	Molina Healthcare of Texas, Inc.
|-13778	TX	27-0522725	Molina Healthcare of Texas Insurance Company
|-12334	OH	20-0750134	Molina Healthcare of Ohio, Inc.
|-00000	CA	20-2714545	Molina Healthcare of California Partner Plan, Inc.
|-95609	MO	43-1743902	Alliance for Community Health, LLC (dba Molina Healthcare of Missouri)
|-13128	FL	26-0155137	Molina Healthcare of Florida, Inc.
|-00000	VA	26-1769086	Molina Healthcare of Virginia, Inc.
|-00000	CA	27-1510177	Molina Information Systems, LLC (dba Molina Medicaid Solutions)
|-12007	WI	20-0813104	Molina Healthcare of Wisconsin, Inc.
|-14104	IL	27-1823188	Molina Healthcare of Illinois, Inc.
|-00000	DE	45-2854547	Molina Pathways, LLC
|-00000	DE	27-4034065	Molina Center LLC
|-00000	NM	45-2634351	Molina Healthcare Data Center, Inc.
|-00000	CA	37-1652282	American Family Care, Inc.
I-00000	AZ	26-1938644	Molina Healthcare of Arizona, Inc.
I-00000	GA	80-0800257	Molina Healthcare of Georgia, Inc
I-00000	MO	26-3342852	Molina Healthcare of Missouri, Inc.
I-00000	MS	26-4390042	Molina Healthcare of Mississippi, Inc.
I-00000	CA	27-0941584	Molina Healthcare Services
I-00000	DC	45-4750271	Molina Healthcare of the District of Columbia, Inc.

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*

Members

Q16

1531.....	Molina Healthcare, Inc.....	00000.....	13-4204626 .....	.....	0001179929	Molina Healthcare, Inc.	Molina Healthcare, Inc.....	DE.....	UDP.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	00000.....	33-0342719 .....	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of California.....	CA.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	52630.....	38-3341599 .....	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of Michigan, Inc.....	MI.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	95502.....	33-0617992 .....	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of Utah, Inc.....	UT.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	96270.....	91-1284790 .....	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of Washington, Inc.....	WA.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	95739.....	85-0408506 .....	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of New Mexico, Inc.....	NM.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	10757.....	20-1494502 .....	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of Texas, Inc.....	TX.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	13778.....	27-0522725 .....	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of Texas Insurance Company...	TX.....	DS.....	Molina Healthcare of Texas, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	12334.....	20-0750134 .....	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of Ohio, Inc.....	OH.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	00000.....	20-2714545 .....	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of California Partner Plan, Inc....	CA.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	95609.....	43-1743902 .....	.....	.....	Molina Healthcare, Inc.	Alliance for Community Health, LLC (dba Molina Healtcare of Missouri	MO.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	13128.....	26-0155137 .....	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of Florida, Inc.....	FL.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	00000.....	26-1769086 .....	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of Virginia, Inc.....	VA.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	00000.....	27-1510177 .....	.....	.....	Molina Healthcare, Inc.	Molina Information Systems, LLC (dba Molina Medicaid Solutions)	CA.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	12007.....	20-0813104 .....	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of Wisconsin, Inc.....	WI.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	14104.....	27-1823188 .....	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of Illinois, Inc.....	IL.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	00000.....	45-2854547 .....	.....	.....	Molina Healthcare, Inc.	Molina Pathways, LLC.....	DE.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	00000.....	27-4034065 .....	.....	.....	Molina Healthcare, Inc.	Molina Center LLC.....	DE.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	00000.....	45-2634351 .....	.....	.....	Molina Healthcare, Inc.	Molina Healthcare Data Center, Inc.....	NM.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
1531.....	Molina Healthcare, Inc.....	00000.....	37-1652282	.....	.....	Molina Healthcare, Inc.	American Family Care, Inc.....	CA.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	00000.....	26-1938644	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of Arizona, Inc.....	AZ.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	00000.....	20-3372390	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of Georgia, Inc.....	GA.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	00000.....	26-3342852	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of Missouri, Inc.....	MO.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	00000.....	26-4390042	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of Mississippi, Inc.....	MS.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	00000.....	27-0941584	.....	.....	Molina Healthcare, Inc.	Molina Healthcare Services.....	CA.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....
1531.....	Molina Healthcare, Inc.....	00000.....	45-4750271	.....	.....	Molina Healthcare, Inc.	Molina Healthcare of the District of Columbia, Inc..	DC.....	DS.....	Molina Healthcare, Inc.....	Ownership.....	100.00	Molina Healthcare, Inc.....	.....

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?

SEE EXPLANATION

Explanation:

1. This line of business is not written by the company.

Bar Code:



Molina Healthcare of Ohio, Inc.
Overflow Page for Write-Ins

NONE

Molina Healthcare of Ohio, Inc.

SCHEDULE A - VERIFICATION

Real Estate

	1	2
	Year to Date	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	2
	Year to Date	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	2
	Year to Date	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. 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 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).....	0	0
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	0	0

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	64,626,406	64,410,109
2. Cost of bonds and stocks acquired.....	4,229,185	43,475,236
3. Accrual of discount.....	2,440	1,125
4. Unrealized valuation increase (decrease).....		110,411
5. Total gain (loss) on disposals.....	11,247	102,176
6. Deduct consideration for bonds and stocks disposed of.....	8,947,657	41,945,943
7. Deduct amortization of premium.....	293,220	1,526,708
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).....	59,628,402	64,626,406
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	59,628,402	64,626,406

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

QSI02

	1	2	3	4	5	6	7	8
	Book/Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book/Adjusted Carrying Value End of First Quarter	Book/Adjusted Carrying Value End of Second Quarter	Book/Adjusted Carrying Value End of Third Quarter	Book/Adjusted Carrying Value December 31 Prior Year
BONDS								
1. Class 1 (a).....	142,766,142	958,522,068	972,870,325	(282,839)	128,135,046			142,766,142
2. Class 2 (a).....	51,757,343	292,948,525	289,479,183	37,047	55,263,732			51,757,343
3. Class 3 (a).....								
4. Class 4 (a).....								
5. Class 5 (a).....								
6. Class 6 (a).....								
7. Total Bonds.....	194,523,484	1,251,470,593	1,262,349,509	(245,791)	183,398,778	0	0	194,523,484
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.....	194,523,484	1,251,470,593	1,262,349,509	(245,791)	183,398,778	0	0	194,523,484

(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.

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.....	71,014,451	XXX.....	71,010,673	7,806	.....

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.....	78,455,232	104,797,471
2. Cost of short-term investments acquired.....	858,288,008	1,687,678,508
3. Accrual of discount.....	5,128	12,624
4. Unrealized valuation increase (decrease).....	.....	.....
5. Total gain (loss) on disposals.....	.....	.....
6. Deduct consideration received on disposals.....	865,733,916	1,713,826,524
7. Deduct amortization of premium.....	.....	.....206,847
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).....	71,014,452	78,455,232
11. Deduct total nonadmitted amounts.....	.....	.....
12. Statement value at end of current period (Line 10 minus Line 11).....	71,014,452	78,455,232

Sch. DB-Pt A-Verification
NONE

Sch. DB-Pt B-Verification
NONE

Sch. DB-Pt C-Sn 1
NONE

Sch. DB-Pt C-Sn 2
NONE

Sch. DB-Verification
NONE

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.....	51,441,848	
2. Cost of cash equivalents acquired.....	388,953,400	647,699,909
3. Accrual of discount.....	39,861	60,519
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....	(61)	
6. Deduct consideration received on disposals.....	387,679,122	596,311,000
7. Deduct amortization of premium.....		7,580
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).....	52,755,926	51,441,848
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	52,755,926	51,441,848

Sch. A-Pt 2
NONE

Sch. A-Pt 3
NONE

Sch. B-Pt 2
NONE

Sch. B-Pt 3
NONE

Sch. BA-Pt 2
NONE

Sch. BA-Pt 3
NONE

SCHEDULE D - PART 3

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

1	2		3	4	5	6	7	8	9	10
CUSIP Identification	Description		Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
Bonds - U.S. Special Revenue and Special Assessment										
13281N MC 3	CAMDEN IMPT-TXB-RECOV.....			...01/03/2012	Unknown.....		734,420	695,000	10,594	1FE.....
3199999.	Total - Bonds - U.S. Special Revenue & Special Assessments.....						734,420	695,000	10,594	XXX.....
Bonds - Industrial and Miscellaneous										
22546Q AG 2	CREDIT SUISSE NEW YORK.....		E.....	...02/08/2012	Unknown.....		1,978,100	2,000,000	2,291	1FE.....
36962G 4Q 4	GENERAL ELEC CAP CORP.....			...01/23/2012	Unknown.....		1,516,665	1,500,000	10,156	1FE.....
3899999.	Total - Industrial & Miscellaneous.....						3,494,765	3,500,000	12,447	XXX.....
8399997.	Total - Bonds - Part 3.....						4,229,185	4,195,000	23,041	XXX.....
8399999.	Total - Bonds.....						4,229,185	4,195,000	23,041	XXX.....
9999999.	Total - Bonds, Preferred and Common Stocks.....						4,229,185	XXX.....	23,041	XXX.....

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

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	F o r e i g n	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	Stated Contractual Maturity Date	NAIC Desig- nation or Market Indicator (a)

Bonds - U.S. Political Subdivisions of States, Territories and Possessions

167485 RR 4	CHICAGO TXB-SER B.....	....	01/01/2012	MATURITY.....	.....	.....490,000	490,000	516,514	490,000	.....	.....	.....	.....0	.....	.....490,000	.....	.....	.....0	12,863	01/01/2012	1FE.....
944488 QC 2	WAYNE CNTY-TXB-B3.....	....	03/15/2012	MATURITY.....	.....	.....1,000,000	1,000,000	1,000,000	1,000,000	.....	.....	.....	.....0	.....	.....1,000,000	.....	.....	.....0	10,800	09/15/2012	1FE.....
2499999.	Total - Bonds - U.S. Political Subdivisions of States, Territories & Possessions.....					1,490,000	1,490,000	1,516,514	1,490,000	0	0	0	0	0	1,490,000	0	0	0	23,663	XXX...	..XXX....

Bonds - U.S. Special Revenue and Special Assessment

650035 RN 0	NYS URBAN DEV CORP.....	....	03/15/2012	Unknown.....	.....	.....230,000	230,000	241,099	233,496	.....	.....(577)	.....	.....(577)	.....	.....232,918	.....	.....(2,918)	(2,918)	6,026	03/15/2013	1FE.....
709163 EQ 8	PA HGR ED ARS-TXB-DD1.....	....	02/23/2012	Unknown.....	.....	.....50,000	50,000	50,000	50,000	.....	.....	.....	.....0	.....	.....50,000	.....	.....	.....0	225	09/01/2045	1FE.....
709163 ER 6	PA HGR ED ARS-TXB-DD2.....	....	03/01/2012	Unknown.....	.....	.....100,000	100,000	100,000	100,000	.....	.....	.....	.....0	.....	.....100,000	.....	.....	.....0	685	09/01/2045	1FE.....
3199999.	Total - Bonds - U.S. Special Revenue & Assessment.....					380,000	380,000	391,099	383,496	0	(577)	0	(577)	0	382,918	0	(2,918)	(2,918)	6,936	XXX...	..XXX....

Bonds - Industrial and Miscellaneous

05565Q BG 2	BP CAPITAL MARKETS PLC.....	F...	03/10/2012	MATURITY.....	.....	.....1,820,000	1,820,000	1,900,135	1,826,739	.....	.....(6,739)	.....	.....(6,739)	.....	.....1,820,000	.....	.....	.....0	28,438	03/10/2012	1FE.....
36962G 3K 8	GENERAL ELEC CAP CORP.....	....	01/04/2012	Unknown.....	.....	.....1,587,291	1,534,000	1,656,275	1,580,916	.....	.....(1,280)	.....	.....(1,280)	.....	.....1,579,636	.....	.....7,655	7,655	17,897	10/19/2012	1FE.....
69373U AB 3	PACCAR INC.....	....	02/15/2012	MATURITY.....	.....	.....2,525,000	2,525,000	2,719,173	2,542,167	.....	.....(17,167)	.....	.....(17,167)	.....	.....2,525,000	.....	.....	.....0	80,484	02/15/2012	1FE.....
949746 NY 3	WELLS FARGO & COMPANY.....	....	02/08/2012	Unknown.....	.....	.....1,145,366	1,105,000	1,182,538	1,142,942	.....	.....(4,087)	.....	.....(4,087)	.....	.....1,138,855	.....	.....6,510	6,510	25,918	01/31/2013	1FE.....
3899999.	Total - Bonds - Industrial & Miscellaneous.....					7,077,657	6,984,000	7,458,120	7,092,764	0	(29,273)	0	(29,273)	0	7,063,491	0	14,166	14,166	152,736	XXX...	..XXX....
8399997.	Total - Bonds - Part 4.....					8,947,657	8,854,000	9,365,733	8,966,259	0	(29,850)	0	(29,850)	0	8,936,410	0	11,247	11,247	183,335	XXX...	..XXX....
8399999.	Total - Bonds.....					8,947,657	8,854,000	9,365,733	8,966,259	0	(29,850)	0	(29,850)	0	8,936,410	0	11,247	11,247	183,335	XXX...	..XXX....
9999999.	Total - Bonds, Preferred and Common Stocks.....					8,947,657	XXX.....	9,365,733	8,966,259	0	(29,850)	0	(29,850)	0	8,936,410	0	11,247	11,247	183,335	XXX...	..XXX....

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

Sch. DB-Pt A-Sn 1
NONE

Sch. DB-Pt B-Sn 1
NONE

Sch. DB-Pt B-Sn 1B-Broker List
NONE

Sch. DB-Pt D
NONE

Sch. DL-Pt. 1
NONE

Sch. DL-Pt. 2
NONE

NONE

SCHEDULE DB - PART B - SECTION 1

Futures Contracts Open December 31 of Current Year

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)

NONE

QE07

Broker Name	Net Cash Deposits
-------------	-------------------

NONE

QE07FE

NONE

SCHEDULE DB - PART D

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 With Fair Value > 0	Contracts With Fair Value < 0	Exposure Net of Collateral	Potential Exposure	Off-Balance Sheet Exposure

NONE

SCHEDULE DL - PART 1
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

1	2	3	4	5	6	7
CUSIP Identification	Description	Code	NAIC Designation /Market Indicator	Fair Value	Book/Adjusted Carrying Value	Maturity Dates

General Interrogatories:

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

NONE

SCHEDULE DL - PART 2
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

1	2	3	4	5	6	7
CUSIP Identification	Description	Code	NAIC Designation /Market Indicator	Fair Value	Book/Adjusted Carrying Value	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

NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	

Open Depositories

Salomon Smith Barney.....	.....	.....	.....	.....	.....1,650,000	6,298,085	.....	XXX..
JP Morgan Chase..... Columbus, Ohio.....	.....	.....	.....	.....	.....1,874,931	2,714,455	3,418,690	XXX..
JP Morgan Chase..... Columbus, Ohio.....	.....	.....	.....	.....	.....(64,139)	126,524	313,083	XXX..
JP Morgan Chase..... Columbus, Ohio.....	.....	.....	.....	.....	.....12,747	445,568	(32,801)	XXX..
US Bank..... St. Paul, MN.....	.....	.....	.....	.....	.....(11,224,362)	(15,817,084)	(13,814,036)	XXX..
US Bank..... St. Paul, MN.....	.....	.....	.....	.....	.....(6,195)	(14,272)	(5,862)	XXX..
US Bank..... St. Paul, MN.....	.....	.....	.....1,061	.....	.....(503,340)	(110,682)	(398,012)	XXX..
0199999. Total Open Depositories.....	...XXX.....	...XXX.....	1,061	0	(8,260,358)	(6,357,406)	(10,518,938)	XXX..
0399999. Total Cash on Deposit.....	...XXX.....	...XXX.....	1,061	0	(8,260,358)	(6,357,406)	(10,518,938)	XXX..
0599999. Total Cash.....	...XXX.....	...XXX.....	1,061	0	(8,260,358)	(6,357,406)	(10,518,938)	XXX..

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8
Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations							
Bacardi Corporation.....		03/26/2012			2,999,391		
Bacardi U.S.A., Inc.....		03/19/2012			1,999,761		
DTE Energy Company.....		03/28/2012			399,989		
DTE Energy Company.....		03/23/2012			999,825		
Diageo Capital PLC.....		03/27/2012			4,999,475		
Ecolab Inc.....		03/20/2012			4,999,778		
IDACORP, Inc.....		03/19/2012			1,999,778		
IDACORP, Inc.....		03/28/2012			1,999,600		
NextEra Energy Capital Holdings, Inc.....		03/19/2012			4,999,313		
ONEOK, Inc.....		03/28/2012			4,999,383		
Pacific Gas and Electric Company.....		03/20/2012			4,999,783		
South Carolina Fuel Company, Inc.....		03/21/2012			4,999,000		
Southwestern Public Service Company.....		03/27/2012			4,999,850		
Thermo Fisher Scientific Inc.....		03/28/2012			361,924		
Virginia Electric and Power Company.....		03/20/2012			4,999,188		
Weatherford International Ltd.....		03/23/2012			1,999,889		
3299999. Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations.....					52,755,926	0	0
3899999. Total - Industrial and Miscellaneous (Unaffiliated).....					52,755,926	0	0
Total Bonds							
7799999. Subtotals - Issuer Obligations.....					52,755,926	0	0
8399999. Subtotals - Bonds.....					52,755,926	0	0
8699999. Total - Cash Equivalents.....					52,755,926	0	0

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