

# QUARTERLY STATEMENT

OF THE

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OFFICE OF RISK  
ASSESSMENT

# Ohio Bankers Benefits Trust

Of

in the state of

Ohio

to the Insurance Department

of the State of Ohio

For the Period Ended

June 30, 2019

2019

OHIO DEPT. OF INSURANCE  
2019 AUG 15 PM 3:24  
RESOURCE MANAGEMENT



# HEALTH QUARTERLY STATEMENT

As of June 30, 2019  
of the Condition and Affairs of the

## Ohio Bankers Benefits Trust

NAIC Group Code..... N/A  
(Current Period) (Prior Period)

Organized under the Laws of Ohio

Licensed as Business Type MEWA

Incorporated/Organized.....1997

Statutory Home Office

4215 Worth Avenue, Suite 300, Columbus, Ohio 43219  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office

Same  
(Street and Number) (City or Town, State, Country and Zip Code)

Mail Address

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

Primary Location of Books and Records

Same  
(Street and Number) (City or Town, State, Country and Zip Code)

Internet Web Site Address

Jeff Quayle  
(Name)  
jquayle@ohiobankersleauge.com  
(E-Mail Address)

Statutory Statement Contact

Employer's ID Number..... 31-1306485

Country of Domicile USA

Is HMO Federally Qualified? Yes [ ] No [ ] N/A

Commenced Business..... 1997

614-340-7595  
(Area Code) (Telephone Number)

614-340-7595  
(Area Code) (Telephone Number)

614-340-7603  
(Area Code) (Telephone Number) (Extension)

614-340-7599  
(Fax Number)

### OFFICERS

1. Name

Title

Name

Title

2.

3.

4.

### OTHER

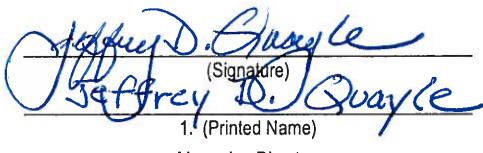
### DIRECTORS OR TRUSTEES

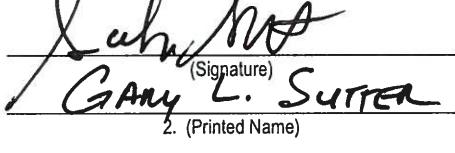
Mark Masters

Dean Miller  
Paul Reed  
Ron Zimmerly  
Lewis Renollet  
John Essen

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

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

  
(Signature)  
Jeffrey D. Quayle  
1. (Printed Name)  
Managing Director  
(Title)

  
(Signature)  
Gary L. Sutter  
2. (Printed Name)  
(Title)

(Signature)  
3. (Printed Name)  
Trustee  
(Title)

Subscribed and sworn to before me  
This 15 day of August 2019

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

Yes [ X ] No [ ]

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LYNN K. MOORE  
Notary Public, State of Ohio  
My Commission Expires 06-10-2021

08/14/2019 4:39:39 PM

**ASSETS**

	Current Statement Date			4 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds.....	5,511,458		5,511,458	6,058,818
2. Stocks:				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....	1,061,816		1,061,816	681,412
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 (\$....7,651,707), cash equivalents (\$.....0) and short-term investments (\$.....0).....	7,651,707		7,651,707	6,986,781
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).....	14,224,981	0	14,224,981	13,727,011
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	47,875		47,875	49,742
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.....			0	
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.....	376,158		376,158	
25. Aggregate write-ins for other than invested assets.....	54,142	0	54,142	108,284
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	14,703,156	0	14,703,156	13,885,037
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	14,703,156	0	14,703,156	13,885,037

**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. Prepaid runout fees.....	54,142		54,142	108,284
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).....	54,142	0	54,142	108,284

**LIABILITIES, CAPITAL AND SURPLUS**

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$.....0 reinsurance ceded).....	.....1,728,000		.....1,728,000	.....1,619,100
2. Accrued medical incentive pool and bonus amounts.....			.....0	
3. Unpaid claims adjustment expenses.....	.....195,000		.....195,000	.....105,268
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/casually unearned premium reserve.....			.....0	
7. Aggregate health claim reserves.....			.....0	
8. Premiums received in advance.....			.....0	
9. General expenses due or accrued.....	.....21,429		.....21,429	.....6,801
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).....	.....0	.....0	.....0	.....0
24. Total liabilities (Lines 1 to 23).....	.....1,944,429	.....0	.....1,944,429	.....1,731,169
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	.....12,758,727	.....12,153,868
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	.....12,758,727	.....12,153,868
34. Total liabilities, capital and surplus (Lines 24 and 33).....	.....XXX	.....XXX	.....14,703,156	.....13,885,037

**DETAILS OF WRITE-INS**

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

**STATEMENT OF REVENUE AND EXPENSES**

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member months.....	XXX.....	.....8,904	.....8,691	.....17,143
2. Net premium income (including \$.....0 non-health premium income).....	XXX.....	.....9,340,793	.....8,699,567	.....16,963,988
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.....	.....376,158	.....0	.....0
7. Aggregate write-ins for other non-health revenues.....	XXX.....	.....0	.....0	.....0
8. Total revenues (Lines 2 to 7).....	XXX.....	.....9,716,951	.....8,699,567	.....16,963,988
<b>Hospital and Medical:</b>				
9. Hospital/medical benefits.....	.....	.....6,020,984	.....7,589,772	.....16,576,356
10. Other professional services.....	.....	.....	.....	.....
11. Outside referrals.....	.....	.....	.....	.....
12. Emergency room and out-of-area.....	.....	.....	.....	.....
13. Prescription drugs.....	.....	.....2,001,247	.....1,663,805	.....3,682,105
14. Aggregate write-ins for other hospital and medical.....	.....0	.....198,632	.....176,000	.....61,600
15. Incentive pool, withhold adjustments and bonus amounts.....	.....	.....	.....	.....
16. Subtotal (Lines 9 to 15).....	.....0	.....8,220,863	.....9,429,577	.....20,320,061
<b>Less:</b>				
17. Net reinsurance recoveries.....	.....	.....80,295	.....897,625	.....3,596,684
18. Total hospital and medical (Lines 16 minus 17).....	.....0	.....8,140,568	.....8,531,952	.....16,723,377
19. Non-health claims (net).....	.....	.....	.....	.....
20. Claims adjustment expenses, including \$.....0 cost containment expenses.....	.....	.....561,435	.....372,003	.....1,549,313
21. General administrative expenses.....	.....	.....602,832	.....559,099	.....304,532
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	.....9,304,835	.....9,463,054	.....18,577,222
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	.....XXX.....	.....412,116	.....(763,487)	.....(1,613,234)
25. Net investment income earned.....	.....	.....192,743	.....141,439	.....283,366
26. Net realized capital gains (losses) less capital gains tax of \$.....0.....	.....	.....	.....	.....
27. Net investment gains or (losses) (Lines 25 plus 26).....	.....0	.....192,743	.....141,439	.....283,366
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$.....0) (amount charged off \$.....0)].....	.....	.....	.....	.....
29. Aggregate write-ins for other income or expenses.....	.....0	.....0	.....0	.....0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29).....	.....XXX.....	.....604,859	.....(622,048)	.....(1,329,868)
31. Federal and foreign income taxes incurred.....	.....XXX.....	.....	.....	.....
32. Net income (loss) (Lines 30 minus 31).....	.....XXX.....	.....604,859	.....(622,048)	.....(1,329,868)

**DETAILS OF WRITE-INS**

0601. Prescription rebate revenue.....	XXX.....	.....376,158	.....	.....
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.....	.....376,158	.....0	.....0
0701. ....	XXX.....	.....	.....	.....
0702. ....	XXX.....	.....	.....	.....
0703. ....	XXX.....	.....	.....	.....
0798. Summary of remaining write-ins for Line 7 from overflow page.....	XXX.....	.....0	.....0	.....0
0799. Totals (Lines 0701 thru 0703 plus 0798) (Line 7 above).....	XXX.....	.....0	.....0	.....0
1401. change in IBNR.....	.....	.....198,632	.....176,000	.....61,600
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	.....198,632	.....176,000	.....61,600
2901. ....	.....	.....	.....	.....
2902. ....	.....	.....	.....	.....
2903. ....	.....	.....	.....	.....
2998. Summary of remaining write-ins for Line 29 from overflow page.....	.....0	.....0	.....0	.....0
2999. Totals (Lines 2901 thru 2903 plus 2998) (Line 29 above).....	.....0	.....0	.....0	.....0

**STATEMENT OF REVENUE AND EXPENSES (Continued)**

CAPITAL AND SURPLUS ACCOUNT	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
33. Capital and surplus prior reporting year.....	12,153,868	13,483,736	13,483,736
34. Net income or (loss) from Line 32.....	604,859	(622,048)	(1,329,868)
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).....	604,859	(622,048)	(1,329,868)
49. Capital and surplus end of reporting period (Line 33 plus 48).....	12,758,727	12,861,688	12,153,868

**DETAILS OF WRITE-INS**

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

**CASH FLOW**

	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
<b>CASH FROM OPERATIONS</b>			
1. Premiums collected net of reinsurance.....	9,340,793	8,707,256	16,971,677
2. Net investment income.....	136,732	135,774	279,857
3. Miscellaneous income.....			
4. Total (Lines 1 through 3).....	9,477,525	8,843,030	17,251,534
5. Benefit and loss related payments.....	9,037,433	9,284,859	18,663,667
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).....	9,037,433	9,284,859	18,663,667
11. Net cash from operations (Line 4 minus Line 10).....	440,092	(441,829)	(1,412,133)
<b>CASH FROM INVESTMENTS</b>			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	896,975		550,000
12.2 Stocks.....	2,243,766	617,082	1,372,977
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).....	3,140,741	617,082	1,922,977
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	351,886	346,788	496,688
13.2 Stocks.....	2,564,021	621,323	1,892,905
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).....	2,915,907	968,111	2,389,593
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).....	224,834	(351,029)	(466,616)
<b>CASH FROM FINANCING AND MISCELLANEOUS SOURCES</b>			
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
<b>RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS</b>			
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	664,926	(792,858)	(1,878,749)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	6,986,781	8,865,530	8,865,530
19.2 End of period (Line 18 plus Line 19.1).....	7,651,707	8,072,672	6,986,781

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 Dental Only	7 Federal Employees Health Benefit Plan	8 Title XVIII Medicare	9 Title XIX Medicaid	10 Other
<b>Total Members at End of:</b>											
1. Prior Year.....		2,374	1,419								
2. First Quarter.....		2,485	1,479								
3. Second Quarter.....		2,540	1,500								
4. Third Quarter.....		0									
5. Current Year.....		0									
6. Current Year Member Months.....		0									
<b>Total Member Ambulatory Encounters for Period:</b>											
7. Physician.....		0									
8. Non-Physician.....		0									
9. Total.....		0	0	0	0	0	0	0	0	0	0
10. Hospital Patient Days Incurred.....		0									
11. Number of Inpatient Admissions.....		0									
12. Health Premiums Written (a).....		9,340,793		9,340,793							
13. Life Premiums Direct.....		0									
14. Property/Casualty Premiums Written.....		0									
15. Health Premiums Earned.....		9,340,793		9,340,793							
16. Property/Casualty Premiums Earned.....		0									
17. Amount Paid for Provision of Health Care Services.....											
18. Amount Incurred for Provision of Health Care Services.....		8,220,863		8,220,863							

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

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

**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
	1 On Claims incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid December 31 of Prior Year		
1. Comprehensive (hospital and medical).....	1,378,369		212,131	1,485,869	1,590,500
2. Medicare Supplement.....					0
3. Dental only.....	24,355	276,630		30,000	24,355
4. Vision only.....					0
5. Federal Employees Health Benefits Plan.....					0
6. Title XVIII - Medicare.....					0
7. Title XIX - Medicaid.....					0
8. Other health.....					0
9. Health subtotal (Lines 1 to 8).....	1,402,724	6,866,883	212,131	1,515,869	1,614,855
10. Healthcare receivables (a).....					0
11. Other non-health.....					0
12. Medical incentive pools and bonus amounts.....					0
13. Totals (Lines 9+10+11+12).....	1,402,724	6,866,883	212,131	1,515,869	1,614,855
					1,619,100

(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. Investments are reported as described below. Purchases of 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.

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 on short-term investments from date of purchase through year-end is included in accrued income.

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

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

**Note 2 – Accounting Changes and Corrections of Errors**

None

**Note 3 – Business Combinations and Goodwill**

None

**Note 4 – Discontinued Operations**

None

**Note 5 – Investments**

Cash and cash equivalents included as admitted assets at June 30, 2019 and 2018 were as follows.

	<u>2019</u>	<u>2018</u>
Checking account – Huntington National Bank	\$ 146,563	\$ 250,000
US Treasury Money Fund – Huntington National Bank	8	1,421,910
Checking account - LCNB National Bank	908,330	0
Certificates of Deposit	<u>6,596,806</u>	<u>6,400,762</u>
Total cash and cash equivalents	<u>\$ 7,651,707</u>	<u>\$ 8,072,672</u>

The Plan's investments are held by a bank serving as the investment agent for the Plan.

	<u>2019</u>	<u>2018</u>
Fixed income securities		
US Treasury Obligations	\$ 1,825,168	\$ 1,970,316
US Government Agencies	2,958,106	3,609,793
Corporate Bonds	728,184	880,453
Total fixed income securities	<u>\$ 5,511,458</u>	<u>\$ 6,460,562</u>
Money market mutual funds		
First Merit Private Bank Cash account	<u>\$ 330,238</u>	<u>\$ 542,011</u>
Stock and mutual fund equity holdings		
Various holdings w/ Huntington National Bank	<u>\$ 731,578</u>	<u>\$ 0</u>

## **NOTES TO FINANCIAL STATEMENTS**

### **Note 6 – Joint Ventures, Partnerships and Limited Liability Companies**

None

### **Note 7 – Investment Income**

No significant changes

### **Note 8 – Derivative Instruments**

None

### **Note 9 – Income Taxes**

No significant changes

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

The participating employers of the Plan pay directly to OBL Bank Services, Inc. a 5% administrative fee. The amount totaled \$492,775 through June 30, 2019 and was included in the premium earned and claims adjustment expenses reported.

### **Note 11 – Debt**

None

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

None

### **Note 13 – Capital and Surplus, Shareholder's Dividend Restrictions and Quasi-Reorganizations**

None

### **Note 14 – Liabilities, Contingencies and Assessments**

No significant changes

### **Note 15 – Leases**

None

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

None

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

None

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

None

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

None

### **Note 20 – Fair Value Measurements**

See Note 1 above

### **Note 21 – Other Items**

No significant changes

### **Note 22 – Events Subsequent**

Subsequent events have been considered through August 14, 2019 for these statutory reports which are to be issued on August 14, 2019. There were no events occurring subsequent to the end of the quarter that merited recognition or disclosure in these statements.

### **Note 23 – Reinsurance**

A stop loss insurance policy is carried by the Plan, with Community Insurance Company, for claims incurred during the year on a claimant in excess of \$300,000 annually. After a claim(s) exceed the stop loss ceiling, the stop loss carrier pays the remainder of the claim on behalf of the Plan. Claims totaling \$80,295 were paid during the current year by the stop loss carrier on behalf of the Plan. These amounts, if any, are reflected on page 4 of the annual report. In addition to stop loss coverage for specific claims, the Plan also carried aggregate stop loss coverage at 125% of prior year's claims.

### **Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination**

None

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## **NOTES TO FINANCIAL STATEMENTS**

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### **Note 25 – Change in Incurred Losses and Loss Adjustment Expenses**

The amount incurred but unpaid claims reserves as of June 30, 2019 and 2018 was based on a study completed by the Plan's actuary and included estimated IBNR of \$1,728,000 and LAE of \$195,000 for 2nd quarter 2019 and IBNR of \$1,733,500 and LAE of \$130,000 for 2nd quarter 2018.

### **Note 26 – Intercompany Pooling Arrangements**

None

### **Note 27 – Structured Settlements**

Not Applicable for Health Companies

### **Note 28 – Health Care Receivables**

None

### **Note 29 – Participating Policies**

None

### **Note 30 – Premium Deficiency Reserves**

None

### **Note 31 – Anticipated Salvage and Subrogation**

None

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

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

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

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

2.2 If yes, date of change: \_\_\_\_\_

3.1 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 ]  
If yes, complete and file the merger history data file with the NAIC for the annual filing corresponding to this period.

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?  
If yes, attach an explanation.

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

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.  5/17/2018

6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).  5/17/2018

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 [ ]  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 [ ]

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 [ ]

14.2 If yes, please complete the following:

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

1 Prior Year End Book/Adjusted Carrying Value	2 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 [X]

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

If no, attach a description with this statement.

16. 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
Huntington National Bank	106 S. Main Street, Akron, Ohio 44308

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
Huntington National Bank - Toby Blossom	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 [ ] No [X]

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
#2305 Huntington National Bank	Huntington National Bank - Toby Blossom	31-0966785	OCC	DS

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:

## **GENERAL INTERROGATORIES**

### **PART 1 - COMMON INTERROGATORIES**

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:

- a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- 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 5GI securities?

Yes [ ] No [X]

20. By self-designating PLGI securities, the reporting entity is certifying the following elements for each self-designated PLGI security:

- a. The security was purchased prior to January 1, 2018.
- b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
- d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities?

Yes [ ] No [X]

**GENERAL INTERROGATORIES (continued)****PART 2 - HEALTH**

## 1. Operating Percentages:

1.1 A&H loss percent .....	88.0 %
1.2 A&H cost containment percent .....	0.0 %
1.3 A&H expense percent excluding cost containment expenses .....	12.5 %

2.1 Do you act as a custodian for health savings accounts? .....	Yes [ ]	No [ X ]
2.2 If yes, please provide the amount of custodial funds held as of the reporting date.		0
2.3 Do you act as an administrator for health savings accounts? .....	Yes [ ]	No [ X ]
2.4 If yes, please provide the amount of funds administered as of the reporting date.		0
3. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?.....	Yes [ X ]	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 of the reporting entity?.....	Yes [ ]	No [ ]

**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
<b>A&amp;H Non-Affiliates</b>								
10345.....	31-1440175.....	01/01/2019	Community Insurance Company.....	OH.....	SSL/G.....	Authorized.....	.....	.....

# Ohio Bankers Benefits Trust

## 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 ..N..							0	
2. Alaska.....	AK ..N..							0	
3. Arizona.....	AZ ..N..							0	
4. Arkansas.....	AR ..N..							0	
5. California.....	CA ..N..							0	
6. Colorado.....	CO ..N..							0	
7. Connecticut.....	CT ..N..							0	
8. Delaware.....	DE ..N..							0	
9. District of Columbia.....	DC ..N..							0	
10. Florida.....	FL ..N..							0	
11. Georgia.....	GA ..N..							0	
12. Hawaii.....	HI ..N..							0	
13. Idaho.....	ID ..N..							0	
14. Illinois.....	IL ..N..							0	
15. Indiana.....	IN ..N..							0	
16. Iowa.....	IA ..N..							0	
17. Kansas.....	KS ..N..							0	
18. Kentucky.....	KY ..N..							0	
19. Louisiana.....	LA ..N..							0	
20. Maine.....	ME ..N..							0	
21. Maryland.....	MD ..N..							0	
22. Massachusetts.....	MA ..N..							0	
23. Michigan.....	MI ..N..							0	
24. Minnesota.....	MN ..N..							0	
25. Mississippi.....	MS ..N..							0	
26. Missouri.....	MO ..N..							0	
27. Montana.....	MT ..N..							0	
28. Nebraska.....	NE ..N..							0	
29. Nevada.....	NV ..N..							0	
30. New Hampshire.....	NH ..N..							0	
31. New Jersey.....	NJ ..N..							0	
32. New Mexico.....	NM ..N..							0	
33. New York.....	NY ..N..							0	
34. North Carolina.....	NC ..N..							0	
35. North Dakota.....	ND ..N..							0	
36. Ohio.....	OH ..L..	9,340,793						9,340,793	
37. Oklahoma.....	OK ..N..							0	
38. Oregon.....	OR ..N..							0	
39. Pennsylvania.....	PA ..N..							0	
40. Rhode Island.....	RI ..N..							0	
41. South Carolina.....	SC ..N..							0	
42. South Dakota.....	SD ..N..							0	
43. Tennessee.....	TN ..N..							0	
44. Texas.....	TX ..N..							0	
45. Utah.....	UT ..N..							0	
46. Vermont.....	VT ..N..							0	
47. Virginia.....	VA ..N..							0	
48. Washington.....	WA ..N..							0	
49. West Virginia.....	WV ..L..							0	
50. Wisconsin.....	WI ..N..							0	
51. Wyoming.....	WY ..N..							0	
52. American Samoa.....	AS ..N..							0	
53. Guam.....	GU ..N..							0	
54. Puerto Rico.....	PR ..N..							0	
55. U.S. Virgin Islands.....	VI ..N..							0	
56. Northern Mariana Islands.....	MP ..N..							0	
57. Canada.....	CAN ..N..							0	
58. Aggregate Other alien.....	OT ..XXX..	0	0	0	0	0	0	0	0
59. Subtotal.....	XXX.	9,340,793	0	0	0	0	0	9,340,793	0
60. Reporting entity contributions for Employee Benefit Plans.....	XXX.							0	
61. Total (Direct Business).....	XXX.	9,340,793	0	0	0	0	0	9,340,793	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	0
58999. Total (Lines 58001 thru 58003 plus 58998) (Line 58 above).....	0	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

### PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

Group Code	Group Name	NAIC 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	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)	*
										11	12				
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

**NONE**

## **SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

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

**Response**

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

NO

**Explanation:**

1.

**Bar Code:**



## SCHEDULE A - PART 2

ZONE

## **SCHEDULE A - PART 3**

## ZONE

**SCHEDULE B - PART 2**  
**Showing all Mortgage Loans ACQUIRED AND ADDITIONS MADE During the Current Quarter**

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

**NONE**

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

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

**NONE**

**SCHEDULE BA - PART 2**

CUSIP Identification	Name or Description	Showing Other Long-Term Invested Assets ACQUIRED AND ADDITIONS MADE During the Current Quarter		Name of Vendor or General Partner	Type and Strategy	Actual Cost at Time of Acquisition	Additional Investment Made after Acquisition	Amount of Encumbrances	Commitment for Additional Investment	Percentage of Ownership		
		1	2								11	12

**NONE****SCHEDULE BA - PART 3**

CUSIP Identification	Name or Description	Showing Other Long-Term Invested Assets DISPOSED, Transferred or Repaid During the Current Quarter		Name of Purchaser or Nature of Disposal	Date Originally Acquired	Disposal Date	Book/Adjusted Carrying Value Less Encumbrances, Prior Year	Unrealized Valuation Increase (Decrease)	Current Year's Current Year's Other-Than-Temporary Impairment (Amortization) / Accretion	Capitalized Interest and Other Recognized	Deferred Interest and Other Recognized	Total Change in B/A.C.V. (9-10-11+12)	Total Foreign Exchange Change in B/A.C.V.	Book/Adjusted Carrying Value Less Encumbrances on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Investment Income		
		1	2																

**NONE**

**SCHEDULE D - PART 3****Showing all Long-Term Bonds and Stocks ACQUIRED During 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 and Administrative Symbol/Market Indicator (a)
<b>Bonds - U.S. Government</b>									
912828 U2 4 US Treasury Note.....			06/19/2019.....	Huntington Trust Company.....		200,773	200,000		1,028.....
912828 K7 4 US Treasury Note.....			06/19/2019.....	Huntington Trust Company.....		151,113	150,000		380.....
05999999. Total - Bonds - U.S. Government.....						351,886	350,000		1,408.....XXX
83999997. Total - Bonds - Part 3.....						351,886	350,000		1,408.....XXX
83999999. Total - Bonds.....						351,886	350,000		1,408.....XXX
<b>Common Stocks - Industrial and Miscellaneous</b>									
90999999. Total - Common Stocks - Industrial and Miscellaneous.....				Various.....	Huntington Trust Company.....	979,577,000	979,577	XXX	0.....XXX
90999999. Total - Common Stocks - Industrial and Miscellaneous.....						979,577	979,577	XXX	0.....XXX
<b>Common Stocks - Mutual Funds</b>									
92999999. Total - Common Stocks - Mutual Funds.....				Various.....	Huntington Trust Company.....	73,000	7,256	XXX	0.....XXX
97999997. Total - Common Stocks - Part 3.....				Various.....	Huntington Trust Company.....	23,000	6,353	XXX	0.....XXX
97999999. Total - Common Stocks.....				Various.....	Huntington Trust Company.....	50,000	8,087	XXX	0.....XXX
97999999. Total - Common Stocks.....				Various.....	Huntington Trust Company.....	35,000	7,042	XXX	0.....XXX
97999999. Total - Common Stocks.....				Various.....	Huntington Trust Company.....	53,000	9,754	XXX	0.....XXX
97999999. Total - Common Stocks.....				Various.....	Huntington Trust Company.....	101,000	8,806	XXX	0.....XXX
97999999. Total - Common Stocks.....				Various.....	Huntington Trust Company.....	81,000	8,808	XXX	0.....XXX
97999999. Total - Common Stocks.....				Various.....	Huntington Trust Company.....	52,000	8,125	XXX	0.....XXX
97999999. Total - Common Stocks.....				Various.....	Huntington Trust Company.....	52,000	6,539	XXX	0.....XXX
97999999. Total - Common Stocks.....				Various.....	Huntington Trust Company.....	47,000	9,560	XXX	0.....XXX
97999999. Total - Common Stocks.....				Various.....	Huntington Trust Company.....	25,000	9,178	XXX	0.....XXX
97999999. Total - Common Stocks.....				Various.....	Huntington Trust Company.....	57,000	9,264	XXX	0.....XXX
97999999. Total - Common Stocks.....						98,772	XXX		0.....XXX
97999999. Total - Common Stocks - Part 3.....						1,078,349	XXX		0.....XXX
97999999. Total - Common Stocks.....						1,078,349	XXX		0.....XXX
98999999. Total - Preferred and Common Stocks.....						1,078,349	XXX		0.....XXX
98999999. Total - Bonds, Preferred and Common Stocks.....						1,430,235	XXX		1,408.....XXX

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

**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	Shares of Stock	Number of Consideration	Par Value	Actual Cost	Book/Adjusted Carrying Value	Prior Year Book/Adjusted Carrying Value	Unrealized Valuation Increase (Decrease)	Current Year's Amortization / Accretion	Current Year's Impairment Recognized	Total Change in B.A.C.V. (11+12-13)	Total Foreign Exchange Change in B.A.C.V.	Book/Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Stated Maturity Date	Contractual Maturity Date	Symbol / Market Indicator (a)	NAIC Designation and Administrative Symbol				
					1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21
05699999.	Total - Bonds - U.S. Government				0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
	<b>Bonds - All Other Government</b>																								
3133EJ	BN 8	Federal Farm Credit Bank			05/23/2019	Huntington Trust Company				150,000	150,000	149,148	149,257	0	30	0	0	149,287	0	852	0	02/05/2025.			
3133EH	2F 9	Federal Farm Credit Bank			06/28/2019	Huntington Trust Company				150,000	150,000	148,559	148,900	0	68	0	0	148,867	0	1,442	0	06/12/2024.			
313379	EE 5	Federal Home Loan Bank			06/14/2019	Huntington Trust Company				250,000	250,000	251,448	250,650	0	(650)	0	0	250,000	0	0	0	0	06/14/2019.		
1099999.	Total - Bonds - All Other Government									550,000	550,000	549,156	549,707	0	0	0	0	548,154	0	2,294	0	XXX	XXX		
8399997.	Total - Bonds - Part 4									550,000	550,000	549,155	549,707	0	0	0	0	548,154	0	2,294	0	XXX	XXX		
8399999.	Total - Bonds									550,000	550,000	549,156	548,707	0	0	0	0	548,154	0	2,294	0	XXX	XXX		
	<b>Common Stocks - Industrial and Miscellaneous</b>																								
	Huntington Conservative Deposit Account	..	Various		Huntington Trust Company					960,854	960,854	960,854	960,854	0	0	0	0	0	0	0	0	0	XXX		
9099999.	Total - Common Stocks - Industrial and Miscellaneous									960,854	960,854	960,854	960,854	0	0	0	0	0	0	0	0	0	XXX		
9799997.	Total - Common Stocks - Part 4									960,854	960,854	960,854	960,854	0	0	0	0	0	0	0	0	0	XXX		
9799998.	Total - Common Stocks									960,854	960,854	960,854	960,854	0	0	0	0	0	0	0	0	0	XXX		
9899999.	Total - Preferred and Common Stocks									960,854	960,854	960,854	960,854	0	0	0	0	0	0	0	0	0	XXX		
9999999.	Total - Bonds - Preferred and Common Stocks									1,510,854	1,510,854	1,510,009	1,509,561	0	(552)	0	0	548,154	0	2,294	0	2,294	0	XXX	

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

**SCHEDULE DB - PART A - SECTION 1****Showing all Options, Caps, Floors, Collars, Swaps and Forwards Open as of Current Statement Date**

Description	Description of Item(s) Hedged, Used for Income Generation, or Replicated	Schedule / Exhibit Identifier	Type(s) of Risk(s)	Description of Item(s) Hedged, Used for Income Generation, or Central Counterparty	Trade Date	Date of Maturity or Expiration	Number of Contracts	Notional Amount	Strike Price, Rate of Index Received (Paid)	Cumulative Prior Year(s) Initial Cost of Undiscounted Premium (Received) Paid	Current Year Initial Cost of Undiscounted Premium (Received) Paid	Current Year Premium Paid	Book/Adjusted Income	Carrying Value	Fair Value	Unrealized Valuation Increase, (Decrease)	Current Year's (Amortization, ) / Accretion	Total Foreign Exchange Change in B/A.C.V.	Adjustment to Carrying Value of Hedged Items	Credit Quality of Reference Entity	Potential Exposure	Hedge Effectiveness at Inception and at Year-end (b)	23

**NONE**

## SCHEDULE DB - PART B - SECTION 1

## Futures Contracts Open as of the Current Statement Date

ZONE

**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		7	8	9	10	11	12
				Master Agreement (Y or N)	Credit Support Annex (Y or N)	Fair Value of Acceptable Collateral	Contracts with Book/Adjusted Carrying Value > 0	Contracts with Book/Adjusted Carrying Value < 0	Exposure Net of Collateral	Contracts with Fair Value > 0	Contracts with Fair Value < 0
1. Offset per SSAP No. 64.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
2. Net after right of offset per SSAP No. 64.....	.....	.....	.....	.....	.....	0	.....	0	.....	.....	.....

**NONE**

**SCHEDULE DB - PART D - SECTION 2**

1		2		3		4		5		6		7		8		9			
Exchange, Counterparty or Central Clearinghouse		Type of Asset Pledged		CUSIP Identification		Collateral for Derivative Instruments Open as of Current Statement Date		Description		Fair Value		Par Value		Book/Adjusted Carrying Value		Maturity Date		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 one 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 and Administrative Symbol / 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 and Administrative Symbol / 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 or 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	
<b>Open Depositories</b>								
Huntington Nat'l Bank.....		various.....	2,706		256,081	228,404	146,571	XXX
LCNB National Bank.....		various.....			1,410,996	1,058,529	908,330	XXX
Barclays Bank Delaware, due 7/26/21.....		2.050		1,719	200,000	200,000	200,000	XXX
BMW Bank North America, 8/10/22.....		3.100		1,181	100,000	100,000	100,000	XXX
Capital One NA, due 9/10/20.....		2.250		1,711	250,000	250,000	250,000	XXX
Centennial Bank, due 9/16/22.....		1.500	756	107	200,000	200,000	200,000	XXX
Choice Bank Oshkosh WI, due 8/16/23.....		2.150	1,084	153	200,000	200,000	200,000	XXX
Citibank, due 8/14/23.....		3.300		1,229	100,000	100,000	100,000	XXX
Citibank, due 11/24/25.....		3.550	1,760	370	99,600	99,600	99,600	XXX
Comenity Capital Bank, due 8/9/22.....		2.300	1,159	252	200,000	200,000	200,000	XXX
Crossfirst Bank, due 11/20/23.....		2.350	1,185	129	200,000	200,000	200,000	XXX
Denver Savings Bank, due 6/26/24.....		2.200		60			250,000	XXX
Discover Bank, due 5/13/20.....		2.000	2,479	658	250,000	250,000	250,000	XXX
Everbank Florida, due 2/13/19.....		1.300						XXX
Enerbank USA, due 7/28/21.....		2.000	1,008	22	200,762	200,762	200,762	XXX
First Business Bank, due 1/21/21.....		1.800		1,959	250,000	250,000	250,000	XXX
First Premier Bank, due 2/7/25.....		3.300		1,284	100,000	100,000	100,000	XXX
Goldman Sachs Bank, due 5/20/20.....		2.000	2,479	562	250,000	250,000	250,000	XXX
Horizon Bank Waverly, due 8/29/23.....		1.700	710	373	250,000	250,000	250,000	XXX
Industrial & Com BK Chna, due 5/31/24.....		2.450	618	181	96,250	96,250	96,250	XXX
Luana Savings Bank, due 9/9/21.....		1.350		616	150,000	150,000	150,000	XXX
MB Financial Bank, due 5/15/20.....		1.600	1,008	142	250,000	250,000	250,000	XXX
Marlin Business Bank, due 11/15/21.....		2.100	1,059	196	200,000	200,000	200,000	XXX
Medallion Bank Utah, due 1/16/24.....		3.200	1,613	281	200,194	200,194	200,194	XXX
Midwest Bank, due 4/6/22.....		1.650	1,040	271	250,000	250,000	250,000	XXX
Morgan Stanley, due 5/3/23.....		3.100	3,843	1,232	250,000	250,000	250,000	XXX
NCB Savings Bank, due 7/25/19.....		1.800		1,886	250,000	250,000	250,000	XXX
Parksidde Financial Bank & Trust, due 8/23/23.....		2.150	1,084	71	200,000	200,000	200,000	XXX
Sallie Mae Bank, due 8/9/24.....		2.500		1,904	200,000	200,000	200,000	XXX
Signature Bank AR, due 12/28/23.....		2.200		30			250,000	XXX
Spring Bank, due 11/14/22.....		2.150	1,084	188	200,000	200,000	200,000	XXX
Summit Community Bank, due 1/15/21.....		1.800	1,134	160	250,000	250,000	250,000	XXX
Synchrony Bank, due 12/05/19.....		2.000	2,493	342	250,000	250,000	250,000	XXX
UBS Bank, due 11/7/23.....		3.500	882	259	100,000	100,000	100,000	XXX
Wells Fargo Bank NA, due 7/28/20.....		1.850	933	23	200,000	200,000	200,000	XXX
Western State Bank, due 9/28/23.....		1.750	882	19	200,000	200,000	200,000	XXX
0199999. Total Open Depositories.....	XXX	XXX	32,999	19,570	7,763,883	7,383,739	7,651,707	XXX
0399999. Total Cash on Deposit.....	XXX	XXX	32,999	19,570	7,763,883	7,383,739	7,651,707	XXX
0599999. Total Cash.....	XXX	XXX	32,999	19,570	7,763,883	7,383,739	7,651,707	XXX

**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

**NONE**

# Ohio Bankers Benefits Trust

## 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.....	6,740,230	6,276,807
2. Cost of bonds and stocks acquired.....	2,915,907	2,389,594
3. Accrual of discount.....	1,431	3,909
4. Unrealized valuation increase (decrease).....	60,149	
5. Total gain (loss) on disposals.....		
6. Deduct consideration for bonds and stocks disposed of.....	3,140,741	1,922,977
7. Deduct amortization of premium.....	3,702	7,103
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).....	6,573,274	6,740,230
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	6,573,274	6,740,230

**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

	1 Book/Adjusted Carrying Value Beginning of Current Quarter NAIC Designation	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
<b>BONDS</b>								
1. NAIC 1 (a).....	5,709,292	351,886	548,154	(1,566)	5,709,292	5,511,458		6,058,818
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.....	5,709,292	351,886	548,154	(1,566)	5,709,292	5,511,458	0	6,058,818
<b>PREFERRED STOCK</b>								
8. NAIC 1.....						0		
9. NAIC 2.....						0		
10. NAIC 3.....						0		
11. NAIC 4.....						0		
12. NAIC 5.....						0		
13. NAIC 6.....						0		
14. Total Preferred Stock.....	0	0	0	0	0	0	0	0
15. Total Bonds and Preferred Stock.....	5,709,292	351,886	548,154	(1,566)	5,709,292	5,511,458	0	6,058,818

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

**SCHEDULE DA - PART 1**

## Short-Term Investments

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

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

**NONE**

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

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

**NONE**