



QUARTERLY STATEMENT
AS OF JUNE 30, 2018
OF THE CONDITION AND AFFAIRS OF THE
DELTA DENTAL PLAN OF OHIO, INC.

NAIC Group Code	0477 (Current Period)	0477 (Prior Period)	NAIC Company Code	54402	Employer's ID Number	31-0685339
Organized under the Laws of	Ohio		State of Domicile or Port of Entry	OH		
Country of Domicile	United States of America					
Licensed as business type:	Life, Accident & Health[] Dental Service Corporation[] Other[X]		Property/Casualty[] Vision Service Corporation[] Is HMO Federally Qualified? Yes[] No[] N/A[X]		Hospital, Medical & Dental Service or Indemnity[] Health Maintenance Organization[]	
Incorporated/Organized	03/06/1960		Commenced Business	04/01/1964		
Statutory Home Office	5600 Blazer Pkwy., Suite 150 (Street and Number)		Dublin, OH, 43017 (City or Town, State, Country and Zip Code)			
Main Administrative Office			4100 Okemos Road (Street and Number)			
	Okemos, MI, 48864 (City or Town, State, Country and Zip Code)		(517)349-6000 (Area Code) (Telephone Number)			
Mail Address	P.O. Box 30416 (Street and Number or P.O. Box)		Lansing, MI, 48909-7916 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records			4100 Okemos Road (Street and Number)			
	Okemos, MI, 48864 (City or Town, State, Country and Zip Code)		(517)349-6000 (Area Code) (Telephone Number)			
Internet Web Site Address	http://ddpoh.com/					
Statutory Statement Contact	Glenn R. Simon, CPA, CGMA (Name)		(517)347-5405 (Area Code)(Telephone Number)(Extension)			
	gsimon@deltadentalmi.com (E-Mail Address)		(517)381-5572 (Fax Number)			

OFFICERS

Name	Title
Laura Linda Czelada, CPA	President & CEO
Frank Buzaki, Jr.	Secretary
James Robert Stahl, DDS	Treasurer
Bruce Randall Smith	Chairperson
Ann Marie Flermoen, DDS	Vice Chairperson
Douglas Robert Anderson, DDS, MS, JD	Immediate Past Chairperson

OTHERS

Goran Mike Jurkovic, CPA, CGMA, Chief Operating Officer
Amy Lyn Basel, CPA, CGMA, SVP, CFO & CRO
Sue Ellen Jenkins, VP & General Counsel #

DIRECTORS OR TRUSTEES

Douglas Robert Anderson, DDS, MS, JD
Frank Buzaki, Jr.
Patrick Thomas Cahill, JD
Ann Marie Flermoen, DDS
Timothy Eldon Moffit, DBA
Bruce Randall Smith
James Robert Stahl, DDS
Michael Scott Stull
Carole Simonetti Watkins

State of Michigan
County of Eaton 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. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature)	(Signature)	(Signature)
Laura Linda Czelada, CPA	Goran Mike Jurkovic, CPA, CGMA	Amy Lyn Basel, CPA, CGMA
(Printed Name)	(Printed Name)	(Printed Name)
1.	2.	3.
President & CEO	COO	SVP, CFO & CRO
(Title)	(Title)	(Title)

Subscribed and sworn to before me this _____ day of August, 2018

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 _____

(Notary Public Signature)

ASSETS

		Current Statement Date			4
		1	2	3	
		Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	December 31 Prior Year Net Admitted Assets
1.	Bonds	77,912,961		77,912,961	74,567,304
2.	Stocks:				
2.1	Preferred stocks	84,840		84,840	85,640
2.2	Common stocks	124,066,966		124,066,966	119,732,674
3.	Mortgage loans on real estate:				
3.1	First liens				
3.2	Other than first liens				
4.	Real estate:				
4.1	Properties occupied by the company (less \$.....0 encumbrances)				
4.2	Properties held for the production of income (less \$.....0 encumbrances)				
4.3	Properties held for sale (less \$.....0 encumbrances)				
5.	Cash (\$.....(6,259,877)), cash equivalents (\$.....3,064,193) and short-term investments (\$.....0)	(3,195,684)		(3,195,684)	9,506,287
6.	Contract loans (including \$.....0 premium notes)				
7.	Derivatives				
8.	Other invested assets	750,000		750,000	641,926
9.	Receivables for securities				
10.	Securities lending reinvested collateral assets				
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)	199,619,083		199,619,083	204,533,831
13.	Title plants less \$.....0 charged off (for Title insurers only)				
14.	Investment income due and accrued	354,397		354,397	323,481
15.	Premiums and considerations:				
15.1	Uncollected premiums and agents' balances in the course of collection	4,726,344	38,867	4,687,477	3,714,635
15.2	Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums)				
15.3	Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0)				
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	14,090,818	3,296	14,087,522	7,074,951
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 (\$.....0)				
22.	Net adjustments in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates	8,730		8,730	9,179
24.	Health care (\$.....0) and other amounts receivable	10,109		10,109	21,271
25.	Aggregate write-ins for other-than-invested assets				
26.	TOTAL assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	218,809,481	42,163	218,767,318	215,677,348
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
28.	TOTAL (Lines 26 and 27)	218,809,481	42,163	218,767,318	215,677,348
DETAILS OF WRITE-INS					
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page				
1199.	TOTALS (Lines 1101 through 1103 plus 1198) (Line 11 above)				
2501.					
2502.					
2503.					
2598.	Summary of remaining write-ins for Line 25 from overflow page				
2599.	TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above)				

LIABILITIES, CAPITAL AND SURPLUS

		Current Period			Prior Year
		1 Covered	2 Uncovered	3 Total	4 Total
1.	Claims unpaid (less \$.....0 reinsurance ceded)	8,177,400		8,177,400	11,431,270
2.	Accrued medical incentive pool and bonus amounts				
3.	Unpaid claims adjustment expenses	355,968		355,968	268,309
4.	Aggregate health policy reserves, including the liability of \$.....0 for medical loss ratio rebate per the Public Health Service Act	168,378		168,378	60,529
5.	Aggregate life policy reserves				
6.	Property/casualty unearned premium reserve				
7.	Aggregate health claim reserves				
8.	Premiums received in advance	1,728,457		1,728,457	1,686,217
9.	General expenses due or accrued	4,103,767		4,103,767	2,879,770
10.1	Current federal and foreign income tax payable and interest thereon (including \$.....0 on realized gains (losses))				
10.2	Net deferred tax liability				
11.	Ceded reinsurance premiums payable				
12.	Amounts withheld or retained for the account of others	2,327,452		2,327,452	2,235,051
13.	Remittances and items not allocated				
14.	Borrowed money (including \$.....0 current) and interest thereon \$.....0 (including \$.....0 current)				
15.	Amounts due to parent, subsidiaries and affiliates	2,683,658		2,683,658	2,369,826
16.	Derivatives				
17.	Payable for securities				166,740
18.	Payable for securities lending				
19.	Funds held under reinsurance treaties with (\$.....0 authorized reinsurers, \$.....0 unauthorized reinsurers and \$.....0 certified reinsurers)				
20.	Reinsurance in unauthorized and certified (\$.....0) companies				
21.	Net adjustments in assets and liabilities due to foreign exchange rates				
22.	Liability for amounts held under uninsured plans	5,389,370		5,389,370	5,295,070
23.	Aggregate write-ins for other liabilities (including \$.....464,696 current)	464,696		464,696	276,921
24.	Total liabilities (Lines 1 to 23)	25,399,146		25,399,146	26,669,703
25.	Aggregate write-ins for special surplus funds	X X X	X X X		2,294,019
26.	Common capital stock	X X X	X X X		
27.	Preferred capital stock	X X X	X X X		
28.	Gross paid in and contributed surplus	X X X	X X X	9,712,604	9,712,604
29.	Surplus notes	X X X	X X X		
30.	Aggregate write-ins for other-than-special surplus funds	X X X	X X X		
31.	Unassigned funds (surplus)	X X X	X X X	183,655,568	177,001,022
32.	Less treasury stock, at cost:				
32.1	0 shares common (value included in Line 26 \$.....0)	X X X	X X X		
32.2	0 shares preferred (value included in Line 27 \$.....0)	X X X	X X X		
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	X X X	X X X	193,368,172	189,007,645
34.	Total Liabilities, capital and surplus (Lines 24 and 33)	X X X	X X X	218,767,318	215,677,348
DETAILS OF WRITE-INS					
2301.	Uninsured Claim Admin Expense Reserve	464,696		464,696	276,921
2302.					
2303.					
2398.	Summary of remaining write-ins for Line 23 from overflow page				
2399.	TOTALS (Lines 2301 through 2303 plus 2398) (Line 23 above)	464,696		464,696	276,921
2501.	2018 ACA Fee	X X X	X X X		2,294,019
2502.		X X X	X X X		
2503.		X X X	X X X		
2598.	Summary of remaining write-ins for Line 25 from overflow page	X X X	X X X		
2599.	TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above)	X X X	X X X		2,294,019
3001.		X X X	X X X		
3002.		X X X	X X X		
3003.		X X X	X X X		
3098.	Summary of remaining write-ins for Line 30 from overflow page	X X X	X X X		
3099.	TOTALS (Lines 3001 through 3003 plus 3098) (Line 30 above)	X X X	X X X		

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	X X X	5,334,097	5,395,561	10,850,291
2.	Net premium income (including \$.....0 non-health premium income)	X X X	128,808,654	128,114,881	257,878,741
3.	Change in unearned premium reserves and reserves for rate credits	X X X			
4.	Fee-for-service (net of \$.....0 medical expenses)	X X X			
5.	Risk revenue	X X X			
6.	Aggregate write-ins for other health care related revenues	X X X			13
7.	Aggregate write-ins for other non-health revenues	X X X			
8.	Total revenues (Lines 2 to 7)	X X X	128,808,654	128,114,881	257,878,754
Hospital and Medical:					
9.	Hospital/medical benefits				
10.	Other professional services		111,518,918	110,537,304	214,801,566
11.	Outside referrals				
12.	Emergency room and out-of-area				
13.	Prescription drugs				
14.	Aggregate write-ins for other hospital and medical				
15.	Incentive pool, withhold adjustments and bonus amounts				
16.	Subtotal (Lines 9 to 15)		111,518,918	110,537,304	214,801,566
Less:					
17.	Net reinsurance recoveries				
18.	Total hospital and medical (Lines 16 minus 17)		111,518,918	110,537,304	214,801,566
19.	Non-health claims (net)				
20.	Claims adjustment expenses, including \$.....215,773 cost containment expenses		891,623	1,045,236	1,354,082
21.	General administrative expenses		13,965,071	10,696,193	21,050,780
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)		126,375,612	122,278,733	237,206,428
24.	Net underwriting gain or (loss) (Lines 8 minus 23)	X X X	2,433,042	5,836,148	20,672,326
25.	Net investment income earned		2,088,313	1,638,071	4,084,551
26.	Net realized capital gains (losses) less capital gains tax of \$.....0		756,130	1,739,621	1,619,710
27.	Net investment gains or (losses) (Lines 25 plus 26)		2,844,443	3,377,692	5,704,261
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....0) (amount charged off \$.....0)]		(1,403)	4,139	3,663
29.	Aggregate write-ins for other income or expenses		674	2,109	(4,997,406)
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	X X X	5,276,756	9,220,088	21,382,844
31.	Federal and foreign income taxes incurred	X X X			
32.	Net income (loss) (Lines 30 minus 31)	X X X	5,276,756	9,220,088	21,382,844
DETAILS OF WRITE-INS					
0601.	Discount card revenue	X X X			13
0602.		X X X			
0603.		X X X			
0698.	Summary of remaining write-ins for Line 6 from overflow page	X X X			
0699.	TOTALS (Lines 0601 through 0603 plus 0698) (Line 6 above)	X X X			13
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 (Lines 0701 through 0703 plus 0798) (Line 7 above)	X X X			
1401.					
1402.					
1403.					
1498.	Summary of remaining write-ins for Line 14 from overflow page				
1499.	TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above)				
2901.	Contribution to Delta Dental Fund				(5,000,000)
2902.	Miscellaneous Income (Expense)		674	2,109	2,594
2903.					
2998.	Summary of remaining write-ins for Line 29 from overflow page				
2999.	TOTALS (Lines 2901 through 2903 plus 2998) (Line 29 above)		674	2,109	(4,997,406)

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
CAPITAL & SURPLUS ACCOUNT				
33.	Capital and surplus prior reporting year	189,007,645	158,259,173	158,259,173
34.	Net income or (loss) from Line 32	5,276,756	9,220,088	21,382,844
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	(1,007,050)	3,062,332	8,711,153
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax			
39.	Change in nonadmitted assets	90,821	(286,079)	654,475
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			
48.	Net change in capital and surplus (Lines 34 to 47)	4,360,527	11,996,341	30,748,472
49.	Capital and surplus end of reporting period (Line 33 plus 48)	193,368,172	170,255,514	189,007,645
DETAILS OF WRITE-INS				
4701.				
4702.				
4703.				
4798.	Summary of remaining write-ins for Line 47 from overflow page			
4799.	TOTALS (Lines 4701 through 4703 plus 4798) (Line 47 above)			

CASH FLOW

		1	2	3
		Current	Prior	Prior
		Year	Year	Year Ended
		To Date	To Date	December 31
Cash from Operations				
1.	Premiums collected net of reinsurance	127,971,944	125,420,729	255,700,204
2.	Net investment income	2,156,608	1,660,227	4,134,264
3.	Miscellaneous income	674	2,109	2,594
4.	TOTAL (Lines 1 to 3)	130,129,226	127,083,065	259,837,062
5.	Benefit and loss related payments	114,772,788	111,899,362	213,188,054
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7.	Commissions, expenses paid and aggregate write-ins for deductions	19,965,952	17,459,165	20,035,628
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)	134,738,740	129,358,527	233,223,682
11.	Net cash from operations (Line 4 minus Line 10)	(4,609,514)	(2,275,462)	26,613,380
Cash from Investments				
12.	Proceeds from investments sold, matured or repaid:			
12.1	Bonds	12,281,237	15,116,076	28,957,136
12.2	Stocks	14,285,837	11,146,675	15,107,477
12.3	Mortgage loans			
12.4	Real estate			
12.5	Other invested assets			500,000
12.6	Net gains or (losses) on cash, cash equivalents and short-term investments			
12.7	Miscellaneous proceeds			
12.8	TOTAL investment proceeds (Lines 12.1 to 12.7)	26,567,074	26,262,751	44,564,613
13.	Cost of investments acquired (long-term only):			
13.1	Bonds	16,373,307	20,541,084	42,845,515
13.2	Stocks	18,225,377	14,344,061	21,955,058
13.3	Mortgage loans			
13.4	Real estate			
13.5	Other invested assets		227,423	60,683
13.6	Miscellaneous applications	166,740		
13.7	TOTAL investments acquired (Lines 13.1 to 13.6)	34,765,424	35,112,568	64,861,256
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)	(8,198,350)	(8,849,817)	(20,296,643)
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)	105,893	107,413	(4,837,478)
17.	Net cash from financing and miscellaneous sources (Line 16.1 through 16.4 minus Line 16.5 plus Line 16.6)	105,893	107,413	(4,837,478)
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS				
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	(12,701,971)	(11,017,866)	1,479,259
19.	Cash, cash equivalents and short-term investments:			
19.1	Beginning of year	9,506,287	8,027,028	8,027,028
19.2	End of period (Line 18 plus Line 19.1)	(3,195,684)	(2,990,838)	9,506,287

Note: Supplemental Disclosures of Cash Flow Information for Non-Cash Transactions:

20.0001				
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EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1 Total	Comprehensive (Hospital & Medical)		4 Medicare Supplement	5 Vision Only	6 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
		2 Individual	3 Group							
Total Members at end of:										
1. Prior Year	910,504					910,504				
2. First Quarter	890,092					890,092				
3. Second Quarter	886,200					886,200				
4. Third Quarter										
5. Current Year										
6. Current Year Member Months	5,334,097					5,334,097				
Total Member Ambulatory Encounters for Period:										
7. Physician										
8. Non-Physician										
9. Total										
10. Hospital Patient Days Incurred										
11. Number of Inpatient Admissions										
12. Health Premiums Written (a)	128,808,654					128,808,654				
13. Life Premiums Direct										
14. Property/Casualty Premiums Written										
15. Health Premiums Earned	128,808,654					128,808,654				
16. Property/Casualty Premiums Earned										
17. Amount Paid for Provision of Health Care Services ...	114,772,789					114,772,789				
18. Amount Incurred for Provision of Health Care Services	111,518,918					111,518,918				

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

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

Aging Analysis of Unpaid Claims						
1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 days	6 Over 120 Days	7 Total
0199999 Individually Listed Claims Unpaid						
0299999 Aggregate Accounts Not Individually Listed - Uncovered						
0399999 Aggregate Accounts Not Individually Listed - Covered	2,232,430	45,793	11,449			2,289,672
0499999 Subtotals	2,232,430	45,793	11,449			2,289,672
0599999 Unreported claims and other claim reserves						5,887,728
0699999 Total Amounts Withheld						
0799999 Total Claims Unpaid						8,177,400
0899999 Accrued Medical Incentive Pool And Bonus Amounts						

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

Line of Business		Claims Paid Year to Date		Liability End of Current Quarter		5	6
		1	2	3	4	Claims Incurred in Prior Years (Columns 1+3)	Estimated Claim Reserve and Claim Liability Dec 31 of Prior Year
		On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid Dec 31 of Prior Year	On Claims Incurred During the Year		
1.	Comprehensive (hospital & medical)						
2.	Medicare Supplement						
3.	Dental only	10,262,243	104,510,546	366,300	7,811,100	10,628,543	11,431,270
4.	Vision only						
5.	Federal Employees Health Benefits Plan						
6.	Title XVIII - Medicare						
7.	Title XIX - Medicaid						
8.	Other health						
9.	Health subtotal (Lines 1 to 8)	10,262,243	104,510,546	366,300	7,811,100	10,628,543	11,431,270
10.	Healthcare receivables (a)						
11.	Other non-health						
12.	Medical incentive pools and bonus amounts						
13.	Totals (Lines 9 - 10 + 11 + 12)	10,262,243	104,510,546	366,300	7,811,100	10,628,543	11,431,270

(a) Excludes \$.00 loans or advances to providers not yet expensed.

Notes to Financial Statement

1. Summary of Significant Accounting Policies

A. Accounting Practices

The financial statements of Delta Dental Plan of Ohio (Company) are presented on the basis of accounting practices prescribed or permitted by the State of Ohio Insurance Department in accordance with the National Association of Insurance Commissioners (NAIC) *Accounting Practices and Procedures Manual*.

The State of Ohio Insurance Department recognizes only statutory accounting practices prescribed or permitted by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Ohio Insurance Law. The NAIC *Accounting Practices and Procedures* manual has been adopted as a component of prescribed or permitted practices by the State of Ohio. The state has not adopted any accounting practices that differ from those found in NAIC SAP with regards to completion the Company’s financial statement.

Description	SSAP #	F/S Page	F/S Line #	6/30/2018	12/31/2017
Net Income, OH				\$5,276,756	\$21,382,844
Effect of OH prescribed practices				-	-
Effect of OH permitted practices				-	-
Net income, NAIC SAP				\$5,276,756	\$21,382,844
Description	SSAP #	F/S Page	F/S Line #	6/30/2018	12/31/2017
Statutory Surplus, OH				\$193,368,172	\$189,007,645
Effect of OH prescribed practices					
Effect of OH permitted practices					
Policyholders Surplus, NAIC SAP				\$193,368,172	\$189,007,645

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy

Health premiums are earned ratably over the terms of the related insurance contracts or policies. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred.

In addition, the company uses the following accounting policies:

- (1) Short-term investments are stated at amortized cost.
- (2) Bonds not backed by other loans are stated at amortized cost using the interest method.
- (3) Common stocks are recorded at market value except investments in stocks of uncombined subsidiaries and affiliates in which the Company has an interest of 20% or more are carried on the statutory equity basis.
- (4) Preferred stocks are stated in accordance with the guidance provided in SSAP No. 32.
- (5) No mortgage loans on real estate are held as of June 30, 2018 and 2017.
- (6) Loan backed securities are stated at amortized cost. The retrospective adjustment method is used to value MBS’s and the scientific interest method is used to value CMO’s.
- (7) The Company carries its investment in a non-insurance affiliate at the audited GAAP equity basis adjusted to a statutory equity basis.
- (8) The Company has no ownership interests in joint ventures, partnerships or limited liability companies as of June 30, 2018 and 2017.
- (9) No derivatives are held as of June 30, 2018 and 2017.
- (10) Not applicable.
- (11) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability are continually reviewed and any adjustments are reflected in the period determined.
- (12) The Company has not modified it capitalization policy from the prior period.
- (13) Not applicable

D. Going Concern

None.

Notes to Financial Statement

2. Accounting Changes and Corrections of Errors

- A. 1. None.
- 2. None.
- 3. None.
- 4. None

3. Business Combinations and Goodwill

No change.

4. Discontinued Operations

Bo change.

5. Investments

- A. The Company owned no mortgage loans.
- B. The Company had no investments in restructured debt.
- C. The Company had no investments in reverse mortgages.
- D. The Company had no investments in loan backed securities that are recorded at other-than-temporarily impaired values.
- E. The Company had no repurchase agreements.
- F. The Company does not have investments in real estate.
- G. The Company has no investments in low-income housing tax credits (LIHTC).
- H. None.
- I. None.
- J. None.
- K. None.
- L. Restricted Assets

(1) Restricted Assets (Including Pledged)

		1	2	3	4	5	6	7
	Restricted Asset Category	Total Gross (Admitted & Nonadmitted) Restricted from Current Year	Total Gross (Admitted & Nonadmitted) Restricted from Prior Year	Increase / (Decrease) (1 minus 2)	Total Current Year Nonadmitted Restricted	Total Current Year Admitted Restricted (1 minus 4)	Gross (Admitted & Nonadmitted) Restricted to Total Asset (a)	Admitted Restricted to Total Admitted Asset (b)
a.	Subject to contractual obligation for which liability is not shown	\$ -	\$ -	\$ -	\$ -	\$ -	0.00%	0.00%
b.	Collateral held under security lending agreements							
c.	Subject to repurchase agreements							
d.	Subject to reserve repurchase agreement							
e.	Subject to dollar repurchase agreements							
f.	Subject to dollar reserve repurchase agreements							
g.	Placed under option contracts							
h.	Letter stock or securities restricted as to sale - excluding FHLB capital stock							
i.	FHLB capital stock							
j.	On deposit with state	150,124	150,190	(66)		150,124	0.07%	0.07%
k.	On deposit with other regulatory bodies							
l.	Pledged as collateral to FHLB (including assets backing funding agreements)							
m.	Pledged as collateral not captured in other categories							
n.	Other restricted assets							
o.	Total Restricted Assets	\$ 150,124	\$ 150,190	\$ (66)	\$ -	\$ 150,124	0.07%	0.07%

(2) - (3) & (4) – Not applicable

Notes to Financial Statement

M-R. Not applicable.

6. Joint Ventures, Partnerships and Limited Liability Companies

No change.

7. Investment Income

No change.

8. Derivative Instruments

No change.

9. Income Taxes

No change.

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

No Change.

11. Debt

No change.

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

No change.

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

No change.

14. Liabilities, Contingencies and Assessments

No change.

15. Leases

No change.

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

No change.

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

- A. The Company had no transfers of receivables reported as sales.
- B. The Company had no transfer or servicing of Financial Assets.
- C. The Company was not involved in any wash sales during the periods presented in these statements.

18. Gain or Loss to the Reporting Entity from Uninsured A&H Plans and the Uninsured Portion of Partially Insured Plans

No material change.

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

No change.

Notes to Financial Statement

20. Fair Value Measurements

A.

1. Fair Value Measurements at Reporting Date

Description	(Level 1)	(Level 2)	(Level 3)	Total	Net Asset Values (NAV) Inlcuded in Level 2
a. Assets at fair value					
Perpetual Preferred stock					
Industrial & Misc	\$84,840	\$0	\$0	\$84,840	
Parent, Subs, and Affiliate	0	0	0	\$0	\$0
Total Perpetual Preferred Stock	\$84,840	\$0	\$0	\$84,840	\$0
Bonds					
U.S. Governments	\$0	\$7,644,668	\$0	\$7,644,668	\$0
Industrial & Misc	0	69,480,317	0	69,480,317	0
Hybrid Securities	0	0	0	0	0
Parent, Subs, and Affiliate	0	0	0	0	0
Total Bonds	\$0	\$77,124,985	\$0	\$77,124,985	\$0
Common stock					
Industrial & Misc	\$102,797,279	\$0	\$0	\$102,797,279	\$0
Parent, Subs, and Affiliate	0	0	0	0	0
Total Common Stocks	\$102,797,279	\$0	\$0	\$102,797,279	\$0
Derivative assets					
Interest rate contracts	\$0	\$0	\$0	\$0	\$0
Foreign exchange contracts	0	0	0	0	0
Credit contracts	0	0	0	0	0
Commodity futures contracts	0	0	0	0	0
Commodity forward contracts	0	0	0	0	0
Total Derivatives	\$0	\$0	\$0	\$0	\$0
Separate account assets	\$0	\$0	\$0	\$0	\$0
Total assets at fair value	\$102,882,119	\$77,124,985	\$0	\$180,007,104	\$0
b. Liabilities at fair value					
Derivative liabilities	\$0	\$0	\$0	\$0	\$0
Total liabilities at fair value	\$0	\$0	\$0	\$0	\$0

- 2. None
- 3. None
- 4. None
- 5. None

- B. None
- C. None
- D. None

21. Other Items

No change.

22. Events Subsequent

The Company has no events subsequent to June 30, 2018, that may have a material effect on these financial statements.

23. Reinsurance

No change.

24. Retrospectively Rated Contracts & Contracts Subject to Re-determination

No material change.

Notes to Financial Statement

25. Change in Incurred Claims and Claim Adjustment Expenses

Reserves as of December 31, 2017 were \$11,699,579. As of June 30, 2018, 10,530,552 has been paid for incurred claims and claim adjustment expense attributable to insured evens of prior years. Remaining reserves for prior years are now \$366,300 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been a \$802,727 favorable prior-year loss development since December 31, 2017 to June 30, 2018. This decrease is generally the result of ongoing analysis of recent loss development trends. Original estimates are increased or decreased as additional information becomes known regarding individual claims. The business to which this relates does not include retrospectively rated policies, therefore there was no return premium accrued as a result of the prior year effects.

26. Intercompany Pooling Arrangements

No change.

27. Structured Settlement

No change.

28. Health Care Receivables

No change.

29. Participating Policies

No change.

30. Premium Deficiency Reserves

- | | |
|---|-----------|
| 1. Liability carried for premium deficiency reserves | \$ 0 |
| 2. Date of the most recent evaluation of this liability | 6/30/2018 |
| 3. Was anticipated investment income utilized in the calculation? | Yes No X |

31. Anticipated Salvage and Subrogation

No change.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES
GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?

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

Yes[] No[] N/A[X]
- 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[X] No[]
- 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 the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved? If yes, attach an explanation.

Yes[] No[X] N/A[]
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made.

.....12/31/2016.....
- 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.

.....12/31/2016.....
- 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).

.....01/17/2018.....
- 6.4 By what department or departments?

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

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

Yes[] No[X]
- 7.2 If yes, give full information
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes[] No[X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms?

Yes[] No[X]
- 8.4 If 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
		 No	 No	 No	 No

- 9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?
(a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
(b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
(c) Compliance with applicable governmental laws, rules and regulations;
(d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
(e) Accountability for adherence to the code.

Yes[X] No[]
- 9.11 If the response to 9.1 is No, please explain:
- 9.2 Has the code of ethics for senior managers been amended?

Yes[] No[X]
- 9.21 If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3 Have any provisions of the code of ethics been waived for any of the specified officers?

Yes[] No[X]
- 9.31 If the response to 9.3 is Yes, provide the nature of any waiver(s).

FINANCIAL

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

Yes[X] No[]
- 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[X] No[]
- 14.2 If yes, please complete the following:

GENERAL INTERROGATORIES (Continued)

		1	2
		Prior Year-End Book/Adjusted Carrying Value	Current Quarter Book/Adjusted Carrying Value
14.21	Bonds		
14.22	Preferred Stock		
14.23	Common Stock	20,584,256	21,269,687
14.24	Short-Term Investments		
14.25	Mortgages Loans on Real Estate		
14.26	All Other	750,000	750,000
14.27	Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	21,334,256	22,019,687
14.28	Total Investment in Parent included in Lines 14.21 to 14.26 above		

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB?

15.2 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[X]
Yes[] No[] N/A[X]

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

16.1 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

16.2 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

16.3 Total payable for securities lending reported on the liability page

\$ 0
\$ 0
\$ 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?

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

Yes[X] No[]

1	2
Name of Custodian(s)	Custodian Address
Bank of America/Merrill Lynch	135. LaSalle St ., Chicago, IL 60603

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	2	3
Name(s)	Location(s)	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?

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

Yes[] No[X]

1	2	3	4
Old Custodian	New Custodian	Date of Change	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	2
Name of Firm or Individual	Affiliation
AEW Capital Management	U
ClearArc Capital	U
Invesco	U
JPMorgan Investment Management	U
McDonnell Investment Management	U
Merrill Lynch	U
Michael M. Gilmore	A
Thomas S. Prichard	A
Laura L. Czelada	A
Goran M. Jukovic	A

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?

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?

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.

Yes[X] No[]
Yes[] No[X]

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
108633	AEW Capital Management	n/a	SEC	NO
104650	ClearArc Capital	549300K4SXC0CLBZHS67	SEC	NO
105360	Invesco	O37NHJVF7S2211ONOU83	SEC	NO
107038	JPMorgan Investment Management	n/a	SEC	NO
166176	McDonnell Investment Management	n/a	SEC	NO
142558	Merrill Lynch	n/a	SEC	NO

GENERAL INTERROGATORIES (Continued)

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. 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]

GENERAL INTERROGATORIES

PART 2 - HEALTH

1. Operating Percentages:	
1.1 A&H loss percent	87.000%
1.2 A&H cost containment percent	0.000%
1.3 A&H expense percent excluding cost containment expenses	11.000%
2.1 Do you act as a custodian for health savings accounts?	Yes[] No[X]
2.2 If yes, please provide the amount of custodial funds held as of the reporting date.	\$..... 0
2.3 Do you act as an administrator for health savings accounts?	Yes[] No[X]
2.4 If yes, please provide the balance of the funds administered as of the reporting date.	\$..... 0
3. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	Yes[] No[X]
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 of the reporting entity?	Yes[] No[X]

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
			NONE					

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS
Current Year to Date - Allocated by States and Territories

		1	Direct Business Only							
			2	3	4	5	6	7	8	9
State, Etc.		Active Status (a)	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums and Other Considerations	Property/ Casualty Premiums	Total Columns 2 Through 7	Deposit-Type Contracts
1.	Alabama (AL)	N								
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	128,808,654						128,808,654	
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	128,808,654						128,808,654	
60.	Reporting entity contributions for Employee Benefit Plans	X X X								
61.	Total (Direct Business)	X X X	128,808,654						128,808,654	
DETAILS OF WRITE-INS										
58001.		X X X								
58002.		X X X								
58003.		X X X								
58998.	Summary of remaining write-ins for Line 58 from overflow page	X X X								
58999.	TOTALS (Lines 58001 through 58003 plus 58998) (Line 58 above)	X X X								

(a) Active Status Counts:

- L Licensed or Chartered - Licensed insurance carrier or domiciled RRG
- 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

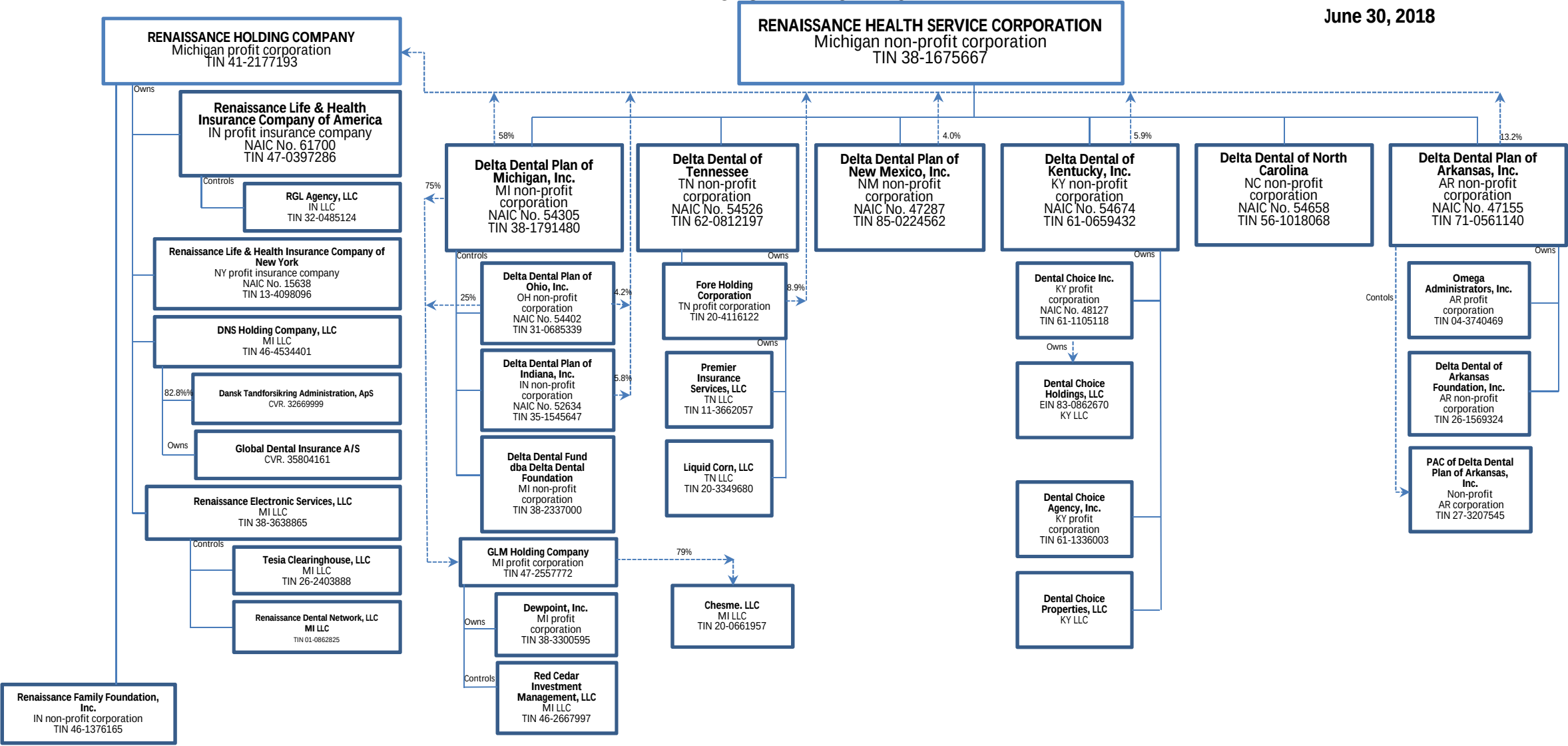
1

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- R Registered - Non-domiciled RRGs
- Q Qualified - Qualified or accredited reinsurer

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

ORGANIZATIONAL CHART
June 30, 2018



SCHEDULE Y
PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Comp- any Code	ID Number	FEDERAL RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domic- iliary Loca- tion	Rela- tion- ship to Report- ing Entity	Directly Controlled by (Name of Entity / Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Y/N)	*
916		0	38-1675667				Renaissance Health Service Corporation	MI	UIP					N	
		0	46-1376165				Renaissance Family Foundation, Inc.	IN	NIA					N	
		0	41-2177193				Renaissance Holding Company	MI	NIA	Delta Dental Plan of Michigan, Inc.	Ownership	58.0	Renaissance Health Service Corporation	Y	
		0	41-2177193				Renaissance Holding Company	MI	NIA	Delta Dental Plan of Ohio, Inc.	Ownership	4.2	Renaissance Health Service Corporation	Y	
		0	41-2177193				Renaissance Holding Company	MI	NIA	Delta Dental Plan of Indiana, Inc.	Ownership	5.8	Renaissance Health Service Corporation	Y	
		0	41-2177193				Renaissance Holding Company	MI	NIA	Fore Holding Corporation	Ownership	8.9	Renaissance Health Service Corporation	N	
		0	41-2177193				Renaissance Holding Company	MI	NIA	Delta Dental of Kentucky, Inc.	Ownership	5.9	Renaissance Health Service Corporation	Y	
		0	41-2177193				Renaissance Holding Company	MI	NIA	Delta Dental Plan of New Mexico, Inc.	Ownership	4.0	Renaissance Health Service Corporation	Y	
		0	41-2177193				Renaissance Holding Company	MI	NIA	Delta Dental Plan of Arkansas, Inc.	Ownership	13.2	Renaissance Health Service Corporation	N	
	477 Renaissance Health Service Corporation	61700	47-0397286				Renaissance Life & Health Insurance Company of America	IN	IA	Renaissance Holding Company	Ownership	100.0	Renaissance Health Service Corporation	N	
		0	32-0485124				RGL Agency, LLC	IN	NIA	Renaissance Life & Health Insurance Company of America	Ownership	100.0	Renaissance Health Service Corporation	N	
	477 Renaissance Health Service Corporation	15638	13-4098096				Renaissance Life & Health Insurance Company of New York	NY	IA	Renaissance Holding Company	Ownership	100.0	Renaissance Health Service Corporation	N	
		0	46-4534401				DNS Holding Company, LLC	MI	NIA	Renaissance Holding Company	Ownership	100.0	Renaissance Health Service Corporation	N	
		0	32669999				Dansk Tandforsikring Administration ApS	DK	NIA	DNS Holding Company, LLC	Ownership	82.8	Renaissance Health Service Corporation	N	
		0	35804161				Global Dental Company A/S	DK	NIA	DNS Holding Company, LLC	Ownership	100.0	Renaissance Health Service Corporation	N	
		0	26-2403888				Tesia Clearinghouse, LLC	MI	NIA	Renaissance Electronic Services, LLC	Ownership	100.0	Renaissance Health Service Corporation	N	
		0	38-3638865				Renaissance Electronic Services, LLC	MI	NIA	Renaissance Holding Company	Ownership	100.0	Renaissance Health Service Corporation	N	
		0	01-0862825				Renaissance Dental Network, LLC	MI	NIA	Renaissance Electronic Services, LLC	Ownership	100.0	Renaissance Health Service Corporation	N	
	477 Renaissance Health Service Corporation	54305	38-1791480				Delta Dental Plan of Michigan, Inc.	MI	UDP	Renaissance Health Service Corporation	Board of Directors		Renaissance Health Service Corporation	N	
	477 Renaissance Health Service Corporation	54402	31-0685339				Delta Dental Plan of Ohio, Inc.	OH	RE	Delta Dental Plan of Michigan, Inc.	Board of Directors		Renaissance Health Service Corporation	N	
	477 Renaissance Health Service Corporation	52634	35-1545647				Delta Dental Plan of Indiana, Inc.	IN	IA	Delta Dental Plan of Michigan, Inc.	Board of Directors		Renaissance Health Service Corporation	N	
		0	38-2337000				Delta Dental Fund dba Delta Dental Foundation	MI	NIA	Delta Dental Plan of Michigan, Inc.	Board of Directors		Renaissance Health Service Corporation	N	
		0	46-2667997				Red Cedar Investment Management, LLC	MI	NIA	GLM Holding Company	Board of Directors		Renaissance Health Service Corporation	N	
		0	47-2557772				GLM Holding Company	MI	NIA	Delta Dental Plan of Michigan, Inc.	Ownership	75.0	Renaissance Health Service Corporation	Y	
		0	47-2557772				GLM Holding Company	MI	NIA	Delta Dental Plan of Ohio, Inc.	Ownership	25.0	Renaissance Health Service Corporation	Y	
		0	38-3300595				Dewpoint, Inc.	MI	NIA	GLM Holding Company	Ownership	100.0	Renaissance Health Service Corporation	N	

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.

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

RESPONSE
No

Explanations:

Bar Codes:

Medicare Part D Coverage Supplement



54402201836500002

2018

Document Code: 365

OVERFLOW PAGE FOR WRITE-INS

STATEMENT AS OF **June 30, 2018** OF THE **DELTA DENTAL PLAN OF OHIO, INC.**
SCHEDULE A - VERIFICATION

Real Estate		
	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		
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 the end of current period (Lines 1 + 2 + 3 + 4 - 5 + 6 - 7 - 8)		
10. Deduct total nonadmitted amounts		
11. Statement value at end of current period (Line 9 minus Line 10)		

SCHEDULE B - VERIFICATION

Mortgage Loans		
	1	2
	Year To Date	Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year		
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		
9. Total foreign exchange change in book value/recorded investment		
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)		
12. Total valuation allowance		
13. Subtotal (Line 11 plus Line 12)		
14. Deduct total nonadmitted amounts		
15. Statement value at end of current period (Line 13 minus Line 14)		

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets		
	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	750,000	1,250,000
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase (decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		500,000
8. Deduct amortization of premium and depreciation		
9. Total foreign exchange change in book/adjusted carrying value		
10. Deduct current year's other-than-temporary impairment recognized		
11. Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 + 6 - 7 - 8 + 9 - 10)	750,000	750,000
12. Deduct total nonadmitted amounts		108,074
13. Statement value at end of current period (Line 11 minus Line 12)	750,000	641,926

SCHEDULE D - VERIFICATION

Bonds and Stocks		
	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	194,385,618	163,481,897
2. Cost of bonds and stocks acquired	34,598,684	64,800,573
3. Accrual of discount	84,554	56,916
4. Unrealized valuation increase (decrease)	(1,009,383)	8,715,679
5. Total gain (loss) on disposals	756,130	1,619,712
6. Deduct consideration for bonds and stocks disposed of	26,567,074	44,064,613
7. Deduct amortization of premium	183,762	224,546
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)	202,064,767	194,385,618
12. Deduct total nonadmitted amounts		
13. Statement value at end of current period (Line 11 minus Line 12)	202,064,767	194,385,618

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

NAIC Designation	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)	56,714,289	3,701,120	2,914,546	(189,076)	56,714,289	57,311,787		57,890,427
2. NAIC 2 (a)	21,214,045		711,977	(8,871)	21,214,045	20,493,197		16,353,466
3. NAIC 3 (a)								
4. NAIC 4 (a)	879,266			(5,750)	879,266	873,516		1,486,300
5. NAIC 5 (a)	34,801		1,067	(77)	34,801	33,657		36,111
6. NAIC 6 (a)								
7. Total Bonds	78,842,401	3,701,120	3,627,590	(203,774)	78,842,401	78,712,157		75,766,304
PREFERRED STOCK								
8. NAIC 1								
9. NAIC 2	84,840				84,840	84,840		85,640
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock	84,840				84,840	84,840		85,640
15. Total Bonds & Preferred Stock	78,927,241	3,701,120	3,627,590	(203,774)	78,927,241	78,796,997		75,851,944

(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 \$.....799,196; NAIC 2 \$.....0; NAIC 3 \$.....0; NAIC 4 \$.....0; NAIC 5 \$.....0; NAIC 6 \$.....0

SCHEDULE DA - PART 1

Short - Term Investments

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

NONE

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		3,862,526
2.	Cost of short-term investments acquired		31,829,538
3.	Accrual of discount		
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals		35,692,064
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)		
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)		

SI04 Schedule DB - Part A Verification NONE

SI04 Schedule DB - Part B Verification NONE

SI05 Schedule DB Part C Section 1 NONE

SI06 Schedule DB Part C Section 2 NONE

SI07 Schedule DB - Verification NONE

SCHEDULE E - PART 2 - VERIFICATION
(Cash Equivalents)

		1	2
		Year To Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year	6,562,834	
2.	Cost of cash equivalents acquired	22,288,700	6,562,662
3.	Accrual of discount	2,872	172
4.	Unrealized valuation increase (decrease)		
5.	Total gain (loss) on disposals	4	
6.	Deduct consideration received on disposals	25,790,217	
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)	3,064,193	6,562,834
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)	3,064,193	6,562,834

E01 Schedule A Part 2 NONE

E01 Schedule A Part 3 NONE

E02 Schedule B Part 2 NONE

E02 Schedule B Part 3 NONE

E03 Schedule BA Part 2 NONE

E03 Schedule BA Part 3 NONE

SCHEDULE D - PART 3

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

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
Bonds - U.S. Governments									
38379UJ98 ..	GNMA REMIC TRUST 2016-127		04/24/2018 ..	PERSHING	X X X	106,228		891	1
38379UGS9 ..	GNMA REMIC TRUST 2016-34		06/19/2018 ..	PERSHING	X X X	11,999		89	1
38379UNY8 ..	GNMA REMIC TRUST 2016-52		04/17/2018 ..	BETZOLD BERG & NUSSBAUM INC	X X X	64,837		446	1
38379USK3 ..	GNMA REMIC TRUST 2016-67		04/06/2018 ..	PERSHING	X X X	113,184		445	1
9128283F5 ..	UNITED STATES TREAS NTS		06/22/2018 ..	VARIOUS	X X X	587,908	625,000	4,857	1
9128283U2 ..	UNITED STATES TREAS NTS		04/01/2018 ..	FIRST TN SECURITIES, CORP	X X X	188,464	190,000	760	1
9128283V0 ..	UNITED STATES TREAS NTS		04/01/2018 ..	Goldman Sachs	X X X	29,667	30,000	126	1
9128284D9 ..	UNITED STATES TREAS NTS		04/26/2018 ..	MERRILL LYNCH	X X X	295,664	300,000	553	1
912828J27 ..	UNITED STATES TREAS NTS		05/31/2018 ..	MERRILL LYNCH	X X X	577,502	600,000		1
0599999 Subtotal - Bonds - U.S. Governments					X X X	1,975,453	1,745,000	8,167	X X X
Bonds - U.S. Special Revenue, Special Assessment									
31418CR97 ..	FNMA PASS-THRU LNG 30 YEAR		06/01/2018 ..	Bank of America	X X X	161,354	157,876	211	1
3199999 Subtotal - Bonds - U.S. Special Revenue, Special Assessment					X X X	161,354	157,876	211	X X X
Bonds - Industrial and Miscellaneous (Unaffiliated)									
256746AF5 ..	DOLLAR TREE INC		05/09/2018 ..	MERRILL LYNCH	X X X	158,635	160,000	362	1FE
406216BG5 ..	HALLIBURTON CO		05/09/2018 ..	MERRILL LYNCH	X X X	290,714	295,000	5,480	1FE
70069FCW5 ..	PARK PLACE SECS 2004-MHQ1		04/18/2018 ..	GUGGENHEIM CAPITAL MARKETS LLC	X X X	77,171	77,123	160	FMR
931142EC3 ..	WALMART INC		06/22/2018 ..	Bank of America	X X X	104,602	105,000		1FE
3899999 Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)					X X X	631,122	637,123	6,002	X X X
Bonds - Hybrid Securities									
369604BQ5 ..	GENERAL ELECTRIC CO PERP SR GL		06/27/2018 ..	Bank of America	X X X	211,238	215,000	418	1FE
4899999 Subtotal - Bonds - Hybrid Securities					X X X	211,238	215,000	418	X X X
8399997 Subtotal - Bonds - Part 3					X X X	2,979,167	2,754,998	14,798	X X X
8399998 Summary Item from Part 5 for Bonds (N/A to Quarterly)					X X X	X X X	X X X	X X X	X X X
8399999 Subtotal - Bonds					X X X	2,979,167	2,754,998	14,798	X X X
8999998 Summary Item from Part 5 for Preferred Stocks (N/A to Quarterly)					X X X	X X X	X X X	X X X	X X X
8999999 Subtotal - Preferred Stocks					X X X		X X X		X X X
Common Stocks - Industrial and Miscellaneous (Unaffiliated)									
056752108 ..	BAIDU INC	C	05/31/2018 ..	MERRILL LYNCH	33.000	8,054	X X X		L
344419106 ..	FOMENTO ECONOMICO MEXICANO SAB	C	05/21/2018 ..	MERRILL LYNCH	82.000	6,852	X X X		L
58502K106 ..	MEDIOBANCA BANCA DI CREDITO FI	C	05/31/2018 ..	MERRILL LYNCH	1,436.000	14,720	X X X		U
024013104 ..	AMERICAN ASSETS TR INC		05/29/2018 ..	MERRILL LYNCH	196.000	6,971	X X X		L
024835100 ..	AMERICAN CAMPUS CMNTYS INC		05/25/2018 ..	MERRILL LYNCH	166.000	6,402	X X X		L
053484101 ..	AVALONBAY CMNTYS INC		05/25/2018 ..	MERRILL LYNCH	31.000	5,011	X X X		L
101121101 ..	BOSTON PROPERTIES INC		04/16/2018 ..	MERRILL LYNCH	19.000	2,286	X X X		L
23283R100 ..	CYRUSONE INC		05/25/2018 ..	MERRILL LYNCH	95.000	5,104	X X X		L
264411505 ..	DUKE REALTY CORP		05/25/2018 ..	MERRILL LYNCH	478.000	12,547	X X X		L
29472R108 ..	EQUITY LIFESTYLE PPTYS INC		05/25/2018 ..	MERRILL LYNCH	50.000	4,418	X X X		L
29476L107 ..	EQUITY RESIDENTIAL		05/25/2018 ..	MERRILL LYNCH	84.000	5,179	X X X		L
40414L109 ..	HCP INC		05/25/2018 ..	MERRILL LYNCH	1,476.000	34,151	X X X		L
42225P501 ..	HEALTHCARE TR AMER INC		05/25/2018 ..	MERRILL LYNCH	398.000	10,015	X X X		L
46115H107 ..	INTESA SANPAOLO SPON ADR	C	05/31/2018 ..	MERRILL LYNCH	518.000	9,195	X X X		U
609207105 ..	MONDELEZ INTL INC		05/18/2018 ..	MERRILL LYNCH	127.000	5,024	X X X		L
720190206 ..	PIEDMONT OFFICE REALTY TR INC		05/25/2018 ..	MERRILL LYNCH	224.000	4,190	X X X		L
862121100 ..	STORE CAP CORP		05/25/2018 ..	MERRILL LYNCH	194.000	5,105	X X X		L
875465106 ..	TANGER FACTORY OUTLET CTRS INC		05/25/2018 ..	MERRILL LYNCH	70.000	1,472	X X X		L

SCHEDULE D - PART 3

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

1	2	3	4	5	6	7	8	9	10
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation or Market Indicator (a)
922908553	VANGUARD INDEX FDS REIT ETF		06/27/2018 ..	DIVIDEND REINVESTMENT	14,810.000	1,201,091	X X X		L
925652109	VICI PPTYS INC		05/25/2018 ..	MERRILL LYNCH	338.000	6,739	X X X		L
95040Q104	WELLTOWER INC COM		04/16/2018 ..	MERRILL LYNCH	88.000	4,600	X X X		L
683715106	OPEN TEXT CORP	C	06/05/2018 ..	MERRILL LYNCH	221.000	7,816	X X X		L
02341R302	AMCOR LTD	C	05/10/2018 ..	MERRILL LYNCH	104.000	4,293	X X X		U
66987V109	NOVARTIS A G	C	06/25/2018 ..	MERRILL LYNCH	172.000	12,944	X X X		L
226718104	CRITEO SA SPON A D R	C	04/09/2018 ..	MERRILL LYNCH	640.000	17,332	X X X		L
307305102	FANUC CORPORATION	C	05/23/2018 ..	MERRILL LYNCH	677.000	14,716	X X X		L
443251103	HOYA CORP	C	06/08/2018 ..	MERRILL LYNCH	845.000	50,262	X X X		U
485537401	KAO CORP	C	05/01/2018 ..	MERRILL LYNCH	1,665.000	23,904	X X X		L
010199305	AKZO NOBEL NV	C	04/06/2018 ..	MERRILL LYNCH	564.000	18,020	X X X		L
456837103	ING GROEP N V	C	06/25/2018 ..	MERRILL LYNCH	357.000	5,206	X X X		L
9099999 Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated)					X X X	1,513,619	X X X		X X X
Common Stocks - Mutual Funds									
057071870	BAIRD CORE PLUS BOND FUND		06/22/2018 ..	DIVIDEND REINVESTMENT	3,613.311	39,216	X X X		U
057071409	BAIRD SHORT TERM BOND FUND		06/22/2018 ..	DIVIDEND REINVESTMENT	2,847.301	27,201	X X X		U
233203827	DFA INVT DIMENSIONS GROUP INC		04/01/2018 ..	DIVIDEND REINVESTMENT	312.097	11,691	X X X		U
233203843	DFA INVT DIMENSIONS GROUP INC		04/01/2018 ..	Bank of America	181.562	6,344	X X X		U
25434D203	DIMENSIONAL INVT GROUP INC		05/15/2018 ..	Bank of America	109,680.496	2,300,000	X X X		L
31420B300	FEDERATED INSTL TR		06/01/2018 ..	DIVIDEND REINVESTMENT	3,820.653	37,163	X X X		U
54400N409	LORD ABBETT HIGH YIELD FD		06/01/2018 ..	DIVIDEND REINVESTMENT	5,159.933	38,736	X X X		L
808524805	SCHWAB INTL EQUITY		06/27/2018 ..	DIVIDEND REINVESTMENT	86,025.000	2,853,449	X X X		L
922908785	VANGAURD SMALL CAP VALUE INDEX		06/21/2018 ..	DIVIDEND REINVESTMENT	216.450	7,179	X X X		U
921937777	VANGUARD BD INDEX FD INC		04/01/2018 ..	DIVIDEND REINVESTMENT	0.272	3	X X X		U
921937504	VANGUARD BOND INDEX FUND INC		06/01/2018 ..	DIVIDEND REINVESTMENT	5,217.570	54,586	X X X		L
921921300	VANGUARD FENWAY FDS		06/15/2018 ..	DIVIDEND REINVESTMENT	252.070	19,445	X X X		U
922908850	VANGUARD INDEX FDS		06/21/2018 ..	DIVIDEND REINVESTMENT	400.030	16,317	X X X		U
922040100	VANGUARD INSTL INDEX FD		06/15/2018 ..	DIVIDEND REINVESTMENT	209.580	53,076	X X X		U
922908819	VANGUARD SMALL CAP GROWTH INDEX		06/21/2018 ..	DIVIDEND REINVESTMENT	53.130	2,694	X X X		U
921908869	VANGUARD SPECIALIZED PORTFOLIO		06/28/2018 ..	DIVIDEND REINVESTMENT	30,527.270	542,737	X X X		U
921909784	VANGUARD STAR FD		06/21/2018 ..	DIVIDEND REINVESTMENT	384.790	44,735	X X X		U
9299999 Subtotal - Common Stocks - Mutual Funds					X X X	6,054,572	X X X		X X X
9799997 Subtotal - Common Stocks - Part 3					X X X	7,568,191	X X X		X X X
9799998 Summary Item from Part 5 for Common Stocks (N/A to Quarterly)					X X X	X X X	X X X	X X X	X X X
9799999 Subtotal - Common Stocks					X X X	7,568,191	X X X		X X X
9899999 Subtotal - Preferred and Common Stocks					X X X	7,568,191	X X X		X X X
9999999 Total - Bonds, Preferred and Common Stocks					X X X	10,547,358	X X X	14,798	X X X

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues17.

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

[illegible]

SCHEDULE D - PART 4
Show All Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed of
During the Current Quarter

1	2	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 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	22 NAIC Designation or Market Indicator (a)
										11 Unrealized Valuation Increase/ (Decrease)	12 Current Year's (Amortization)/ 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.							
9299999 Subtotal - Common Stocks - Mutual Funds					... X X X ...	 608,261	... X X X ...	 477,473	 600,681	 (123,211)			 (123,211)		 477,473		 130,788	 130,788	 3	.. X X X .	.. X X X .
9799997 Subtotal - Common Stocks - Part 4					... X X X ...	 6,958,023	... X X X ...	 6,087,298	 6,494,438	 (1,066,603)			 (1,066,603)		 6,087,298		 870,731	 870,731	 110,661	.. X X X .	.. X X X .
9799998 Summary Item from Part 5 for Common Stocks (N/A to Quarterly)					... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ..	... X X X ...	... X X X ...	... X X X ...	... X X X ...	... X X X ...	.. X X X .	.. X X X .
9799999 Subtotal - Common Stocks					... X X X ...	 6,958,023	... X X X ...	 6,087,298	 6,494,438	 (1,066,603)			 (1,066,603)		 6,087,298		 870,731	 870,731	 110,661	.. X X X .	.. X X X .
9899999 Subtotal - Preferred and Common Stocks					... X X X ...	 6,958,023	... X X X ...	 6,087,298	 6,494,438	 (1,066,603)			 (1,066,603)		 6,087,298		 870,731	 870,731	 110,661	.. X X X .	.. X X X .
9999999 Total - Bonds, Preferred and Common Stocks					... X X X ...	 9,224,228	... X X X ...	 8,389,548	 8,137,134	... (1,066,603)	 (12,904)		... (1,079,507)		 8,367,209		 854,823	 854,823	 154,002	.. X X X .	.. X X X .

(a) For all common stock bearing the NAIC market indicator "U" provide: the number of such issues32.

E06 Schedule DB Part A Section 1 NONE

E07 Schedule DB Part B Section 1 NONE

E08 Schedule DB Part D Section 1 NONE

E09 Schedule DB Part D Section 2 - Collateral Pledged By Reporting Entity NONE

E09 Schedule DB Part D Section 2 - Collateral Pledged To Reporting Entity NONE

E10 Schedule DL - Part 1 - Securities Lending Collateral Assets NONE

E11 Schedule DL - Part 2 - Securities Lending Collateral Assets NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1			2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
Depository			Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date	6	7	8	*
							First Month	Second Month	Third Month	
open depositories										
Fifth Third Admin	Cincinnati, OH						(1,065,734)	(1,073,226)	(1,063,214)	X X X
Fifth Third Claims Checking	Cincinnati, OH						(15,240,814)	(13,565,329)	(13,065,073)	X X X
Fifth Third Control Account	Cincinnati, OH						5,831,064	7,388,485	4,606,055	X X X
Fifth Third Prefunds	Cincinnati, OH						211,200	211,200	211,200	X X X
Fifth Third Receipts Groups	Cincinnati, OH							119	1,418,678	X X X
Bank of America Receipts Indiv	Chicago, IL						71,484	537,188	1,016,893	X X X
Wells Fargo BOD Deferred Comp	Chicago, IL						559,381	559,090	567,238	X X X
First Premier Bank	Sioux Falls, SD						48,426	48,386	48,346	X X X
0199998 Deposits in0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - open depositories ..			X X X	X X X						X X X
0199999 Totals - Open Depositories			X X X	X X X			(9,584,993)	(5,894,087)	(6,259,877)	X X X
0299998 Deposits in0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - suspended depositories			X X X	X X X						X X X
0299999 Totals - Suspended Depositories			X X X	X X X						X X X
0399999 Total Cash On Deposit			X X X	X X X			(9,584,993)	(5,894,087)	(6,259,877)	X X X
0499999 Cash in Company's Office			X X X	X X X	X X X	X X X				X X X
0599999 Total Cash			X X X	X X X			(9,584,993)	(5,894,087)	(6,259,877)	X X X

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8	9
Cusip	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book/Adjusted Carrying Value	Amount of Interest Due & Accrued	Amount Received During Year
Bonds - U.S. Governments - Issuer Obligations								
	UNITED STATES TREAS NTS		06/27/2018 ...	1.000	08/15/2018 ...	799,196	3,006	71
0199999	Subtotals - Bonds - U.S. Governments - Issuer Obligations					799,196	3,006	71
0599999	Subtotals - Bonds - U.S. Governments					799,196	3,006	71
7799999	Subtotals - Bonds - Total Bonds - Issuer Obligations					799,196	3,006	71
7899999	Subtotals - Bonds - Total Bonds - Residential Mortgage-Backed Securities							
7999999	Subtotals - Bonds - Total Bonds - Commercial Mortgage-Backed Securities							
8099999	Subtotals - Bonds - Total Bonds - Other Loan-Backed and Structured Securities							
8199999	Subtotals - Bonds - SVO Identified Funds							
8399999	Subtotals - Bonds - Total Bonds					799,196	3,006	71
8499999	Subtotals - Sweep Accounts							
Exempt Money Market Mutual Funds - as Identified by SVO								
316175108	FIDELITY INSTL GOVT FUND		06/28/2018 ...	0.250	X X X	1,713,373	303	25,661
8599999	Subtotals - Exempt Money Market Mutual Funds - as Identified by SVO					1,713,373	303	25,661
8699999	Subtotals - All Other Money Market Mutual Funds							
Other Cash Equivalents								
	BBIF MONEY FUND		05/16/2018 ...	0.000		551,624		490
8799999	Subtotals - Other Cash Equivalents					551,624		490
8899999	Total - Cash Equivalents					3,064,193	3,309	26,222

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