

QUARTERLY STATEMENT

OF THE

Ohio Bankers Benefits Trust

Of

Ohio

in the state of

Ohio

to the Insurance Department

of the State of Ohio

For the Period Ended

March 31, 2020

2020



* N / A 2 0 2 0 2 0 1 0 0 1 0 1 *

HEALTH QUARTERLY STATEMENT

As of March 31, 2020

of the Condition and Affairs of the

Ohio Bankers Benefits Trust

NAIC Group Code.....N/A, (Current Period) (Prior Period)	NAIC Company Code..... N/A	Employer's ID Number..... 31-1306485
Organized under the Laws of Ohio	State of Domicile or Port of Entry Ohio	Country of Domicile USA
Licensed as Business Type MEWA	Is HMO Federally Qualified? Yes [] No []	N/A
Incorporated/Organized..... 1997	Commenced Business.....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)	614-340-7595 (Area Code) (Telephone Number)
Mail Address	Same (Street and Number) (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)	614-340-7595 (Area Code) (Telephone Number)
Internet Web Site Address		
Statutory Statement Contact	Jeff Quayle (Name) jquayle@ohiobankersleague.org (E-Mail Address)	614-340-7603 (Area Code) (Telephone Number) (Extension) 614-340-7599 (Fax Number)

OFFICERS

Name	Title	Name	Title
------	-------	------	-------

1.
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.

<u>Jeffrey D. Quayle</u> (Signature) Jeffrey D. Quayle	<u>Christine Zeek</u> (Signature) Christine Zeek	
1. (Printed Name) Managing Director	2. (Printed Name) Plan Administrator	3. (Printed Name) Trustee
(Title)	(Title)	(Title)

Subscribed and sworn to before me

This 16th day of May, 2020

- 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 []



JULIE A. KIPLINGER
NOTARY PUBLIC
STATE OF OHIO
Recorded in
Licking County
My Comm. Exp. 4/22/2024

ASSETS

	Current Statement Date			4
	1	2	3	
	Assets	Nonadmitted Assets	Net Admitted Assets (Cols. 1 - 2)	Prior Year Net Admitted Assets
1. Bonds.....	5,204,961		5,204,961	5,104,913
2. Stocks:				
2.1 Preferred stocks.....			0	
2.2 Common stocks.....	1,261,628		1,261,628	1,497,999
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 (\$.....7,877,109), cash equivalents (\$.....0) and short-term investments (\$.....0).....	7,877,109		7,877,109	8,118,065
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).....	14,343,698	0	14,343,698	14,720,977
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	36,916		36,916	42,825
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.....	595,354		595,354	601,202
25. Aggregate write-ins for other than invested assets.....	0	0	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	14,975,968	0	14,975,968	15,365,004
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. Total (Lines 26 and 27).....	14,975,968	0	14,975,968	15,365,004

DETAILS OF WRITE-INS

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

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$.....0 reinsurance ceded).....	1,601,000		1,601,000	1,596,000
2. Accrued medical incentive pool and bonus amounts.....				
3. Unpaid claims adjustment expenses.....	190,000		190,000	195,000
4. Aggregate health policy reserves, including the liability of \$.....0 for medical loss ratio rebate per the Public Health Service Act.....				
5. Aggregate life policy reserves.....				
6. Property/casualty unearned premium reserve.....				
7. Aggregate health claim reserves.....				
8. Premiums received in advance.....				
9. General expenses due or accrued.....	22,179		22,179	30,567
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.....				
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.....				
16. Derivatives.....				
17. Payable for securities.....				
18. Payable for securities lending.....				
19. Funds held under reinsurance treaties with (\$.....0 authorized reinsurers, \$.....0 unauthorized reinsurers and certified \$.....0 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.....				
23. Aggregate write-ins for other liabilities (including \$.....0 current).....	0		0	0
24. Total liabilities (Lines 1 to 23).....	1,813,179		1,813,179	1,821,567
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	13,162,789	13,543,437
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		
34. Total liabilities, capital and surplus (Lines 24 and 33).....	XXX	XXX	13,162,789	15,365,004

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
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		
1. Member months.....	XXX.....	4,363	4,371	17,840
2. Net premium income (including \$.....0 non-health premium income).....	XXX.....	4,809,266	4,621,308	18,686,512
3. Change in unearned premium reserves and reserve for rate credits.....	XXX.....			
4. Fee-for-service (net of \$.....0 medical expenses).....	XXX.....			
5. Risk revenue.....	XXX.....			
6. Aggregate write-ins for other health care related revenues.....	XXX.....	0	0	0
7. Aggregate write-ins for other non-health revenues.....	XXX.....	123,972	165,320	735,000
8. Total revenues (Lines 2 to 7).....	XXX.....	4,933,238	4,786,628	19,421,512
Hospital and Medical:				
9. Hospital/medical benefits.....				12,346,320
10. Other professional services.....		3,764,668	2,605,169	
11. Outside referrals.....				
12. Emergency room and out-of-area.....				
13. Prescription drugs.....				
14. Aggregate write-ins for other hospital and medical.....		1,023,261	937,501	3,982,059
15. Incentive pool, withhold adjustments and bonus amounts.....	0	5,000	20,900	(23,100)
16. Subtotal (Lines 9 to 15).....	0	4,792,929	3,563,570	16,305,279
Less:				
17. Net reinsurance recoveries.....				482,241
18. Total hospital and medical (Lines 16 minus 17).....	0	4,792,929	3,563,570	15,823,038
19. Non-health claims (net).....				
20. Claims adjustment expenses, including \$.....0 cost containment expenses.....		255,391	364,688	1,314,052
21. General administrative expenses.....		286,568	281,029	1,186,646
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	5,334,888	4,209,287	18,323,736
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	XXX.....	(401,650)	577,341	1,097,776
25. Net investment income earned.....				289,062
26. Net realized capital gains (losses) less capital gains tax of \$.....0.....		21,002	93,645	2,731
27. Net investment gains or (losses) (Lines 25 plus 26).....	0	21,002	93,645	291,793
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.....	(380,648)	670,986	1,389,569
31. Federal and foreign income taxes incurred.....	XXX.....			
32. Net income (loss) (Lines 30 minus 31).....	XXX.....	(380,648)	670,986	1,389,569

DETAILS OF WRITE-INS

0601.	XXX.....			
0602.	XXX.....			
0603.	XXX.....			
0698. Summary of remaining write-ins for Line 6 from overflow page.....	XXX.....	0	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above).....	XXX.....	0	0	0
0701. Prescription rebate revenue.....	XXX.....	123,972	165,320	735,000
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.....	123,972	165,320	735,000
1401. change in IBNR.....		5,000	20,900	(23,100)
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	5,000	20,900	(23,100)
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.....	13,543,437	12,153,868	12,153,868
34.	Net income or (loss) from Line 32.....	(380,648)	670,986	1,389,569
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).....	(380,648)	670,986	1,389,569
49.	Capital and surplus end of reporting period (Line 33 plus 48).....	13,162,789	12,824,854	13,543,437

DETAILS OF WRITE-INS

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

CASH FLOW

	1 Current Year to Date	2 Prior Year To Date	3 Prior Year Ended December 31
CASH FROM OPERATIONS			
1. Premiums collected net of reinsurance.....	4,939,086	4,621,308	18,820,310
2. Net investment income.....	28,400	67,481	303,272
3. Miscellaneous income.....			
4. Total (Lines 1 through 3).....	4,967,486	4,688,789	19,123,582
5. Benefit and loss related payments.....	5,343,276	4,059,800	18,125,054
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).....	5,343,276	4,059,800	18,125,054
10. Total (Lines 5 through 9).....	(375,790)	628,989	998,528
11. Net cash from operations (Line 4 minus Line 10).....			
CASH FROM INVESTMENTS			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	899,869	348,821	2,302,565
12.2 Stocks.....	1,237,876	1,282,912	3,900,099
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.....	196,906		(173,340)
12.7 Miscellaneous proceeds.....			
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	2,334,651	1,631,733	6,029,344
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	1,001,406		1,353,242
13.2 Stocks.....	1,198,411	1,485,672	4,543,346
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).....	2,199,817	1,485,672	5,896,588
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).....	134,834	146,061	132,756
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).....	0	0	0
17. Net cash from financing and miscellaneous sources (Lines 16.1 through 16.4 minus Line 16.5 plus Line 16.6).....	0	0	0
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS			
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	(240,956)	775,050	1,131,284
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	8,118,065	6,986,781	6,986,781
19.2 End of period (Line 18 plus Line 19.1).....	7,877,109	7,761,831	8,118,065

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							
1.	Prior Year.....2,560	1,499				1,061				
2.	First Quarter.....2,546	1,444				1,102				
3.	Second Quarter.....0									
4.	Third Quarter.....0									
5.	Current Year.....0									
6.	Current Year Member Months.....0									
Total Member Ambulatory Encounters for Period:										
7.	Physician.....0									
8.	Non-Physician.....0									
9.	Total.....0	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).....4,809,266	4,809,266								
13.	Life Premiums Direct.....0									
14.	Property/Casualty Premiums Written.....0									
15.	Health Premiums Earned.....4,809,266	4,809,266								
16.	Property/Casualty Premiums Earned.....0									
17.	Amount Paid for Provision of Health Care Services.....4,950,916	4,950,916								
18.	Amount Incurred for Provision of Health Care Services.....4,792,929	4,792,929								

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

Account	1	2	3	4	5	6	Total
		1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	

Aging Analysis of Unpaid Claims

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

Ohio Bankers Benefits Trust

Statement as of March 31, 2020 of the

NONE

UNDERWRITING AND INVESTMENT EXHIBIT

Analysis of Claims Unpaid - Prior Year - Net of Reinsurance

Line of Business	1 On Claims Incurred Prior to January 1 of Current Year		2 On Claims Incurred During the Year		3 On Claims Unpaid December 31 of Prior Year		4 On Claims Incurred During the Year		5 Claims Incurred in Prior Years (Columns 1 + 3)		6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year	
	Claims Paid Year to Date		Incurred During the Year		December 31 of Prior Year		Incurred During the Year		(Columns 1 + 3)		December 31 of Prior Year	
1. Comprehensive (hospital and medical).....	1,417,825	3,365,511			178,175		1,400,345		1,596,000		1,568,500	
2. Medicare Supplement.....												
3. Dental only.....	34,875	132,705			5,025		17,455		39,900		27,500	
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).....	1,452,700	3,498,216			183,200		1,417,800		1,635,900		1,596,000	
10. Healthcare receivables (a).....												
11. Other non-health.....												
12. Medical incentive pools and bonus amounts.....												
13. Totals (Lines 9-10+11+12).....	1,452,700	3,498,216			183,200		1,417,800		1,635,900		1,596,000	

(a) Excludes \$.00 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 March 31, 2020 and 2019 were as follows.

	2020	2019
Checking account – Huntington National Bank	\$ 0	\$ 266,969
US Treasury Money Fund – Huntington National Bank	0	340,558
Checking account - LCNB National Bank (w/ sweep feature)	1,080,303	1,057,499
Certificates of Deposit	6,796,806	6,096,806
Total cash and cash equivalents	\$ 7,877,109	\$ 7,761,832

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

	2019	2019
Fixed income securities		
US Treasury Obligations	\$ 2,076,458	\$ 1,473,168
US Government Agencies	2,456,867	3,507,439
Corporate Bonds	671,636	728,685
Total fixed income securities	\$ 5,204,961	\$ 5,709,292
Money market mutual funds		
Huntington Conservative Deposit Account	\$ 227,119	\$ 311,515
Stock and mutual fund equity holdings		
Various holdings w/ Huntington National Bank	\$ 1,034,509	\$ 599,079

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 \$251,931 through March 31, 2020 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 May 14, 2020 for these statutory financial statements which are to be issued on . There were no events occurring subsequent to the end of the quarter that merited recognition or disclosure in these statements.

The World Health Organization declared the novel coronavirus (COVID-19) as a pandemic in March, 2020. The United States of America, Ohio and Central Ohio areas were affected by COVID-19 both in terms of the virus itself including the related effects on personnel as well as the orders from both federal and state organizations on operational procedures to prevent the spread of COVID-19. The offices of the OBBT were officially closed, but work was conducted from home as prescribed by the "stay at home" orders issued. The disruption is anticipated to be temporary in nature.

The financial impact of COVID-19 is not known at this time, but it is anticipated OBBT certainly will experience some degree of increased claims. Due to the uncertain nature of COVID-19 at this time it is not possible to reasonably estimate what overall potential loss may be experienced. OBBT does have substantial reserves and continues to manage spending in response to the pandemic, but the ultimate affect could be substantial due to increase health

NOTES TO FINANCIAL STATEMENTS

care costs. OBBT is also on the forefront of risk assessment, which includes performing stress tests by evaluating the potential effects of natural disasters upon the Plan. The most recent test, conducted on April 1st, using best COVID-19 data available at that time, showed favorable outcomes for the Plan with potential increase in claims of only 4% to 7%. However, the overall ultimate effect is not yet known but due to the uncertainty of COVID-19, no adjustments have been made to these financial 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 \$0 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

Note 25 – Change in Incurred Losses and Loss Adjustment Expenses

The amount incurred but unpaid claims reserves as of March 31, 2020 and 2019 was based on a study completed by the Plan's actuary and included estimated IBNR of \$1,101,000 and LAE of \$190,000 for 1st quarter 2020 and IBNR of \$1,640,000 and LAE of \$195,000 for 1st quarter 2019.

Note 26 – Intercompany Pooling Arrangements

None

Note 27 – Structured Settlements

Not Applicable for Health Companies

Note 28 – Health Care Receivables

Amounts included on page 2, line 24 represent contractual pharmaceutical rebate receivables to be recieved by the Plan. The amounts are based upon reports provided by the prescription provider based on the volume of prescriptions filled within each category contained in the agreement. The contract also contains a targeted minimum amount to be received. The program began in 2019 when the Plan switched third party administrators, accordingly, the history of the rebate program is continuing to build and develop. However, the rebates being received are on a consistent, steady basis each quarter. In accordance with Statutory Issue Paper No. 107, items 12-15, the amount is being reported as an admitted asset.

Note 29 – Participating Policies

None

Note 30 – Premium Deficiency Reserves

None

Note 31 – Anticipated Salvage and Subrogation

None

NOTES TO FINANCIAL STATEMENTS

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

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

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

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

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

Yes [] No [X]
- 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? If yes, complete and file the merger history data file with the NAIC for the annual filing corresponding to this period.

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

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

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

Yes [] No [] 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 [X]
- 7.2 If yes, give full information:

- 8.1 Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Board?

Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [] No [X]

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

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

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

Yes [X] No []

- (a) Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;

- (b) Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;

- (c) Compliance with applicable governmental laws, rules and regulations;

- (d) The prompt internal reporting of violations to an appropriate person or persons identified in the code; and

- (e) Accountability for adherence to the code.

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

- 9.2 Has the code of ethics for senior managers been amended?

Yes [] No [X]

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

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

Yes [] No [X]

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

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

FINANCIAL

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

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

INVESTMENT

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

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

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

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

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

14.2 If yes, please complete the following:

	¹ Prior Year End Book/Adjusted Carrying Value	² Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	0	\$ 0
14.22 Preferred Stock	0	0
14.23 Common Stock	0	0
14.24 Short-Term Investments	0	0
14.25 Mortgage Loans on Real Estate	0	0
14.26 All Other	0	0
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	0	\$ 0
14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above	0	\$ 0

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

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

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*?

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 invested 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 invested 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	²	³	⁴	⁵
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	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: 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.	Yes []	No [X]
	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?		
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.	Yes []	No [X]
	Has the reporting entity self-designated PLGI securities?		
21.	By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund: a. The security was purchased prior to January 1, 2019. b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019. d. The fund only or predominantly holds bonds in its portfolio. e. The current reporting NAIC designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO. f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.	Yes []	No [X]
	Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria?		

Statement as of March 31, 2020 of the

Ohio Bankers Benefits Trust

GENERAL INTERROGATORIES (continued)

PART 2 - HEALTH

1. Operating Percentages:		
1.1 A&H loss percent		115.3 %
1.2 A&H cost containment percent		5.3 %
1.3 A&H expense percent excluding cost containment expenses		6.0 %
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	2	3	4	5	6	7	8	9	10
NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Type of Reinsurer	Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating
10345	31-1440175	01/01/2020	Community Insurance Company	OH	SSLG		Authorized		
Accident & Health - Non-Affiliates									

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

1		Direct Business Only					8	9	
2		3	4	5	6	7	Total Columns 2 through 7	Deposit-Type Contracts	
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	
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	4,809,266					4,809,266	
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
59.	Subtotal.....	XXX	4,809,266	0	0	0	0	4,809,266	0
60.	Reporting entity contributions for Employee Benefit Plans.....	XXX						0	
61.	Total (Direct Business).....	XXX	4,809,266	0	0	0	0	4,809,266	0

DETAILS OF WRITE-INS

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

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

2

R - Registered - Non-domiciled RRGs.....

0

E - Eligible - Reporting entities eligible or approved to write surplus lines in the state.....

0

Q - Qualified - Qualified or accredited reinsurer.....

0

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

55

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

SCHEDULE Y

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 Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Provided Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*

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

Showing all Real Estate ACQUIRED AND ADDITIONS MADE During the Current Quarter

1	Description of Property		State	Date Acquired	5	6	7	8	9					
	2	3												
Location		City	Name of Vendor											
			Actual Cost at Time of Acquisition											
			Amount of Encumbrances											
			Book/Adjusted Carrying Value Less Encumbrances											
			Additional Investment Made After Acquisition											

NONE

SCHEDULE A - PART 3

Showing all Real Estate DISPOSED During the Quarter, Including Payments During the Final Year on "Sales Under Contract "

1		2		3		4		5		6		7		8		9		10		11		12		13		14		15		16		17		18		19		20	
Description of Property		City		State		Disposal Date		Name of Purchaser		Actual Cost		Expended for Additions, Improvements and Changes in Encumbrances		Book/Adjusted Carrying Value Less Encumbrances Prior Year		Current Years' Depreciation		Current Years' Recognized Other-Than-Temporary Impairment		Change in Current Years' Encumbrances (11 - 9 - 10)		Total Change in B./A.C.V. (11 - 9 - 10)		Total Foreign Exchange Change in B./A.C.V.		Book/Adjusted Carrying Value Less Encumbrances on Disposal		Amounts Received During Year		Foreign Exchange Gain (Loss) on Disposal		Realized Gain (Loss) on Disposal		Total Gain (Loss) on Disposal		Gross Income Earned Less Interest Incurred on Encumbrances		Taxes, Repairs, and Expenses Incurred	

NONE

SCHEDULE B - PART 2

Showing all Mortgage Loans ACQUIRED AND ADDITIONS MADE During the Current Quarter

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

NONE

SCHEDULE B - PART 3

Showing all Mortgage Loans DISPOSED, Transferred or Repaid During the Current Quarter

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

NONE

SCHEDULE BA - PART 2

Showing Other Long-Term Invested Assets ACQUIRED AND ADDITIONS MADE During the Current Quarter

CUSIP Identification	Name or Description	Location		NAIC Designation and Administrative Symbol/Indicator	Date Originally Acquired	Type and Strategy	Actual Cost at Time of Acquisition	Additional Investment Made after Acquisition	Amount of Encumbrances	Commitment for Additional Investment	Percentage of Ownership
		3	4								
1	2	City	State	5	6	8	9	10	11	12	13

NONE

SCHEDULE BA - PART 3

Showing Other Long-Term Invested Assets DISPOSED, Transferred or Repaid During the Current Quarter

CUSIP Identification	Name or Description	Location		City	State	5	6	7	8	9	Changes in Book/Adjusted Carrying Value				14	15	16	17	18	19	20
1	2			3	4																

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

912828	47	3	US Treasury Note	The Huntington Trust Company	251,406	250,000	250,000	3,137	XXX
059999	Total - Bonds - U.S. Government								

Bonds - U.S. Government

3133EL	LW	2	Federal Farm Credit Bank	The Huntington Trust Company	250,000	250,000	250,000	179	
3133EL	PG	3	Federal Farm Credit Bank	The Huntington Trust Company	250,000	250,000	250,000	0	
3133EL	PK	4	Federal Farm Credit Bank	The Huntington Trust Company	250,000	250,000	250,000	0	
109999	Total - Bonds - All Other Government								
839997	Total - Bonds - Part 3								
839999	Total - Bonds								

Common Stocks - Industrial and Miscellaneous (Unaffiliated) Publicly Traded

037833	10	0	Apple, Inc.	The Huntington Trust Company	various	33,853	XXX	0	XXX
071813	10	9	Baxter International Inc	The Huntington Trust Company	various	9,612	XXX	0	XXX
166764	10	0	Chevron Corporation	The Huntington Trust Company	various	7,299	XXX	0	XXX
20825C	10	4	Conocophillips	The Huntington Trust Company	various	9,537	XXX	0	XXX
22822V	10	1	Crown Castle Intl Corp.	The Huntington Trust Company	various	23,658	XXX	0	XXX
437076	10	2	Home Depot, Inc.	The Huntington Trust Company	various	7,446	XXX	0	XXX
46625H	10	0	JP Morgan Chase & Co.	The Huntington Trust Company	various	13,950	XXX	0	XXX
539830	10	9	Lockheed Martin Corporation	The Huntington Trust Company	various	7,541	XXX	0	XXX
65339F	10	1	Nextera Energy, Inc.	The Huntington Trust Company	various	9,546	XXX	0	XXX
742718	10	9	Proctor & Gamble Co.	The Huntington Trust Company	various	9,701	XXX	0	XXX
74340W	10	3	Prologis, Inc.	The Huntington Trust Company	various	23,060	XXX	0	XXX
883556	10	2	Thermo Fisher Scientific Inc.	The Huntington Trust Company	various	15,599	XXX	0	XXX
92939U	10	6	Vec Energy Group, Inc.	The Huntington Trust Company	various	9,914	XXX	0	XXX
931142	10	3	Wal-Mart Stores, Inc.	The Huntington Trust Company	various	9,995	XXX	0	XXX
909999	Total - Common Stocks - Industrial and Miscellaneous (Unaffiliated) Publicly Traded								

Common Stocks - Mutual Funds

949999	Total - Common Stocks - Mutual Funds								
			Huntington Conservative Deposit Account	The Huntington Trust Company	various	1,007,700,000	XXX	0	XXX
979997	Total - Common Stocks - Part 3								
979999	Total - Common Stocks								
989999	Total - Preferred and Common Stocks								
999999	Total - Bonds, Preferred and Common Stocks								

QE04

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change in Book/Adjusted Carrying Value				16	17	18	19	20	21	22
										11	12	13	14							
CUSIP Identification	Description	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Book/Adjusted Prior Year	Unrealized Increase (Decrease)	Current Years Amortization / Accretion	Other-Than-Temporary Impairment	Total Change in B./A.C.V. (1+12-13)	Total Foreign Exchange B./A.C.V.	Book/Adjusted Disposal Value at Disposal	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain Disposal	Bond Interest / Received During Year	Stated Contractual Maturity Date	NAIC Designation and Administrative Symbol

3135GO A7 B	Federal National Mortgage Association.....	01/21/2020.	The Huntington Trust Company.....	250,000	250,000	250,000	250,299	200,000	250,010	(10)	0	(10)	(10)	250,000	250,000	250,000	250,000	2,031	01/21/2020.	
3130AG YJ B	Federal Home Loan Bank.....	02/26/2020.	The Huntington Trust Company.....	200,000	200,000	200,000	199,950	200,000	199,953	1	0	1	1	200,000	199,953	200,000	50	1,978	08/26/2022	
3133EK G6 7	Federal Farm Credit Bank.....	02/03/2020.	The Huntington Trust Company.....	200,000	200,000	200,000	199,950	200,000	199,953	0	0	0	0	199,953	199,953	200,000	50	858	05/27/2025.	
3134GU HW 3	Federal Home Loan Mortgage Co.....	01/15/2020.	The Huntington Trust Company.....	250,000	250,000	250,000	250,000	250,000	250,000	0	0	0	0	250,000	250,000	250,000	0	1,172	10/15/2021.	
1099999	Total - Bonds - All Other Government.....			900,000	900,000	900,000	900,249	899,963	900,249	(9)	0	(9)	0	899,963	899,963	900,000	50	6,039	XXX	XXX
8399997	Total - Bonds - Part 4.....			900,000	900,000	900,000	900,249	899,963	900,249	(9)	0	(9)	0	899,963	899,963	900,000	50	6,039	XXX	XXX
8399999	Total - Bonds.....			900,000	900,000	900,000	900,249	899,963	900,249	0	0	(9)	0	899,963	899,963	900,000	50	6,039	XXX	XXX

209115 10 4	Consolidated Edison, Inc.....	various.....	The Huntington Trust Company.....	various.....	8,128	8,128	7,592	8,595	(467)	0	0	(467)	(467)	7,592	7,592	7,244	536	536	XXX	XXX
256746 10 8	Dollar Tree, Inc.....	various.....	The Huntington Trust Company.....	various.....	6,484	6,484	7,244	7,148	(664)	0	0	(664)	(664)	7,244	7,244	(760)	536	(760)	XXX	XXX
40434L 10 5	HP, Inc.....	various.....	The Huntington Trust Company.....	various.....	10,200	10,200	10,994	11,015	(815)	0	0	(815)	(815)	10,994	10,994	(794)	536	(794)	XXX	XXX
580135 10 1	McDonalds Corp.....	various.....	The Huntington Trust Company.....	various.....	10,142	10,142	8,965	9,683	459	0	0	459	459	8,965	8,965	1,177	159	1,177	XXX	XXX
9099999	Total - Common Stocks - Industrial and Miscellaneous (Unaffiliated) Publicly Traded.....			34,954	34,954	34,954	34,795	36,441	(1,487)	0	0	(1,487)	(1,487)	34,795	34,795	0	159	0	XXX	XXX

9499999	Total - Common Stocks - Mutual Funds.....	1,202,922	1,202,922	1,202,922	1,202,922	1,202,922	1,202,922	1,202,922	1,202,922	0	0	0	0	1,202,922	1,202,922	0	0	0	XXX	XXX
9799997	Total - Common Stocks - Part 4.....	1,237,876	1,237,717	1,239,363	(1,487)	0	0	(1,487)	0	0	0	(1,487)	(1,487)	1,237,717	1,237,717	0	159	0	XXX	XXX
9899999	Total - Preferred and Common Stocks.....	1,237,876	1,237,717	1,239,363	(1,487)	0	0	(1,487)	0	0	0	(1,487)	(1,487)	1,237,717	1,237,717	0	159	0	XXX	XXX
9999999	Total - Bonds, Preferred and Common Stocks.....	2,137,876	2,137,966	2,139,326	(1,487)	0	0	(1,487)	(9)	0	0	(1,496)	0	2,137,670	2,137,670	0	209	6,039	XXX	XXX

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

1	Description
2	Description of Item(s) Hedged, Used for Income Generation or Replicated
3	Schedule Identifier
4	Type(s) of Risk(s)
5	Exchange, Counterparty or Central Clearinghouse
6	Trade Date
7	Date of Maturity or Expiration
8	Number of Contracts
9	Notional Amount
10	Strike Price, Rate of Index Received (Paid)
11	Cumulative Prior Year(s) Initial Cost of Undiscounted Premium Received (Paid)
12	Current Year Undiscounted Premium Received (Paid)
13	Current Year Income
14	Book/Adjusted Carrying Value
15	Fair Value
16	Unrealized Valuation Increase (Decrease)
17	Total Foreign Exchange Change in B/A,C,V.
18	Current Year's Accretion (Amortization) / Hedged Items Value of Adjustment to Carrying Value
19	Potential Exposure
20	Credit Effectiveness and at Year-End (b)
21	Reference Entity
22	
23	

NONE

SCHEDULE DB - PART B - SECTION 1
Futures Contracts Open as of the Current Statement Date

1	Ticker Symbol	
2	Number of Contracts	
3	Notional Amount	
4	Description	
5	Description of Item(s) Hedged, Replicated Used for Income Generation or	
6	Identifier Schedule / Exhibit	
7	Type(s) of Risk(s) (a)	
8	Date of Maturity or Expiration	
9	Exchange	
10	Trade Date	
11	Transaction Price	
12	Reporting Date Price	
13	Fair Value	
14	Book/Adjusted Carrying Value	
15	Cumulative Variation Margin	
16	Deferred Variation Margin	
17	Change in Variation Margin Gain Hedged Item	
18	Cumulative Variation Margin for All Other Hedged	
19	Change in Variation Margin Gain Current Year	
20	Potential Exposure	
21	Hedge Effectiveness at Inception and Year-end (b)	
22	Value of One (1) Point	

NONE

SCHEDULE DB - PART D - SECTION 1

Counterparty Exposure for Derivative Instruments Open as of Current Statement Date

1. Offset per SSAP No. 64															2. Net after right of offset per SSAP No. 64														
Description of Exchange, Counterparty or Central Clearinghouse																													
Master Agreement (Y or N)															Agreement Annex (Y or N)														
2															3														
4															5														
Book/Adjusted Carrying Value															6														
7															8														
9															10														
11															12														

NONE

SCHEDULE DB - PART D - SECTION 2

Collateral for Derivative Instruments Open as of Current Statement Date

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

NONE

SCHEDULE DB - PART E

Derivatives Hedging Variable Annuity Guarantees as of the Current Statement Date
This schedule is specific for the derivatives and the hedging programs captured in SSAP No. 108

CDHS															Hedged Item				Hedging Instruments			
1	Identifier														Hedged Item				Hedging Instruments			
2	Description														Hedged Item				Hedging Instruments			
3	Prior Fair Value Attributed to Cash Flow in Full Contract														Hedged Item				Hedging Instruments			
4	Ending Fair Value in Full Contract														Hedged Item				Hedging Instruments			
5	Fair Value Gain (Loss) in Hedged Item Attributed to Interest Rates (4-3)														Hedged Item				Hedging Instruments			
6	Fair Value Gain (Loss) in Hedged Item Attributed to Hedged Risk														Hedged Item				Hedging Instruments			
7	Current Year Increase (Decrease) in VM-21 Liability														Hedged Item				Hedging Instruments			
8	Current Year Increase (Decrease) in VM-21 Liability Attributed to Interest Rates														Hedged Item				Hedging Instruments			
9	Change in the Hedged Risk Attributed to Hedged Risk Percentage (6/5)														Hedged Item				Hedging Instruments			
10	Current Year Increase (Decrease) in VM-21 Liability Attributed to Hedged Risk (8-9)														Hedged Item				Hedging Instruments			
11	Prior Deferred Balance														Hedged Item				Hedging Instruments			
12	Current Year Fair Value Fluctuation of the Hedge Instruments														Hedged Item				Hedging Instruments			
13	Current Year Natural Offset to VM-21 Liability														Hedged Item				Hedging Instruments			
14	Hedging Instruments' Value Fluctuation Not Attributed to Hedged Risk														Hedged Item				Hedging Instruments			
15	Hedge Gain (Loss) in Current Year Deferred Adjustment (12 - (13 + 14))														Hedged Item				Hedging Instruments			
16	Current Year Prescribed Deferred Amortization														Hedged Item				Hedging Instruments			
17	Current Year Additional Deferred Amortization														Hedged Item				Hedging Instruments			
18	Current Year Total Deferred Amortization (16 + 17)														Hedged Item				Hedging Instruments			
19	Ending Deferred Balance (11 + 15 + 18)														Hedged Item				Hedging Instruments			

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	2	3	4	5	6	7
CUSIP Identification	Description	Code	NAIC Designation and Administrative Symbol	Fair Value	Book/Adjusted Carrying Value	Maturity Date

General Interrogatories:

1. The activity for the year: Fair Value \$.00000000 Book/Adjusted Carrying Value \$.00000000
2. Average balance for the year: Fair Value \$.00000000 Book/Adjusted Carrying Value \$.00000000
3. Reinvested securities lending collateral assets book/adjusted carrying value included in this schedule by NAIC designation:
NAIC 1: \$.00000000 NAIC 2: \$.00000000 NAIC 3: \$.00000000 NAIC 4: \$.00000000 NAIC 5: \$.00000000 NAIC 6: \$.00000000

NONE

SCHEDULE DL - PART 2
SECURITIES LENDING COLLATERAL ASSETS

Reinvested Collateral Assets Owned Current Statement Date

1		2	3	4	5	6	7
CUSIP Identification	Description		Code	NAIC Designation and Administrative Symbol	Fair Value	Book/Adjusted Carrying Value	Maturity Date

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

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	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								
LCNB National Bank.....		varies.....	0	0	1,846,449	1,756,529	1,080,303	XXX
Bankwest Inc.....		1,700	1,060	163	250,000	250,000	250,000	XXX
Barclays Bank Delaware.....		2,050	2,067	674	200,000	200,000	200,000	XXX
BMW Bank North America.....		3,100	1,563	408	100,000	100,000	100,000	XXX
Capital One NA.....		2,250	2,805	324	250,000	250,000	250,000	XXX
Centennial Bank.....		1,500	748	123	200,000	200,000	200,000	XXX
CF Bank.....		1,700	1,060	140	250,000	250,000	250,000	XXX
Choice Bank Oshkosh WI.....		2,150	1,072	152	200,000	200,000	200,000	XXX
Citibank, due.....		3,300	1,663	407	100,000	100,000	100,000	XXX
Citibank.....		3,550	0	1,216	99,600	99,600	99,600	XXX
Comenity Capital Bank.....		2,300	1,147	605	200,000	200,000	200,000	XXX
Crossfirst Bank.....		2,350	1,172	142	200,000	200,000	200,000	XXX
Denver Savings Bank.....		2,200	1,371	75	250,000	250,000	250,000	XXX
Discover Bank.....		2,000	0	1,877	250,000	250,000	250,000	XXX
Enerbank USA.....		2,000	997	11	200,762	200,762	200,762	XXX
First Business Bank.....		1,800	2,268	801	250,000	250,000	250,000	XXX
First Premier Bank.....		3,300	1,663	434	100,000	100,000	100,000	XXX
Goldman Sachs Bank.....		2,000	0	1,781	250,000	250,000	250,000	XXX
Horizon Bank Waverly.....		1,700	1,060	12	250,000	250,000	250,000	XXX
Industrial & Com BK China.....		2,500	611	188	96,250	96,250	96,250	XXX
Live Oak Banking Co.....		1,800	779	284	200,000	200,000	200,000	XXX
Luana Savings Bank.....		1,400	1,010	122	150,000	150,000	150,000	XXX
MB Financial Bank.....		1,600	997	142	250,000	250,000	250,000	XXX
Marlin Business Bank.....		2,100	1,047	206	200,000	200,000	200,000	XXX
Metallion Bank Utah.....		3,200	1,595	263	200,194	200,194	200,194	XXX
Midwest Bank.....		1,700	1,028	283	250,000	250,000	250,000	XXX
Morgan Stanley.....		3,100	0	3,100	250,000	250,000	250,000	XXX
Parkside Financial Bank & Trust.....		2,200	1,072	94	200,000	200,000	200,000	XXX
Sallie Mae Bank.....		2,500	2,521	658	200,000	200,000	200,000	XXX
Signature Bank AR.....		2,200	1,371	15	250,000	250,000	250,000	XXX
Spring Bank.....		2,200	1,072	177	200,000	200,000	200,000	XXX
Summit Community Bank.....		1,800	1,122	160	250,000	250,000	250,000	XXX
UBS Bank.....		3,500	873	211	100,000	100,000	100,000	XXX
Wells Fargo Bank NA.....		1,900	922	12	200,000	200,000	200,000	XXX
Western State Bank.....		1,800	873	10	200,000	200,000	200,000	XXX
0199999, Total Open Depositories.....	XXX	XXX	38,609	15,270	8,643,255	8,553,335	7,877,109	XXX
0399999, Total Cash on Deposit.....	XXX	XXX	38,609	15,270	8,643,255	8,553,335	7,877,109	XXX
0599999, Total Cash.....	XXX	XXX	38,609	15,270	8,643,255	8,553,335	7,877,109	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

Statement as of March 31, 2020 of the

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

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.....	6,602,912	6,740,230
2. Cost of bonds and stocks acquired.....	2,199,817	5,896,588
3. Accrual of discount.....	309	1,959
4. Unrealized valuation increase (decrease).....	(196,906)	173,340
5. Total gain (loss) on disposals.....		
6. Deduct consideration for bonds and stocks disposed of.....	2,137,876	6,202,684
7. Deduct amortization of premium.....	1,667	6,521
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).....	6,466,589	6,602,912
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	6,466,589	6,602,912

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	2	3	4	5	6	7	8
		Book/Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book/Adjusted Carrying Value End of First Quarter	Book/Adjusted Carrying Value End of Second Quarter	Book/Adjusted Carrying Value End of Third Quarter	Book/Adjusted Carrying Value December 31 Prior Year
1.	NAIC 1 (a)	5,104,913	1,001,406	899,869	(1,489)	5,204,961			5,104,913
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	5,104,913	1,001,406	899,869	(1,489)	5,204,961	0	0	5,104,913
PREFERRED STOCK									
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	5,104,913	1,001,406	899,869	(1,489)	5,204,961	0	0	5,104,913

(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 \$.000000; NAIC 2 \$.000000; NAIC 3 \$.000000; NAIC 4 \$.000000; NAIC 5 \$.000000; NAIC 6 \$.000000.

SCHEDULE DA - PART 1

Short-Term Investments					
	1	2	3	4	5
	Book/Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	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

Statement as of March 31, 2020 of the
Ohio Bankers Benefits Trust
SCHEDULE DB - PART A - VERIFICATION
Options, Caps, Floors, Collars, Swaps and Forwards

1.	Book/adjusted carrying value, December 31, prior year (Line 10, prior year).....	
2.	Cost paid/(consideration received) on additions.....	
3.	Unrealized valuation increase/(decrease).....	
4.	SSAP No. 108 adjustments.....	
5.	Total gain (loss) on termination recognized.....	
6.	Considerations received/(paid) on terminations.....	
7.	Amortization.....	
8.	Adjustment to the book/adjusted carrying value of hedge item.....	
9.	Total foreign exchange change in book/adjusted carrying value.....	
10.	Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 + 7 + 8 + 9).....	0
11.	Deduct nonadmitted assets.....	
12.	Statement value at end of current period (Line 10 minus Line 11).....	0

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.....	
3.25	SSAP No. 108 adjustments.....	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.....	
4.23	SSAP No. 108 adjustments.....	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

Replication (Synthetic) Asset Transactions								Components of the Replication (Synthetic Asset) Transactions							
1	2	3	4	5	6	7	8	Derivative Instrument(s) Open				Cash Instrument(s) Held			
Number	Description	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	NAIC Designation or Other Description	Book/Adjusted Carrying Value	Fair Value
9									10	11	12	13	14	15	16

NONE

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

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