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ANNUAL STATEMENT  
FOR THE YEAR ENDED DECEMBER 31, 2013  
OF THE CONDITION AND AFFAIRS OF THE

BY

OHIO GRAPHIC ARTS HEALTH FUND

NAIC Group Code 0001 (Current Period) , 0001 (Prior Period) NAIC Company Code 00108 Employer's ID Number 316034857

Organized under the Laws of Ohio , State of Domicile or Port of Entry Ohio

Country of Domicile US

Licensed as business type:

Life, Accident and Health [ X ] Property/Casualty [ ] Hospital, Medical and Dental Service or Indemnity [ ]  
Dental Service Corporation [ ] Vision Service Corporation [ ] Other [ ]  
Health Maintenance Organization [ ] Is HMO Federally Qualified? Yes ( ) No ( )

Incorporated/Organized August 1, 1953 Commenced Business August 1, 1953

Statutory Home Office 88 Dorchester Square, Westerville, Ohio 43086  
(Street and Number, City or Town, State, Country and Zip Code)

Main Administrative Office 88 Dorchester Square, Westerville, Ohio 43086 888-576-1971  
(Street and Number, City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 88 Dorchester Square, Westerville, Ohio 43086  
(Street and Number or P.O. Box, City or Town, State, Country and Zip Code)

Primary Location of Books and Records 88 Dorchester Square, Westerville, Ohio 43086  
(Street and Number, City or Town, State, Country and Zip Code)  
888-576-1971  
(Area Code) (Telephone Number)

Internet Website Address N/A

Statutory Statement Contact Jim Cunningham 888-576-1971  
(Name) (Area Code) (Telephone Number) (Extension)  
(E-Mail Address) (Fax Number)

OFFICERS

Larry Halenkamp (President)  
James Maly (Secretary)

OTHER OFFICERS

DIRECTORS OR TRUSTEES

Pam Lasita  
Robert Phillips  
Jim Cunningham  
Ken Rellar  
John Hassan  
Larry Halenkamp  
James Maly  
Robert Van Leer

State of Ohio }  
County of } SS

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.

  
Larry Halenkamp  
President

  
James Maly  
Secretary

Subscribed and sworn to before me this  
day of

a. Is this an original filing? Yes (X) No ( )  
b. If no: 1. State the amendment number  
2. Date filed  
3. Number of pages attached

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Col 1 - Col 2)	4 Net Admitted Assets
1. Bonds (Schedule D) .....	941,641		941,641	919,445
2. Stocks (Schedule D):				
2.1 Preferred stocks .....	174,090		174,090	107,060
2.2 Common stocks .....	2,172,081		2,172,081	1,861,794
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens .....				
3.2 Other than first liens .....				
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ ..... encumbrances) .....				
4.2 Properties held for the production of income (less \$ ..... encumbrances) .....				
4.3 Properties held for sale (less \$ ..... encumbrances) .....				
5. Cash (\$ ..... 26,793 , Schedule E - Part 1) , cash equivalents (\$ ..... , Schedule E - Part 2) and short-term investments (\$ ..... 2,309 , Schedule DA) .....	29,102		29,102	429,905
6. Contract loans (including \$ ..... premium notes) .....				
7. Derivatives (Schedule DB) .....				
8. Other invested assets (Schedule BA) .....				
9. Receivables for securities .....	33,655		33,655	
10. Securities lending reinvested collateral assets (Schedule DL) .....				
11. Aggregate write-ins for invested assets .....				
12. Subtotals, cash and invested assets (Line 1 through Line 11) .....	3,350,569		3,350,569	3,318,204
13. Title plants less \$ ..... charged off (for Title insurers only) .....				
14. Investment income due and accrued .....	14,591		14,591	13,905
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection .....	77,907	25,731	52,176	95,033
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ ..... earned but unbilled premiums) .....				
15.3 Accrued retrospective premiums .....				
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers .....	79,989		79,989	
16.2 Funds held by or deposited with reinsured companies .....				
16.3 Other amounts receivable under reinsurance contracts .....				
17. Amounts receivable relating to uninsured plans .....				
18.1 Current federal and foreign income tax recoverable and interest thereon .....				
18.2 Net deferred tax asset .....				
19. Guaranty funds receivable or on deposit .....				
20. Electronic data processing equipment and software .....				
21. Furniture and equipment, including health care delivery assets (\$ ..... ) .....				
22. Net adjustment in assets and liabilities due to foreign exchange rates .....				
23. Receivables from parent, subsidiaries and affiliates .....				
24. Health care (\$ ..... ) and other amounts receivable .....				
25. Aggregate write-ins for other-than-invested assets .....				
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Line 12 to Line 25) .....	3,523,056	25,731	3,497,325	3,427,142
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....				
28. Total (Line 26 and Line 27) .....	3,523,056	25,731	3,497,325	3,427,142
DETAILS OF WRITE-INS				
1101. Amount due from Brokers .....				
1102. ....				
1103. ....				
1198. Summary of remaining write-ins for Line 11 from overflow page .....				
1199. Totals (Line 1101 through Line 1103 plus Line 1198) (Line 11 above) .....				
2501. Amounts due from Brokers .....				
2502. ....				
2503. ....				
2598. Summary of remaining write-ins for Line 25 from overflow page .....				
2599. Totals (Line 2501 through Line 2503 plus Line 2598) (Line 25 above) .....				

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

LIABILITIES, CAPITAL AND SURPLUS

	Current Year			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ ..... reinsurance ceded) .....	575,000		575,000	550,000
2. Accrued medical incentive pool and bonus amounts .....				
3. Unpaid claims adjustment expenses .....				
4. Aggregate health policy reserves, including the liability of \$ ..... for medical loss ratio rebate per the Public Health Service Act .....				
5. Aggregate life policy reserves .....				
6. Property/casualty unearned premium reserves .....				
7. Aggregate health claim reserves .....				
8. Premiums received in advance .....	23,816		23,816	15,334
9. General expenses due or accrued .....	17,849		17,849	37,203
10.1 Current federal and foreign income tax payable and interest thereon (including \$ ..... on realized capital gains (losses)) .....				
10.2 Net deferred tax liability .....				
11. Ceded reinsurance premiums payable .....				
12. Amounts withheld or retained for the account of others .....				
13. Remittances and items not allocated .....				
14. Borrowed money (including \$ ..... current) and interest thereon \$ ..... (including \$ ..... current) .....				
15. Amounts due to parent, subsidiaries and affiliates .....				
16. Derivatives .....				
17. Payable for securities .....				
18. Payable for securities lending .....				
19. Funds held under reinsurance treaties (with \$ ..... authorized reinsurers, \$ ..... unauthorized reinsurers and \$ ..... certified reinsurers) .....				
20. Reinsurance in unauthorized and certified (\$ ..... ) companies .....				
21. Net adjustments in assets and liabilities due to foreign exchange rates .....				
22. Liability for amounts held under uninsured plans .....				
23. Aggregate write-ins for other liabilities (including \$ ..... current) .....				
24. Total liabilities (Line 1 to Line 23) .....	616,665		616,665	602,537
25. Aggregate write-ins for special surplus funds .....	XXX	XXX		
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		
31. Unassigned funds (surplus) .....	XXX	XXX	2,880,660	2,824,605
32. Less treasury stock, at cost:				
32.1 ..... shares common (value included in Line 26 \$ ..... ) .....	XXX	XXX		
32.2 ..... shares preferred (value included in Line 27 \$ ..... ) .....	XXX	XXX		
33. Total capital and surplus (Line 25 to Line 31 minus Line 32) .....	XXX	XXX	2,880,660	2,824,605
34. Total liabilities, capital and surplus (Line 24 and Line 33) .....	XXX	XXX	3,497,325	3,427,142
DETAILS OF WRITE-INS				
2301. ....				
2302. ....				
2303. ....				
2398. Summary of remaining write-ins for Line 23 from overflow page .....				
2399. Totals (Line 2301 through Line 2303 plus Line 2398) (Line 23 above) .....				
2501. ....	XXX	XXX		
2502. ....	XXX	XXX		
2503. ....	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page .....	XXX	XXX		
2599. Totals (Line 2501 through Line 2503 plus Line 2598) (Line 25 above) .....	XXX	XXX		
3001. ....	XXX	XXX		
3002. ....	XXX	XXX		
3003. ....	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page .....	XXX	XXX		
3099. Totals (Line 3001 through Line 3003 plus Line 3098) (Line 30 above) .....	XXX	XXX		

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member Months	X X X	12,817	13,153
2. Net premium income (including \$ non-health premium income)	X X X	3,706,249	3,999,727
3. Change in unearned premium reserves and reserve for rate credits	X X X		
4. Fee-for-service (net of \$ medical expenses)	X X X		
5. Risk revenue	X X X		
6. Aggregate write-ins for other health care related revenues	X X X		56,923
7. Aggregate write-ins for other non-health revenues	X X X		
8. Total revenues (Line 2 to Line 7)	X X X	3,706,249	4,056,650
Hospital and Medical:			
9. Hospital/medical benefits		2,666,520	2,974,557
10. Other professional services			
11. Outside referrals			
12. Emergency room and out-of-area		133,769	122,120
13. Prescription drugs		733,605	700,624
14. Aggregate write-ins for other hospital and medical			
15. Incentive pool, withhold adjustments, and bonus amounts			
16. Subtotal (Line 9 to Line 15)		3,533,894	3,797,301
Less:			
17. Net reinsurance recoveries			
18. Total hospital and medical (Line 16 minus Line 17)		3,533,894	3,797,301
19. Non-health claims (net)			
20. Claims adjustment expenses, including \$ cost containment expenses			
21. General administrative expenses		572,874	557,633
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only)		25,000	
23. Total underwriting deductions (Line 18 through Line 22)		4,131,768	4,354,934
24. Net underwriting gain or (loss) (Line 8 minus Line 23)	X X X	(425,519)	(298,284)
25. Net investment income earned (Exhibit of Net Investment Income, Line 17)		91,867	82,421
26. Net realized capital gains (losses) less capital gains tax of \$		114,042	98,856
27. Net investment gains (losses) (Line 25 plus Line 26)		205,909	181,277
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$ (amount charged off \$ )]			
29. Aggregate write-ins for other income or expenses		4,817	
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Line 24 plus Line 27 plus Line 28 plus Line 29)	X X X	(214,793)	(117,007)
31. Federal and foreign income taxes incurred	X X X		
32. Net income (loss) (Line 30 minus Line 31)	X X X	(214,793)	(117,007)
DETAILS OF WRITE-INS			
0601. Increase in funds held with reinsurance companies	X X X		
0602. Refund of funds held with reinsurance companies	X X X		56,923
0603.	X X X		
0698. Summary of remaining write-ins for Line 6 from overflow page	X X X		
0699. Totals (Line 0601 through Line 0603 plus Line 0698) (Line 6 above)	X X X		56,923
0701.	X X X		
0702.	X X X		
0703.	X X X		
0798. Summary of remaining write-ins for Line 7 from overflow page	X X X		
0799. Totals (Line 0701 through Line 0703 plus Line 0798) (Line 7 above)	X X X		
1401.			
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page			
1499. Totals (Line 1401 through Line 1403 plus Line 1498) (Line 14 above)			
2901. Change in Estimate from Prior Year decrease in Accrued expenses		4,817	
2902.			
2903.			
2998. Summary of remaining write-ins for Line 29 from overflow page			
2999. Totals (Line 2901 through Line 2903 plus Line 2998) (Line 29 above)		4,817	

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

STATEMENT OF REVENUE AND EXPENSES (continued)

CAPITAL AND SURPLUS ACCOUNT	1	2
	Current Year	Prior Year
33. Capital and surplus prior reporting year	2,824,605	2,897,145
34. Net income or (loss) from Line 32	(214,793)	(117,007)
35. Change in valuation basis of aggregate policy and claims reserves		
36. Change in net unrealized capital gains (losses) less capital gains tax of \$	296,579	36,601
37. Change in net unrealized foreign exchange capital gain or (loss)		
38. Change in net deferred income tax		
39. Change in nonadmitted assets	(25,731)	7,871
40. Change in unauthorized and certified 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 Tranferred from capital		
46. Dividends to stockholders		
47. Aggregate write-ins for gains or (losses) in surplus		
48. Net change in capital and surplus (Line 34 to Line 47)	56,055	(72,535)
49. Capital and surplus end of reporting year (Line 33 plus Line 48)	2,880,660	2,824,610
DETAILS OF WRITE-INS		
4701.		
4702.		
4703.		
4798. Summary of remaining write-ins for Line 47 from overflow page		
4799. Totals (Line 4701 through Line 4703 plus Line 4798) (Line 47 above)		

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	3,698,202	4,112,686
2. Net investment income	107,150	98,469
3. Miscellaneous income		56,923
4. Total (Line 1 through Line 3)	3,805,352	4,268,078
5. Benefit and loss related payments	3,613,883	3,375,036
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions	587,411	553,199
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)		
10. Total (Line 5 through Line 9)	4,201,294	3,928,235
11. Net cash from operations (Line 4 minus Line 10)	(395,942)	339,843
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	228,820	52,939
12.2 Stocks	508,978	551,956
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		6
12.8 Total investment proceeds (Line 12.1 through Line 12.7)	737,798	604,901
13. Cost of investments acquired (long-term only):		
13.1 Bonds	279,024	209,270
13.2 Stocks	463,635	577,170
13.3 Mortgage loans		
13.4 Real estate		
13.5 Other invested assets		
13.6 Miscellaneous applications		
13.7 Total investments acquired (Line 13.1 through Line 13.6)	742,659	786,440
14. Net increase (decrease) in contract loans and premium notes		
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(4,861)	(181,539)
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		
16.6 Other cash provided (applied)		
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)		
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)	(400,803)	158,304
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	429,905	271,601
19.2 End of year (Line 18 plus Line 19.1)	29,102	429,905

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

20.0001		
20.0002		
20.0003		
20.0004		
20.0005		
20.0006		
20.0007		
20.0008		
20.0009		
20.0010		

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

**ANALYSIS OF OPERATIONS BY LINES OF BUSINESS**

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital and Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefit Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Net premium income	3,706,249	3,706,249								
2. Change in unearned premium reserves and reserve for rate credit										
3. Fee-for-service (net of \$ medical expenses)										XXX
4. Risk revenue										XXX
5. Aggregate write-ins for other health care related revenues										XXX
6. Aggregate write-ins for other non-health care related revenues		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
7. Total revenues (Line 1 through Line 6)	3,706,249	3,706,249								
8. Hospital/medical benefits	2,666,520	2,666,520								XXX
9. Other professional services										XXX
10. Outside referrals										XXX
11. Emergency room and out-of-area	133,769	133,769								XXX
12. Prescription drugs	733,605	733,605								XXX
13. Aggregate write-ins for other hospital and medical										XXX
14. Incentive pool, withhold adjustments, and bonus amounts										XXX
15. Subtotal (Line 8 through Line 14)	3,533,894	3,533,894								XXX
16. Net reinsurance recoveries										XXX
17. Total hospital and medical (Line 15 minus Line 16)	3,533,894	3,533,894								XXX
18. Non-health claims (net)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
19. Claims adjustment expenses including \$ cost containment expenses										
20. General administrative expenses	572,874	572,874								
21. Increase in reserves for accident and health contracts	25,000	25,000								XXX
22. Increase in reserves for life contracts		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23. Total underwriting deductions (Line 17 through Line 22)	4,131,768	4,131,768								
24. Net underwriting gain or (loss) (Line 7 minus Line 23)	(425,519)	(425,519)								
<b>DETAILS OF WRITE-INS</b>										
0501.										XXX
0502.										XXX
0503.										XXX
0598. Summary of remaining write-ins for Line 5 from overflow page										XXX
0599. Total (Line 0501 through Line 0503 plus Line 0598) (Line 5 above)										XXX
0601.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0602.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0603.		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0698. Summary of remaining write-ins for Line 6 from overflow page		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0699. Total (Line 0601 through Line 0603 plus Line 0698) (Line 6 above)		XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
1301.										XXX
1302.										XXX
1303.										XXX
1398. Summary of remaining write-ins for Line 13 from overflow page										XXX
1399. Total (Line 1301 through Line 1303 plus Line 1398) (Line 13 above)										XXX

UNDERWRITING AND INVESTMENT EXHIBIT

Part 1 - Premiums

	1	2	3	4
Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Column 1 plus Column 2 minus Column 3)
1. Comprehensive (hospital and medical) .....	4,265,727		559,478	3,706,249
2. Medicare Supplement .....				
3. Dental only .....				
4. Vision only .....				
5. Federal Employees Health Benefits Plan .....				
6. Title XVIII - Medicare .....				
7. Title XIX - Medicaid .....				
8. Other health .....				
9. Health subtotal (Line 1 through Line 8) .....	4,265,727		559,478	3,706,249
10. Life .....				
11. Property/casualty .....				
12. Totals (Line 9 to Line 11) .....	4,265,727		559,478	3,706,249



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - Claims Incurred During the Year

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital and Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Payments during the year:										
1.1 Direct	3,508,894	3,508,894								
1.2 Reinsurance assumed										
1.3 Reinsurance ceded										
1.4 Net	3,508,894	3,508,894								
2. Paid medical incentive pools and bonuses										
3. Claim liability December 31, current year from Part 2A:										
3.1 Direct	575,000	575,000								
3.2 Reinsurance assumed										
3.3 Reinsurance ceded										
3.4 Net	575,000	575,000								
4. Claim reserve December 31, current year from Part 2D:										
4.1 Direct										
4.2 Reinsurance assumed										
4.3 Reinsurance ceded										
4.4 Net										
5. Accrued medical incentive pools and bonuses, current year										
6. Net health care receivables (a)										
7. Amounts recoverable from reinsurers December 31, current year										
8. Claim liability December 31, prior year from Part 2A:										
8.1 Direct	550,000	550,000								
8.2 Reinsurance assumed										
8.3 Reinsurance ceded										
8.4 Net	550,000	550,000								
9. Claim reserve December 31, prior year from Part 2D:										
9.1 Direct										
9.2 Reinsurance assumed										
9.3 Reinsurance ceded										
9.4 Net										
10. Accrued medical incentive pools and bonuses, prior year										
11. Amounts recoverable from reinsurers December 31, prior year										
12. Incurred benefits:										
12.1 Direct	3,533,894	3,533,894								
12.2 Reinsurance assumed										
12.3 Reinsurance ceded										
12.4 Net	3,533,894	3,533,894								
13. Incurred medical incentive pools and bonuses										

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

**UNDERWRITING AND INVESTMENT EXHIBIT**  
**PART 2A - Claims Liability End of Current Year**

	1	2	3	4	5	6	7	8	9	10
	Total	Comprehensive (Hospital and Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other Health	Other Non-Health
1. Reported in Process of Adjustment:										
1.1 Direct .....	153,103	153,103								
1.2 Reinsurance assumed .....										
1.3 Reinsurance ceded .....										
1.4 Net .....	153,103	153,103								
2. Incurred but Unreported:										
2.1 Direct .....	421,897	421,897								
2.2 Reinsurance assumed .....										
2.3 Reinsurance ceded .....										
2.4 Net .....	421,897	421,897								
3. Amounts Withheld from Paid Claims and Capitations:										
3.1 Direct .....										
3.2 Reinsurance assumed .....										
3.3 Reinsurance ceded .....										
3.4 Net .....										
4. TOTALS:										
4.1 Direct .....	575,000	575,000								
4.2 Reinsurance assumed .....										
4.3 Reinsurance ceded .....										
4.4 Net .....	575,000	575,000								

UNDERWRITING AND INVESTMENT EXHIBIT  
PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid During the Year		Claim Reserve and Claim Liability December 31 of Current Year		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 (Column 1 plus Column 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical) .....	472,453	3,036,441	4,514	570,486	476,967	550,000
2. Medicare Supplement .....						
3. Dental Only .....						
4. Vision Only .....						
5. Federal Employees Health Benefits Plan .....						
6. Title XVIII - Medicare .....						
7. Title XIX - Medicaid .....						
8. Other health .....						
9. Health subtotal (Line 1 through Line 8) .....	472,453	3,036,441	4,514	570,486	476,967	550,000
10. Healthcare receivables (a) .....						
11. Other non-health .....						
12. Medical incentive pools and bonus amounts .....						
13. Totals (Line 9 minus Line 10 plus Line 11 plus Line 12) .....	472,453	3,036,441	4,514	570,486	476,967	550,000

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

## ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

## UNDERWRITING AND INVESTMENT EXHIBIT

## PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(000 Omitted)

## Section A - Paid Health Claims - Comprehensive (Hospital and Medical)

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior .....					
2. 2009 .....	6,163	662			
3. 2010 .....	X X X	3,464	561		
4. 2011 .....	X X X	X X X	3,664	376	
5. 2012 .....	X X X	X X X	X X X	3,421	476
6. 2013 .....	X X X	X X X	X X X	X X X	3,061

## Section B - Incurred Health Claims - Comprehensive (Hospital and Medical)

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior .....					
2. 2009 .....	5,363	660			
3. 2010 .....	X X X	2,867	560		
4. 2011 .....	X X X	X X X	3,165	376	
5. 2012 .....	X X X	X X X	X X X	3,421	472
6. 2013 .....	X X X	X X X	X X X	X X X	3,061

## Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Comprehensive (Hospital and Medical)

Years in Which Premiums Were Earned and Claims Were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Column 3 divided by Column 2) Percent	5 Claim and Claim Adjustment Expense Payments (Column 2 plus 3)	6 (Column 5 divided by Column 1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Column 5 plus 7 plus 8)	10 (Column 9 divided by Column 1) Percent
1. 2009 .....	5,979	6,825			6,825	114.150			6,825	114.150
2. 2010 .....	4,190	4,025			4,025	96.062			4,025	96.062
3. 2011 .....	4,102	3,664			3,664	89.322			3,664	89.322
4. 2012 .....	3,999	3,421			3,421	85.546			3,421	85.546
5. 2013 .....	3,716	3,061			3,061	82.374			3,061	82.374

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS**

**(000 Omitted)**

**Section A - Paid Health Claims - Medicare Supplement**

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1	2	3	4	5
	2009	2010	2011	2012	2013
1. Prior .....					
2. 2009 .....					
3. 2010 .....	XXX				
4. 2011 .....	XXX	XXX			
5. 2012 .....	XXX	XXX	XXX		
6. 2013 .....	XXX	XXX	XXX	XXX	

**Section B - Incurred Health Claims - Medicare Supplement**

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1	2	3	4	5
	2009	2010	2011	2012	2013
1. Prior .....					
2. 2009 .....					
3. 2010 .....	XXX				
4. 2011 .....	XXX	XXX			
5. 2012 .....	XXX	XXX	XXX		
6. 2013 .....	XXX	XXX	XXX	XXX	

**Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Medicare Supplement**

Years in Which Premiums Were Earned and Claims Were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payments	Claim Adjustment Expense Payments	(Column 3 divided by Column 2) Percent	Claim and Claim Adjustment Expense Payments (Column 2 plus 3)	(Column 5 divided by Column 1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Column 5 plus 7 plus 8)	(Column 9 divided by Column 1) Percent
1. 2009 .....										
2. 2010 .....										
3. 2011 .....										
4. 2012 .....										
5. 2013 .....										

## ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

## UNDERWRITING AND INVESTMENT EXHIBIT

## PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(000 Omitted)

## Section A - Paid Health Claims - Dental Only

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior .....					
2. 2009 .....					
3. 2010 .....	XXX				
4. 2011 .....	XXX	XXX			
5. 2012 .....	XXX	XXX	XXX		
6. 2013 .....	XXX	XXX	XXX	XXX	

## Section B - Incurred Health Claims - Dental Only

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior .....					
2. 2009 .....					
3. 2010 .....	XXX				
4. 2011 .....	XXX	XXX			
5. 2012 .....	XXX	XXX	XXX		
6. 2013 .....	XXX	XXX	XXX	XXX	

## Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Dental Only

Years in Which Premiums Were Earned and Claims Were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Column 3 divided by Column 2) Percent	5 Claim and Claim Adjustment Expense Payments (Column 2 plus 3)	6 (Column 5 divided by Column 1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Column 5 plus 7 plus 8)	10 (Column 9 divided by Column 1) Percent
1. 2009 .....										
2. 2010 .....										
3. 2011 .....										
4. 2012 .....										
5. 2013 .....										

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(000 Omitted)

Section A - Paid Health Claims - Vision Only

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior .....					
2. 2009 .....					
3. 2010 .....	XXX				
4. 2011 .....	XXX	XXX			
5. 2012 .....	XXX	XXX	XXX		
6. 2013 .....	XXX	XXX	XXX	XXX	

Section B - Incurred Health Claims - Vision Only

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior .....					
2. 2009 .....					
3. 2010 .....	XXX				
4. 2011 .....	XXX	XXX			
5. 2012 .....	XXX	XXX	XXX		
6. 2013 .....	XXX	XXX	XXX	XXX	

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Vision Only

Years in Which Premiums Were Earned and Claims Were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Column 3 divided by Column 2) Percent	5 Claim and Claim Adjustment Expense Payments (Column 2 plus 3)	6 (Column 5 divided by Column 1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Column 5 plus 7 plus 8)	10 (Column 9 divided by Column 1) Percent
1. 2009 .....										
2. 2010 .....										
3. 2011 .....										
4. 2012 .....										
5. 2013 .....										

## ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

## UNDERWRITING AND INVESTMENT EXHIBIT

## PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(000 Omitted)

## Section A - Paid Health Claims - Federal Employees Health Benefit Plan

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior .....					
2. 2009 .....					
3. 2010 .....	XXX				
4. 2011 .....	XXX	XXX			
5. 2012 .....	XXX	XXX	XXX		
6. 2013 .....	XXX	XXX	XXX	XXX	

## Section B - Incurred Health Claims - Federal Employees Health Benefit Plan

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior .....					
2. 2009 .....					
3. 2010 .....	XXX				
4. 2011 .....	XXX	XXX			
5. 2012 .....	XXX	XXX	XXX		
6. 2013 .....	XXX	XXX	XXX	XXX	

## Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Federal Employees Health Benefit Plan

Years in Which Premiums Were Earned and Claims Were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Column 3 divided by Column 2) Percent	5 Claim and Claim Adjustment Expense Payments (Column 2 plus 3)	6 (Column 5 divided by Column 1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Column 5 plus 7 plus 8)	10 (Column 9 divided by Column 1) Percent
1. 2009 .....										
2. 2010 .....										
3. 2011 .....										
4. 2012 .....										
5. 2013 .....										



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS**

**(000 Omitted)**

**Section A - Paid Health Claims - Title XVIII Medicare**

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1	2	3	4	5
	2009	2010	2011	2012	2013
1. Prior .....					
2. 2009 .....					
3. 2010 .....	XXX				
4. 2011 .....	XXX	XXX			
5. 2012 .....	XXX	XXX	XXX		
6. 2013 .....	XXX	XXX	XXX	XXX	

**Section B - Incurred Health Claims - Title XVIII Medicare**

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability , Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1	2	3	4	5
	2009	2010	2011	2012	2013
1. Prior .....					
2. 2009 .....					
3. 2010 .....	XXX				
4. 2011 .....	XXX	XXX			
5. 2012 .....	XXX	XXX	XXX		
6. 2013 .....	XXX	XXX	XXX	XXX	

**Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XVIII Medicare**

Years in Which Premiums Were Earned and Claims Were Incurred	1	2	3	4	5	6	7	8	9	10
	Premiums Earned	Claims Payments	Claim Adjustment Expense Payments	(Column 3 divided by Column 2) Percent	Claim and Claim Adjustment Expense Payments (Column 2 plus 3)	(Column 5 divided by Column 1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Column 5 plus 7 plus 8)	(Column 9 divided by Column 1) Percent
1. 2009 .....										
2. 2010 .....										
3. 2011 .....										
4. 2012 .....										
5. 2013 .....										

## ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

## UNDERWRITING AND INVESTMENT EXHIBIT

## PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(000 Omitted)

## Section A - Paid Health Claims - Title XIX Medicaid

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior .....					
2. 2009 .....					
3. 2010 .....	XXX				
4. 2011 .....	XXX	XXX			
5. 2012 .....	XXX	XXX	XXX		
6. 2013 .....	XXX	XXX	XXX	XXX	

## Section B - Incurred Health Claims - Title XIX Medicaid

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior .....					
2. 2009 .....					
3. 2010 .....	XXX				
4. 2011 .....	XXX	XXX			
5. 2012 .....	XXX	XXX	XXX		
6. 2013 .....	XXX	XXX	XXX	XXX	

## Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Title XIX Medicaid

Years in Which Premiums Were Earned and Claims Were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Column 3 divided by Column 2) Percent	5 Claim and Claim Adjustment Expense Payments (Column 2 plus 3)	6 (Column 5 divided by Column 1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Column 5 plus 7 plus 8)	10 (Column 9 divided by Column 1) Percent
1. 2009 .....										
2. 2010 .....										
3. 2011 .....										
4. 2012 .....										
5. 2013 .....										

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

**UNDERWRITING AND INVESTMENT EXHIBIT**

**PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS**

(000 Omitted)

**Section A - Paid Health Claims - Other**

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior .....					
2. 2009 .....					
3. 2010 .....	XXX				
4. 2011 .....	XXX	XXX			
5. 2012 .....	XXX	XXX	XXX		
6. 2013 .....	XXX	XXX	XXX	XXX	

**Section B - Incurred Health Claims - Other**

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior .....					
2. 2009 .....					
3. 2010 .....	XXX				
4. 2011 .....	XXX	XXX			
5. 2012 .....	XXX	XXX	XXX		
6. 2013 .....	XXX	XXX	XXX	XXX	

**Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Other**

Years in Which Premiums Were Earned and Claims Were Incurred	1  Premiums Earned	2  Claims Payments	3  Claim Adjustment Expense Payments	4 (Column 3 divided by Column 2) Percent	5 Claim and Claim Adjustment Expense Payments (Column 2 plus 3)	6 (Column 5 divided by Column 1) Percent	7  Claims Unpaid	8  Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Column 5 plus 7 plus 8)	10 (Column 9 divided by Column 1) Percent
1. 2009 .....										
2. 2010 .....										
3. 2011 .....										
4. 2012 .....										
5. 2013 .....										

## ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

## UNDERWRITING AND INVESTMENT EXHIBIT

## PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(000 Omitted)

## Section A - Paid Health Claims - Grand Total

Year in Which Losses Were Incurred	Cumulative Net Amounts Paid				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior .....					
2. 2009 .....	6,163	662			
3. 2010 .....	XXX	3,464	561		
4. 2011 .....	XXX	XXX	3,664	376	
5. 2012 .....	XXX	XXX	XXX	3,421	472
6. 2013 .....	XXX	XXX	XXX	XXX	3,057

## Section B - Incurred Health Claims - Grand Total

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
	1 2009	2 2010	3 2011	4 2012	5 2013
1. Prior .....					
2. 2009 .....	5,363	660			
3. 2010 .....	XXX	2,867	560		
4. 2011 .....	XXX	XXX	3,165	376	
5. 2012 .....	XXX	XXX	XXX	3,421	472
6. 2013 .....	XXX	XXX	XXX	XXX	3,057

## Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Grand Total

Years in Which Premiums Were Earned and Claims Were Incurred	1 Premiums Earned	2 Claims Payments	3 Claim Adjustment Expense Payments	4 (Column 3 divided by Column 2) Percent	5 Claim and Claim Adjustment Expense Payments (Column 2 plus 3)	6 (Column 5 divided by Column 1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Column 5 plus 7 plus 8)	10 (Column 9 divided by Column 1) Percent
1. 2009 .....	5,979	6,825			6,825	114.150			6,825	114.150
2. 2010 .....	4,190	4,025			4,025	96.062			4,025	96.062
3. 2011 .....	4,102	3,664			3,664	89.322			3,664	89.322
4. 2012 .....	3,999	3,421			3,421	85.546			3,421	85.546
5. 2013 .....	3,706	2,959			2,959	79.843	575		3,534	95.359

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - ANALYSIS OF EXPENSES

	Claim Adjustment Expenses		3  General Administrative Expenses	4  Investment Expenses	5  Total
	1  Cost Containment Expenses	2  Other Claim Adjustment Expenses			
1. Rent (\$ .....for occupancy of own building) .....					
2. Salaries, wages and other benefits .....					
3. Commissions (less \$ .....ceded plus \$ .....assumed) .....			94,210		94,210
4. Legal fees and expenses .....			80,191		80,191
5. Certifications and accreditation fees .....					
6. Auditing, actuarial and other consulting services .....			78,051		78,051
7. Traveling expenses .....			54		54
8. Marketing and advertising .....					
9. Postage, express, and telephone .....			73		73
10. Printing and office supplies .....					
11. Occupancy, depreciation and amortization .....					
12. Equipment .....					
13. Cost or depreciation of EDP equipment and software .....					
14. Outsourced services including EDP, claims, and other services .....					
15. Boards, bureaus and association fees .....					
16. Insurance, except on real estate .....			7,658		7,658
17. Collection and bank service charges .....			25,942		25,942
18. Group service and administration fees .....			285,095		285,095
19. Reimbursements by uninsured accident and health plans .....					
20. Reimbursements from fiscal intermediaries .....					
21. Real estate expenses .....					
22. Real estate taxes .....					
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes .....					
23.2 State premium taxes .....					
23.3 Regulator authority licenses and fees .....			1,600		1,600
23.4 Payroll taxes .....					
23.5 Other (excluding federal income and real estate taxes) .....					
24. Investment expenses not included elsewhere .....					
25. Aggregate write-ins for expenses .....					
26. Total expenses incurred (Line 1 to Line 25) .....			572,874		(a) 572,874
27. Less expenses unpaid December 31, current year .....			17,849		17,849
28. Add expenses unpaid December 31, prior year .....			37,204		37,204
29. Amounts receivable relating to uninsured accident and health plans, prior year .....					
30. Amounts receivable relating to uninsured accident and health plans, current year .....					
31. Total expenses paid (Line 26 minus Line 27 plus Line 28 minus Line 29 plus Line 30) .....			592,229		592,229
DETAILS OF WRITE-INS					
2501. ....					
2502. ....					
2503. ....					
2598. Summary of remaining write-ins for Line 25 from overflow page .....					
2599. Totals (Line 2501 through Line 2503 plus Line 2598) (Line 25 above) .....					

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

EXHIBIT OF NET INVESTMENT INCOME

	1	2
	Collected During Year	Earned During Year
1. U.S. Government bonds	(a) 37,684	36,798
1.1 Bonds exempt from U.S. tax	(a)	
1.2 Other bonds (unaffiliated)	(a)	
1.3 Bonds of affiliates	(a)	
2.1 Preferred stocks (unaffiliated)	(b) 8,078	8,453
2.11 Preferred stocks of affiliates	(b)	
2.2 Common stocks (unaffiliated)	53,488	44,931
2.21 Common stocks of affiliates		
3. Mortgage loans	(c)	
4. Real estate	(d)	
5. Contract loans		
6. Cash, cash equivalents and short-term investments	(e) 1,817	1,685
7. Derivative instruments	(f)	
8. Other invested assets		
9. Aggregate write-ins for investment income		
10. Total gross investment income	101,067	91,867
11. Investment expenses		(g)
12. Investment taxes, licenses and fees, excluding federal income taxes		(g)
13. Interest expense		(h)
14. Depreciation on real estate and other invested assets		(i)
15. Aggregate write-ins for deductions from investment income		
16. Total deductions (Line 11 through Line 15)		
17. Net investment income (Line 10 minus Line 16)		91,867
DETAILS OF WRITE-INS		
0901.		
0902.		
0903.		
0998. Summary of remaining write-ins for Line 9 from overflow page		
0999. Totals (Line 0901 through Line 0903 plus Line 0998) (Line 9 above)		
1501.		
1502.		
1503.		
1598. Summary of remaining write-ins for Line 15 from overflow page		
1599. Totals (Line 1501 through Line 1503 plus Line 1598) (Line 15 above)		
(a) Includes \$ 377 accrual of discount less \$ 5,569 amortization of premium and less \$ paid for accrued interest on purchases.	(f) Includes \$ accrual of discount less \$ amortization of premium.	
(b) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued dividends on purchases.	(g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.	
(c) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.	(h) Includes \$ interest on surplus notes and \$ interest on capital notes.	
(d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.	(i) Includes \$ depreciation on real estate and \$ depreciation on other invested assets.	
(e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.		

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1	2	3	4	5
	Realized Gain (Loss) on Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Col. 1 + Col. 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. Government bonds					
1.1 Bonds exempt from U.S. tax					
1.2 Other bonds (unaffiliated)	3,391		3,391		
1.3 Bonds of affiliates					
2.1 Preferred stocks (unaffiliated)	(4,694)		(4,694)	(16,147)	
2.11 Preferred stocks of affiliates					
2.2 Common stocks (unaffiliated)	115,345		115,345	312,726	
2.21 Common stocks of affiliates					
3. Mortgage loans					
4. Real estate					
5. Contract loans					
6. Cash, cash equivalents and short-term investments					
7. Derivative instruments					
8. Other invested assets					
9. Aggregate write-ins for capital gains (losses)					
10. Total capital gains (losses)	114,042		114,042	296,579	
DETAILS OF WRITE-INS					
0901.					
0902.					
0903.					
0998. Summary of remaining write-ins for Line 9 from overflow page					
0999. Totals (Line 0901 through Line 0903 plus Line 0998) (Line 9 above)					

EXHIBIT OF NONADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D)			
2. Stocks (Schedule D):			
2.1 Preferred stocks			
2.2 Common stocks			
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens			
3.2 Other than first liens			
4. Real estate (Schedule A):			
4.1 Properties occupied by the company			
4.2 Properties held for the production of income			
4.3 Properties held for sale			
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA)			
6. Contract loans			
7. Derivatives (Schedule DB)			
8. Other invested assets (Schedule BA)			
9. Receivables for securities			
10. Securities lending reinvested collateral assets (Schedule DL)			
11. Aggregate write-ins for invested assets			
12. Subtotals, cash and invested assets (Line 1 to Line 11)			
13. Title plants (for Title insurers only)			
14. Investment income due and accrued			
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection	25,731		(25,731)
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due			
15.3 Accrued retrospective premiums			
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers			
16.2 Funds held by or deposited with reinsured companies			
16.3 Other amounts receivable under reinsurance contracts			
17. Amounts receivable relating to uninsured plans			
18.1 Current federal and foreign income tax recoverable and interest thereon			
18.2 Net deferred tax asset			
19. Guaranty funds receivable or on deposit			
20. Electronic data processing equipment and software			
21. Furniture and equipment, including health care delivery assets			
22. Net adjustment in assets and liabilities due to foreign exchange rates			
23. Receivables from parent, subsidiaries and affiliates			
24. Health care and other amounts receivable			
25. Aggregate write-ins for other-than-invested assets			
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Line 12 to Line 25)	25,731		(25,731)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			
28. Total (Line 26 and Line 27)	25,731		(25,731)
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page			
1199. Totals (Line 1101 through Line 1103 plus Line 1198) (Line 11 above)			
2501.			
2502.			
2503.			
2598. Summary of remaining write-ins for Line 25 from overflow page			
2599. Totals (Line 2501 through Line 2503 plus Line 2598) (Line 25 above)			

EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

Source of Enrollment	Total Members at End of					6 Current Year Member Months
	1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	
1. Health Maintenance Organizations .....						
2. Provider Service Organizations .....						
3. Preferred Provider Organizations .....	452	486	482	501	504	12,817
4. Point of Service .....						
5. Indemnity Only .....						
6. Aggregate write-ins for other lines of business .....						
7. Total .....	452	486	482	501	504	12,817
DETAILS OF WRITE-INS						
0601. ....						
0602. ....						
0603. ....						
0698. Summary of remaining write-ins for Line 6 from overflow page .....						
0699. Totals (Line 0601 through Line 0603 plus Line 0698) (Line 6 above) .....						



## ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

## EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1	2	3	4	5	6	7
Name of Debtor	1 - 30 Days	31 - 60 Days	61 - 90 Days	Over 90 Days	Nonadmitted	Admitted
Group subscribers				158	158	
Aztec Graphics				3,973	3,973	
Banks Company, Inc.						
BLT Corp.	6,950					6,950
Dayton Legal Blank	1,466	947				2,413
Digital Color Int'l, LLC	14,439					14,439
Hanna Paper Recycling	2,440	950				3,390
Health Service Review				3,933	3,933	
Impac Graphics	1,429	1,429		3,909	3,909	2,859
Keystone Printing	3,026					3,026
Marco Printing	3,106					3,106
McNerney & Associates	20					20
Paper Prod., Inc.	730					730
Print Prod., Inc.	6,513	3,512				10,024
RPI, Inc.	1,405					1,405
SpecTape, Inc.	684					684
Synergy Displays & Graphics				13,759	13,759	
The Cobb Group	2,509	622				3,131
0299997 - Subtotal - Group subscribers	44,717	7,460		25,732	25,732	52,177
0299999 - TOTAL - Group	44,717	7,460		25,732	25,732	52,177
0599999 - Accident and health premiums due and unpaid (Page 2, Line 15)	44,717	7,460		25,732	25,732	52,177

EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

Aging Analysis of Unpaid Claims

<sup>1</sup> Account	<sup>2</sup> 1 - 30 Days	<sup>3</sup> 31 - 60 Days	<sup>4</sup> 61 - 90 Days	<sup>5</sup> 91 - 120 Days	<sup>6</sup> Over 120 Days	<sup>7</sup> Total
0399999 - Aggregate accounts not individually listed-covered	279,833	136,197	22,782	14,709	14,697	468,218
0499999 - Subtotals	279,833	136,197	22,782	14,709	14,697	468,218
0599999 - Unreported claims and other claim reserves						106,782
0799999 - Total claims unpaid						575,000

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

**EXHIBIT 7 - PART 1 - SUMMARY OF TRANSACTIONS WITH PROVIDERS**

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a Percentage of of Total Payments	3 Total Members Covered	4 Column 3 as a Percentage of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups .....	3,375,036	100.000	504	100.000		3,375,036
2. Intermediaries .....						
3. All other providers .....						
4. Total capitation payments .....	3,375,036	100.000	504	100.000		3,375,036
Other Payments:						
5. Fee-for-service .....			X X X	X X X		
6. Contractual fee payments .....			X X X	X X X		
7. Bonus/withhold arrangements - fee-for-service .....			X X X	X X X		
8. Bonus/withhold arrangements - contractual fee payments .....			X X X	X X X		
9. Non-contingent salaries .....			X X X	X X X		
10. Aggregate cost arrangements .....			X X X	X X X		
11. All other payments .....			X X X	X X X		
12. Total other payments .....			X X X	X X X		
13. Total (Line 4 plus Line 12) .....	3,375,036	100%	X X X	X X X		3,375,036

**EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES**

1 NAIC Code	2 Name of Intermediary	3 Capitation Paid	4 Average Monthly Capitation	5 Intermediary's Total Adjusted Capital	6 Intermediary's Authorized Control Level RBC
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NONE

## NOTES TO FINANCIAL STATEMENTS

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### 1. Summary of Accounting Policies

#### Basis of Accounting

The financial statements are prepared using accounting principles prescribed or permitted by the Insurance Department of the State of Ohio. Under this method, the Fund does not record prepaid expenses or recognize income on unbilled exit assessments. Accounts receivable that are uncollected after 90 days are reported as "nonadmitted" assets. Bonds are recorded at amortized cost.

#### Cash and Cash Equivalents

The Company considers cash and short term investments purchased with a maturity of three months or less to be cash equivalents. Such short-term investments are stated at fair value (level 1). These accounts may exceed federally insured amounts at times.

#### Investment Valuations and Income Recognition

As of December 31, 2013, the Fund's investments, held by Huntington Bank and managed by Bahl & Gaynor Investment Counsel, are not covered by federal insurance.

Statutory accounting guidance establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). A financial instrument's level within the fair value hierarchy is based on the lowest level of input that is significant to the fair value measurement. The three levels of the fair value hierarchy are as follows:

Level 1- Unadjusted quoted prices in active markets that are accessible at the measurement date for identical, unrestricted assets or liabilities.

Level 2 – Quoted prices in markets that are not active, or inputs that are observable either directly or indirectly, for substantially the full term of the asset or liability.

Level 3 – Prices or valuation techniques that require inputs that are both significant to the fair value measurement and unobservable (i.e. supported by little or no market activity).

The Fund's investment in short-term investments reported as cash equivalents, common stock and preferred stock are stated at fair value as determined by quoted market prices on the last business day of the year (Level 1).

The Fund's investment in bonds is stated at amortized cost and amortized on the constant yield method over the expected life of the bond. For the purposes of assessing impairment and making disclosures, the fair value of investments in bonds is determined by quoted market prices on the last business day of the year (Level 1).

Purchases and sales of investments are recorded on a trade-date basis. Interest income recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Investment income receivable which is deemed uncollectible is charged off against investment income during the period in which the determination is made. Investment income receivable that is more than 90 days past due is treated as a non-admitted asset. The Fund deems all investment income receivable, none of which was more than 90 days past due, as fully collectible at December 31, 2013 and 2012.

#### Premiums Due and Unpaid

Premium due and unpaid represent amounts due to the Fund. Accounts receivable that are uncollected after 90 days are to be reported as "non-admitted" assets. Changes to "non-admitted assets" are shown on the Statements of Changes in Surplus.

#### Unearned Premiums

Unearned premiums represent contributions received by the Fund for future periods of service. These contributions are recognized as premiums earned in the period earned.

#### Estimates

The preparation of financial statements in conformity with the accounting principles prescribed or permitted by the Insurance Department of the State of Ohio requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

#### Concentrations of Credit Risk

Concentrations of credit risk arise due to the Fund operating solely in the printing industry in the Greater Cincinnati area. Consequently, these operations and the associated credit risk may be affected, either positively or negatively, by changes in economic conditions in this geographical area.

#### Estimated Liability for Claims Incurred But Not Reported

Fund obligations for health claims incurred but not reported, by active participants are estimated at present

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

**NOTES TO FINANCIAL STATEMENTS**

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value, based on a 5% discount rate, by the Fund's actuary in accordance with accepted actuarial principles. Health claims incurred but not reported, by retired participants at year-end are included in the postretirement benefit obligation.

- 2. Accounting Changes and Corrections of Errors  
None
- 3. Business Combinations and Goodwill  
None
- 4. Discontinued Operations  
None
- 5. Investments  
None
- 6. Joint Ventures, Partnerships and Limited Liability Companies  
None
- 7. Investment Income  
No investment income was excluded in the financial statements.
- 8. Derivative Instruments  
None
- 9. Income Tax  
The Fund has been advised that it is exempt from federal income tax under Section 501(c) (9) of United States Internal Revenue Code. Therefore, there is no income tax expense or related deferred tax recognized in the financial statements.
- 10. Information Concerning Parent, Subsidiaries and Affiliates  
None
- 11. Debt  
None
- 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

**Postretirement Benefits**  
The amount reported as the postretirement benefit obligation represents the actuarial present value of those estimated future benefits that are attributed by the terms of the plan to employees for service rendered to the date of the financial statements, reduced by the actuarial present value of contributions expected to be received in the future from retirees. Postretirement benefits include future benefits expected to be paid to or for (1) currently retired or terminated employees and their beneficiaries and dependents and (2) active employees and their beneficiaries and dependents after retirement from service with participating employers. The postretirement benefit obligation represents the amount that is to be funded by contributions from the retirees. Prior to an active employee's full eligibility date, the postretirement benefit obligation is the portion of the expected postretirement benefit obligation that is attributed to that employee's service in the printing industry rendered to the valuation date.

The actuarial present value of the expected postretirement benefit obligation was determined by an actuary and is the amount that results from applying actuarial assumptions to historical claims-cost data to estimate future annual incurred claims costs per participant and to adjust such estimates for the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as those for death, disability, withdrawal, or retirement) between the valuation date and the expected date of payment.

**Total Benefit Obligations as Required Under SOP 92-6**

	December 31, 2013	December 31, 2012
Amounts Currently Payable		
Claims payable, claims incurred but not reported	\$ 575,000	\$ 550,000
Postretirement benefit obligations, net of amounts currently payable:		
Retired participants	2,807,224	2,807,224
Other participants fully eligible for benefits	7,697,813	7,697,813

## NOTES TO FINANCIAL STATEMENTS

Participants not yet fully eligible for benefits	23,628,176	23,628,176
Total Postretirement Benefit Obligations	34,133,213	34,133,213
Less: Contributions expected to be received in the future from retirees	(34,133,213)	(34,133,213)
Net Postretirement Benefit Obligation	0	0
Plan's Total Benefit Obligations	\$ 575,000	\$ 550,000

## Changes in Plan's Benefits Obligations as Required Under SOP 92-6

	December 31, 2013	December 31, 2012
Amounts Currently Payable To Or For Participants, Beneficiaries, And Dependents		
Balance at beginning of year	\$ 134,185	\$ 134,185
Claims reported and approved for payment	3,797,302	3,797,302
Claims paid	(3,882,396)	(3,882,396)
Balance at end of year	49,091	49,091
Other Obligations For Current Benefit Coverage, At Present Value Of Estimated Amounts		
Balance at beginning of year	365,815	365,815
Net change during the year	160,094	135,094
Balance at end of year	525,909	500,909
Postretirement benefit obligations, net of amounts currently payable		
Balance at beginning of year	22,704,042	22,704,042
Increases (decreases) in postretirement benefits	11,429,171	11,429,171
Less: Contributions to be received in the future from retirees	(34,133,213)	(34,133,213)
Balance at end of year	0	0
Plan's Total Benefit Obligations At End Of Year	\$ 575,000	\$ 550,000

## Benefit Obligations

The projected increase in covered health benefits at December 31, 2012 was 7% for 2013, 6% for 2014-2020 and graduated down to 4% thereafter. The projected increase in covered health care benefits at December 31, 2011 was 8% for 2011 graduated to 4% for 2016 and thereafter. The weighted-average health care cost-trend rate assumption has a significant effect on the amounts reported in the accompanying financial statements. If the assumed rates increased by one percentage point in each year it would increase the obligation as of December 31, 2012 by \$7,461,831.

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations  
None

14. Contingencies  
None

15. Leases  
None

16. Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk  
None

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities  
None

## NOTES TO FINANCIAL STATEMENTS

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

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators  
None

20. Other Items  
None

21. Events Subsequent  
None

22. Reinsurance

### A. Ceded Reinsurance Report

#### Section 1-General Interrogatories

(1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?

Yes ( ) No (X)

(2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business?

Yes ( ) No (X)

#### Section 2-Ceded Reinsurance Report-Part A

(1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credit?

Yes ( ) No (X)

- a. \$0
- b. \$0

(2) Does the reporting entity have any reinsurance agreement in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes ( ) No (X)

#### Section 3-Ceded Reinsurance Report-Part B

(1) What is the estimated amount of the aggregate reduction in surplus, (for agreement other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of payment or other similar credits that are reflected in Section 2 Above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate. Not applicable.

(2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement?

Yes ( ) No (X)

B. Uncollectible Reinsurance  
None

**NOTES TO FINANCIAL STATEMENTS**

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C. Commutation of Ceded Reinsurance  
None

23. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. Not applicable  
B. Not applicable

24. Change in Incurred Claims and Claim Adjustment Expenses  
None

25. Intercompany Pooling Arrangements  
None

26. Structured Settlements  
Not Applicable

27. Health Care Receivables  
None

28. Participating Policies  
None

29. Premium Deficiency Reserves  
None

30. Anticipated Salvage and Subrogation  
None



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

**NOTES TO FINANCIAL STATEMENTS - ITEM 1A**

(Electronic Filing Only)

1	2	3	4
State Prescribed Practices	State of Domicile	Current	Prior
01A01 - Net Income, state basis (Page 4, Line 32, Columns 2 and 3)	OH	(214,793)	(117,007)
01A04 - Net Income, NAIC SAP (Line 1 - Line 2 - Line 3)	OH	(214,793)	(117,007)
01A05 - Surplus, state basis (Page 3, Line 33, Columns 3 and 4)	OH	2,880,660	2,824,605
01A08 - Surplus, NAIC SAP (Line 5 - Line 6 - Line 7)	OH	2,880,660	2,824,605

NOTES TO FINANCIAL STATEMENTS
(Electronic Filing Only)

15. Leases
A. Disclose the following items related to lessee leasing arrangements (refer to SSAP No. 22, Leases):
2. For leases having initial or remaining noncancellable lease terms in excess of one year:
a. At January 1, of said year, the minimum aggregate rental commitments are as follows: (whole dollars)

Table with 2 columns: Year Ending December 31, Operating Leases (1). Rows include years 2014 through 2018 and a Total row.

B. When leasing is a significant part of the lessor's business activities in terms of revenue, net income, or assets, disclose the following information with respect to leases:

1. Lessor Leases:
c. Future minimum lease payment receivables under noncancellable leasing arrangements as of December 31, of said year are as follows: (whole dollars)

Table with 2 columns: Year Ending December 31, Operating Leases (1). Rows include years 2014 through 2018 and a Total row.

2. Leveraged Leases:
b. The Company's investment in leveraged leases relates to equipment used primarily in the transportation industries. The component of net income from leveraged leases at December 31, of said year were as shown below:

Table with 3 columns: (whole dollars), Current Year(2), Prior Year(3). Rows include Income from leveraged leases before income tax including investment tax credit, Less current income tax, and Net income from leveraged leases.

c. The components of the investment in leveraged leases at December 31, of said year were as shown below:

Table with 3 columns: (whole dollars), Current Year(2), Prior Year(3). Rows include Lease contracts receivable (net of principal and interest on non-recourse financing), Estimated residual value of leased assets, Unearned and deferred income, Investment in leveraged leases, Deferred income taxes related to leveraged leases, and Net investment in leveraged leases.

16. Information about Financial Instruments with Off-Balance S

For financial instruments with off-balance risk, an insur the following information by class of financial instrumen

1. The table below summarizes the face amount of the

NONE

Table with 4 columns: a. Swaps, b. Futures, c. Options, d. Total, Current Year(3), Liabilities, Prior Year(4). Rows include face amounts for swaps, futures, options, and total.

GENERAL INTERROGATORIES  
PART 1 - COMMON INTERROGATORIES

GENERAL

1.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?  
  
If yes, complete Schedule Y, Parts 1, 1A and 2.

Yes ( ) No (X)

1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent, or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?

Yes ( ) No ( ) N/A (X)

1.3

State Regulating?

.....

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes ( ) No (X)

2.2

If yes, date of change:

.....

3.1

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

12/31/2009

3.2

State the as of date of 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.

05/26/2010

3.3

State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).

05/26/2010

3.4

By what department or departments?  
Ohio Department of Insurance

3.5

Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?

Yes ( ) No ( ) N/A (X)

3.6

Have all of the recommendations within the latest financial examination report been complied with?

Yes (X) No ( ) N/A ( )

4.1

During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.11

sales of new business?

Yes ( ) No (X)

4.12

renewals?

Yes ( ) No (X)

4.2

During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.21

sales of new business?

Yes ( ) No (X)

4.22

renewals?

Yes ( ) No (X)

GENERAL INTERROGATORIES  
PART 1 - COMMON INTERROGATORIES

GENERAL

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes ( ) No (X)

5.2 If yes, provide the name of entity, the NAIC company code, and state of domicile (use two-letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile
---------------------	------------------------	------------------------

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

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

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

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

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

1 Nationality	2 Type of Entity
------------------	---------------------

8.1 Is the company a subsidiary of a 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 response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any any affiliates regulated by a federal financial regulatory services agency (i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)) and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC
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GENERAL INTERROGATORIES  
PART 1 - COMMON INTERROGATORIES

GENERAL

9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?  
J.D. Cloud 120 East Fourth Street, Cincinnati, Ohio 45202
- 10.1

Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule) , or substantially similar state law or regulation?

Yes ( ) No (X)
- 10.2

If the response to 10.1 is yes, provide information related to this exemption:  
.....
- 10.3

Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 17A of the Model Regulation, or substantially similar state law or regulation?

Yes ( ) No (X)
- 10.4

If the response to 10.3 is yes, provide information related to this exemption:  
.....
- 10.5

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

Yes (X) No ( ) N/A ( )
- 10.6

If the response to 10.5 is no or n/a, please explain:  
.....
11.

What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?  
Tim Berghoff 8216 Millview Drive Cincinnati, Ohio 45249
- 12.1

Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?

Yes ( ) No (X)
- 12.11

Name of real estate holding company  
.....
- 12.12

Number of parcels involved  
.....
- 12.13

Total book/adjusted carrying value  
\$ .....
- 12.2

If yes, provide explanation  
.....
13.

FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:
- 13.1

What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?  
.....
- 13.2

Does this statement contain all business transacted for the reporting entity through its United States branch on risks wherever located?

Yes ( ) No ( )
- 13.3

Have there been any changes made to any of the trust indentures during the year?

Yes ( ) No ( )
- 13.4

If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?

Yes ( ) No ( ) N/A (X)
- 14.1

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?  
(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 ( )
- 14.11

If the response to 14.1 is No, please explain:  
.....
- 14.2

Has the code of ethics for senior managers been amended?

Yes ( ) No (X)
- 14.21

If the response to 14.2 is Yes, provide information related to amendment(s).  
.....
- 14.3

Have any provisions of the code of ethics been waived for any of the specified officers?

Yes ( ) No (X)
- 14.31

If the response to 14.3 is Yes, provide the nature of any waiver(s).  
.....
- 15.1

Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?

Yes ( ) No (X)
- 15.2

If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

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

GENERAL INTERROGATORIES  
PART 1 - COMMON INTERROGATORIES

BOARD OF DIRECTORS

16.

Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof?

Yes (X) No ( )
17.

Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof?

Yes (X) No ( )
18.

Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees, or responsible employees that is in conflict or is likely to conflict with the official duties of such person?

Yes (X) No ( )

FINANCIAL

19.

Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?

Yes ( ) No (X)
- 20.1

Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11

To directors or other officers

\$ .....

20.12

To stockholders not officers

\$ .....

20.13

Trustees, supreme or grand (Fraternal only)

\$ .....
- 20.2

Total amount of loans outstanding at end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21

To directors or other officers

\$ .....

20.22

To stockholders not officers

\$ .....

20.23

Trustees, supreme or grand (Fraternal only)

\$ .....
- 21.1

Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement?

Yes ( ) No (X)
- 21.2

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

21.21

Rented from others

\$ .....

21.22

Borrowed from others

\$ .....

21.23

Leased from others

\$ .....

21.24

Other

\$ .....
- 22.1

Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments?

Yes ( ) No (X)
- 22.2

If answer is yes:

22.21

Amount paid as losses or risk adjustment

\$ .....

22.22

Amount paid as expenses

\$ .....

22.23

Other amounts paid

\$ .....
- 23.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes ( ) No (X)
- 23.2

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

\$ .....

GENERAL INTERROGATORIES  
PART 1 - COMMON INTERROGATORIES

INVESTMENT

24.01

Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 24.03)

Yes (X) No ( )

24.02

If no, give full and complete information relating thereto:  
.....  
.....

24.03

For the security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)  
.....  
.....

24.04

Does the Company's security lending program meet the requirements for a conforming program as outlined in Risk-Based Capital Instructions?

Yes ( ) No ( ) N/A (X)

24.05

If answer to 24.04 is YES, report amount of collateral for conforming programs.

\$ .....

24.06

If answer to 24.04 is NO, report amount of collateral for other programs.

\$ .....

24.07

Does your security lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract?

Yes ( ) No ( ) N/A (X)

24.08

Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?

Yes ( ) No ( ) N/A (X)

24.09

Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending?

Yes ( ) No ( ) N/A (X)

24.10

For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:  
24.101 Total fair value of reinvented collateral assets reported on Schedule DL, Parts 1 and 2  
24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2  
24.103 Total payable for securities lending reported on the liability page

\$ .....

\$ .....

\$ .....

25.1

Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03)

Yes ( ) No (X)

25.2

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

25.21 Subject to repurchase agreements

25.22 Subject to reverse repurchase agreements

25.23 Subject to dollar repurchase agreements

25.24 Subject to reverse dollar repurchase agreements

25.25 Pledged as collateral

25.26 Placed under option agreements

25.27 Letter stock or securities restricted as to sale

25.28 On deposit with state or other regulatory body

25.29 Other

\$ .....

\$ .....

\$ .....

\$ .....

\$ .....

\$ .....

\$ .....

\$ .....

GENERAL INTERROGATORIES  
PART 1 - COMMON INTERROGATORIES

INVESTMENT

25.3 For category (25.27) provide the following:

1 Nature of Restriction	2 Description	3 Amount
----------------------------	------------------	-------------

- 26.1 Does the reporting entity have any hedging transactions reported on Schedule DB?

Yes ( ) No (X)
- 26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?

If no, attach a description with this statement.

Yes ( ) No ( ) N/A (X)
- 27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?

Yes ( ) No (X)
- 27.2 If yes, state the amount thereof at December 31 of the current year.

\$ .....
28. 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 ( )

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

1 Name of Custodian(s)	2 Custodian's Address
---------------------------	--------------------------

Huntington Bank ..... P.O. Box 1558; Columbus, OH 43216 .....

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

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



GENERAL INTERROGATORIES  
PART 1 - COMMON INTERROGATORIES

INVESTMENT

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year? Yes ( ) No (X)

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

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

28.05 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 Number (s)	2 Name	3 Address
---	-----------	--------------

106139 ..... Bahl & Gaynor ..... 212 E 3rd St; Cincinnati, OH 45202 .....

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])? Yes ( ) No (X)

29.2 If yes, complete the following schedule:

1 CUSIP Number	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
-------------------	--------------------------	-----------------------------------

29.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from question 29.2)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
--	--	---	------------------------

.....

GENERAL INTERROGATORIES  
PART 1 - COMMON INTERROGATORIES

INVESTMENT

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-) , or Fair Value over Statement (+)
30.1 Bonds .....	\$ ..... 941,641	\$ ..... 936,232	\$ ..... (5,409)
30.2 Preferred stocks .....	\$ ..... 174,090	\$ ..... 174,090	\$ .....
30.3 Totals .....	\$ ..... 1,115,731	\$ ..... 1,110,322	\$ ..... (5,409)

30.4 Describe the sources or methods utilized in determining the fair values:  
Quaoted market value on the last day of the year  
.....

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes (X) No ( )

31.2 If the answer to 31. 1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes (X) No ( )

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:  
.....

32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed? Yes (X) No ( )

32.2 If no, list exceptions:  
.....

GENERAL INTERROGATORIES  
PART 1 - COMMON INTERROGATORIES

OTHER

33.1 Amount of payments to Trade Associations, service organizations and statistical or Rating Bureaus, if any? \$ .....

33.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
.....	\$ .....
.....	\$ .....
.....	\$ .....
.....	\$ .....

34.1 Amount of payments for legal expenses, if any? \$ ..... 80,191

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

1 Name	2 Amount Paid
Fisher & Phillips, LLP .....	\$ ..... 80,191
.....	\$ .....
.....	\$ .....
.....	\$ .....

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

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

1 Name	2 Amount Paid
.....	\$ .....
.....	\$ .....
.....	\$ .....
.....	\$ .....

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

1.1

Does the reporting entity have any direct Medicare Supplement Insurance in force?

Yes ( ) No (X)

1.2

If yes, indicate premium earned on U.S. business only.

\$ .....

1.3

What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?

\$ .....

1.31

Reason for excluding:

.....

.....

1.4

Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above

\$ .....

1.5

Indicate total incurred claims on all Medicare Supplement insurance.

\$ .....

1.6

Individual policies:

Most current three years:

1.61

Total premium earned

\$ .....

1.62

Total incurred claims

\$ .....

1.63

Number of covered lives

.....

All years prior to most current three years:

1.64

Total premium earned

\$ .....

1.65

Total incurred claims

\$ .....

1.66

Number of covered lives

.....

1.7

Group policies:

Most current three years:

1.71

Total premium earned

\$ .....

1.72

Total incurred claims

\$ .....

1.73

Number of covered lives

.....

All years prior to most current three years:

1.74

Total premium earned

\$ .....

1.75

Total incurred claims

\$ .....

1.76

Number of covered lives

.....

2.

Health Test:

1

2

Current Year

Prior Year

2.1

Premium Numerator

\$ 3,706,249

\$ 3,999,727

2.2

Premium Denominator

\$ 3,706,249

\$ 3,999,727

2.3

Premium Ratio (2.1 / 2.2)

1.000

1.000

2.4

Reserve Numerator

\$ 575,000

\$ 550,000

2.5

Reserve Denominator

\$ 575,000

\$ 550,000

2.6

Reserve Ratio (2.4 / 2.5)

1.000

1.000

3.1

Has the reporting entity received any endowment or gift from contracting hospitals, physicians, dentists, or others that is agreed will be returned when, as and if the earnings of the reporting entity permits?

Yes ( ) No (X)

3.2

If yes, give particulars:

.....

.....

4.1

Have copies of all agreements stating the period and nature of hospitals', physicians', and dentists' care offered to subscribers and dependents been filed with the appropriate regulatory agency?

Yes ( ) No (X)

4.2

If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered?

Yes ( ) No (X)

5.1

Does the reporting entity have stop-loss reinsurance?

Yes (X) No ( )

5.2

If no, explain:

.....

.....

5.3

Maximum retained risk (see instructions)

5.31

Comprehensive Medical

\$ 150,000

5.32

Medical Only

\$ .....

5.33

Medicare Supplement

\$ .....

5.34

Dental & Vision

\$ .....

5.35

Other Limited Benefit Plan

\$ .....

5.36

Other

\$ .....

6.

Describe arrangement which the reporting entity may have to protect subscribers and their dependents against the risk of insolvency including hold harmless provisions, conversion privileges with other carriers, agreements with providers to continue rendering services, and any other agreements:

.....

.....

7.1

Does the reporting entity set up its claim liability for provider services on a service date basis?

Yes ( ) No (X)

7.2

If no, give details:

.....

.....

8.

Provide the following information regarding participating providers:

8.1

Number of providers at start of reporting year

2,450

8.2

Number of providers at end of reporting year

2,450

9.1

Does the reporting entity have business subject to premium rate guarantees?

Yes ( ) No (X)

9.2

If yes, direct premium earned:

9.21

Business with rate guarantees between 15-36 months

.....

9.22

Business with rate guarantees over 36 months

.....

28

GENERAL INTERROGATORIES (Continued)

PART 2 - HEALTH INTERROGATORIES

10.1

Does the reporting entity have Incentive Pool, Withhold, or Bonus Arrangements in its provider contracts?

Yes ( ) No (X)

10.2

If yes:

10.21

Maximum amount payable bonuses

\$ .....

10.22

Amount actually paid for year bonuses

\$ .....

10.23

Maximum amount payable withholds

\$ .....

10.24

Amount actually paid for year withholds

\$ .....

11.1

Is the reporting entity organized as:

11.12

A Medical Group / Staff Model,

Yes ( ) No (X)

11.13

An Individual Practice Association (IPA), or

Yes ( ) No (X)

11.14

A Mixed Model (combination of above)?

Yes ( ) No (X)

11.2

Is the reporting entity subject to Minimum Net Worth Requirements?

Yes ( ) No (X)

11.3

If yes, show the name of the state requiring such net worth.

.....

11.4

If yes, show the amount required.

\$ .....

11.5

Is this amount included as part of a contingency reserve in stockholder's equity?

Yes ( ) No (X)

11.6

If the amount is calculated, show the calculation

.....

.....

12.1

List service areas in which reporting entity is licensed to operate:

1
Name of Service Area
IN, KY, OH
.....
.....

13.1

Do you act as a custodian for health savings accounts?

Yes ( ) No (X)

13.2

If yes, please provide the amount of custodial funds held as of the reporting date.

\$ .....

13.3

Do you act as an administrator for health savings accounts?

Yes ( ) No (X)

13.4

If yes, please provide the balance of the funds administered as of the reporting date.

\$ .....

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

FIVE - YEAR HISTORICAL DATA

	1	2	3	4	5
	2013	2012	2011	2010	2009
BALANCE SHEET (Page 2 and Page 3)					
1. Total admitted assets (Page 2, Line 28)	3,497,325	3,427,142	3,455,081	3,154,702	2,811,124
2. Total liabilities (Page 3, Line 24)	616,665	602,537	557,936	662,034	853,213
3. Statutory surplus					
4. Total capital and surplus (Page 3, Line 33)	2,880,660	2,824,605	2,897,145	2,492,668	1,957,911
INCOME STATEMENT (Page 4)					
5. Total revenues (Line 8)	3,706,249	4,056,650	4,383,823	4,189,944	6,107,939
6. Total medical and hospital expenses (Line 18)	3,533,894	3,797,301	3,624,907	3,326,780	6,224,666
7. Claims adjustment expenses (Line 20)					
8. Total administrative expenses (Line 21)	572,874	557,633	502,900	530,867	670,562
9. Net underwriting gain (loss) (Line 24)	(425,519)	(298,284)	256,016	332,297	(787,289)
10. Net investment gain (loss) (Line 27)	205,909	181,277	99,825	99,004	(125,290)
11. Total other income (Line 28 plus Line 29)	4,817				
12. Net income or (loss) (Line 32)	(214,793)	(117,007)	355,841	431,301	(912,579)
CASH FLOW (Page 6)					
13. Net cash from operations (Line 11)	(395,942)	339,843	(213,210)	287,645	(1,032,679)
RISK-BASED CAPITAL ANALYSIS					
14. Total adjusted capital	2,880,660	2,824,605	2,897,145	2,492,668	1,957,911
15. Authorized control level risk-based capital	363,314	321,069	311,574	274,967	286,060
ENROLLMENT (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7)	504	452	499	538	797
17. Total members months (Column 6, Line 7)	12,817	13,153	13,732	14,688	23,250
OPERATING PERCENTAGE (Page 4) (Item divided by Page 4, sum of Line 2, Line 3, and Line 5) X 100.0					
18. Premiums earned plus risk revenue (Line 2 plus Line 3 plus Line 5)	100.0	100.0	100.0	100.0	100.0
19. Total hospital and medical plus other non-health (Line 18 plus Line 19)	95.3	94.9	88.4	79.4	104.1
20. Cost containment expenses					
21. Other claims adjustment expenses					
22. Total underwriting deductions (Line 23)	111.5	108.9	100.6	92.1	115.3
23. Total underwriting gain (loss) (Line 24)	(11.5)	(7.5)	6.2	7.9	(13.2)
UNPAID CLAIMS ANALYSIS (U and I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 13, Column 5)	476,967	376,220	561,115	662,294	1,083,893
25. Estimated liability of unpaid claims of prior year (Line 13, Column 6)	550,000	550,000	600,000	800,000	1,022,567
INVESTMENTS IN PARENT, SUBSIDIARIES, AND AFFILIATES					
26. Affiliated bonds (Schedule D Summary, Line 12, Column 1)					
27. Affiliated preferred stocks (Schedule D Summary, Line 18, Column 1)					
28. Affiliated common stocks (Schedule D Summary, Line 24, Column 1)					
29. Affiliated short-term investments (subtotal included in Schedule DA Verification, Column 5, Line 10)					
30. Affiliated mortgage loans on real estate					
31. All other affiliated					
32. Total of above Line 26 to Line 31					
33. Total investment in parent included in Line 26 to Line 31 above					

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

Yes ( ) No ( )

If no, please explain:

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

REPORT FOR: 1. CORPORATION OHIO GRAPHIC ARTS HEALTH FUND

2. Ohio

(LOCATION)

NAIC Group Code: 0001

NAIC Company Code: 00108

BUSINESS IN THE STATE OF OHIO DURING THE YEAR 2013

	1	Comprehensive (Hospital and 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 .....	452		426	26						
2. First Quarter .....	486		476	10						
3. Second Quarter .....	482		465	17						
4. Third Quarter .....	501		486	15						
5. Current Year .....	519		504	15						
6. Current Year Member Months .....	12,817		12,817							
Total Member Ambulatory Encounters for Year:										
7. Physician .....										
8. Non-Physician .....										
9. Total .....										
10. Hospital Patient Days Incurred .....										
11. Number of Inpatient Admissions .....										
12. Health Premiums Written (b) .....										
13. Life Premiums Direct .....										
14. Property/Casualty Premiums Written .....										
15. Health Premiums Earned .....										
16. Property/Casualty Premiums Earned .....										
17. Amount Paid for Provision of Health Care Services .....										
18. Amount Incurred for Provision of Health Care Services .....	3,533,894		3,533,894							

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....

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ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

REPORT FOR: 1. CORPORATION OHIO GRAPHIC ARTS HEALTH FUND

2. Ohio

(LOCATION)

NAIC Group Code: 0001

NAIC Company Code: 00108

BUSINESS IN THE STATE OF GRAND TOTAL DURING THE YEAR 2013

	1 Total	Comprehensive (Hospital and 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 .....	452		426	26						
2. First Quarter .....	486		476	10						
3. Second Quarter .....	482		465	17						
4. Third Quarter .....	501		486	15						
5. Current Year .....	519		504	15						
6. Current Year Member Months .....	12,817		12,817							
Total Member Ambulatory Encounters for Year:										
7. Physician .....										
8. Non-Physician .....										
9. Total .....										
10. Hospital Patient Days Incurred .....										
11. Number of Inpatient Admissions .....										
12. Health Premiums Written (b) .....										
13. Life Premiums Direct .....										
14. Property/Casualty Premiums Written .....										
15. Health Premiums Earned .....										
16. Property/Casualty Premiums Earned .....										
17. Amount Paid for Provision of Health Care Services .....	3,375,036		3,375,036							
18. Amount Incurred for Provision of Health Care Services .....	3,533,894		3,533,894							

(a) For health business: number of persons insured under PPO managed care products ..... and number of persons insured under indemnity only products .....

(b) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ .....



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

SCHEDULE S - PART 2

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

1	2	3	4	5	6	7
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Paid Losses	Unpaid Losses
Life and Annuity, Non-Affiliates, U.S. Non-Affiliates						
70939	13-2611847	01/01/2013	GERBER LIFE INS CO	NY	498,099	79,989
0899999 - Life and Annuity, Non-Affiliates, U.S. Non-Affiliates					498,099	79,989
1099999 - Life and Annuity, Non-Affiliates, Total Non-Affiliates					498,099	79,989
1199999 - Total Life and Annuity					498,099	79,989
2399999 - Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)					498,099	79,989
9999999 - Total (Sum of 1199999 and 2299999)					498,099	79,989

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31 , Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4  Name of Company	5  Domiciliary Jurisdiction	6  Type	7  Premiums	8  Unearned Premiums (Estimated)	9  Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		12  Modified Coinsurance Reserve	13  Funds Withheld Under Coinsurance
									10  Current Year	11  Prior Year		

NONE

SCHEDULES S - PART 6  
Five-Year Exhibit of Reinsurance Ceded Business  
(000 Omitted)

	1	2	3	4	5
	2013	2012	2011	2010	2009
A. OPERATIONS ITEMS					
1. Premiums .....	559	513	533	492	577
2. Title XVIII - Medicare .....					
3. Title XIX - Medicaid .....					
4. Commissions and reinsurance expense allowance .....					
5. Total hospital and medical expenses .....					
B. BALANCE SHEET ITEMS					
6. Premiums receivable .....					
7. Claims payable .....					
8. Reinsurance recoverable on paid losses .....	80		372		88
9. Experience rating refunds due or unpaid .....					
10. Commissions and reinsurance expense allowances due .....					
11. Unauthorized reinsurance offset .....					
12. Offset for reinsurance with Certified Reinsurers .....		XXX	XXX	XXX	XXX
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
13. Funds deposited by and withheld from (F) .....					
14. Letters of credit (L) .....					
15. Trust agreements (T) .....					
16. Other (O) .....					
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
17. Multiple Beneficiary Trust .....		XXX	XXX	XXX	XXX
18. Funds deposited by and withheld from (F) .....		XXX	XXX	XXX	XXX
19. Letters of credit (L) .....		XXX	XXX	XXX	XXX
20. Trust agreements (T) .....		XXX	XXX	XXX	XXX
21. Other (O) .....		XXX	XXX	XXX	XXX

**SCHEDULE S - PART 7**

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
<b>ASSETS (Page 2, Column 3)</b>			
1. Cash and invested assets (Line 12) .....	3,350,569		3,350,569
2. Accident and health premiums due and unpaid (Line 15) .....	52,176		52,176
3. Amounts recoverable from reinsurers (Line 16.1) .....	79,989		79,989
4. Net credit for ceded reinsurance .....	X X X		
5. All other admitted assets (Balance) .....	14,591		14,591
6. Total assets (Line 28) .....	3,497,325		3,497,325
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
7. Claims unpaid (Line 1) .....	575,000		575,000
8. Accrued medical incentive pool and bonus payments (Line 2) .....			
9. Premiums received in advance (Line 8) .....	23,816		23,816
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19, first inset amount plus second inset amount) .....			
11. Reinsurance in unauthorized companies (Line 20 minus inset amount) .....			
12. Reinsurance with Certified Reinsurers (Line 20 inset amount) .....			
13. Funds held under reinsurance treaties with Certified Reinsurers (Line 19 third inset amount) .....			
14. All other liabilities (Balance) .....	17,849		17,849
15. Total liabilities (Line 24) .....	616,665		616,665
16. Total capital and surplus (Line 33) .....	2,880,660	X X X	2,880,660
17. Total liabilities, capital and surplus (Line 34) .....	3,497,325		3,497,325
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
18. Claims unpaid .....			
19. Accrued medical incentive pool .....			
20. Premiums received in advance .....			
21. Reinsurance recoverable on paid losses .....			
22. Other ceded reinsurance recoverables .....			
23. Total ceded reinsurance recoverables .....			
24. Premiums receivable .....			
25. Funds held under reinsurance treaties with authorized and unauthorized insurers .....			
26. Unauthorized reinsurance .....			
27. Reinsurance with Certified Reinsurers .....			
28. Funds held under reinsurance treaties with Certified Reinsurers .....			
29. Other ceded reinsurance payables/offsets .....			
30. Total ceded reinsurance payables/offsets .....			
31. Total net credit for ceded reinsurance .....			

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories

States, Etc.		1		Direct Business Only Year to Date						
		Active Status		2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 Federal Employees Health Benefits Plan Premiums	6 Life and Annuity Premiums and Other Considerations	7 Property/ Casualty Premiums	8 Total Column 2 Through Column 7
1. Alabama	AL	N								
2. Alaska	AK	N								
3. Arizona	AZ	N								
4. Arkansas	AR	N								
5. California	CA	N								
6. Colorado	CO	N								
7. Connecticut	CT	N								
8. Delaware	DE	N								
9. District of Columbia	DC	N								
10. Florida	FL	N								
11. Georgia	GA	N								
12. Hawaii	HI	N								
13. Idaho	ID	N								
14. Illinois	IL	N								
15. Indiana	IN	N								
16. Iowa	IA	N								
17. Kansas	KS	N								
18. Kentucky	KY	N								
19. Louisiana	LA	N								
20. Maine	ME	N								
21. Maryland	MD	N								
22. Massachusetts	MA	N								
23. Michigan	MI	N								
24. Minnesota	MN	N								
25. Mississippi	MS	N								
26. Missouri	MO	N								
27. Montana	MT	N								
28. Nebraska	NE	N								
29. Nevada	NV	N								
30. New Hampshire	NH	N								
31. New Jersey	NJ	N								
32. New Mexico	NM	N								
33. New York	NY	N								
34. North Carolina	NC	N								
35. North Dakota	ND	N								
36. Ohio	OH	L	4,265,727						4,265,727	
37. Oklahoma	OK	N								
38. Oregon	OR	N								
39. Pennsylvania	PA	N								
40. Rhode Island	RI	N								
41. South Carolina	SC	N								
42. South Dakota	SD	N								
43. Tennessee	TN	N								
44. Texas	TX	N								
45. Utah	UT	N								
46. Vermont	VT	N								
47. Virginia	VA	N								
48. Washington	WA	N								
49. West Virginia	WV	N								
50. Wisconsin	WI	N								
51. Wyoming	WY	N								
52. American Samoa	AS	N								
53. Guam	GU	N								
54. Puerto Rico	PR	N								
55. U. S. Virgin Islands	VI	N								
56. Northern Mariana Islands	MP	N								
57. Canada	CAN	N								
58. Aggregate Other Alien	OT	X X X								
59. Subtotal		X X X	4,265,727						4,265,727	
60. Reporting entity contributions for Employee Benefit Plans		X X X								
61. Total (Direct Business)	(a)	1	4,265,727						4,265,727	
DETAILS OF WRITE-INS										
58001.										
58002.										
58003.										
58998.	Summary of remaining write-ins for Line 58 from overflow page									
58999.	Total (Line 58001 through Line 58003 plus Line 58998) (Line 58 above)									
(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.										
Explanation of basis of allocation by states, premiums by state, etc.										

(a) Insert the number of "L" responses except for Canada and Other Alien.

**NONE**

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED 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.

	MARCH FILING	RESPONSE
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?		YES
EXPLANATION:		
BARCODE:		
Document Identifier 460:		
2. Will an actuarial opinion be filed by March 1?		YES
EXPLANATION:		
BARCODE:		
Document Identifier 440:		
3. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?		YES
EXPLANATION:		
BARCODE:		
Document Identifier 390:		
4. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required by March 1?		YES
EXPLANATION:		
BARCODE:		
Document Identifier 390:		
	APRIL FILING	
5. Will Management's Discussion and Analysis be filed by April 1?		YES
EXPLANATION:		
BARCODE:		
Document Identifier 350:		
6. Will the Supplemental Investment Risks Interrogatories be filed by April 1?		YES
EXPLANATION:		
BARCODE:		
Document Identifier 285:		
7. Will the Accident and Health Policy Experience Exhibit be filed by April 1?		YES
EXPLANATION:		
BARCODE:		
Document Identifier 210:		
	JUNE FILING	
8. Will an audited financial report be filed by June 1?		YES
EXPLANATION:		
BARCODE:		
Document Identifier 220:		

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED 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.

JUNE FILING	RESPONSE
9. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
EXPLANATION:	
BARCODE:	
Document Identifier 221:	

AUGUST FILING	
10. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	YES
EXPLANATION:	
BARCODE:	
Document Identifier 222:	

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.

MARCH FILING	RESPONSE
11. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
EXPLANATION:	
n/a	
BARCODE:	
Document Identifier 360:	
0 0 1 0 8 2 0 1 3 3 6 0 0 0 0 0 0	

12. Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC?	NO
EXPLANATION:	
n/a	
BARCODE:	
Document Identifier 205:	
0 0 1 0 8 2 0 1 3 2 0 5 0 0 0 0 0	

13. Will the Supplemental Property/Casualty data due March 1 be filed with the state of domicile and the NAIC?	NO
EXPLANATION:	
n/a	
BARCODE:	
Document Identifier 207:	
0 0 1 0 8 2 0 1 3 2 0 7 0 0 0 0 0	

14. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
EXPLANATION:	
n/a	
BARCODE:	
Document Identifier 420:	
0 0 1 0 8 2 0 1 3 4 2 0 0 0 0 0 0	

15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?	NO
EXPLANATION:	
n/a	
BARCODE:	
Document Identifier 371:	
0 0 1 0 8 2 0 1 3 3 7 1 0 0 0 0 0	

16. Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?	NO
EXPLANATION:	
n/a	
BARCODE:	
Document Identifier 370:	
0 0 1 0 8 2 0 1 3 3 7 0 0 0 0 0 0	



ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

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.

	MARCH FILING	RESPONSE
17. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?		NO
EXPLANATION: n/a		
BARCODE: Document Identifier 365:	001082013365000000 	
18. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?		NO
EXPLANATION:		
BARCODE: Document Identifier 224:	001082013224000000 	
19. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?		NO
EXPLANATION:		
BARCODE: Document Identifier 225:	001082013225000000 	
20. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?		NO
EXPLANATION:		
BARCODE: Document Identifier 226:	001082013226000000 	
APRIL FILING		
21. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?		NO
EXPLANATION: n/a		
BARCODE: Document Identifier 306:	001082013306000000 	
22. Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?		NO
EXPLANATION: n/a		
BARCODE: Document Identifier 211:	001082013211000000 	
23. Will the Supplemental Property/Casualty Insurance Expense Exhibit due April 1 be filed with any state that requires it, and, if so, the NAIC?		NO
EXPLANATION: n/a		
BARCODE: Document Identifier 213:	001082013213000000 	
24. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?		NO
EXPLANATION: n/a		
BARCODE: Document Identifier 216:	001082013216000000 	

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

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.

APRIL FILING		RESPONSE
25. Will the regulator only (non-public) Supplemental Health Care Exhibit's Allocation Report be filed with the state of domicile and the NAIC by April 1?		NO
EXPLANATION: n/a		
BARCODE: Document Identifier 217:		0 0 1 0 8 2 0 1 3 2 1 7 0 0 0 0 0

AUGUST FILING		RESPONSE
26. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?		NO
EXPLANATION: n/a		
BARCODE: Document Identifier 223:		0 0 1 0 8 2 0 1 3 2 2 3 0 0 0 0 0

SUMMARY INVESTMENT SCHEDULE

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in Annual Statement			
	1 Amount	2 Percentage	3 Amount	4 Securities Lending Reinvested Collateral Amount	5 Total Amount (Col 3 + Col 4)	6 Percentage
1. Bonds:						
1.1 U.S. treasury securities						
1.2 U.S. government agency obligations (excluding mortgage-backed securities):						
1.21 Issued by U.S. government agencies						
1.22 Issued by U.S. government sponsored agencies						
1.3 Non-U.S. government (including Canada, excluding mortgage-backed securities)						
1.4 Securities issued by states, territories, and possessions and political subdivisions in the U.S.:						
1.41 States, territories and possessions general obligations						
1.42 Political subdivisions of states, territories and possessions and political subdivison general obligations						
1.43 Revenue and assessment obligations						
1.44 Industrial development and similar obligations						
1.5 Mortgage-backed securities (includes residential and commercial MBS):						
1.51 Pass-through securities:						
1.511 Issued or guaranteed by GNMA						
1.512 Issued or guaranteed by FNMA and FHLMC						
1.513 All other						
1.52 CMOs and REMICs:						
1.521 Issued or guaranteed by GNMA, FNMA, FHLMC or VA						
1.522 Issued by non-U.S. Government issuers and collateralized by mortgage-backed securities issued or guaranteed by agencies shown in Line 1.521						
1.523 All other						
2. Other debt and other fixed income securities (excluding short term):						
2.1 Unaffiliated domestic securities (includes credit tenant loans and hybrid securities)			941,641		941,641	28.104
2.2 Unaffiliated non-U.S. securities (including Canada)						
2.3 Affiliated securities						
3. Equity interests:						
3.1 Investments in mutual funds						
3.2 Preferred stocks:						
3.21 Affiliated						
3.22 Unaffiliated			174,090		174,090	5.196
3.3 Publically traded equity securities (excluding preferred stocks):						
3.31 Affiliated						
3.32 Unaffiliated			2,172,081		2,172,081	64.827
3.4 Other equity securities:						
3.41 Affiliated						
3.42 Unaffiliated						
3.5 Other equity interests including tangible personal property under lease:						
3.51 Affiliated						
3.52 Unaffiliated						
4. Mortgage loans:						
4.1 Construction and land development						
4.2 Agricultural						
4.3 Single family residential properties						
4.4 Multifamily residential properties						
4.5 Commercial loans						
4.6 Mezzanine real estate loans						
5. Real estate investments:						
5.1 Property occupied by company						
5.2 Property held for production of income (including \$ of property acquired in satisfaction of debt)						
5.3 Property held for sale (including \$ property acquired in satisfaction of debt)						
6. Contract loans						
7. Derivatives						
8. Receivables for securities			33,655		33,655	1.004
9. Securities Lending (Line 10, Asset page reinvested collateral)				X X X	X X X	X X X
10. Cash, cash equivalents and short-term investments			29,102		29,102	0.869
11. Other invested assets						
12. Total invested assets			3,350,569		3,350,569	100.000

SCHEDULE BA - VERIFICATION BETWEEN YEARS  
Other Long-Term Invested Assets

1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
2.1	Actual cost at time of acquisition (Part 2, Column 8)		
2.2	Additional investment made after acquisition (Part 2, Column 9)		
3.	Capitalized deferred interest and other		
3.1	Totals, Part 1, Column 16		
3.2	Totals, Part 3, Column 12		
4.	Accrual of discount		
5.	Unrealized valuation increase (decrease):		
5.1	Totals, Part 1, Column 13		
5.2	Totals, Part 3, Column 9		
6.	Total gain (loss) on disposals, Part 3, Column 19		
7.	Deduct amounts received on disposals, Part 3, Col		
8.	Deduct amortization of premium and depreciation		
9.	Total foreign exchange change in book/adjusted carrying value:		
9.1	Totals, Part 1, Column 17		
9.2	Totals, Part 3, Column 14		
10.	Deduct current year's other-than-temporary impairment recognized:		
10.1	Totals, Part 1, Column 15		
10.2	Totals, Part 3, Column 11		
11.	Book/adjusted carrying value at the end of current period (Line 1 plus Line 2 plus Line 3 plus Line 4 plus Line 5 plus Line 6 minus Line 7 minus Line 8 plus Line 9 minus Line 10)		
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)		

NONE

SCHEDULE D - VERIFICATION BETWEEN YEARS  
Bonds and Stocks

1.	Book/adjusted carrying value, December 31 of prior year		2,888,305
2.	Cost of bonds and stocks acquired, Part 3, Column 7		742,659
3.	Accrual of discount		377
4.	Unrealized valuation increase (decrease):		
4.1	Part 1, Column 12		
4.2	Part 2, Section 1, Column 15	(16,147)	
4.3	Part 2, Section 2, Column 13	356,785	
4.4	Part 4, Column 11	(54,842)	285,796
5.	Total gain (loss) on disposals, Part 4, Column 19		114,042
6.	Deduction consideration for bonds and stocks disposed of, Part 4, Column 7		737,798
7.	Deduct amortization of premium		5,569
8.	Total foreign exchange change in book/adjusted carrying value:		
8.1	Part 1, Column 15		
8.2	Part 2, Section 1, Column 19		
8.3	Part 2, Section 2, Column 16		
8.4	Part 4, Column 15		
9.	Deduct current year's other-than-temporary impairment recognized:		
9.1	Part 1, Column 14		
9.2	Part 2, Section 1, Column 17		
9.3	Part 2, Section 2, Column 14		
9.4	Part 4, Column 13		
10.	Book/adjusted carrying value at end of current period (Line 1 plus Line 2 plus Line 3 plus Line 4 plus Line 5 minus Line 6 minus Line 7 plus Line 8 minus Line 9)		3,287,812
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)		3,287,812

SCHEDULE D - SUMMARY BY COUNTRY

Long-Term Bonds and Stocks OWNED December 31 of Current Year

Description		1	2	3	4
		Book/Adjusted Carrying Value	Fair Value	Actual Cost	Par Value of Bonds
BONDS  Governments (Including all obligations guaranteed by governments)	1. United States .....				
	2. Canada .....				
	3. Other Countries .....				
	4. Totals .....				
U.S. States, Territories and Possessions (Direct and guaranteed)	5. Totals .....				
U.S. Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	6. Totals .....				
U.S. Special revenue and special assessment obligations and all non-guaranteed obligations of agencies and authorities of governments and their political subdivisions	7. Totals .....				
Industrial and Miscellaneous and Hybrid Securities (unaffiliated)	8. United States .....	941,641	936,232	951,443	925,000
	9. Canada .....				
	10. Other Countries .....				
	11. Totals .....	941,641	936,232	951,443	925,000
Parent, Subsidiaries and Affiliates	12. Totals .....				
	13. Total Bonds .....	941,641	936,232	951,443	925,000
PREFERRED STOCKS  Industrial and Miscellaneous (unaffiliated)	14. United States .....	174,090	174,090	185,777	
	15. Canada .....				
	16. Other Countries .....				
	17. Totals .....	174,090	174,090	185,777	
Parent, Subsidiaries and Affiliates	18. Totals .....				
	19. Total Preferred Stocks .....	174,090	174,090	185,777	
COMMON STOCKS  Industrial and Miscellaneous (unaffiliated)	20. United States .....	2,048,510	2,048,510	1,422,701	
	21. Canada .....				
	22. Other Countries .....	123,571	123,571	74,471	
	23. Totals .....	2,172,081	2,172,081	1,497,172	
Parent, Subsidiaries and Affiliates	24. Totals .....				
	25. Total Common Stocks .....	2,172,081	2,172,081	1,497,172	
	26. Total Stocks .....	2,346,171	2,346,171	1,682,949	
	27. Total Bonds and Stocks .....	3,287,812	3,282,403	2,634,392	

## ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

## SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 9.7	8 Total from Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
1. U.S. Governments											
1.1 NAIC 1											
1.2 NAIC 2											
1.3 NAIC 3											
1.4 NAIC 4											
1.5 NAIC 5											
1.6 NAIC 6											
1.7 Totals											
2. All Other Governments											
2.1 NAIC 1											
2.2 NAIC 2											
2.3 NAIC 3											
2.4 NAIC 4											
2.5 NAIC 5											
2.6 NAIC 6											
2.7 Totals											
3. U.S. States, Territories and Possessions etc., Guaranteed											
3.1 NAIC 1											
3.2 NAIC 2											
3.3 NAIC 3											
3.4 NAIC 4											
3.5 NAIC 5											
3.6 NAIC 6											
3.7 Totals											
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed											
4.1 NAIC 1											
4.2 NAIC 2											
4.3 NAIC 3											
4.4 NAIC 4											
4.5 NAIC 5											
4.6 NAIC 6											
4.7 Totals											
5. U.S. Special Revenue and Special Assessment Obligations etc., Non-Guaranteed											
5.1 NAIC 1											
5.2 NAIC 2											
5.3 NAIC 3											
5.4 NAIC 4											
5.5 NAIC 5											
5.6 NAIC 6											
5.7 Totals											

NONE

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

SCHEDULE D - PART 1A - SECTION 1 (continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book / Adjusted Carrying Values by Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 9.7	8 Total from Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
6. Industrial and Miscellaneous (Unaffiliated)											
6.1 NAIC 1	200,033	485,880	205,728		50,000	941,641	100.0	919,446		941,641	
6.2 NAIC 2											
6.3 NAIC 3											
6.4 NAIC 4											
6.5 NAIC 5											
6.6 NAIC 6											
6.7 Totals	200,033	485,880	205,728		50,000	941,641	100.0	919,446		941,641	
7. Hybrid Securities											
7.1 NAIC 1											
7.2 NAIC 2											
7.3 NAIC 3											
7.4 NAIC 4											
7.5 NAIC 5											
7.6 NAIC 6											
7.7 Totals											
8. Parent, Subsidiaries and Affiliates											
8.1 NAIC 1											
8.2 NAIC 2											
8.3 NAIC 3											
8.4 NAIC 4											
8.5 NAIC 5											
8.6 NAIC 6											
8.7 Totals											

## ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

**SCHEDULE D - PART 1A - SECTION 1 (continued)**

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

Quality Rating per the NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 9.7	8 Total from Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed (a)
<b>9. Total Bonds Current Year</b>											
9.1 NAIC 1	(d) 200,033	485,880	205,728		50,000	941,641	100.0	XXX	XXX	941,641	
9.2 NAIC 2	(d)							XXX	XXX		
9.3 NAIC 3	(d)							XXX	XXX		
9.4 NAIC 4	(d)							XXX	XXX		
9.5 NAIC 5	(d)					(c)		XXX	XXX		
9.6 NAIC 6	(d)					(c)		XXX	XXX		
9.7 Totals	200,033	485,880	205,728		50,000	(b) 941,641	100.0	XXX	XXX	941,641	
9.8 Line 9.7 as a % of Column 6	21.2	51.6	21.8		5.3	100.0	XXX	XXX	XXX	100.0	
<b>10. Total Bonds Prior Year</b>											
10.1 NAIC 1	175,619	534,743	209,084			XXX	XXX	919,446		919,446	
10.2 NAIC 2						XXX	XXX				
10.3 NAIC 3						XXX	XXX				
10.4 NAIC 4						XXX	XXX				
10.5 NAIC 5						XXX	XXX	(c)			
10.6 NAIC 6						XXX	XXX	(c)			
10.7 Totals	175,619	534,743	209,084			XXX	XXX	(b) 919,446		919,446	
10.8 Line 10.7 as a % of Column 8	19.1	58.2	22.7			XXX	XXX	100.0	XXX	100.0	
<b>11. Total Publicly Traded Bonds</b>											
11.1 NAIC 1	200,033	485,880	205,728		50,000	941,641	100.0	919,446		941,641	XXX
11.2 NAIC 2											XXX
11.3 NAIC 3											XXX
11.4 NAIC 4											XXX
11.5 NAIC 5											XXX
11.6 NAIC 6											XXX
11.7 Totals	200,033	485,880	205,728		50,000	941,641	100.0	919,446		941,641	XXX
11.8 Line 11.7 as a % of Column 6	21.2	51.6	21.8		5.3	100.0	XXX	XXX	XXX	100.0	XXX
11.9 Line 11.7 as a % of Line 9.7, Column 6, Section 9	21.2	51.6	21.8		5.3	100.0	XXX	XXX	XXX	100.0	XXX
<b>12. Total Privately Placed Bonds</b>											
12.1 NAIC 1										XXX	
12.2 NAIC 2										XXX	
12.3 NAIC 3										XXX	
12.4 NAIC 4										XXX	
12.5 NAIC 5										XXX	
12.6 NAIC 6										XXX	
12.7 Totals										XXX	
12.8 Line 12.7 as a % of Column 6							XXX	XXX	XXX	XXX	
12.9 Line 12.7 as a % of Line 9.7, Column 6, Section 9							XXX	XXX	XXX	XXX	

(a) Includes \$ ..... freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.

(b) Includes \$ ..... current year, \$ ..... prior year of bonds with Z designations and \$ ..... current year, \$ ..... prior year of bonds with Z\* designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement. "Z\*" means the SVO could not evaluate the obligation because valuation procedures for the security class is under regulatory review.

(c) Includes \$ ..... current year, \$ ..... prior year of bonds with 5\* designations and \$ ..... current year, \$ ..... prior year of bonds with 6\* designations. "5\*" means the NAIC designation was assigned by the SVO in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6\*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

(d) Includes the following amount of non-rated short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$ .....; NAIC 2 \$ .....; NAIC 3 \$ .....; NAIC 4 \$ .....; NAIC 5 \$ .....; NAIC 6 \$ .....



## ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

**SCHEDULE D - PART 1A - SECTION 2**

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 9.5	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
1. U.S. Governments											
1.1 Issuer Obligations											
1.2 Residential Mortgage-Backed Securities											
1.3 Commercial Mortgage-Backed Securities											
1.4 Other Loan-Backed and Structured Securities											
1.5 Totals											
2. All Other Governments											
2.1 Issuer Obligations											
2.2 Residential Mortgage-Backed Securities											
2.3 Commercial Mortgage-Backed Securities											
2.4 Other Loan-Backed and Structured Securities											
2.5 Totals											
3. U.S. States, Territories and Possessions, Guaranteed											
3.1 Issuer Obligations											
3.2 Residential Mortgage-Backed Securities											
3.3 Commercial Mortgage-Backed Securities											
3.4 Other Loan-Backed and Structured Securities											
3.5 Totals											
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed											
4.1 Issuer Obligations											
4.2 Residential Mortgage-Backed Securities											
4.3 Commercial Mortgage-Backed Securities											
4.4 Other Loan-Backed and Structured Securities											
4.5 Totals											
5. U.S. Special Revenue and Special Assessment Obligations etc., Non-Guaranteed											
5.1 Issuer Obligations											
5.2 Residential Mortgage-Backed Securities											
5.3 Commercial Mortgage-Backed Securities											
5.4 Other Loan-Backed and Structured Securities											
5.5 Totals											
6. Industrial and Miscellaneous											
6.1 Issuer Obligations	200,033	485,880	205,728		50,000	941,641	100.0	919,446	100.0	941,641	
6.2 Residential Mortgage-Backed Securities											
6.3 Commercial Mortgage-Backed Securities											
6.4 Other Loan-Backed and Structured Securities											
6.5 Totals	200,033	485,880	205,728		50,000	941,641	100.0	919,446	100.0	941,641	
7. Hybrid Securities											
7.1 Issuer Obligations											
7.2 Residential Mortgage-Backed Securities											
7.3 Commercial Mortgage-Backed Securities											
7.4 Other Loan-Backed and Structured Securities											
7.5 Totals											
8. Parent, Subsidiaries and Affiliates											
8.1 Issuer Obligations											
8.2 Residential Mortgage-Backed Securities											
8.3 Commercial Mortgage-Backed Securities											
8.4 Other Loan-Backed and Structured Securities											
8.5 Totals											

## ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

**SCHEDULE D - PART 1A - SECTION 2 (continued)**

Maturity Distribution of All Bonds Owned December 31, At Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 Total Current Year	7 Column 6 as a % of Line 9.5	8 Total From Column 6 Prior Year	9 % From Column 7 Prior Year	10 Total Publicly Traded	11 Total Privately Placed
<b>9. Total Bonds Current Year</b>											
9.1 Issuer Obligations	200,033	485,880	205,728		50,000	941,641	100.0	XXX	XXX	941,641	
9.2 Residential Mortgage-Backed Securities								XXX	XXX		
9.3 Commercial Mortgage-Backed Securities								XXX	XXX		
9.4 Other Loan-Backed and Structured Securities								XXX	XXX		
9.5 Totals	200,033	485,880	205,728		50,000	941,641	100.0	XXX	XXX	941,641	
9.6 Line 9.5 as a % of Column 6	21.2	51.6	21.8		5.3	100.0	XXX	XXX	XXX	100.0	
<b>10. Total Bonds Prior Year</b>											
10.1 Issuer Obligations	175,619	534,743	209,084			XXX	XXX	919,446	100.0	919,446	
10.2 Residential Mortgage-Backed Securities						XXX	XXX				
10.3 Commercial Mortgage-Backed Securities						XXX	XXX				
10.4 Other Loan-Backed and Structured Securities						XXX	XXX				
10.5 Totals	175,619	534,743	209,084			XXX	XXX	919,446	100.0	919,446	
10.6 Line 10.5 as a % of Column 8	19.1	58.2	22.7			XXX	XXX	100.0	XXX	100.0	
<b>11. Total Publicly Traded Bonds</b>											
11.1 Issuer Obligations	200,033	485,880	205,728		50,000	941,641	100.0	919,446	100.0	941,641	XXX
11.2 Residential Mortgage-Backed Securities											XXX
11.3 Commercial Mortgage-Backed Securities											XXX
11.4 Other Loan-Backed and Structured Securities											XXX
11.5 Totals	200,033	485,880	205,728		50,000	941,641	100.0	919,446	100.0	941,641	XXX
11.6 Line 11.5 as a % of Column 6	21.2	51.6	21.8		5.3	100.0	XXX	XXX	XXX	100.0	XXX
11.7 Line 11.5 as a % of Line 9.5, Column 6, Section 9	21.2	51.6	21.8		5.3	100.0	XXX	XXX	XXX	100.0	XXX
<b>12. Total Privately Placed Bonds</b>											
12.1 Issuer Obligations										XXX	
12.2 Residential Mortgage-Backed Securities										XXX	
12.3 Commercial Mortgage-Backed Securities										XXX	
12.4 Other Loan-Backed and Structured Securities										XXX	
12.5 Totals										XXX	
12.6 Line 12.5 as a % of Column 6							XXX	XXX	XXX	XXX	
12.7 Line 12.5 as a % of Line 9.5, Column 6, Section 9							XXX	XXX	XXX	XXX	

SCHEDULE DA - VERIFICATION BETWEEN YEARS

Short-Term Investments

	1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Assets (a)	Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value, December 31 of prior year .....	184,354			184,354	
2. Cost of short-term investments acquired .....	411,383			411,383	
3. Accrual of discount .....					
4. Unrealized valuation increase (decrease) .....					
5. Total gain (loss) on disposals .....					
6. Deduct consideration received on disposals .....	593,428			593,428	
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 the end of current period (Lines 1 plus 2 plus 3 plus 4 plus 5 minus 6 minus 7 plus 8 minus 9) .....	2,309			2,309	
11. Deduct total nonadmitted amounts .....					
12. Statement value of end of current period (Line 10 minus Line 11) .....	2,309			2,309	

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment: .....

## ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

## SCHEDULE D - PART 1

Showing all Long-Term BONDS Owned December 31 of Current Year

1	2	Codes			6	7	Fair Value		10	11	Change in Book Adjusted Carrying Value				Interest					Dates	
		3	4	5			8	9			12	13	14	15	16	17	18	19	20	21	22
CUSIP Identification	Description	Code	Foreign	Bond CHAR	NAIC Designation	Actual Cost	Rate Used To Obtain Fair Value	Fair Value	Par Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization) / Accretion	Current Year's Other-Than- Temporary Impairment Recognized	Total Foreign Exchange Change in B./A.C.V.	Rate of	Effective Rate of	When Paid	Admitted Amount Due and Accrued	Amount Received During Year	Acquired	Stated Contractual Maturity Date
Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations																					
009363-AP-7	Airgas, Inc. 2.375%				1Z	50,635		47,227	50,000	50,576		59			2.375		Semi	449	300	05/14/2013	02/15/2020
031162-BB-5	Amgen Inc 4.5%				1Z	56,625		53,611	50,000	55,401		864			4.500		Semi	663	2,250	08/03/2012	03/15/2020
035229-CW-1	Anheuser Busch				1Z	53,990		55,769	50,000	52,589		509			5.000		Semi	833	2,500	04/28/2011	03/01/2019
24422E-QZ-5	John Deere Capital Corp				1Z	52,738		52,343	50,000	51,749		456			2.800		Semi	400	1,400	10/19/2011	09/18/2017
25389J-AG-1	Digital Realty Trust				1Z	52,287		52,008	50,000	50,945		597			4.500		Semi	1,038	2,250	09/22/2011	07/15/2015
38141G-EU-4	Goldman Sachs Group Inc				1Z	53,950		55,097	50,000	52,033		697			5.625		Semi	1,297	2,813	04/28/2011	01/15/2017
26138E-AM-1	Dr Pepper Snapple Group 2.9%				1Z	52,980		51,892	50,000	51,759		862			2.900		Semi	669	1,450	08/02/2012	01/15/2016
26875P-AK-7	EOG Resources				1Z	50,428		45,488	50,000	50,368		49			2.625		Semi	386	1,331	09/07/2012	03/15/2023
46625H-HW-3	JP Morgan Chase & Co				1Z	48,699		51,500	50,000	49,480		(260)			2.600		Semi	599	1,300	01/27/2011	01/15/2016
494368-BH-5	Kimberly-Clark Corp				1Z	49,237		46,476	50,000	49,383		(76)			2.400		Semi	400	1,200	02/06/2012	03/01/2022
046353-AA-6	Astrazeneca				1Z	50,722		51,047	50,000	50,037		88			5.400		Semi	225	2,700	03/16/2006	06/01/2014
66989H-AA-6	Novartis Capital				1Z	51,077		50,195	50,000	50,018		215			4.125		Semi	808	2,063	02/04/2009	02/10/2014
742718-DA-4	Procter & Gamble				1Z	99,653		102,841	100,000	99,978		(41)			4.950		Semi	1,870	4,950	01/30/2006	08/15/2014
756109-AJ-3	Realty Income Corp				1Z	26,242		27,781	25,000	25,474		196			5.950		Semi	438	1,487	02/17/2010	09/15/2016
316773-CM-0	Fifth Third Bancorp				1Z	50,000		44,250	50,000	50,000					5.100		Semi	7	1,587	05/13/2013	12/31/2049
842587-CG-0	Southern Co				1Z	51,640		51,169	50,000	51,367		273			2.375		Semi	350	63	08/21/2013	09/15/2015
882508-AU-8	Texas Instruments, Inc				1Z	50,300		48,163	50,000	50,270		30			1.650		Semi	339	195	05/03/2013	08/03/2019
071813-BJ-7	Baxter International, Inc				1Z	50,240		49,375	50,000	50,214		26			1.850		Semi	41	473	06/05/2013	06/15/2018
3299999	- Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations					951,443		936,232	925,000	941,641		4,544						10,812	30,312		
3899999	- Subtotal - Industrial and Miscellaneous (Unaffiliated)					951,443		936,232	925,000	941,641		4,544						10,812	30,312		
7799999	- Total Bonds - Subtotal - Issuer Obligations					951,443		936,232	925,000	941,641		4,544						10,812	30,312		
8399999	- Subtotal - Total Bonds					951,443		936,232	925,000	941,641		4,544						10,812	30,312		

SCHEDULE D - PART 2 - SECTION 1

Showing all PREFERRED STOCKS Owned December 31 of Current Year

1	2	Codes		5	6	7	8	Fair Value		11	Dividends			Changes in Book/Adjusted Carrying Value					20	21
		3	4					9	10		12	13	14	15	16	17	18	19		
CUSIP Identification	Description	Code	Foreign	Number Of Shares	Par Value Per Share	Rate Per Share	Book/Adjusting Carrying Value	Rate Per Share Used to Obtain Fair Value	Fair Value	Actual Cost	Declared but Unpaid	Amount Received During Year	Nonadmitted Declared But Unpaid	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization) Accretion	Current Year's Other-Than- Temporary Impairment Recognized	Total Change in B. /A. C. V. (15+16-17)	Total Foreign Exchange Change in B. /A. C. V.	NAIC Designation	Date Acquired
Industrial and Miscellaneous (Unaffiliated)																				
693475-85-7	PNC			2,000.000			50,500	0.904	50,500	55,845		2,297		(6,385)			(6,385)		P1A	05/07/2013
902973-81-7	US BANCORP			2,000.000			54,740	0.985	54,740	55,572	750	2,250		(1,512)			(1,512)		P1A	05/07/2013
949746-55-6	Wells Fargo & Co V/R 5.85%			2,000.000			47,140	0.955	47,140	49,360		1,050		(2,220)			(2,220)		P1A	10/17/2013
253868-70-7	Digital Realty Series E PFD 7%			1,000.000			21,710	0.870	21,710	25,000		1,750		(6,030)			(6,030)		P1A	09/11/2011
8499999	Industrial and Miscellaneous (Unaffiliated)						174,090		174,090	185,777	750	7,347		(16,147)			(16,147)			
8999999	Total - Preferred Stocks						174,090		174,090	185,777	750	7,347		(16,147)			(16,147)			

## ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

## SCHEDULE D - PART 2 - SECTION 2

Showing all COMMON STOCKS Owned December 31 of Current Year

1  CUSIP Identification	2  Description	Codes		5  Number of Shares	6  Book/Adjusted Carrying Value	Fair Value		9  Actual Cost	Dividends			Changes in Book/Adjusted Carrying Value				17  NAIC Market Indicator (a)	18  Date Acquired
		3  Code	4  Foreign			7  Rate Per Share Used to Obtain Fair Value	8  Fair Value		10  Declared but Unpaid	11  Amount Received During Year	12  Nonadmitted Declared But Unpaid	13  Unrealized Valuation Increase/ (Decrease)	14  Current Year's Other-Than- Temporary Impairment Recognized	15  Total Change in B./A.C.V. (13 - 14)	16  Total Foreign Exchange Change in B./A.C.V.		
Industrial and Miscellaneous (Unaffiliated)																	
002824-10-0	Abbott Labs			1,400.000	53,662	38.330	53,662	37,866		582		6,892		6,892		A	13/1/2002
031162-10-0	Amgen Inc			490.000	55,899	114.080	55,899	35,591		921		13,661		13,661		A	01/1/2006
032654-10-5	Analog Devices			440.000	22,409	50.930	22,409	16,506		649		3,689		3,689		A	18/1/2001
037833-10-0	Apple Inc			100.000	56,102	561.020	56,102	53,410		856		3,328		3,328		A	14/1/2011
054937-10-7	BB&T Corp			1,075.000	40,119	37.320	40,119	35,433		1,026		7,265		7,265		A	27/1/2007
075887-10-9	Becton Dickinson			270.000	29,832	110.490	29,832	21,296		593		8,839		8,839		A	10/1/2012
09247X-10-1	Blackrock			100.000	31,647	316.470	31,647	16,970		1,170		10,976		10,976		A	08/1/2002
166764-10-0	Chevron Texaco			280.000	34,975	124.910	34,975	12,532		870		3,470		3,470		A	21/1/2007
171340-10-2	Church & Dwight			620.000	41,094	66.280	41,094	23,729		736		2,374		2,374		A	07/1/2003
17275R-10-2	Cisco Systems			2,350.000	52,711	22.430	52,711	46,219		1,107		5,572		5,572		A	05/1/2009
191216-10-0	Coca cola			800.000	33,048	41.310	33,048	19,929		896		4,048		4,048		A	10/1/2012
229899-10-9	Cullen/Frost Bankers			690.000	51,357	74.430	51,357	40,324		1,287		12,271		12,271		A	22/1/2004
231021-10-6	Cummins Inc			290.000	40,881	140.970	40,881	37,475				3,406		3,406		A	04/1/2012
254687-10-6	Walt Disney			750.000	57,300	76.400	57,300	32,900	645			20,351		20,351		A	10/1/2001
260003-10-8	Dover			410.000	39,581	96.540	39,581	23,280		971		10,879		10,879		A	23/1/2003
26875P-10-1	EOG Resources			260.000	43,638	167.840	43,638	24,794		223		10,898		10,898		A	04/1/2001
278865-10-0	Ecolab			350.000	31,281	89.374	31,281	10,103	88		228	8,586		8,586		A	23/1/2011
291011-10-4	Emerson			820.000	57,548	70.180	57,548	30,599		1,453		14,289		14,289		A	23/1/2011
36191G-10-7	GNC Holdings			400.000	23,380	58.450	23,380	19,090		120		4,290		4,290		A	17/1/2007
369604-10-3	General Electric			1,550.000	43,447	28.030	43,447	37,528	341			5,919		5,919		A	02/1/2010
426281-10-1	Henry Jack & Assoc Inc			440.000	26,052	59.210	26,052	16,932		342		8,747		8,747		A	08/1/2010
452308-10-9	Illinois Tool			480.000	40,358	84.080	40,358	23,688	202		944	8,480		8,480		A	07/1/2012
458140-10-0	Intel Corp			2,100.000	54,505	25.955	54,506	37,561		2,059		12,596		12,596		A	15/1/2003
478160-10-4	Johnson & Johnson			600.000	54,954	91.590	54,954	41,846		1,826		13,100		13,100		A	27/1/2007
501044-10-1	Kroger			1,150.000	45,460	39.530	45,460	41,347		272		4,113		4,113		A	23/1/2005
518439-10-4	Estee Lauder			470.000	35,400	75.320	35,400	26,424		339		6,378		6,378		A	01/1/2006
580135-10-1	McDonalds			190.000	18,436	97.030	18,436	10,345		885		(3,327)		(3,327)		A	27/1/2009
58933Y-10-5	Merck & Co. Inc.			550.000	27,528	50.050	27,528	26,904	242		396	624		624		A	05/1/2006
594918-10-4	Microsoft			1,000.000	37,410	37.410	37,410	18,200		1,191		9,504		9,504		A	21/1/2007
682680-10-3	Oneok			930.000	57,827	62.180	57,827	27,734		1,480		17,363		17,363		A	24/1/2007
718172-10-9	Phillip Morris Intl Inc			500.000	43,565	87.130	43,565	37,506	470		1,745	1,745		1,745		A	08/1/2009
74005P-10-4	Praxair			460.000	59,814	130.030	59,814	20,738		1,164		8,972		8,972		A	21/1/2007
74144T-10-8	T Rowe			390.000	32,670	83.770	32,670	22,747		467		5,927		5,927		A	30/1/2006
742718-10-9	Procter & Gamble			240.000	19,538	81.410	19,538	11,365		615		2,834		2,834		A	21/1/2007
747525-10-3	Qualcomm			790.000	58,658	74.250	58,658	32,903		1,094		9,029		9,029		A	19/1/2003
776696-10-6	Roper Industries Inc.			160.000	22,189	138.680	22,189	15,343		87		4,118		4,118		A	10/1/2004
806857-10-8	Schlumberger Ltd			420.000	37,846	90.110	37,846	20,702	141		546	8,525		8,525		A	24/1/2010
832696-40-5	Smucker (J.M.) Co The-New Com WI			360.000	37,303	103.620	37,303	27,789		813		5,920		5,920		A	20/1/2005
863667-10-1	Stryker Corp			580.000	43,581	75.140	43,581	34,059	186		668	12,395		12,395		A	20/1/2005
872540-10-9	TJX Companies Inc			540.000	34,414	63.730	34,414	8,297		319		582		582		A	08/1/2009
887317-30-3	Time Warner Inc			590.000	41,135	69.720	41,135	39,779		89		1,356		1,356		A	02/1/2010
899896-10-4	Tupperware Corp Tupperware Brands Corp			330.000	31,195	94.530	31,195	26,717	205		502	4,478		4,478		A	14/1/2008
902973-30-4	U S Bancorp			1,270.000	51,308	40.400	51,308	44,758		292		9,521		9,521		A	08/1/2010
907818-10-8	Union Pacific Corp			250.000	42,000	168.000	42,000	32,087	213		608	9,787		9,787		A	14/1/2012
913017-10-9	United Technologies			280.000	31,864	113.800	31,864	11,033		672		8,864		8,864		A	01/1/2001
918204-10-8	VF Corp			690.000	43,015	62.340	43,015	26,982		659		17,053		17,053		A	19/1/2009
(continues)																	

(continues)

(a) For all common stocks bearing the NAIC market indicator "U" provide: the number of such issues , the total \$ value (included in Column 8) of all such issues \$

SCHEDULE D - PART 2 - SECTION 2

Showing all COMMON STOCKS Owned December 31 of Current Year

1	2	Codes		5	6	Fair Value		9	Dividends			Changes in Book/Adjusted Carrying Value				17	18
		3	4			7	8		10	11	12	13	14	15	16		
CUSIP Identification	Description	Code	Foreign	Number of Shares	Book/Adjusted Carrying Value	Rate Per Share Used to Obtain Fair Value	Fair Value	Actual Cost	Declared but Unpaid	Amount Received During Year	Nonadmitted Declared But Unpaid	Unrealized Valuation Increase/ (Decrease)	Current Year's Other-Than- Temporary Impairment Recognized	Total Change in B./A.C.V. (13 - 14)	Total Foreign Exchange Change in B./A.C.V.	NAIC Market Indicator (a)	Date Acquired
Industrial and Miscellaneous (Unaffiliated) (continued)																	
969457-10-0	Williams			1,120,000	43,198	38.570	43,198	35,159		1,458		6,358		6,358		A	18/12007
29250N-10-5	Enbridge	R		910,000	39,749	43.680	39,749	25,864		986		(811)		(811)		A	14/12012
66987V-10-9	Novartis	R		470,000	37,779	80.380	37,779	24,590		1,031		7,793		7,793		A	10/12010
G1151C-10-1	Accenture	R		560,000	46,043	82.220	46,043	24,017		1,044		8,145		8,145		A	05/12004
9099999	Industrial and Miscellaneous (Unaffiliated)				2,034,705		2,034,705	1,368,990	3,025	38,920		371,172		371,172			
Mutual Funds																	
464287-17-6	ISHARES BARCLAYS US TREASURY			1,250,000	137,375	109.900	137,375	128,171		1,588		(14,387)		(14,387)		A	01/12001
9299999	Mutual Funds				137,375		137,375	128,171		1,588		(14,387)		(14,387)			
9799999	Total Common Stocks				2,172,080		2,172,080	1,497,161	3,025	40,508		356,785		356,785			
9899999	Total Preferred and Common Stocks				2,346,170		2,346,170	1,682,938	3,775	47,855		340,638		340,638			

## ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

## SCHEDULE D - PART 3

Showing all Long-Term Bonds and Stocks ACQUIRED During Current Year

1	2	3	4	5	6	7	8	9
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends
Bonds - Industrial and Miscellaneous (Unaffiliated)								
882508-AU-8	Texas Instruments Inc 1.65%		03/05/2013	National Financial Services Corp		50,300	50,000.00	218
009363-AP-7	Airgas Inc 2.375%		05/09/2013	Griffin, Kubik, Stephens and Thompson		50,635	50,000.00	297
316773-CM-0	Fifth Third Bancorp		05/13/2013	Morgan Stanley DW Inc		50,000	50,000.00	
071813-BJ-7	Baxter International Inc 1.85%		06/05/2013	National Financial Services Corp		50,240	50,000.00	
842587-CG-0	Southern Co. 2.375%		08/21/2013	National Financial Services Corp		51,640	50,000.00	531
421915-EH-8	Health Care PPTY		12/15/2013	PPTY Invest Inc		26,209	25,000.00	
3899999	Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					279,024	275,000.00	1,046
8399997	Subtotal - Bonds - Part 3					279,024	275,000.00	1,046
8399999	Subtotal - Bonds					279,024	275,000.00	1,046
Preferred Stocks - Industrial and Miscellaneous (Unaffiliated)								
693475-85-7	PNC		05/07/2013	Morgan Stanley and Co	1,000.000	28,625		
902973-81-7	US Bancorp		05/07/2013	Morgan Stanley and Co	1,000.000	28,162		
949746-55-6	Wells Fargo		10/17/2013	Bernstein, Sanford	2,000.000	49,360		
8499999	Subtotal - Preferred Stocks - Industrial and Miscellaneous (Unaffiliated)					106,147		
8999997	Subtotal - Preferred Stocks - Part 3					106,147		
8999999	Subtotal - Preferred Stocks					106,147		
Common Stocks - Industrial and Miscellaneous (Unaffiliated)								
907818-10-8	Union Pacific Corp		01/22/2013	CAP Institutional Services Inc	130.000	17,361		
899896-10-4	Tupperware Corp		02/25/2013	CAP Institutional Services Inc	240.000	18,844		
002824-10-0	Abbott Laboratories		04/16/2013	Instinet	320.000	11,580		
17275R-10-2	Cisco Systems		04/16/2013	Instinet	780.000	16,399		
518439-10-4	Estee Lauder		04/16/2013	Instinet	130.000	8,831		
229899-10-9	Cullen/Frost Bankers		05/23/2013	Instinet	190.000	12,077		
501044-10-1	The Kroger Co		05/23/2013	Instinet	550.000	18,850		
58933Y-10-5	Merck & Co Inc		06/05/2013	Credit Suisse/First Boston	370.000	18,275		
054937-10-7	BB&T		07/10/2013	ISI Group	295.000	10,274		
902973-30-4	US Bancorp		07/10/2013	ISI Group	240.000	8,889		
58933Y-10-5	Merck & Co Inc		07/10/2013	Instinet	180.000	8,629		
969457-10-0	Williams Cos.		07/10/2013	Instinet	220.000	7,374		
36191G-10-7	GNC Holdings		07/17/2013	CAP Institutional Services Inc	400.000	19,090		
49456B-10-1	Kinder Morgan		08/14/2013	Credit Suisse/First Boston	220.000	8,230		
899896-10-4	Tupperware Corp		08/14/2013	Credit Suisse/First Boston	90.000	7,874		
501044-10-1	Kroger Co.		09/06/2013	Credit Suisse/First Boston	600.000	22,498		
887317-30-3	Time Warner Cable		10/02/2013	Barclays Capital	60.000	11,134		
369604-10-3	General Electric		10/02/2013	Goldman Sachs and Co	1,550.000	37,528		
037833-10-0	Apple, Inc		11/01/2013	Morgan Stanley and Co.	40.000	20,935		
74144T-10-8	Price T Rowe		11/01/2013	Morgan Stanley and Co.	110.000	8,510		
231021-10-6	Cummin Inc		12/04/2013	CAP Institutional Services Inc	290.000	37,475		
002824-10-0	Abbott Laboratories		12/04/2013	CAP Institutional Services Inc	200.000	7,537		
887317-30-3	Time Warner Cable		12/23/2013	CAP Institutional Services Inc	280.000	19,294		
9099999	Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated)					357,488		
9799997	Subtotal - Common Stocks - Part 3					357,488		
9799999	Subtotal - Common Stocks					357,488		



SCHEDULE D - PART 3

Showing all Long-Term Bonds and Stocks ACQUIRED During Current Year

1	2	3	4	5	6	7	8	9
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends
98999999 - Subtotal - Preferred and Common Stocks						463,635		
99999999 - TOTALS						742,659		1,046

## ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

## SCHEDULE D - PART 4

Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Year

1  CUSIP Identifi- cation	2  Description	3 F o r e i g n	4  Disposal Date	5  Name of Purchaser	6  Number of Shares of Stock	7  Consideration	8  Par Value	9  Actual Cost	10  Prior Year Book/ Adjusted Carrying Value	Change In Book/Adjusted Carrying Value					16  Book/Adjusted Carrying Value at Disposal Date	17  Foreign Exchange Gain (Loss) on Disposal	18  Realized Gain (Loss) on Disposal	19  Total Gain (Loss) on Disposal	20  Bond Interest/ Stock Dividends Received During Year	21  Stated Contractual Maturity Date
										11  Unrealized Valuation Increase/ (Decrease)	12  Current Year (Amorti- zation) / Accretion	13  Current Year's Other-Than- Temporary Impairment Recognized	14  Total Change in B./A.C.V. (11+12-13)	15  Total Foreign Exchange Change in B./A.C.V.						
Bonds - Industrial and Miscellaneous (Unaffiliated)																				
713448-BG-2	Pepsico Inc 4.65%		15/1/1302	Matured		50,000	50,000.00	51,372	50,027		27		27		50,000				1,163	
377372-AC-1	Glaxosmithkline		15/1/1305	Matured		50,000	50,000.00	50,314	50,024		24		24		50,000				1,213	
72447W-AA-7	Pitney Bowes		07/1/1305	Davidson (DA) and Co Inc.		53,820	50,000.00	50,620	50,461		32		32		50,429		3,391	3,391	1,155	
084664-AD-3	Berkshire Hathaway		15/1/1310	Matured		50,000	50,000.00	51,703	50,279		279		279		50,000				2,313	
421915-EH-8	Health Care PPTYS Invest Inc.		15/1/1312	Matured		25,000	25,000.00	26,209	25,289		289		289		25,000				1,413	
3899999 - Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						228,820	225,000.00	230,218	226,080		651		651		225,429		3,391	3,391	7,257	
8399997 - Subtotal - Bonds - Part 4						228,820	225,000.00	230,218	226,080		651		651		225,429		3,391	3,391	7,257	
8399999 - Subtotal - Bonds						228,820	225,000.00	230,218	226,080		651		651		225,429		3,391	3,391	7,257	
Preferred Stocks - Industrial and Miscellaneous (Unaffiliated)																				
949746-72-1	Wells Fargo & Co.		17/1/1310	Bernstein, Sanford C., and Co.	1,000.000	20,306		25,000	24,900	100			100		24,900		(4,694)	(4,694)	731	
8499999 - Subtotal - Preferred Stocks - Industrial and Miscellaneous (Unaffiliated)						20,306		25,000	24,900	100			100		24,900		(4,694)	(4,694)	731	
8999997 - Subtotal - Preferred Stocks - Part 4						20,306		25,000	24,900	100			100		24,900		(4,694)	(4,694)	731	
8999999 - Subtotal - Preferred Stocks						20,306		25,000	24,900	100			100		24,900		(4,694)	(4,694)	731	
Common Stocks - Industrial and Miscellaneous (Unaffiliated)																				
171340-10-2	Church & Dwight Co Inc.		22/1/1301	CAP Institutional Services Inc	300.000	16,935		11,482	16,071	(4,589)			(4,589)		16,071		5,453	5,453		
580135-10-1	McDonalds Corp		25/1/1302	CAP Institutional Services Inc	185.000	17,718		17,145	16,319	826			826		16,319		573	573		
00287Y-10-9	Abbvie Inc		06/1/1304	CAP Institutional Services Inc	430.000	17,899		10,929	5,823	5,106			5,106		5,823		6,970	6,970	704	
594918-10-4	Microsoft Corp		16/1/1304	CAP Institutional Services Inc	750.000	21,630		19,194	20,032	(838)			(838)		20,032		2,436	2,436		
032654-10-5	Analog Devices		01/1/1305	Bernstein, Sanford C., and Co.	60.000	2,636		2,381	2,524	(143)			(143)		2,524		254	254		
037833-10-0	Apple Inc		01/1/1305	Bernstein, Sanford C., and Co.	10.000	4,376		5,413	5,322	91			91		5,322		(1,036)	(1,036)		
054937-10-7	BB&T Corp		07/1/1305	Morgan Stanley and Co.	40.000	1,251		1,290	1,164	126			126		1,164		(39)	(39)		
171340-10-2	Church & Dwight		07/1/1305	Morgan Stanley and Co.	30.000	1,896		1,148	1,607	(459)			(459)		1,607		748	748		
229899-10-9	Cullen/Frost Bankers		07/1/1305	Morgan Stanley and Co.	25.000	1,536		1,482	1,357	125			125		1,357		54	54		
260003-10-8	Dover		07/1/1305	Morgan Stanley and Co.	40.000	2,888		2,542	2,628	(86)			(86)		2,628		345	345		
26138E-10-9	Dr. Pepper		01/1/1305	Bernstein, Sanford C., and Co.	50.000	2,420		1,895	2,209	(314)			(314)		2,209		525	525		
26138E-10-9	Dr. Pepper		23/1/1305	CAP Institutional Services Inc	300.000	14,337		11,299	13,254	(1,955)			(1,955)		13,254		3,038	3,038		
278865-10-0	Ecolab		07/1/1305	Morgan Stanley and Co.	30.000	2,582		1,482	2,157	(675)			(675)		2,157		1,100	1,100		
458140-10-0	Intel Corp		01/1/1305	Bernstein, Sanford C., and Co.	150.000	3,580		3,877	3,093	784			784		3,093		(296)	(296)		
459200-10-1	IBM		01/1/1305	Bernstein, Sanford C., and Co.	10.000	2,011		1,276	1,916	(640)			(640)		1,916		735	735	641	
478160-10-4	Johnson & Johnson		01/1/1305	Bernstein, Sanford C., and Co.	30.000	2,545		2,130	2,103	27			27		2,103		415	415		
478160-10-4	Johnson & Johnson		23/1/1305	CAP Institutional Services Inc	200.000	17,459		14,199	14,020	179			179		14,020		3,260	3,260		
49456B-10-1	Kinder Morgan Inc.		07/1/1305	Morgan Stanley and Co.	40.000	1,557		1,213	1,413	(200)			(200)		1,413		344	344		
580135-10-1	McDonalds		07/1/1305	Morgan Stanley and Co.	20.000	2,036		1,483	1,764	(281)			(281)		1,764		553	553		
74005P-10-4	Praxair		07/1/1305	Morgan Stanley and Co.	20.000	2,274		1,941	2,189	(248)			(248)		2,189		332	332		
747525-10-3	Qualcomm	R	07/1/1305	Morgan Stanley and Co.	50.000	3,191		2,726	3,093	(367)			(367)		3,093		465	465		
832696-40-5	Smucker (J.M.)	R	01/1/1305	Bernstein, Sanford C., and Co.	20.000	2,054		1,557	1,725	(168)			(168)		1,725		497	497		
832696-40-5	Smucker (J.M.)		07/1/1305	Morgan Stanley and Co.	20.000	2,065		1,557	1,725	(168)			(168)		1,725		508	508		
863667-10-1	Stryker Corp		07/1/1305	Morgan Stanley and Co.	40.000	2,652		2,541	2,193	348			348		2,193		110	110		
913017-10-9	United Technologies	R	07/1/1305	Morgan Stanley and Co.	25.000	2,336		2,030	2,050	(20)			(20)		2,050		307	307		
064149-10-7	Bank of Nova Scotia		01/1/1305	Bernstein, Sanford C., and Co.	50.000	2,871		2,010	2,894	(884)			(884)		2,894		861	861		
29250N-10-5	Enbridge		01/1/1305	Bernstein, Sanford C., and Co.	50.000	2,365		1,545	2,166	(621)			(621)		2,166		820	820		
00287Y-10-9	Abbvie Inc		05/1/1306	CAP Institutional Services Inc	450.000	19,438		9,404	6,504	2,900			2,900		6,504		10,034	10,034		
(continues)																				

ANNUAL STATEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

SCHEDULE D - PART 4

Showing all Long-Term Bonds and Stocks SOLD , REDEEMED or Otherwise DISPOSED OF During Current Year

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21
										11	12	13	14	15						
CUSIP Identifi- cation	Description	For 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 (Amorti- zation) / 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
Common Stocks - Industrial and Miscellaneous (Unaffiliated) (continued)																				
580135-10-1	McDonalds Corp		17//1307	CAP Institutional Services Inc	180.000	17,975		10,327	15,878	(5,551)			(5,551)		15,878		7,648	7,648		
064149-10-7	Bank of Nova Scotia		10//1307	CAP Institutional Services Inc	500.000	26,456		20,101	28,940	(8,839)			(8,839)		28,940		6,354	6,354	788	
253868-10-3	Digital Realty		14//1308	CAP Institutional Services Inc	360.000	19,476		21,605	24,440	(2,835)			(2,835)		24,440		(2,128)	(2,128)	824	
26138E-10-9	Dr. Pepper		06//1309	Credit Suisse	550.000	24,361		20,442	24,299	(3,857)			(3,857)		24,299		3,920	3,920	857	
254687-10-6	Walt Disney		02//1310	Bernstein, Sanford C., and Co.	150.000	9,667		7,862	7,469	393			393		7,469		1,805	1,805		
26875P-10-1	EOG Resources		02//1310	Bernstein, Sanford C., and Co.	60.000	10,187		5,913	7,247	(1,334)			(1,334)		7,247		4,274	4,274		
459200-10-1	IBM		02//1310	Bernstein, Sanford C., and Co.	60.000	11,134		7,658	11,493	(3,835)			(3,835)		11,493		3,476	3,476		
49456B-10-1	Kinder Morgan Inc.		02//1310	ISI Group	830.000	29,472		26,730	29,781	(3,051)			(3,051)		29,781		2,742	2,742	732	
459200-10-1	IBM		01//1311	Wells Fargo Securities	170.000	30,527		17,383	32,564	(15,181)			(15,181)		32,564		13,144	13,144		
872540-10-9	TJX Company		18//1311	Wells Fargo Securities	40.000	2,490		615	1,698	(1,083)			(1,083)		1,698		1,875	1,875		
747525-10-3	Qualcomm		18//1311	Wells Fargo Securities	30.000	2,154		1,636	1,856	(220)			(220)		1,856		518	518		
907818-10-8	Union Pacific		18//1311	Wells Fargo Securities	10.000	1,591		1,335	1,294	41			41		1,294		256	256		
458140-10-0	Intel Corp		18//1311	Wells Fargo Securities	100.000	2,455		2,062	493	2,062			493		2,062		(100)	(100)		
452308-10-9	Illinois Tool Works		18//1311	Wells Fargo Securities	50.000	3,971		2,759	3,041	(282)			(282)		3,041		1,212	1,212		
682680-10-3	Oneok Inc		18//1311	Wells Fargo Securities	50.000	2,881		1,633	2,138	(505)			(505)		2,138		1,248	1,248		
426281-10-1	Henry Jack and Assoc.		18//1311	Wells Fargo Securities	40.000	2,263		1,539	(31)	(31)			(31)		1,570		726	726		
87612E-10-6	Target Corp		18//1311	Wells Fargo Securities	30.000	1,990		1,896	1,775	121			121		1,775		94	94	553	
29250N-10-5	Enbridge		18//1311	Wells Fargo Securities	40.000	1,716		1,215	1,733	(518)			(518)		1,733		501	501		
291011-10-4	Emerson Electric		18//1311	Wells Fargo Securities	35.000	2,363		1,987	1,854	133			133		1,854		376	376		
075887-10-9	Becton Dickinson		18//1311	Wells Fargo Securities	30.000	3,240		2,346	118	118			118		2,346		776	776		
032654-10-5	Analog Devices		18//1311	Wells Fargo Securities	30.000	1,502		1,191	1,262	(71)			(71)		1,262		311	311		
166764-10-0	Chevron Corporation		18//1311	Wells Fargo Securities	20.000	2,405		937	2,163	(1,226)			(1,226)		2,163		1,468	1,468		
171340-10-2	Church and Dwight Co		18//1311	Wells Fargo Securities	30.000	1,966		1,148	1,607	(459)			(459)		1,607		818	818		
G1151C-10-1	Accenture		18//1311	Wells Fargo Securities	40.000	3,136		2,002	2,660	(658)			(658)		2,660		1,134	1,134		
260003-10-8	Dover Corp		04//1312	CAP Institutional Services Inc	250.000	22,217		14,753	16,428	(1,675)			(1,675)		16,428		7,464	7,464		
452308-10-9	Illinois Tool Works		04//1312	CAP Institutional Services Inc	270.000	21,053		14,011	16,419	(2,408)			(2,408)		16,419		7,042	7,042		
87612E-10-6	Target Corp		23//1312	Wells Fargo Securities	320.000	19,827		20,228	18,934	1,294			1,294		18,934		(401)	(401)		
747525-10-3	Qualcomm		30//1312	Credit Suisse	20.000	1,471		1,064	1,237	(173)			(173)		1,237		407	407		
66987V-10-9	Novartis		30//1312	Credit Suisse	30.000	2,399		1,664	1,899	(235)			(235)		1,899		735	735		
742718-10-9	Procter & Gamble		30//1312	Credit Suisse	20.000	1,633		947	1,358	(411)			(411)		1,358		686	686		
682680-10-3	Oneok Inc		30//1312	Credit Suisse	20.000	1,221		653	855	(202)			(202)		855		568	568		
74005P-10-4	Praxair		30//1312	Credit Suisse	20.000	2,598		1,941	2,189	(248)			(248)		2,189		657	657		
458140-10-0	Intel Corp		30//1312	Credit Suisse	50.000	1,286		1,146	1,031	115			115		1,031		140	140		
278865-10-0	Ecolab		30//1312	Credit Suisse	20.000	2,083		988	1,438	(450)			(450)		1,438		1,095	1,095		
291011-10-4	Emerson Electric		30//1312	Credit Suisse	20.000	1,402		1,094	1,059	35			35		1,059		308	308		
17275R-10-2	Cisco Systems		30//1312	Credit Suisse	80.000	1,774		1,682	1,607	75			75		1,607		92	92		
518439-10-4	Estee Lauder		30//1312	Credit Suisse	20.000	1,500		1,359	1,240	119			119		1,240		141	141		
594918-10-4	Microsoft Corp		30//1312	Credit Suisse	50.000	1,861		978	1,335	(357)			(357)		1,335		883	883		
776696-10-6	Roper Industries		30//1312	Credit Suisse	15.000	2,076		1,438	1,672	(234)			(234)		1,672		638	638		
913017-10-9	United Technologies		30//1312	Credit Suisse	20.000	2,250		1,624	1,640	(16)			(16)		1,640		626	626		
907818-10-8	Union Pacific		30//1312	Credit Suisse	20.000	3,314		2,571	2,587	84			84		2,587		643	643		
863667-10-1	Stryker Corp		30//1312	Credit Suisse	30.000	2,248		1,906	1,645	261			261		1,645		342	342		
806857-10-8	Schleibinger		30//1312	Credit Suisse	30.000	2,681		1,863	2,079	(216)			(216)		2,079		818	818		
918204-10-8	VF Corp		30//1312	Credit Suisse	30.000	1,860		1,213	1,132	81			81		1,132		647	647		
9099999	Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated)					488,672		373,327	428,269	(54,942)			(54,942)		428,269		115,345	115,345	5,099	
9799997	Subtotal - Common Stocks - Part 4					488,672		373,327	428,269	(54,942)			(54,942)		428,269		115,345	115,345	5,099	

SCHEDULE D - PART 4

Showing all Long-Term Bonds and Stocks SOLD , REDEEMED or Otherwise DISPOSED OF During Current Year

1  CUSIP Identifi- cation	2  Description	3 F o r e i g n	4  Disposal Date	5  Name of Purchaser	6  Number of Shares of Stock	7  Consideration	8  Par Value	9  Actual Cost	10  Prior Year Book/ Adjusted Carrying Value	Change In Book/Adjusted Carrying Value					16  Book/Adjusted Carrying Value at Disposal Date	17  Foreign Exchange Gain (Loss) on Disposal	18  Realized Gain (Loss) on Disposal	19  Total Gain (Loss) on Disposal	20  Bond Interest/ Stock Dividends Received During Year	21  Stated Contractual Maturity Date
										11  Unrealized Valuation Increase/ (Decrease)	12  Current Year (Amorti- zation) / Accretion	13  Current Year's Other-Than- Temporary Impairment Recognized	14  Total Change in B./A.C.V. (11+12-13)	15  Total Foreign Exchange Change in B./A.C.V.						
9799999 - Subtotal - Common Stocks .....						488,672		373,327	428,269	(54,942)			(54,942)		428,269		115,345	115,345	5,099	
9899999 - Subtotal - Preferred and Common Stocks .....						508,978		398,327	453,169	(54,842)			(54,842)		453,169		110,651	110,651	5,830	
9999999 - TOTALS .....						737,798		628,545	679,249	(54,842)	651		(54,191)		678,598		114,042	114,042	13,087	

SCHEDULE DA - PART 1

Showing all SHORT-TERM INVESTMENTS Owned December 31 of Current Year

1	2	Codes		5	6	7	8	Change In Book/Adjusted Carrying Value				13	14	Interest						21
		3	4					9	10	11	12			15	16	17	18	19	20	
CUSIP Identification	Description	Code	Foreign	Date Acquired	Name of Vendor	Maturity Date	Book/Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization) / Accretion	Current Year's Other-Than- Temporary Impairment Recognized	Total Foreign Exchange Change in B./A.C.V.	Par Value	Actual Cost	Amount Due and Accrued Dec. 31 of Current Year on Bond Not in Default	Non-Admitted Due and Accrued	Rate of	Effective Rate of	When Paid	Amount Received During Year	Paid for Accrued Interest
Other Short-Term Invested Assets																				
	Huntington Conservative Deposit Account			12/31/2013	Huntington Bank	12/31/2014	2,309													119
9099999	- Subtotal - Other Short-Term Invested Assets						2,309													119
9199999	- TOTAL Short-Term Investments						2,309													119

SCHEDULE E - PART 1 - CASH

1		2	3	4	5	6	7
Depository							
Name	Location and Supplemental Information	Code	Rate of Interest	Amount of Interest Received During Year	Amount of Interest Accrued December 31 of Current Year	Balance	*
Open Depositories							
Huntington Bank	Cash in Bank					26,793	
0199999 - TOTAL - Open Depositories						26,793	
0399999 - TOTAL Cash on Deposit						26,793	
0599999 - TOTAL Cash						26,793	

TOTALS OF DEPOSITORY BALANCES ON THE LAST DAY OF EACH MONTH DURING THE CURRENT YEAR

1. January	115,218	4. April	463,192	7. July	375,199	10. October	125,902
2. February	202,096	5. May	477,887	8. August	300,068	11. November	144,262
3. March	393,800	6. June	410,226	9. September	317,726	12. December	26,793



SUPPLEMENT FOR THE YEAR 2013 OF THE OHIO GRAPHIC ARTS HEALTH FUND

SUPPLEMENTAL COMPENSATION EXHIBIT

For the Year Ended December 31, 2013

(To Be Filed by March 1)

PART 1 - INTERROGATORIES

1. The reporting insurer is a member of a group of insurers or other holding company system: Yes ( ) No (X)  
If yes, do the below amounts represent  
1) total gross compensation paid to each individual by or on behalf of all companies that are part of the group: Yes [ ] ; or  
2) allocation to each insurer: Yes [ ] .

2. Did any person while an officer, director, or trustee of the reporting entity receive directly or indirectly, during the period covered by this statement any commission on the business transactions of the reporting entity?  

Yes ( ) No (X)

3. Except for retirement plans generally applicable to its staff employees, has the reporting entity any agreement with any person, other than contracts with its agents for the payment of commissions whereby it agrees that for any service rendered or to be rendered, that he/she shall receive directly or indirectly, any salary, compensation or emolument that will extend beyond a period of 12 months from the date of the agreement?  

Yes ( ) No (X)

PART 2 - OFFICERS AND EMPLOYEES COMPENSATION

1		2	Annual Compensation			
Principal Position	Name	Year	3 Salary	4 Bonus	5 All Other Compensation	6 Totals
Chief Executive Officer		2013				
Chief Executive Officer -		2012				
Chief Executive Officer -		2011				
1.	Larry Halenkamp	2013				
	Larry Halenkamp	2012				
President	Larry Halenkamp	2011				
2.	James Maly	2013				
	James Maly	2012				
Secretary	James Maly	2011				
3.	Robert Keeler	2013				
	Robert Keeler	2012				
Trustee	Robert Keeler	2011				
4.	John Hassan	2013				
	John Hassan	2012				
Trustee	John Hassan	2011				
5.	Robert Phillips	2013				
	Robert Phillips	2012				
Trustee	Robert Phillips	2011				
6.	Jim Cunningham	2013				
	Jim Cunningham	2012				
Trustee	Jim Cunningham	2011				
7.	Ken Rellar	2013				
	Ken Rellar	2012				
Trustee	Ken Rellar	2011				
8.	Robert Van Leer	2013				
	Robert Van Leer	2012				
Trustee	Robert Van Leer	2011				
9.	Pam Lasita	2013				
		2012				
Trustee		2011				