

QUARTERLY STATEMENT

OF THE

RECEIVED

AUG 16 2018

OFFICE OF RISK
ASSESSMENT

Cooperative Group Benefits Plan

in the state of

Ohio

to the Insurance Department
of the State of Ohio

For the Period Ended
June 30, 2018

2018

Statement as of June 30, 2018 of the **Cooperative Group Benefits Plan**
ASSETS

	Current Statement Date			4 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds.....	950,000		950,000	950,000
2. Stocks:				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....	1,083,911		1,083,911	1,075,894
3. Mortgage loans on real estate:				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate:				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....			0	
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$.....10,629,976), cash equivalents (\$.....0) and short-term investments (\$.....0).....	10,629,976		10,629,976	11,785,071
6. Contract loans (including \$.....0 premium notes).....			0	
7. Derivatives.....			0	
8. Other invested assets.....			0	
9. Receivables for securities.....			0	
10. Securities lending reinvested collateral assets.....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	12,663,887	0	12,663,887	13,810,965
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	30,468		30,468	37,452
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....			0	
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....			0	
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....	311,960		311,960	
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	
18.2 Net deferred tax asset.....			0	
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....			0	
21. Furniture and equipment, including health care delivery assets (\$.....0).....			0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....			0	
24. Health care (\$.....0) and other amounts receivable.....	434,193		434,193	339,403
25. Aggregate write-ins for other than invested assets.....	0	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	13,440,508	0	13,440,508	14,187,820
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	13,440,508	0	13,440,508	14,187,820

DETAILS OF WRITE-INS

1101.....			0	
1102.....			0	
1103.....			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501.....			0	
2502.....			0	
2503.....			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0	0	0

Cooperative Group Benefits Plan
LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$.....0 reinsurance ceded).....	2,461,000		2,461,000	3,240,000
2. Accrued medical incentive pool and bonus amounts.....			0	
3. Unpaid claims adjustment expenses.....	200,000		200,000	263,000
4. Aggregate health policy reserves, including the liability of \$.....0 for medical loss ratio rebate per the Public Health Service Act.....			0	
5. Aggregate life policy reserves.....			0	
6. Property/casualty unearned premium reserve.....			0	
7. Aggregate health claim reserves.....			0	
8. Premiums received in advance.....			0	
9. General expenses due or accrued.....			0	
10.1 Current federal and foreign income tax payable and interest thereon (including \$.....0 on realized gains (losses)).....			0	
10.2 Net deferred tax liability.....			0	
11. Ceded reinsurance premiums payable.....			0	
12. Amounts withheld or retained for the account of others.....			0	
13. Remittances and items not allocated.....			0	
14. Borrowed money (including \$.....0 current) and interest thereon \$.....0 (including \$.....0 current).....			0	
15. Amounts due to parent, subsidiaries and affiliates.....			0	
16. Derivatives.....			0	
17. Payable for securities.....			0	
18. Payable for securities lending.....			0	
19. Funds held under reinsurance treaties with (\$.....0 authorized reinsurers, \$.....0 unauthorized reinsurers and certified \$.....0 reinsurers).....			0	
20. Reinsurance in unauthorized and certified (\$.....0) companies.....			0	
21. Net adjustments in assets and liabilities due to foreign exchange rates.....			0	
22. Liability for amounts held under uninsured plans.....			0	
23. Aggregate write-ins for other liabilities (including \$.....0 current).....	49,274	0	49,274	44,129
24. Total liabilities (Lines 1 to 23).....	2,710,274	0	2,710,274	3,547,129
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	0	0
26. Common capital stock.....	XXX	XXX		
27. Preferred capital stock.....	XXX	XXX		
28. Gross paid in and contributed surplus.....	XXX	XXX		
29. Surplus notes.....	XXX	XXX		
30. Aggregate write-ins for other than special surplus funds.....	XXX	XXX	0	0
31. Unassigned funds (surplus).....	XXX	XXX	10,730,234	10,640,691
32. Less treasury stock, at cost:				
32.1 ....0.000 shares common (value included in Line 26 \$.....0).....	XXX	XXX		
32.2 ....0.000 shares preferred (value included in Line 27 \$.....0).....	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32).....	XXX	XXX	10,730,234	10,640,691
34. Total liabilities, capital and surplus (Lines 24 and 33).....	XXX	XXX	13,440,508	14,187,820

DETAILS OF WRITE-INS

2301. Accounts Payable.....	49,274		49,274	44,129
2302.			0	
2303.			0	
2398. Summary of remaining write-ins for Line 23 from overflow page.....	0	0	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398) (Line 23 above).....	49,274	0	49,274	44,129
2501.				
2502.				
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page.....	XXX	XXX	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	XXX	XXX	0	0
3001.				
3002.				
3003.				
3098. Summary of remaining write-ins for Line 30 from overflow page.....	XXX	XXX	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098) (Line 30 above).....	XXX	XXX	0	0

Statement as of June 30, 2018 of the **Cooperative Group Benefits Plan**
STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member months.....	XXX.....	12,587	11,117	22,410
2. Net premium income (including \$.....0 non-health premium income).....	XXX.....	14,051,023	12,137,818	24,032,586
3. Change in unearned premium reserves and reserve for rate credits.....	XXX.....			
4. Fee-for-service (net of \$.....0 medical expenses).....	XXX.....			
5. Risk revenue.....	XXX.....			
6. Aggregate write-ins for other health care related revenues.....	XXX.....	0	0	0
7. Aggregate write-ins for other non-health revenues.....	XXX.....	0	0	0
8. Total revenues (Lines 2 to 7).....	XXX.....	14,051,023	12,137,818	24,032,586
Hospital and Medical:				
9. Hospital/medical benefits.....		11,692,747	9,347,892	19,354,583
10. Other professional services.....				
11. Outside referrals.....				
12. Emergency room and out-of-area.....				
13. Prescription drugs.....		2,641,678	1,980,830	3,918,891
14. Aggregate write-ins for other hospital and medical.....	0	(779,000)	(1,232,000)	179,000
15. Incentive pool, withhold adjustments and bonus amounts.....				
16. Subtotal (Lines 9 to 15).....	0	13,555,425	10,096,722	23,452,474
Less:				
17. Net reinsurance recoveries.....		311,960		
18. Total hospital and medical (Lines 16 minus 17).....	0	13,243,465	10,096,722	23,452,474
19. Non-health claims (net).....				
20. Claims adjustment expenses, including \$.....0 cost containment expenses.....		697,851	750,998	1,395,001
21. General administrative expenses.....		114,397	210,797	207,577
22. Increase in reserves for life and accident and health contracts (including \$.....0 increase in reserves for life only).....				
23. Total underwriting deductions (Lines 18 through 22).....	0	14,055,713	11,058,517	25,055,052
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	XXX.....	(4,690)	1,079,301	(1,022,466)
25. Net investment income earned.....		94,233	61,421	197,055
26. Net realized capital gains (losses) less capital gains tax of \$.....0.....				
27. Net investment gains or (losses) (Lines 25 plus 26).....	0	94,233	61,421	197,055
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....0) (amount charged off \$.....0)].				
29. Aggregate write-ins for other income or expenses.....	0	0	(156,888)	(159,499)
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29).....	XXX.....	89,543	983,834	(984,910)
31. Federal and foreign income taxes incurred.....	XXX.....			
32. Net income (loss) (Lines 30 minus 31).....	XXX.....	89,543	983,834	(984,910)

DETAILS OF WRITE-INS

0601.....	XXX.....			
0602.....	XXX.....			
0603.....	XXX.....			
0698. Summary of remaining write-ins for Line 6 from overflow page.....	XXX.....	0	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above).....	XXX.....	0	0	0
0701.....	XXX.....			
0702.....	XXX.....			
0703.....	XXX.....			
0798. Summary of remaining write-ins for Line 7 from overflow page.....	XXX.....	0	0	0
0799. Totals (Lines 0701 thru 0703 plus 0798) (Line 7 above).....	XXX.....	0	0	0
1401. Increase (decrease) in IBNR.....		(779,000)	(1,232,000)	179,000
1402.....				
1403.....				
1498. Summary of remaining write-ins for Line 14 from overflow page.....	0	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498) (Line 14 above).....	0	(779,000)	(1,232,000)	179,000
2901. ACA Transitional Reinsurance Fees.....			(111,591)	(159,499)
2902. IRS annual fees.....				
2903.....			(45,297)	
2998. Summary of remaining write-ins for Line 29 from overflow page.....	0	0	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	0	0	(156,888)	(159,499)

Cooperative Group Benefits Plan
STATEMENT OF REVENUE AND EXPENSES (Continued)

CAPITAL AND SURPLUS ACCOUNT	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
33. Capital and surplus prior reporting year.....	10,640,691	11,625,601	11,625,601
34. Net income or (loss) from Line 32.....	89,543	983,834	(984,910)
35. Change in valuation basis of aggregate policy and claim reserves.....			
36. Change in net unrealized capital gains (losses) less capital gains tax of \$.....0			
37. Change in net unrealized foreign exchange capital gain or (loss).....			
38. Change in net deferred income tax.....			
39. Change in nonadmitted assets.....			
40. Change in unauthorized 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 Transferred from capital.....			
46. Dividends to stockholders.....			
47. Aggregate write-ins for gains or (losses) in surplus.....	0	0	0
48. Net change in capital and surplus (Lines 34 to 47).....	89,543	983,834	(984,910)
49. Capital and surplus end of reporting period (Line 33 plus 48).....	10,730,234	12,609,435	10,640,691

DETAILS OF WRITE-INS

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

Statement as of June 30, 2018 of the **Cooperative Group Benefits Plan**
CASH FLOW

	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
CASH FROM OPERATIONS			
1. Premiums collected net of reinsurance.....	14,051,023	12,137,818	24,032,586
2. Net investment income.....	117,643	57,023	95,144
3. Miscellaneous income.....			
4. Total (Lines 1 through 3).....	14,168,666	12,194,841	24,127,730
5. Benefit and loss related payments.....	15,299,318	12,485,213	25,260,385
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			
7. Commissions, expenses paid and aggregate write-ins for deductions.....			
8. Dividends paid to policyholders.....			
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....			
10. Total (Lines 5 through 9).....	15,299,318	12,485,213	25,260,385
11. Net cash from operations (Line 4 minus Line 10).....	(1,130,652)	(290,372)	(1,132,655)
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....			
12.2 Stocks.....	868,793		359,214
12.3 Mortgage loans.....			
12.4 Real estate.....			
12.5 Other invested assets.....			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....			
12.7 Miscellaneous proceeds.....			
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	868,793	0	359,214
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....			950,000
13.2 Stocks.....	893,236	988,600	1,366,516
13.3 Mortgage loans.....			
13.4 Real estate.....			
13.5 Other invested assets.....			
13.6 Miscellaneous applications.....			
13.7 Total investments acquired (Lines 13.1 to 13.6).....	893,236	988,600	2,316,516
14. Net increase or (decrease) in contract loans and premium notes.....			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14).....	(24,443)	(988,600)	(1,957,302)
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 (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	0	0	0
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).....	(1,155,095)	(1,278,972)	(3,089,957)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	11,785,071	14,875,028	14,875,028
19.2 End of period (Line 18 plus Line 19.1).....	10,629,976	13,596,056	11,785,071

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

20.0001
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EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

		1 Total	2 Individual	3 Group	4 Medicare Supplement	5 Vision Only	6 Denial Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
Total Members at End of:											
1. Prior Year.....		1,883									
2. First Quarter.....		2,205									
3. Second Quarter.....		2,066									
4. Third Quarter.....		0									
5. Current Year.....		0									
6. Current Year Member Months.....		0									
Total Member Ambulatory Encounters for Period:											
7. Physician.....		0									
8. Non-Physician.....		0									
9. Total.....		0									
10. Hospital Patient Days Incurred.....		0									
11. Number of Inpatient Admissions.....		0									
12. Health Premiums Written (a).....		14,051,023									
13. Life Premiums Direct.....		0									
14. Property/Casualty Premiums Written.....		0									
15. Health Premiums Earned.....		14,051,023									
16. Property/Casualty Premiums Earned.....		0									
17. Amount Paid for Provision of Health Care Services.....		15,299,318									
18. Amount Incurred for Provision of Health Care Services.....		14,334,425									

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

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

Account		Aging Analysis of Unpaid Claims				Total	
1	2	3	4	5	6	7	
1-30 Days	31-60 Days	61-90 Days	91-120 Days	Over 120 Days			

NONE

UNDERWRITING AND INVESTMENT EXHIBIT

Line of Business	Analysis of Claims Unpaid - Prior Year - Net of Reinsurance			Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	Claims Paid Year to Date	On Claims Incurred During the Year	On Claims Unpaid December 31 of Prior Year		
1. Comprehensive (hospital and medical).....	2,808,005	11,526,420	431,995	2,029,005	3,240,000
2. Medicare Supplement.....	.....	.....	.....	.....	0
3. Dental only.....	.....	.....	.....	.....	0
4. Vision only.....	.....	.....	.....	.....	0
5. Federal Employees Health Benefits Plan.....	.....	.....	.....	.....	0
6. Title XVIII - Medicare.....	.....	.....	.....	.....	0
7. Title XIX - Medicaid.....	.....	.....	.....	.....	0
8. Other health.....	.....	.....	.....	.....	0
9. Health subtotal (Lines 1 to 8).....	2,808,005	11,526,420	431,995	2,029,005	3,240,000
10. Healthcare receivables (a).....	.....	.....	.....	.....	0
11. Other non-health.....	.....	.....	.....	.....	0
12. Medical incentive pools and bonus amounts.....	.....	.....	.....	.....	0
13. Totals (Lines 9+10+11+12).....	2,808,005	11,526,420	431,995	2,029,005	3,240,000

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

NOTES TO FINANCIAL STATEMENTS

Note 1 – Summary of Significant Accounting Policies and Going Concern

Basis of Accounting

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

Estimates

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

Valuation of investments

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

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

Note 2 – Accounting Changes and Corrections of Errors

No significant changes

Note 3 – Business Combinations and Goodwill

No significant change

Note 4 – Discontinued Operations

No significant changes

Note 5 – Investments

Investments consist of all cash items, mutual funds and one bond holding.

Checking accounts and money markets as well as short term holdings are classified as cash on page 2, line 5. See QE12 for detail list of all cash accounts.

Investments include mutual fund holdings with fair market value of \$1,083,911 and cost basis of \$1,033,670 at June 30, 2018. Also included in investments are bond holdings with amortized cost basis of \$950,000 and market value of \$932,293 at June 30, 2018. See QE04 for detail list of mutual funds and bonds acquired.

Note 6 – Joint Ventures, Partnerships and Limited Liability Companies

No significant changes

Note 7 – Investment Income

No significant changes

Note 8 – Derivative Instruments

No significant changes

Note 9 – Income Taxes

The trust established under the Plan is qualified pursuant to Section 501(c)(9) of the Internal Revenue Code, and accordingly the Plan's net income is exempt from income taxes. The Plan has obtained a favorable tax determination letter from the Internal Revenue Service and the trustees believe the Plan, as amended, continues to qualify and operate as designed.

The Plan does not believe there are currently any tax positions which have a reasonable possibility of change from taxing authorities. Accrued interest and penalties with uncertain tax positions, if any, are recognized as part of administrative expense. There were no taxes or accrued interest or penalties related to the tax positions of the Plan as of June 30, 2018. The Internal Revenue Service and Department of Labor have jurisdiction over the Plan. The Plan administrator believes it is no longer subject to income tax examinations for years ended prior to December 31, 2015.

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

No significant changes

Note 11 – Debt

No significant changes

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

No significant changes.

NOTES TO FINANCIAL STATEMENTS

Note 13 – Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

No significant changes

Note 14 – Liabilities, Contingencies and Assessments

No significant changes.

Note 15 – Leases

No significant changes

Note 16 – Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk

No significant changes

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

No significant changes.

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

No significant changes

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

No significant changes

Note 20 – Fair Value Measurements

The Plan invested in mutual funds and a bond during the current period. All mutual funds held are reported at fair market value based on prices determined by the open market in which they are traded. The government agency bond is reported at amortized cost but also has a fair market value based on prices determined by the open market in which they are traded. These investments are considered Level 1 investments with respect to the valuation techniques used to report fair market values.

Note 21 – Other Items

No significant changes

Note 22 – Events Subsequent

No significant changes

Note 23 – Reinsurance

A stop loss insurance policy is carried by the Plan with Everest Reinsurance Company for claims incurred during the year and paid by June 30th of the following year on claims in excess of \$375,000 annually less a corridor or reduction of \$125,000 on the first claim(s) in excess of this limit. If a claim exceeds \$375,000 and the corridor amount has been met the carrier reimburses the Plan for the excess. In addition to stop loss coverage for specific claims, the Plan also carries aggregate stop loss coverage. This insurance reimburses the Plan if total claims exceed the specified amount. During the current year, the Plan had claims in excess of the deductible amounts of \$311,960. These amounts have not yet been received, but have been recorded as a receivable.

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination

No significant changes

Note 25 – Change in Incurred Losses and Loss Adjustment Expenses

The amount incurred by unpaid claims reserve as of June 30, 2018 is based on a study by the Plan's actuary and includes estimated claims expenses of \$2,461,000 for IBNR and \$200,000 for LAE. These numbers as determined by the actuary have decreased by \$779,000 and \$63,000 respectively for IBNR and LAE since December 31, 2017.

Note 26 – Intercompany Pooling Arrangements

No significant changes

Note 27 – Structured Settlements

Not applicable for health entities

Note 28 – Health Care Receivables

No significant changes

Note 29 – Participating policies

No significant changes

Note 30 – Premium Deficiency Reserves

No significant changes

Note 31 – Anticipated Salvage and Subrogation

No significant changes

NOTES TO FINANCIAL STATEMENTS

GENERAL INTERROGATORIES**PART 1 - COMMON INTERROGATORIES****GENERAL**

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

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

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]

2.2 If yes, date of change:

3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [] No [X]
If yes, complete Schedule Y, Parts 1 and 1A.

3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes [] No [X]

3.3 If the response to 3.2 is yes, provide a brief description of those changes.

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

3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

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

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

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

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

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2016

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

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

6.4 By what department or departments?
Ohio Department of Insurance

6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? Yes [X] No [] N/A []

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

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

7.2 If yes, give full information:

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

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

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

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

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

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

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

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

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

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

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

GENERAL INTERROGATORIES**PART 1 - COMMON INTERROGATORIES****FINANCIAL**

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

10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 0

INVESTMENT

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

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

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

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

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

14.2 If yes, please complete the following:

14.21	Bonds	\$ 0
14.22	Preferred Stock	\$ 0
14.23	Common Stock	\$ 0
14.24	Short-Term Investments	\$ 0
14.25	Mortgage Loans on Real Estate	\$ 0
14.26	All Other	\$ 0
14.27	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$ 0
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above	\$ 0

1	2
Prior Year End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
\$ 0	\$ 0
0	0
0	0
0	0
0	0
0	0
\$ 0	\$ 0
\$ 0	\$ 0

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

15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No []

If no, attach a description with this statement.

16. For the reporting entity's security lending program, state the amount of the following as of current statement date:

16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:	\$ 0
16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:	\$ 0
16.3 Total payable for securities lending reported on the liability page:	\$ 0

17. 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 []

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

1 Name of Custodian(s)	2 Custodian Address
Meeder Investment Management	

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [] No [x]

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

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

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

1 Name of Firm or Individual	2 Affiliation
Meeder Investment Management Invesco Investment Services, Inc.	U U

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's assets? Yes [X] No []

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's assets? Yes [X] No []

17.6 For those firms or individuals listed in the table for 17.5 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

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

18.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed? Yes [X] No []

18.2 If no, list exceptions:

19. By self-designating 5*GI securities, the reporting entity is certifying the following elements for each self-designated 5*GI security:
a. Documentation necessary to permit a full credit analysis of the security does not exist.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

- b. Issuer or obligor is current on all contracted interest and principal payments.
- c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5*GI securities?

Yes [] No [X]

Statement as of June 30, 2018 of the **Cooperative Group Benefits Plan**
GENERAL INTERROGATORIES (continued)
PART 2 - HEALTH

1. Operating Percentages:

1.1 A&H loss percent	0.0 %
1.2 A&H cost containment percent	0.0 %
1.3 A&H expense percent excluding cost containment expenses	0.0 %

2.1 Do you act as a custodian for health savings accounts? Yes [] No [X] 0

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

2.3 Do you act as an administrator for health savings accounts? Yes [] No [X] 0

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

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

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

Cooperative Group Benefits Plan
SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Reinsurer	8 Certified Reinsurer Rating (1 through 6)	9 Effective Date of Certified Reinsurer Rating
A&H Non-Affiliates								
.....	01/01/2018	Everest Reinsurance Company.....	PA.....	SSL/G.....	Authorized.....	.....	.....

Cooperative Group Benefits Plan

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

State, Etc.	1 Active Status (a)	Direct Business Only							
		2 Accident and Health Premiums	3 Medicare Title XVIII	4 Medicaid Title XIX	5 Federal Employees Health Benefits Program Premiums	6 Life and Annuity Premiums and Other Considerations	7 Property/Casualty Premiums	8 Total Columns 2 through 7	9 Deposit-Type Contracts
1. Alabama.....	AL							0	
2. Alaska.....	AK							0	
3. Arizona.....	AZ							0	
4. Arkansas.....	AR							0	
5. California.....	CA							0	
6. Colorado.....	CO							0	
7. Connecticut.....	CT							0	
8. Delaware.....	DE							0	
9. District of Columbia.....	DC							0	
10. Florida.....	FL							0	
11. Georgia.....	GA							0	
12. Hawaii.....	HI							0	
13. Idaho.....	ID							0	
14. Illinois.....	IL							0	
15. Indiana.....	IN	7,332,845						7,332,845	
16. Iowa.....	IA							0	
17. Kansas.....	KS							0	
18. Kentucky.....	KY							0	
19. Louisiana.....	LA							0	
20. Maine.....	ME							0	
21. Maryland.....	MD							0	
22. Massachusetts.....	MA							0	
23. Michigan.....	MI							0	
24. Minnesota.....	MN							0	
25. Mississippi.....	MS							0	
26. Missouri.....	MO							0	
27. Montana.....	MT							0	
28. Nebraska.....	NE							0	
29. Nevada.....	NV							0	
30. New Hampshire.....	NH							0	
31. New Jersey.....	NJ							0	
32. New Mexico.....	NM							0	
33. New York.....	NY							0	
34. North Carolina.....	NC							0	
35. North Dakota.....	ND							0	
36. Ohio.....	OH	6,718,178						6,718,178	
37. Oklahoma.....	OK							0	
38. Oregon.....	OR							0	
39. Pennsylvania.....	PA							0	
40. Rhode Island.....	RI							0	
41. South Carolina.....	SC							0	
42. South Dakota.....	SD							0	
43. Tennessee.....	TN							0	
44. Texas.....	TX							0	
45. Utah.....	UT							0	
46. Vermont.....	VT							0	
47. Virginia.....	VA							0	
48. Washington.....	WA							0	
49. West Virginia.....	WV							0	
50. Wisconsin.....	WI							0	
51. Wyoming.....	WY							0	
52. American Samoa.....	AS							0	
53. Guam.....	GU							0	
54. Puerto Rico.....	PR							0	
55. U.S. Virgin Islands.....	VI							0	
56. Northern Mariana Islands.....	MP							0	
57. Canada.....	CAN							0	
58. Aggregate Other alien.....	OT XXX..	0	0	0	0	0	0	0	0
59. Subtotal.....	XXX..	14,051,023	0	0	0	0	0	14,051,023	0
60. Reporting entity contributions for Employee Benefit Plans.....	XXX..							0	
61. Total (Direct Business).....	XXX..	14,051,023	0	0	0	0	0	14,051,023	0

DETAILS OF WRITE-INS

58001.....								0	
58002.....								0	
58003.....								0	
58998. Summary of remaining write-ins for line 58 from overflow page.....		0	0	0	0	0	0	0	0
58999. Total (Lines 58001 thru 58003 plus 58998) (Line 58 above).....		0	0	0	0	0	0	0	0

(a) Active Status Count

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 2 R - Registered - Non-domiciled RRGs..... 0

E - Eligible - Reporting entities eligible or approved to write surplus lines in the state 0 Q - Qualified - Qualified or accredited reinsurer..... 0

N - None of the above - Not allowed to write business in the state..... 55

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

SCHEDULE Y

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provided	Ultimate Controlling Entity(ies)/Persons)	Is an SCA Filing Required? (Y/N)	*

NON

Statement as of June 30, 2018 of the **Cooperative Group Benefits Plan**
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

Response

1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?

NO

Explanation:

1. The data for this supplement is not required to be filed.

Bar Code:



* N / A 2 0 1 8 3 6 5 0 0 0 0 2 *

SCHEDULE A - PART 2

Description of Property		Showing all Real Estate ACQUIRED AND ADDITIONS MADE During the Current Quarter				Name of Vendor	Actual Cost at Time of Acquisition	Amount of Encumbrances	Book/Adjusted Carrying Value Less Encumbrances	Additional Investment Made After Acquisition	9
		1	2	3	4						

NONE

SCHEDULE A - PART 3

Description of Property		Showing all Real Estate DISPOSED During the Quarter, Including Payments During the Final Year on "Sales Under Contract"				Name of Purchaser	Actual Cost	Disposal Date	State	City	Location	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20				
		1	2	3	4							5	6	7	8	9	10	11	12	13	14	Book/Adjusted Carrying Value Less Encumbrances	Total Foreign Exchange Change in B/A.C.V.	Current Year's Change in Encumbrances	Current Year's Impairment Recognized	Current Year's Depreciation					

QE01

NONE

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SCHEDULE B - PART 2

Showing all Mortgage Loans ACQUIRED AND ADDITIONS MADE During the Current Quarter								
1	Location		4	5	6	7	8	9
Loan Number	City	State	Loan Type	Date Acquired	Rate of Interest	Actual Cost at Time of Acquisition	Additional Investment Made After Acquisition	Value of Land and Buildings

NONE

SCHEDULE B - PART 3
Showing all Mortgage Loans DISPOSED, Transferred or Repaid During the Current Quarter

Showing all Mortgage Loans DISPOSED, Transferred or Repaid During the Current Quarter								
1	Location		4	5	6	7	8	9
Loan Number	City	State	Loan Type	Date Acquired	Disposal Date	Book Value/Recorded Investment Excluding Accrued Interest Prior Year	Unrealized Valuation Increase (Decrease)	Current Year's (Amortization) / Accretion
Change in Book Value/Recorded Investment								
						10	11	12
Current Year's Other-Than-Temporary Impairment Recognized								
						13	14	15
Total Foreign Exchange Change in Book Value in Book Value								
						10 + 11)	Total Foreign Book Value (8 + 9 - 10 + 11)	16
Book Value / Recorded Investment Excluding Accrued Interest on Disposal								
							17	18
Realized Gain (Loss) on Disposal								
								Total Gain (Loss) on Disposal

NONE

SCHEDULE BA - PART 2**Showing Other Long-Term Invested Assets ACQUIRED AND ADDITIONS MADE During the Current Quarter**

CUSIP Identification	Name or Description	Location		Name of Vendor or General Partner	NAIC Designation	Date Originally Acquired	Type and Strategy	Actual Cost at Time of Acquisition	Additional Investment Made after Acquisition	Amount of Encumbrances	Commitment for Additional Investment	Percentage of Ownership
		3	4									

NONE**SCHEDULE BA - PART 3**
Showing Other Long-Term Invested Assets DISPOSED, Transferred or Repaid During the Current Quarter

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

QE03**NONE**

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SCHEDULE D - PART 3
Showing all Long-Term Bonds and Stocks ACQUIRED During Current Quarter

For all common stock bearing NAC market indicator "I" provide the number of such issues:

SCHEDULE D - PART 4**Showing all Long-Term Bonds and Stocks SOLD, REDEEMED or Otherwise DISPOSED OF During Current Quarter**

CUSIP Identification	Description	Name of Purchaser	Number of Shares of Stock Consideration	Par Value	Prior Year Book/Adjusted Carrying Value	Actual Cost	Unrealized Increase (Decrease) / Amortization	Current Year's Accretion	Other-Than-Temporary Impairment Recognized	Total Change in Book/Adjusted Carrying Value in B.A.C.V. (11+12+13)	Total Foreign Exchange Change in B.A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest / Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation or Market Indicator (a)			
Common Stocks - Mutual Funds																					
Consumer Discretionary Sector																					
Consumer Staples Sub Sector																					
Energy Select Sector																					
Financial Select Sector																					
Health Care Select Sector																					
iShares Core MSCI EAFE ETF																					
iShares Core MSCI Emerging Markets																					
iShares MSCI EAFE Small-Cap ETF																					
iShares Russell 1000 Value Index Fund																					
iShares Russell 2000 Growth Index Fund																					
iShares Russell 2000 Value Index Fund																					
iShares Russell Mid Cap Value Index																					
iShares Russell Midcap Growth																					
Technology Select Sector SPDR Fund																					
iShares 1-3 Year Treasury Bond FD																					
iShares 3-7 Year Treasury Bond FD																					
iShares Aggregate Bond Fund																					
iShares Barclays 1-3 Year Credit Bond Fund																					
iShares iBoxx High Yield Corporate Bond ETF																					
iShares JP/Morgan USD Emerging Markets																					
iShares MBS ETF																					
SPDR Barclays High Yield Bond ETF																					
Vanguard Intermediate-Term Bond Fund																					
Vanguard Mortgage-Backed Securities ETF																					
Vanguard Short-Term Bond Fund ETF																					
Vanguard Inflm - TM Corp Bd Idx ETF																					
Vanguard Total Bond Market ETF																					
9298999. Total - Common Stocks - Mutual Funds																					
9798997. Total - Common Stocks - Part 4																					
9798999. Total - Common Stocks																					
9899999. Total - Preferred and Common Stocks																					
9999999. Total - Bonds, Preferred and Common Stocks																					

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

SCHEDULE DB - PART A - SECTION 1

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

Description	Description of Item(s) Hedged, Used for Income Generation or Replicated	Type(s) of Risk(s)	Schedule / Exhibit Identifier	Showing all Options, Caps, Floors, Collars, Swaps and Forwards Open as of Current Statement Date										Hedge Effectiveness at Inception and at Year-end (b)												
				1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23

NONE

SCHEDULE DB - PART B - SECTION 1

Futures Contracts Open as of the Current Statement Date

1 Ticker Symbol	2 Number of Contracts	3 Notional Amount	4 Description	5 Description of Item(s) Hedged, Used for Income Generation or Replicated	6 Type(s) of Risk(s) (a)	7 Date of Maturity or Expiration	8 Schedule / Exhibit Identifier	9		10		11		12		13		14		15		16		17		18		19		20		21		22	
								Change in Margin Value	Margin Value																										

NONE

SCHEDULE DB - PART D - SECTION 1

Counterparty Exposure for Derivative Instruments Open as of Current Statement Date

1	2	3	4	Book Adjusted Carrying Value				Fair Value				11	12
				5	6	7	8	9	10				
Master Agreement (Y or N)				Credit Support Annex (Y or N)				Exposure Net of Collateral				Potential Exposure	
Description of Exchange, Counterparty or Central Clearinghouse				Contracts with Book/Adjusted Carrying Value > 0	Contracts with Book/Adjusted Carrying Value < 0	Contracts with Book/Adjusted Carrying Value < 0	Contracts with Fair Value > 0	Contracts with Fair Value < 0	Exposure Net of Collateral	Contracts with Fair Value > 0	Exposure Net of Collateral		
1. Offset per SSAP No. 64.....					
2. Net after right of offset per SSAP No. 64.....					
					

NONE

SCHEDULE DB - PART D - SECTION 2

1 Exchange, Counterparty or Central Clearinghouse		2 Type of Asset Pledged		3 CUSIP Identification		4 Collateral for Derivative Instruments Open as of Current Statement Date		5 Fair Value		6 Par Value		7 Book/Adjusted Carrying Value		8 Maturity Date		9 Type of Margin (I, V or IV)

NONE

SCHEDULE DL - PART 1
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

(Securities lending collateral assets reported in aggregate on Line 10 of the Assets page and not included on Schedules A, B, BA, D, DB and E)

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

General Interrogatories:

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

NONE

SCHEDULE DL - PART 2
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

(Securities lending collateral assets included on Schedules A, B, BA, D, DB and E and not reported in aggregate on Line 10 of the Assets page)

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

General Interrogatories:

1. The activity for the year: Fair Value \$.....0 Book/Adjusted Carrying Value \$.....0
2. Average balance for the year: Fair Value \$.....0 Book/Adjusted Carrying Value \$.....0

NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	
Open Depositories								
Huntington National Bank - checking.....		various.....	0	.0	(454,561)	(1,434,822)	(213,589)	XXX
Columbus First Bank.....		various.....	850	.0	248,619	248,985	0	XXX
Federally Insured Cash Act - US Bank.....		various.....	12,557	.0	3,058,561	3,062,769	2,779,332	XXX
Federated Government Obligations Fund.....		various.....	681	.0	291,513	149,668	334,773	XXX
First Merchant.....		various.....	134	.0	0	0	134	XXX
Fidelity Institutional Prime Money Market.....		various.....	0	.0	.97	.97	.97	XXX
Huntington National Bank Conservative.....		various.....	134	.0	44,163	0	0	XXX
invesco.....		various.....	2,876	.0	1,334,114	1,735,591	236,118	XXX
Metro City Bank.....		various.....	54	.0	12,859	14,000	14,018	XXX
Mid America.....		various.....	218	.0	0	0	249,204	XXX
Nationwide Bank Deposit.....		various.....	638	.0	245,068	245,367	271	XXX
Pacific Mercantile Bank.....		various.....	1,097	.0	248,673	249,045	245,365	XXX
Pacific Premier Bank Deposit Account.....		various.....	988	.0	249,122	248,327	248,671	XXX
Seacoast Commerce Bank Deposit Account.....		various.....	1,093	.0	249,158	248,387	248,765	XXX
Ally Bank CD.....		various.....	2,217	.12	242,842	242,966	241,554	XXX
Bank of Baroda CD.....		various.....	0	1,809	136,362	136,605	136,749	XXX
Bank of China/NY.....		various.....	0	3,521	248,819	249,160	249,474	XXX
Bank of India.....		various.....	0	3,346	248,598	248,949	249,263	XXX
Capital One Bank NA CD.....		various.....	0	2,580	240,746	239,584	239,753	XXX
Capital One Bank NA CD.....		various.....	0	2,576	240,743	239,584	239,750	XXX
Discover Bank CD.....		various.....	0	1,949	203,355	202,430	202,482	XXX
First Community Bank.....		various.....	0	0	242,387	242,714	240,971	XXX
InsBank CD.....		various.....	728	.0	243,106	242,842	243,039	XXX
KeyBank NA CD.....		various.....	0	2,132	248,389	242,938	243,581	XXX
Morgan Stanley Bank NA CD.....		various.....	0	3,417	248,701	249,052	249,364	XXX
Morgan Stanley Private Bank CD.....		various.....	0	3,417	248,788	249,049	249,363	XXX
Safra National Bank CD.....		various.....	0	3,407	248,697	249,039	249,353	XXX
Sallie Mae CD.....		various.....	0	2,304	240,328	239,235	239,297	XXX
Summit Community Bank.....		various.....	.707	.0	242,845	242,592	242,799	XXX
Bank of Tokyo Mitsubishi Comm. Paper.....		various.....	0	0	322,729	323,246	323,764	XXX
Can. Imp Comm. Paper.....		various.....	0	0	0	0	345,910	XXX
Credit Agricole Comm. Paper.....		various.....	0	0	322,320	322,863	323,406	XXX
Credit Suisse Comm. Paper.....		various.....	0	0	328,363	328,802	0	XXX
GE Capital Treasury Comm. Paper.....		various.....	0	0	326,840	327,289	332,442	XXX
ING (US) Funding Comm. Paper.....		various.....	0	0	326,826	327,281	327,736	XXX
JP Morgan Sec. Comm. Paper.....		various.....	0	0	322,292	322,851	323,411	XXX
Natixis NY Comm. Paper.....		various.....	0	0	322,782	323,287	323,793	XXX
Royal Bk Ca Comm. Paper.....		various.....	0	0	0	0	345,811	XXX
Toyota Motor Corp. Comm. Paper.....		various.....	0	0	322,706	323,229	323,752	XXX
0199999. Total Open Depositories.....	XXX	XXX	24,972	.30,470	11,646,950	10,883,201	10,629,976	XXX
0399999. Total Cash on Deposit.....	XXX	XXX	24,972	.30,470	11,646,950	10,883,201	10,629,976	XXX
0599999. Total Cash.....	XXX	XXX	24,972	.30,470	11,646,950	10,883,201	10,629,976	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book/Adjusted Carrying Value	8 Amount of Interest Due & Accrued	9 Amount Received During Year
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NONE

Statement as of June 30, 2018 of the **Cooperative Group Benefits Plan**
SCHEDULE A - VERIFICATION

Real Estate

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

NONE

SCHEDULE B - VERIFICATION

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

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

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	.....2,025,894	.....
2. Cost of bonds and stocks acquired.....	.....893,236	.....2,318,442
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....	.....(16,427)	.....66,666
5. Total gain (loss) on disposals.....	.....	.....
6. Deduct consideration for bonds and stocks disposed of.....	.....868,793	.....359,214
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. Total investment income recognized as a result of prepayment penalties and/or acceleration fees.....	.....	.....
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7-8-9+10).....	.....2,033,910	.....2,025,894
12. Deduct total nonadmitted amounts.....	.....	.....
13. Statement value at end of current period (Line 11 minus Line 12).....	.....2,033,910	.....2,025,894

SCHEDULE D - PART 1B**Showing the Acquisitions, Dispositions and Non-Trading Activity**

		During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation			Book/Adjusted Carrying Value December 31 Prior Year				
		1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
BONDS									
1. NAIC 1 (a)	.....	950,000	.....	.....	.....	950,000	.....	.....	950,000
2. NAIC 2 (a)	.....	.....	.....	.....	.....	0	.....	.....	.....
3. NAIC 3 (a)	.....	.....	.....	.....	.....	0	.....	.....	.....
4. NAIC 4 (a)	.....	.....	.....	.....	.....	0	.....	.....	.....
5. NAIC 5 (a)	.....	.....	.....	.....	.....	0	.....	.....	.....
6. NAIC 6 (a)	.....	.....	.....	.....	.....	0	.....	.....	.....
7. Total Bonds.....	.....	950,000	.....	0	.....	950,000	.....	0	950,000
PREFERRED STOCK									
8. NAIC 1	.....	.....	.....	.....	.....	0	.....	.....	0
9. NAIC 2	.....	.....	.....	.....	.....	0	.....	.....	0
10. NAIC 3	.....	.....	.....	.....	.....	0	.....	.....	0
11. NAIC 4	.....	.....	.....	.....	.....	0	.....	.....	0
12. NAIC 5	.....	.....	.....	.....	.....	0	.....	.....	0
13. NAIC 6	.....	.....	.....	.....	.....	0	.....	.....	0
14. Total Preferred Stock.....	.....	0	.....	0	.....	0	.....	0	0
15. Total Bonds and Preferred Stock.....	.....	950,000	.....	0	.....	950,000	.....	0	950,000

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:

NAIC 1 \$.....; NAIC 2 \$.....; NAIC 3 \$.....; NAIC 4 \$.....; NAIC 5 \$.....; NAIC 6 \$.....

SCHEDULE DA - PART 1

Short-Term Investments

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

SCHEDULE DA - VERIFICATION

Short-Term Investments

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

SCHEDULE DB - PART A - VERIFICATION**Options, Caps, Floors, Collars, Swaps and Forwards**

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

NONE**SCHEDULE DB - PART B - VERIFICATION****Futures Contracts**

1. Book/adjusted carrying value, December 31, prior year (Line 6, prior year).....	.....
2. Cumulative cash change (Section 1, Broker Name/Net Cash Deposits Footnote - Cumulative Cash Change column).....	.....
3.1 Add:	
Change in variation margin on open contracts - Highly Effective Hedges:	
3.11 Section 1, Column 15, current year to date minus.....	.....
3.12 Section 1, Column 15, prior year.....	0
Change in variation margin on open contracts - All Other:	
3.13 Section 1, Column 18, current year to date minus.....	.....
3.14 Section 1, Column 18, prior year.....	0
3.2 Add:	
Change in adjustment to basis of hedged item:	
3.21 Section 1, Column 17, current year to date minus.....	.....
3.22 Section 1, Column 17, prior year.....	0
Change in amount recognized:	
3.23 Section 1, Column 19, current year to date minus.....	.....
3.24 Section 1, Column 19, prior year.....	0
3.3 Subtotal (Line 3.1 minus Line 3.2).....	0
4.1 Cumulative variation margin on terminated contracts during the year.....	.....
4.2 Less:	
4.21 Amount used to adjust basis of hedged item.....	.....
4.22 Amount recognized.....	0
4.3 Subtotal (Line 4.1 minus Line 4.2).....	0
5. Dispositions gains (losses) on contracts terminated in prior year:	
5.1 Total gain (loss) recognized for terminations in prior year.....	.....
5.2 Total gain (loss) adjusted into the hedged item(s) for the terminations in prior year.....	.....
6. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3.3 - 4.3 - 5.1 - 5.2).....	0
7. Deduct nonadmitted assets.....	.....
8. Statement value at end of current period (Line 6 minus Line 7).....	0

SCHEDULE DB - PART C - SECTION 1

Replication (Synthetic Asset) Transactions Open as of Current Statement Date

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

NONE

SCHEDULE DB - PART C - SECTION 2
Reconciliation (Synthetic Asset) Transactions Open

	1	2	3	4	5	6	7	8	9	10
	First Quarter Number of Positions	Total Replication (Synthetic Asset) Transactions Statement Value	Number of Positions	Total Replication (Synthetic Asset) Transactions Statement Value	Number of Positions	Total Replication (Synthetic Asset) Transactions Statement Value	Number of Positions	Total Replication (Synthetic Asset) Transactions Statement Value	Number of Positions	Year-To-Date
1. Beginning Inventory.....	0	0	0	0	0	0	0	0	0	0
2. Add: Opened or acquired transactions.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0
3. Add: Increases in replication (synthetic asset) transactions statement value.....	XXX.....	.....	XXX.....	.....	XXX.....	.....	XXX.....	.....	XXX.....	0
4. Less: Closed or disposed of transactions.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0
5. Less: Positions disposed of for failing effectiveness criteria.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	0
6. Less: Decreases in replication (synthetic asset) transactions statement value.....	XXX.....	.....	XXX.....	.....	XXX.....	.....	XXX.....	.....	XXX.....	0
7. Ending Inventory.....	0	0	0	0	0	0	0	0	0	0

SCHEDULE DB - VERIFICATION

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

Book/Adjusted Carrying Value Check

1. Part A, Section 1, Column 14.....	.....	.....
2. Part B, Section 1, Column 15 plus Part B, Section 1 Footnote - Total Ending Cash Balance.....	.....	.....
3. Total (Line 1 plus Line 2).....	.....	0
4. Part D, Section 1, Column 5.....	.....	.....
5. Part D, Section 1, Column 6.....	.....	.....
6. Total (Line 3 minus Line 4 minus Line 5).....	.....	0

Fair Value Check

7. Part A, Section 1, Column 16.....	.....	.....
8. Part B, Section 1, Column 13.....	.....	.....
9. Total (Line 7 plus Line 8).....	.....	0
10. Part D, Section 1, Column 8.....	.....	.....
11. Part D, Section 1, Column 9.....	.....	.....
12. Total (Line 9 minus Line 10 minus Line 11).....	.....	0

Potential Exposure Check

13. Part A, Section 1, Column 21.....	.....	.....
14. Part B, Section 1, Column 20.....	.....	.....
15. Part D, Section 1, Column 11.....	.....	.....
16. Total (Line 13 plus Line 14 minus Line 15).....	.....	0

NONE

SCHEDULE E - PART 2 - VERIFICATION**Cash Equivalents**

	1 Year To Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....	0	
2. Cost of cash equivalents acquired.....		
3. Accrual of discount.....		
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....	NONE	
6. Deduct consideration received on disposals.....		
7. Deduct amortization of premium.....		
8. Total foreign exchange change in book/ adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	0	0
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	0	0

	A	BD	BE	BF	BG	BH	BI	BJ	BK	BL	BM	BN	BO	BP	BQ	
1	FrontOT	2017-06	2017-07	2017-08	2017-09	2017-10	2017-11	2017-12	2018-01	2018-02	2018-03	2018-04	2018-05	2018-06	2018-07	
51	2014-10															
52	2014-11															
53	2014-12															
54	2015-01															
55	2015-02															
56	2015-03															
57	2015-04															
58	2015-05															
59	2015-06															
60	2015-07															
61	2015-08	\$														
62	2015-09	\$														
63	2015-10	\$														
64	2015-11	\$	24.21	\$												
65	2015-12	\$														
66	2016-01	\$	54.79	\$												
67	2016-02	\$	322.15	\$												
68	2016-03	\$	702.24	\$	(215.20)	\$										
69	2016-04	\$	5,792.59	\$	1,449.64	\$										
70	2016-05	\$			15.20	\$										
71	2016-06	\$	1,113.45	\$	15.20	\$										
72	2016-07	\$	1,083.07	\$	390.71	\$										
73	2016-08	\$	4,131.39	\$	734.87	\$	68.40	\$	596.24	\$						
74	2016-09	\$	544.19	\$	490.19	\$										
75	2016-10	\$	5,010.97	\$	678.45	\$	78.37	\$	5,533.45	\$	42,557.87	\$				
76	2016-11	\$	2,170.40	\$	2,531.28	\$	6,663.76	\$	311.34	\$	83,600.38	\$				
77	2016-12	\$	1,427.91	\$	5,705.19	\$	774.62	\$	293.02	\$	14,995.97	\$				
78	2017-01	\$	8,842.36	\$	2,897.73	\$	2,472.79	\$	1,961.24	\$	1,483.91	\$				
79	2017-02	\$	22,243.87	\$	13,364.71	\$	2,672.65	\$	531.73	\$	16,001.40	\$				
80	2017-03	\$	14,558.01	\$	6,311.70	\$	9,213.68	\$	9,107.60	\$	3,767.25	\$				
81	2017-04	\$	177,279.40	\$	15,299.09	\$	6,123.83	\$	3,254.20	\$	20,050.10	\$				
82	2017-05	\$	751,273.02	\$	58,797.28	\$	39,014.08	\$	8,600.28	\$	142,997.05	\$				
83	2017-06	\$	687,698.31	\$	667,835.79	\$	112,949.56	\$	24,001.22	\$	20,691.05	\$				
84	2017-07	\$			635,360.84	\$	888,515.80	\$	41,428.35	\$	33,740.06	\$				
85	2017-08	\$					862,334.65	\$	1,011,312.98	\$	225,776.05	\$				
86	2017-09	\$					563,966.93	\$	1,012,600.59	\$	246,076.32	\$				
87	2017-10	\$						\$	493,560.17	\$	1,171,036.79	\$				
88	2017-11	\$							\$	734,531.01	\$	1,041,118.44	\$			
89	2017-12	\$								\$	909,790.44	\$	1,431,867.25	\$		
90	2018-01	\$									\$	244,051.34	\$			
91	2018-02	\$										31,154.14	\$			
92	2018-03	\$										868,462.74	\$			
93	2018-04	\$										\$	787,419.24	\$		
94	2018-05	\$										\$	1,031,557.80	\$		
95	2018-06	\$											\$	606,724.47	\$	
96	2018-07	\$	1,684,272.33	\$	1,411,662.68	\$	1,711,351.81	\$	1,671,958.72	\$	2,253,556.45	\$	2,442,662.25	\$	2,571,166.41	\$
97															2,321,853.83	\$
															2,389,354.20	\$
															966,302.14	\$
															2,321,853.83	\$