95189202220100102 2022 Document Code: 201

# QUARTERLY STATEMENT

## AS OF JUNE 30, 2022

OF THE CONDITION AND AFFAIRS OF THE

# Paramount Care Inc.

NAIC Group Code 1212 (Current Period), 1212 (Prior Period) NAIC Company Code 95189 Employer's ID Number 341549926

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

Country of Domicile United States of America

Licensed as business type: Life, Accident & Health[ ] Property/Casualty[ ] Hospital, Medical & Dental Service or Indemnity[ ]
Dental Service Corporation[ ] Vision Service Corporation[ ] Health Maintenance Organization[X]
Other[ ] Is HMO Federally Qualified? Yes[ ] No[X] N/A[ ]

Incorporated/Organized 04/22/1987 Commenced Business 01/01/1988

Statutory Home Office 1901 Indian Wood Circle (Street and Number), Maumee, OH, US 43537 (City or Town, State, Country and Zip Code)

Main Administrative Office 1901 Indian Wood Circle (Street and Number)
Maumee, OH, US 43537 (City or Town, State, Country and Zip Code) (419)887-2500 (Area Code) (Telephone Number)

Mail Address 1901 Indian Wood Circle (Street and Number or P.O. Box), Maumee, OH, US 43537 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 1901 Indian Wood Circle (Street and Number)
Maumee, OH, US 43537 (City or Town, State, Country and Zip Code) (419)887-2500 (Area Code) (Telephone Number)

Internet Web Site Address www.paramounthealthcare.com

Statutory Statement Contact Rich Potter, Mr. (Name) (419)887-2006 (Area Code)(Telephone Number)(Extension)
rich.potter@promedica.org (E-Mail Address) (419)887-2020 (Fax Number)

## OFFICERS

| Name | Title |
|---|---|
| James Frederick White Mr. | Chairman |
| Lori Ann Johnston Mrs. | President |
| Louis Eugene Robichaux Mr. | Treasurer # |
| Jeffrey Craig Kuhn Mr. | Secretary |

## OTHERS

Jeffrey William Martin Mr., Chief Financial Officer
Jered Joseph Wilson Mr., Chief Operating Officer
Dee Ann Bialecki-Haase M.D., Chief Medical Officer
David Roger Brackett Mr., Chief Information Officer

## DIRECTORS OR TRUSTEES

David Frantz Waterman Mr.
John Paul Imm M.D.
Elaine Marie Canning Ms.
Stephanie Michelle Cole M.D.
Larry Carl Peterson Mr.
Joseph James Sferra M.D.
Terry Lynn Bawal Ms #
Lisa Lyn Burke D.O. #
Mark Duane Wagoner Mr. #
Lori Ann Johnston Mrs.
Douglas J Welch Mr.
Tammy Lou Claus Ms.
Zak Jon Vassar Mr.
Shraddha Gupta Ms.
James Frederick White Mr.
Sameh Bashar Almadani M.D. #
Jim Allen Hoffman Mr. #

State of Ohio
County of Lucas ss

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

| (Signature) | (Signature) | (Signature) |
|---|---|---|
| Lori Ann Johnston | Jeffrey William Martin | Stephen Michael Sadowski |
| (Printed Name) | (Printed Name) | (Printed Name) |
| 1. | 2. | 3. |
| President | CFO | Secretary |
| (Title) | (Title) | (Title) |

Subscribed and sworn to before me this _____ day of _____, 2022

a. Is this an original filing? Yes[X] No[ ]
b. If no, 1. State the amendment number _____
2. Date filed _____
3. Number of pages attached _____

(Notary Public Signature)

# ASSETS

| | | Current Statement Date | | | 4 |
|---|---|---|---|---|---|
| | | 1 | 2 | 3 | |
| | | Assets | Nonadmitted Assets | Net Admitted Assets (Cols. 1 - 2) | December 31 Prior Year Net Admitted Assets |
| 1. | Bonds | 3,995,086 | | 3,995,086 | 4,040,658 |
| 2. | Stocks: | | | | |
| | 2.1 Preferred stocks | | | | |
| | 2.2 Common stocks | | | | |
| 3. | Mortgage loans on real estate: | | | | |
| | 3.1 First liens | | | | |
| | 3.2 Other than first liens | | | | |
| 4. | Real estate: | | | | |
| | 4.1 Properties occupied by the company (less $.....0 encumbrances) | | | | |
| | 4.2 Properties held for the production of income (less $.....0 encumbrances) | | | | |
| | 4.3 Properties held for sale (less $.....0 encumbrances) | | | | |
| 5. | Cash ($.....52,555,220), cash equivalents ($.....91,579) and short-term investments ($.....0) | 52,646,799 | | 52,646,799 | 45,140,170 |
| 6. | Contract loans (including $.....0 premium notes) | | | | |
| 7. | Derivatives | | | | |
| 8. | Other invested assets | 439,738 | 439,738 | | |
| 9. | Receivables for securities | 1,041 | | 1,041 | 1,719 |
| 10. | Securities lending reinvested collateral assets | | | | |
| 11. | Aggregate write-ins for invested assets | | | | |
| 12. | Subtotals, cash and invested assets (Lines 1 to 11) | 57,082,664 | 439,738 | 56,642,926 | 49,182,547 |
| 13. | Title plants less $.....0 charged off (for Title insurers only) | | | | |
| 14. | Investment income due and accrued | 11,461 | | 11,461 | 11,288 |
| 15. | Premiums and considerations: | | | | |
| | 15.1 Uncollected premiums and agents' balances in the course of collection | 371,110 | 41,247 | 329,863 | 193,504 |
| | 15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including $.....0 earned but unbilled premiums) | | | | |
| | 15.3 Accrued retrospective premiums ($.....0) and contracts subject to redetermination ($.....0) | 8,672,723 | | 8,672,723 | 6,275,679 |
| 16. | Reinsurance: | | | | |
| | 16.1 Amounts recoverable from reinsurers | | | | |
| | 16.2 Funds held by or deposited with reinsured companies | | | | |
| | 16.3 Other amounts receivable under reinsurance contracts | | | | |
| 17. | Amounts receivable relating to uninsured plans | 1,841,829 | | 1,841,829 | 2,436,576 |
| 18.1 | Current federal and foreign income tax recoverable and interest thereon | 43,334 | | 43,334 | 13,828 |
| 18.2 | Net deferred tax asset | 1,127,236 | | 1,127,236 | 1,127,236 |
| 19. | Guaranty funds receivable or on deposit | | | | |
| 20. | Electronic data processing equipment and software | 348,099 | | 348,099 | 86,409 |
| 21. | Furniture and equipment, including health care delivery assets ($.....0) | 417,088 | 417,088 | | |
| 22. | Net adjustments in assets and liabilities due to foreign exchange rates | | | | |
| 23. | Receivables from parent, subsidiaries and affiliates | 8,108,053 | | 8,108,053 | 9,127,520 |
| 24. | Health care ($.....3,086,759) and other amounts receivable | 3,086,759 | | 3,086,759 | 3,706,282 |
| 25. | Aggregate write-ins for other-than-invested assets | 993,058 | 944,035 | 49,023 | 48,023 |
| 26. | TOTAL assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) | 82,103,414 | 1,842,108 | 80,261,306 | 72,208,892 |
| 27. | From Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | | |
| 28. | TOTAL (Lines 26 and 27) | 82,103,414 | 1,842,108 | 80,261,306 | 72,208,892 |
| **DETAILS OF WRITE-INS** | | | | | |
| 1101. | | | | | |
| 1102. | | | | | |
| 1103. | | | | | |
| 1198. | Summary of remaining write-ins for Line 11 from overflow page | | | | |
| 1199. | TOTALS (Lines 1101 through 1103 plus 1198) (Line 11 above) | | | | |
| 2501. | AR | 73,278 | 73,278 | | |
| 2502. | Prepaids | 870,757 | 870,757 | | |
| 2503. | State income tax recoverable | 49,023 | | 49,023 | 48,023 |
| 2598. | Summary of remaining write-ins for Line 25 from overflow page | | | | |
| 2599. | TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above) | 993,058 | 944,035 | 49,023 | 48,023 |

# LIABILITIES, CAPITAL AND SURPLUS

| | | Current Period | | | Prior Year |
|---|---|---|---|---|---|
| | | 1<br>Covered | 2<br>Uncovered | 3<br>Total | 4<br>Total |
| 1. | Claims unpaid (less $.....0 reinsurance ceded) | 17,054,718 | | 17,054,718 | 16,683,397 |
| 2. | Accrued medical incentive pool and bonus amounts | 532,260 | | 532,260 | 1,303,013 |
| 3. | Unpaid claims adjustment expenses | 341,000 | | 341,000 | 327,000 |
| 4. | Aggregate health policy reserves, including the liability of $.....0 for medical loss ratio rebate per the Public Health Service Act | 2,528,109 | | 2,528,109 | 832,760 |
| 5. | Aggregate life policy reserves | | | | |
| 6. | Property/casualty unearned premium reserve | | | | |
| 7. | Aggregate health claim reserves | | | | |
| 8. | Premiums received in advance | 235,584 | | 235,584 | 207,689 |
| 9. | General expenses due or accrued | 14,828,984 | | 14,828,984 | 12,008,428 |
| 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 | 1,147,654 | | 1,147,654 | 1,736,989 |
| 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 | 19,815,689 | | 19,815,689 | 15,318,310 |
| 16. | Derivatives | | | | |
| 17. | Payable for securities | 86,279 | | 86,279 | 116,223 |
| 18. | Payable for securities lending | | | | |
| 19. | Funds held under reinsurance treaties (with $.....0 authorized reinsurers, $.....0 unauthorized reinsurers and $.....0 certified reinsurers) | | | | |
| 20. | Reinsurance in unauthorized and certified ($.....0) companies | | | | |
| 21. | Net adjustments in assets and liabilities due to foreign exchange rates | | | | |
| 22. | Liability for amounts held under uninsured plans | 68,635 | | 68,635 | 30,004 |
| 23. | Aggregate write-ins for other liabilities (including $.....0 current) | | | | |
| 24. | Total liabilities (Lines 1 to 23) | 56,638,912 | | 56,638,912 | 48,563,813 |
| 25. | Aggregate write-ins for special surplus funds | XXX | XXX | | |
| 26. | Common capital stock | XXX | XXX | | |
| 27. | Preferred capital stock | XXX | XXX | | |
| 28. | Gross paid in and contributed surplus | XXX | XXX | 20,486,362 | 20,486,362 |
| 29. | Surplus notes | XXX | XXX | | |
| 30. | Aggregate write-ins for other-than-special surplus funds | XXX | XXX | | |
| 31. | Unassigned funds (surplus) | XXX | XXX | 3,136,032 | 3,158,717 |
| 32. | Less treasury stock, at cost: | | | | |
| | 32.1 .....0 shares common (value included in Line 26 $.....0) | XXX | XXX | | |
| | 32.2 .....0 shares preferred (value included in Line 27 $.....0) | XXX | XXX | | |
| 33. | Total capital and surplus (Lines 25 to 31 minus Line 32) | XXX | XXX | 23,622,394 | 23,645,079 |
| 34. | Total Liabilities, capital and surplus (Lines 24 and 33) | XXX | XXX | 80,261,306 | 72,208,892 |
| **DETAILS OF WRITE-INS** | | | | | |
| 2301. | | | | | |
| 2302. | | | | | |
| 2303. | | | | | |
| 2398. | Summary of remaining write-ins for Line 23 from overflow page | | | | |
| 2399. | TOTALS (Lines 2301 through 2303 plus 2398) (Line 23 above) | | | | |
| 2501. | | XXX | XXX | | |
| 2502. | | XXX | XXX | | |
| 2503. | | XXX | XXX | | |
| 2598. | Summary of remaining write-ins for Line 25 from overflow page | XXX | XXX | | |
| 2599. | TOTALS (Lines 2501 through 2503 plus 2598) (Line 25 above) | XXX | XXX | | |
| 3001. | | XXX | XXX | | |
| 3002. | | XXX | XXX | | |
| 3003. | | XXX | XXX | | |
| 3098. | Summary of remaining write-ins for Line 30 from overflow page | XXX | XXX | | |
| 3099. | TOTALS (Lines 3001 through 3003 plus 3098) (Line 30 above) | XXX | XXX | | |

# 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 | 76,925 | 80,106 | 159,214 |
| 2. | Net premium income (including $.....0 non-health premium income) | XXX | 90,304,914 | 90,376,769 | 176,465,906 |
| 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 | | | |
| 7. | Aggregate write-ins for other non-health revenues | XXX | | | |
| 8. | Total revenues (Lines 2 to 7) | XXX | 90,304,914 | 90,376,769 | 176,465,906 |
| **Hospital and Medical:** | | | | | |
| 9. | Hospital/medical benefits | | 64,513,755 | 63,320,086 | 128,407,911 |
| 10. | Other professional services | | 1,081,728 | 950,009 | 2,024,166 |
| 11. | Outside referrals | | | | |
| 12. | Emergency room and out-of-area | | 1,841,103 | 1,684,647 | 4,052,279 |
| 13. | Prescription drugs | | 12,182,894 | 12,618,642 | 22,766,980 |
| 14. | Aggregate write-ins for other hospital and medical | | | | |
| 15. | Incentive pool, withhold adjustments and bonus amounts | | 568,604 | 707,236 | 569,899 |
| 16. | Subtotal (Lines 9 to 15) | | 80,188,084 | 79,280,620 | 157,821,235 |
| **Less:** | | | | | |
| 17. | Net reinsurance recoveries | | | | |
| 18. | Total hospital and medical (Lines 16 minus 17) | | 80,188,084 | 79,280,620 | 157,821,235 |
| 19. | Non-health claims (net) | | | | |
| 20. | Claims adjustment expenses, including $.....1,494,244 cost containment expenses | | 1,680,252 | 1,203,983 | 2,643,969 |
| 21. | General administrative expenses | | 8,529,969 | 6,661,623 | 13,422,377 |
| 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) | | 90,398,305 | 87,146,226 | 173,887,581 |
| 24. | Net underwriting gain or (loss) (Lines 8 minus 23) | XXX | (93,391) | 3,230,543 | 2,578,325 |
| 25. | Net investment income earned | | (34,428) | (16,614) | (43,933) |
| 26. | Net realized capital gains (losses) less capital gains tax of $.....2,973 | | (11,186) | (809) | 767 |
| 27. | Net investment gains or (losses) (Lines 25 plus 26) | | (45,614) | (17,423) | (43,166) |
| 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 | | | | |
| 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 | (139,005) | 3,213,120 | 2,535,159 |
| 31. | Federal and foreign income taxes incurred | XXX | (26,533) | 674,962 | 774,442 |
| 32. | Net income (loss) (Lines 30 minus 31) | XXX | (112,472) | 2,538,158 | 1,760,717 |
| **DETAILS OF WRITE-INS** | | | | | |
| 0601. | | XXX | | | |
| 0602. | | XXX | | | |
| 0603. | | XXX | | | |
| 0698. | Summary of remaining write-ins for Line 6 from overflow page | XXX | | | |
| 0699. | TOTALS (Lines 0601 through 0603 plus 0698) (Line 6 above) | XXX | | | |
| 0701. | | XXX | | | |
| 0702. | | XXX | | | |
| 0703. | | XXX | | | |
| 0798. | Summary of remaining write-ins for Line 7 from overflow page | XXX | | | |
| 0799. | TOTALS (Lines 0701 through 0703 plus 0798) (Line 7 above) | XXX | | | |
| 1401. | | | | | |
| 1402. | | | | | |
| 1403. | | | | | |
| 1498. | Summary of remaining write-ins for Line 14 from overflow page | | | | |
| 1499. | TOTALS (Lines 1401 through 1403 plus 1498) (Line 14 above) | | | | |
| 2901. | | | | | |
| 2902. | | | | | |
| 2903. | | | | | |
| 2998. | Summary of remaining write-ins for Line 29 from overflow page | | | | |
| 2999. | TOTALS (Lines 2901 through 2903 plus 2998) (Line 29 above) | | | | |

# STATEMENT OF REVENUE AND EXPENSES (Continued)

| | | 1<br>Current Year To Date | 2<br>Prior Year To Date | 3<br>Prior Year Ended December 31 |
|---|---|---|---|---|
| | **CAPITAL & SURPLUS ACCOUNT** | | | |
| 33. | Capital and surplus prior reporting year | 23,645,079 | 20,486,362 | 20,486,362 |
| 34. | Net income or (loss) from Line 32 | (112,472) | 2,538,158 | 1,760,717 |
| 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 | (562) | (1,241) | 41,363 |
| 37. | Change in net unrealized foreign exchange capital gain or (loss) | | | |
| 38. | Change in net deferred income tax | | | 27,316 |
| 39. | Change in nonadmitted assets | 90,349 | (317,241) | 1,329,321 |
| 40. | Change in unauthorized and certified reinsurance | | | |
| 41. | Change in treasury stock | | | |
| 42. | Change in surplus notes | | | |
| 43. | Cumulative effect of changes in accounting principles | | | |
| 44. | Capital Changes: | | | |
| | 44.1 Paid in | | | |
| | 44.2 Transferred from surplus (Stock Dividend) | | | |
| | 44.3 Transferred to surplus | | | |
| 45. | Surplus adjustments: | | | |
| | 45.1 Paid in | | | |
| | 45.2 Transferred to capital (Stock Dividend) | | | |
| | 45.3 Transferred from capital | | | |
| 46. | Dividends to stockholders | | | |
| 47. | Aggregate write-ins for gains or (losses) in surplus | | | |
| 48. | Net change in capital and surplus (Lines 34 to 47) | (22,685) | 2,219,676 | 3,158,717 |
| 49. | Capital and surplus end of reporting period (Line 33 plus 48) | 23,622,394 | 22,706,038 | 23,645,079 |
| **DETAILS OF WRITE-INS** | | | | |
| 4701. | Distribution to Parent Company | | | |
| 4702. | | | | |
| 4703. | | | | |
| 4798. | Summary of remaining write-ins for Line 47 from overflow page | | | |
| 4799. | TOTALS (Lines 4701 through 4703 plus 4798) (Line 47 above) | | | |

# CASH FLOW

| | | 1<br>Current Year To Date | 2<br>Prior Year To Date | 3<br>Prior Year Ended December 31 |
|---|---|---|---|---|
| | **Cash from Operations** | | | |
| 1. | Premiums collected net of reinsurance | 89,474,725 | 85,729,263 | 173,314,238 |
| 2. | Net investment income | (29,692) | (8,221) | (27,967) |
| 3. | Miscellaneous income | | | |
| 4. | TOTAL (Lines 1 to 3) | 89,445,033 | 85,721,042 | 173,286,271 |
| 5. | Benefit and loss related payments | 79,967,993 | 79,403,186 | 156,876,922 |
| 6. | Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts | | | |
| 7. | Commissions, expenses paid and aggregate write-ins for deductions | 6,742,287 | (9,758,061) | 16,053,216 |
| 8. | Dividends paid to policyholders | | | |
| 9. | Federal and foreign income taxes paid (recovered) net of $.....0 tax on capital gains (losses) | | 365,750 | (1,527,772) |
| 10. | TOTAL (Lines 5 through 9) | 86,710,280 | 70,010,875 | 171,402,366 |
| 11. | Net cash from operations (Line 4 minus Line 10) | 2,734,753 | 15,710,167 | 1,883,905 |
| | **Cash from Investments** | | | |
| 12. | Proceeds from investments sold, matured or repaid: | | | |
| | 12.1 Bonds | 916,084 | 1,838,437 | 3,078,308 |
| | 12.2 Stocks | | | |
| | 12.3 Mortgage loans | | | |
| | 12.4 Real estate | | | |
| | 12.5 Other invested assets | | | 8,885 |
| | 12.6 Net gains or (losses) on cash, cash equivalents and short-term investments | | | |
| | 12.7 Miscellaneous proceeds | | | 97,004 |
| | 12.8 TOTAL investment proceeds (Lines 12.1 to 12.7) | 916,084 | 1,838,437 | 3,184,197 |
| 13. | Cost of investments acquired (long-term only): | | | |
| | 13.1 Bonds | 889,580 | 1,828,082 | 3,048,608 |
| | 13.2 Stocks | | | |
| | 13.3 Mortgage loans | | | |
| | 13.4 Real estate | | | |
| | 13.5 Other invested assets | | | 61,368 |
| | 13.6 Miscellaneous applications | 29,828 | 58,178 | |
| | 13.7 TOTAL investments acquired (Lines 13.1 to 13.6) | 919,408 | 1,886,260 | 3,109,976 |
| 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) | (3,324) | (47,823) | 74,221 |
| | **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) | 4,775,200 | 7,479,508 | 20,396,167 |
| 17. | Net cash from financing and miscellaneous sources (Line 16.1 through 16.4 minus Line 16.5 plus Line 16.6) | 4,775,200 | 7,479,508 | 20,396,167 |
| | **RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS** | | | |
| 18. | Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17) | 7,506,629 | 23,141,852 | 22,354,293 |
| 19. | Cash, cash equivalents and short-term investments: | | | |
| | 19.1 Beginning of year | 45,140,170 | 22,785,877 | 22,785,877 |
| | 19.2 End of period (Line 18 plus Line 19.1) | 52,646,799 | 45,927,729 | 45,140,170 |

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

| | | | | |
|---|---|---|---|---|
| 20.0001 | | | | |

# EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

| | 1 | Comprehensive (Hospital & Medical) | | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|---|---|---|---|---|---|---|---|---|---|---|
| | | 2 | 3 | | | | | | | |
| | Total | Individual | Group | Medicare Supplement | Vision Only | Dental Only | Federal Employees Health Benefits Plan | Title XVIII Medicare | Title XIX Medicaid | Other |
| Total Members at end of: | | | | | | | | | | |
| 1. Prior Year | 13,109 | | | | | | | 13,109 | | |
| 2. First Quarter | 12,818 | | | | | | | 12,818 | | |
| 3. Second Quarter | 12,710 | | | | | | | 12,710 | | |
| 4. Third Quarter | | | | | | | | | | |
| 5. Current Year | | | | | | | | | | |
| 6. Current Year Member Months | 76,925 | | | | | | | 76,925 | | |
| Total Member Ambulatory Encounters for Period: | | | | | | | | | | |
| 7. Physician | 17,227 | | | | | | | 17,227 | | |
| 8. Non-Physician | 2,331 | | | | | | | 2,331 | | |
| 9. Total | 19,558 | | | | | | | 19,558 | | |
| 10. Hospital Patient Days Incurred | 17,226 | | | | | | | 17,226 | | |
| 11. Number of Inpatient Admissions | 1,302 | | | | | | | 1,302 | | |
| 12. Health Premiums Written (a) | 90,329,527 | | | | | | | 90,329,527 | | |
| 13. Life Premiums Direct | | | | | | | | | | |
| 14. Property/Casualty Premiums Written | | | | | | | | | | |
| 15. Health Premiums Earned | 90,329,527 | | | | | | | 90,329,527 | | |
| 16. Property/Casualty Premiums Earned | | | | | | | | | | |
| 17. Amount Paid for Provision of Health Care Services | 79,197,239 | | | | | | | 79,197,239 | | |
| 18. Amount Incurred for Provision of Health Care Services | 80,188,084 | | | | | | | 80,188,084 | | |

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees $.....90,329,527.

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

**Aging Analysis of Unpaid Claims**

| 1<br>Account | 2<br>1 - 30 Days | 3<br>31 - 60 Days | 4<br>61 - 90 Days | 5<br>91 - 120 days | 6<br>Over 120 Days | 7<br>Total |
|---|---|---|---|---|---|---|
| 0199999 Individually Listed Claims Unpaid | | | | | | |
| 0299999 Aggregate Accounts Not Individually Listed - Uncovered | | | | | | |
| 0399999 Aggregate Accounts Not Individually Listed - Covered | 1,636,560 | 179,233 | 47,446 | 25,783 | 1,433,920 | 3,322,942 |
| 0499999 Subtotals | 1,636,560 | 179,233 | 47,446 | 25,783 | 1,433,920 | 3,322,942 |
| 0599999 Unreported claims and other claim reserves | | | | | | 13,731,776 |
| 0699999 Total Amounts Withheld | | | | | | |
| 0799999 Total Claims Unpaid | | | | | | 17,054,718 |
| 0899999 Accrued Medical Incentive Pool And Bonus Amounts | | | | | | 532,260 |

# UNDERWRITING AND INVESTMENT EXHIBIT

## ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

| | Line of Business | Claims Paid Year to Date | | Liability End of Current Quarter | | 5 | 6 |
|---|---|---|---|---|---|---|---|
| | | 1<br>On Claims Incurred Prior to January 1 of Current Year | 2<br>On Claims Incurred During the Year | 3<br>On Claims Unpaid Dec 31 of Prior Year | 4<br>On Claims Incurred During the Year | Claims Incurred in Prior Years (Columns 1+3) | Estimated Claim Reserve and Claim Liability Dec 31 of Prior Year |
| 1. | Comprehensive (hospital & medical) | | | | | | |
| 2. | Medicare Supplement | | | | | | |
| 3. | Dental only | | | | | | |
| 4. | Vision only | | | | | | |
| 5. | Federal Employees Health Benefits Plan | | | | | | |
| 6. | Title XVIII - Medicare | 10,670,405 | 67,958,231 | 2,141,640 | 14,913,078 | 12,812,045 | 16,683,397 |
| 7. | Title XIX - Medicaid | | | | | | |
| 8. | Other health | | | | | | |
| 9. | Health subtotal (Lines 1 to 8) | 10,670,405 | 67,958,231 | 2,141,640 | 14,913,078 | 12,812,045 | 16,683,397 |
| 10. | Healthcare receivables (a) | | 3,086,759 | | | | 3,706,282 |
| 11. | Other non-health | | | | | | |
| 12. | Medical incentive pools and bonus amounts | 1,339,357 | | 32,943 | 499,317 | 1,372,300 | 1,303,013 |
| 13. | Totals (Lines 9 - 10 + 11 + 12) | 12,009,762 | 64,871,472 | 2,174,583 | 15,412,395 | 14,184,345 | 14,280,128 |

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

# Notes to Financial Statements

1. Summary of Significant Accounting Policies

A. Accounting Practices

The financial statements of Paramount Insurance Company (the "Company") are presented on a basis of accounting practices prescribed by the Ohio Department of Insurance.

The Ohio Department of Insurance recognizes only statutory accounting practices prescribed by the State of Ohio for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures Manual, (NAIC SAP) has been adopted as a component of prescribed practices by the State of Ohio.

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Ohio is shown below:

| | State of Domicile | Jun. 30 2022 | Dec. 31 2021 |
|---|---|---|---|
| **NET(LOSS) INCOME** | Ohio | | |
| Paramount Health Care state basis | | (112,472) | 1,760,717 |
| State Prescribed Practices that increase/(decrease) NAIC SAP | | - | - |
| State Permitted Practices that increase/(decrease) NAIC SAP | | - | - |
| NAIC SAP | | (112,472) | 1,760,717 |
| | | | |
| **SURPLUS** | | | |
| Paramount Health Care state basis | | 22,622,394 | 23,645,079 |
| State Prescribed Practices that increase/(decrease) NAIC SAP | | - | - |
| State Permitted Practices that increase/(decrease) NAIC SAP | | - | - |
| | | | |
| NAIC SAP | | 22,622,394 | 23,645,079 |

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

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

C. Accounting Policy

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

In addition, the company uses the following accounting policies:

1. Short-term investments are stated at amortized cost.
2. Bonds are stated at amortized cost.
3. Common stock investments are stated at Fair Market Value.
4. The Company does not have any preferred stock investments.
5. The Company does not invest in mortgage loans.
6. The Company has no investments in loan-backed securities.
7. The Company has no investments in subsidiaries.
8. The Company has no investments in joint ventures.
9. The Company does not invest in derivatives.

# Notes to Financial Statements

10. The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP No. 54, Individual and Group Accident and Health Contracts.
11. Unpaid losses and loss adjustment expenses include an amount from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and any adjustments are reflected in the period determined.
12. The Company has not modified its capitalization policy from prior period.
13. The Company estimates its pharmaceutical rebate receivables based on historical cash payments and actual prescriptions filled.

2. Accounting Changes and Corrections of Errors

No significant change.

3. Business Combinations and Goodwill

No significant change.

4. Discontinued Operations

**-NOT APPLICABLE**

5. Investments

A. The company does not have any Mortgage Loan investments.

B. The company is not a creditor for any Restructured Debt.

C. The company does not have any reverse mortgages.

D. 1. When necessary the Company uses internal estimates in determining prepayment assumptions and whether an other-than-temporary impairment has occurred.
2. None
3. None
4. None
5. None

E. The company does not have any repurchase agreements or security lending transactions.

F. The company does not have any repurchase agreements.

G. The company does not have any reverse repurchase agreements.

H. The company does not have repurchase agreements accounted for as a sale.

I. The company does not have reverse repurchase agreements accounted for as a sale.

J. The company does not have any real estate investments

K. The company does not have any low-income housing tax credits.

L. Restricted Assets
No significant change.

M. The company does not have any working capital financing investments.

# Notes to Financial Statements

N. The company does not have any netting of assets and liabilities relating to derivatives, repurchase and reverse repurchase and securities borrowing and lending.

O. The company does not have any structured notes.

P. The company does not have any 5* securities.

Q. The company does not have any short sales.

R. Prepayment Penalty and Acceleration Fees
No significant change.

6. Joint ventures, Partnerships and Limited Liability Companies

**-NOT APPLICABLE**

7. Investment Income

No significant change.

8. Derivative Instruments

**-NOT APPLICABLE**

9. Income Taxes

No significant change.

10. Information Concerning Parent, Subsidiaries and Affiliates

No significant change.

11. Debt

**-NOT APPLICABLE**

12. Retirement Plans, Deferred Compensation, Postemployment Benefits

No significant change.

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

No significant change.

14. Contingencies

**-NOT APPLICABLE**

15. Leases

No significant change.

16. Off-Balance Sheet Risk

No significant change.

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

**-NOT APPLICABLE**

18. Gain or loss to the Reporting Entity from Uninsured A&H Plans and the uninsured Portion of partially Insured Plans

No significant change.

# Notes to Financial Statements

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

**-NOT APPLICABLE**

20. Fair Value Measurements

A1. NA

B. NA

C.

| Type of Financial Instrument | Aggregate Fair Value | Admitted Assets | Level 1 | Level 2 | Level 3 | Net Asset Value | Not Practicable Carrying Value |
|---|---|---|---|---|---|---|---|
| Bonds | $ 3,877,292 | $ 3,995,086 | | $ 3,877,292 | | | |
| Cash Equivalents | 91,579 | 91,579 | 91,579 | | | | |
| Cash | 52,555,220 | 52,555,220 | 52,555,220 | | | | |

D. NA

21. Other Items

**-NOT APPLICABLE**

22. Subsequent Events

**-NOT APPLICABLE**

23. Reinsurance

No significant change.

24. Retrospectively Rated Contracts

**-NOT APPLICABLE**

25. Change in Incurred Claims and Claim Adjustment Expenses

Reserves as of December 31, 2021 were $17,010,397. As of June 30, 2022, $10,937,127 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Reserves remaining for prior years are now $2,141,640 on Medicare lines of insurance. Therefore, there has been a $3,931,630 favorable prior-year development since December 31, 2021 to June 30, 2022. The decrease is generally a result of ongoing analysis of recent development trends. Original estimates are increased or decreased, as additional information becomes known regarding individual claims.

26. Intercompany Pooling Arrangements

**-NOT APPLICABLE**

27. Structured Settlements

**-NOT APPLICABLE**

28. Health Care Receivables

No significant change.

29. Participating Policies

**-NOT APPLICABLE**

# Notes to Financial Statements

30. Premium Deficiency Reserves

| | |
|---|---|
| 1. Liability carried for premium deficiency reserve | $ - |
| 2. Date of the most recent evaluation of this liability | 2/8/2022 |
| 3. Was anticipated investment income utilized in the calculation? | yes |

31. Anticipated Salvage and Subrogation

No significant change.

# GENERAL INTERROGATORIES

## PART 1 - COMMON INTERROGATORIES
## GENERAL

1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act? Yes[X] No[ ]
1.2 If yes, has the report been filed with the domiciliary state? Yes[X] No[ ] N/A[ ]

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

3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes[X] No[ ]
If yes, complete Schedule Y, Parts 1 and 1A.
3.2 Have there been any substantial changes in the organizational chart since the prior quarter end? Yes[ ] No[X]
3.3 If the response to 3.2 is yes, provide a brief description of those changes:
3.4 Is the reporting entity publicly traded or a member of a publicly traded group? Yes[ ] No[X]
3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes[ ] No[X]
4.2 If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

| 1<br>Name of Entity | 2<br>NAIC Company Code | 3<br>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? Yes[ ] No[ ] N/A[X]
If yes, attach an explanation.

6.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2020
6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2020
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). 05/13/2022
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[ ] No[ ] N/A[X]

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

8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes[ ] No[X]
8.2 If response to 8.1 is yes, please identify the name of the bank holding company.
8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes[ ] No[X]
8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.]

| 1<br>Affiliate Name | 2<br>Location (City, State) | 3<br>FRB | 4<br>OCC | 5<br>FDIC | 6<br>SEC |
|---|---|---|---|---|---|
| | | No | No | No | No |

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

## FINANCIAL

10.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes[X] No[ ]
10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: $ 208,405

## 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:

# GENERAL INTERROGATORIES (Continued)

| | | 1<br>Prior Year-End<br>Book/Adjusted<br>Carrying Value | 2<br>Current Quarter<br>Book/Adjusted<br>Carrying Value |
|---|---|---|---|
| 14.21 | Bonds | | |
| 14.22 | Preferred Stock | | |
| 14.23 | Common Stock | | |
| 14.24 | Short-Term Investments | | |
| 14.25 | Mortgages 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 | | |

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 the 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<br>Name of Custodian(s) | 2<br>Custodian Address |
|---|---|
| The Bank of New York Mellon | Three Mellon Center, Suite 153-3925, Pittsburg, PA |

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<br>Name(s) | 2<br>Location(s) | 3<br>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<br>Old Custodian | 2<br>New Custodian | 3<br>Date of Change | 4<br>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<br>Name of Firm or Individual | 2<br>Affiliation |
|---|---|
| Income Research & Management | 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[ ] No[X]
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<br>Central Registration<br>Depository Number | 2<br>Name of Firm or Individual | 3<br>Legal Entity<br>Identifier (LEI) | 4<br>Registered<br>With | 5<br>Investment Management<br>Agreement (IMA) Filed |
|---|---|---|---|---|
| 104863 | Income Research & Management | NA | SEC | 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:

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 of 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)

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 shares were 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 reported 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.

    Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? Yes[ ] No[X]

# GENERAL INTERROGATORIES

## PART 2 - HEALTH

1. Operating Percentages:
   1.1 A&H loss percent ..... 90.000%
   1.2 A&H cost containment percent ..... 2.000%
   1.3 A&H expense percent excluding cost containment expenses ..... 10.000%

2.1 Do you act as a custodian for health savings accounts? Yes[ ] No[X]
2.2 If yes, please provide the amount of custodial funds held as of the reporting date. $ ..... 0
2.3 Do you act as an administrator for health savings accounts? Yes[ ] No[X]
2.4 If yes, please provide the balance of the funds administered as of the reporting date. $ ..... 0

3. Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states? Yes[ ] No[X]
3.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity? Yes[ ] No[X]

# SCHEDULE S - CEDED REINSURANCE

## Showing All New Reinsurance Treaties - Current Year to Date

| 1<br>NAIC<br>Company<br>Code | 2<br>ID<br>Number | 3<br>Effective<br>Date | 4<br>Name of Reinsurer | 5<br>Domiciliary<br>Jurisdiction | 6<br>Type of<br>Reinsurance<br>Ceded | 7<br>Type of<br>Business<br>Ceded | 8<br>Type of<br>Reinsurer | 9<br>Certified<br>Reinsurer Rating<br>(1 through 6) | 10<br>Effective Date<br>of Certified<br>Reinsurer Rating |
|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| **Accident and Health - Non-affiliates** | | | | | | | | | |
| 23680 | 47-0698507 | 01/01/2022 | ODYSSEY REINS CO | CT | SSL/G | MR | Authorized | | |
| 23680 | 47-0698507 | 01/01/2022 | ODYSSEY REINS CO | CT | SSL/I | MR | Authorized | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |

# 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 CHIP Title XXI | 6 Federal Employees Health Benefits Program Premiums | 7 Life and Annuity Premiums and Other Considerations | 8 Property/ Casualty Premiums | 9 Total Columns 2 Through 8 | 10 Deposit -Type Contracts |
|---|---|---|---|---|---|---|---|---|---|---|
| 1. Alabama (AL) | N | | | | | | | | | |
| 2. Alaska (AK) | N | | | | | | | | | |
| 3. Arizona (AZ) | N | | | | | | | | | |
| 4. Arkansas (AR) | N | | | | | | | | | |
| 5. California (CA) | N | | | | | | | | | |
| 6. Colorado (CO) | N | | | | | | | | | |
| 7. Connecticut (CT) | N | | | | | | | | | |
| 8. Delaware (DE) | N | | | | | | | | | |
| 9. District of Columbia (DC) | N | | | | | | | | | |
| 10. Florida (FL) | N | | | | | | | | | |
| 11. Georgia (GA) | N | | | | | | | | | |
| 12. Hawaii (HI) | N | | | | | | | | | |
| 13. Idaho (ID) | N | | | | | | | | | |
| 14. Illinois (IL) | N | | | | | | | | | |
| 15. Indiana (IN) | N | | | | | | | | | |
| 16. Iowa (IA) | N | | | | | | | | | |
| 17. Kansas (KS) | N | | | | | | | | | |
| 18. Kentucky (KY) | N | | | | | | | | | |
| 19. Louisiana (LA) | N | | | | | | | | | |
| 20. Maine (ME) | N | | | | | | | | | |
| 21. Maryland (MD) | N | | | | | | | | | |
| 22. Massachusetts (MA) | N | | | | | | | | | |
| 23. Michigan (MI) | N | | | | | | | | | |
| 24. Minnesota (MN) | N | | | | | | | | | |
| 25. Mississippi (MS) | N | | | | | | | | | |
| 26. Missouri (MO) | N | | | | | | | | | |
| 27. Montana (MT) | N | | | | | | | | | |
| 28. Nebraska (NE) | N | | | | | | | | | |
| 29. Nevada (NV) | N | | | | | | | | | |
| 30. New Hampshire (NH) | N | | | | | | | | | |
| 31. New Jersey (NJ) | N | | | | | | | | | |
| 32. New Mexico (NM) | N | | | | | | | | | |
| 33. New York (NY) | N | | | | | | | | | |
| 34. North Carolina (NC) | N | | | | | | | | | |
| 35. North Dakota (ND) | N | | | | | | | | | |
| 36. Ohio (OH) | L | | 90,329,527 | | | | | | 90,329,527 | |
| 37. Oklahoma (OK) | N | | | | | | | | | |
| 38. Oregon (OR) | N | | | | | | | | | |
| 39. Pennsylvania (PA) | N | | | | | | | | | |
| 40. Rhode Island (RI) | N | | | | | | | | | |
| 41. South Carolina (SC) | N | | | | | | | | | |
| 42. South Dakota (SD) | N | | | | | | | | | |
| 43. Tennessee (TN) | N | | | | | | | | | |
| 44. Texas (TX) | N | | | | | | | | | |
| 45. Utah (UT) | N | | | | | | | | | |
| 46. Vermont (VT) | N | | | | | | | | | |
| 47. Virginia (VA) | N | | | | | | | | | |
| 48. Washington (WA) | N | | | | | | | | | |
| 49. West Virginia (WV) | N | | | | | | | | | |
| 50. Wisconsin (WI) | N | | | | | | | | | |
| 51. Wyoming (WY) | N | | | | | | | | | |
| 52. American Samoa (AS) | N | | | | | | | | | |
| 53. Guam (GU) | N | | | | | | | | | |
| 54. Puerto Rico (PR) | N | | | | | | | | | |
| 55. U.S. Virgin Islands (VI) | N | | | | | | | | | |
| 56. Northern Mariana Islands (MP) | N | | | | | | | | | |
| 57. Canada (CAN) | N | | | | | | | | | |
| 58. Aggregate other alien (OT) | XXX | | | | | | | | | |
| 59. Subtotal | XXX | | 90,329,527 | | | | | | 90,329,527 | |
| 60. Reporting entity contributions for Employee Benefit Plans | XXX | | | | | | | | | |
| 61. Total (Direct Business) | XXX | | 90,329,527 | | | | | | 90,329,527 | |
| **DETAILS OF WRITE-INS** | | | | | | | | | | |
| 58001. | XXX | | | | | | | | | |
| 58002. | XXX | | | | | | | | | |
| 58003. | XXX | | | | | | | | | |
| 58998. Summary of remaining write-ins for Line 58 from overflow page | XXX | | | | | | | | | |
| 58999. TOTALS (Lines 58001 through 58003 plus 58998) (Line 58 above) | XXX | | | | | | | | | |

(a) Active Status Counts:

L – Licensed or Chartered - Licensed insurance carrier or domiciled RRG 1
R – Registered - Non-domiciled RRGs
E – Eligible - Reporting entities eligible or approved to write surplus lines in the state
Q – Qualified - Qualified or accredited reinsurer
N – None of the above – Not allowed to write business in the state 56

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

## MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

## ORGANIZATION CHART

Paramount Care Inc. is ultimately controlled by ProMedica Health System, Inc., ("ProMedica"), a nonprofit holding company exempt from federal taxation under Section 501(c)(3) and 509(a)(3) of the Internal Revenue Code. The following coding system is used to show the interrelationships among the various members of the insurance holding company system:

- l A circle means that ProMedica is the sole member/parent of the entity.
- u Each entity marked with a diamond is a subsidiary of the entity listed directly above and denoted with a circle.
- n Each entity marked with a square is a subsidiary of the entity listed directly above and marked with a diamond.
- n Each entity marked with a small square is a subsidiary of the entity listed directly above and marked with a larger square
- o Each entity marked with an open circle is a subsidiary of the entity listed directly above and marked with a small square.
- Ø Each entity marked with an arrow is a member of the insurance holding company system.

The following list depicts the identities and interrelationships of affiliated persons within the insurance holding company system:

Q15

- l ProMedica Foundation, an Ohio nonprofit corporation, of which Defiance Foundation, Fostoria Community Hospital Foundation, ProMedica, Bixby Hospital Foundation, Herrick Hospital Foundation, Memorial Hospital Foundation, Monroe Regional Hospital Foundation, Community Health Center Foundation and Metro Foundation (which includes Bay Park Community Hospital Foundation, Toledo Hospital Foundation, Ebeid Children's Hospital Foundation and Flower Hospital Foundation) are divisions.
  - u Mission Pointe Golf Course, LLC, a Michigan limited liability company, with ProMedica Foundation d/b/a Herrick Hospital Foundation as its sole member.
  - u HCR ManorCare Foundation, Inc.
  - u Heartland Hospice Memorial Fund, Inc.
  - u The Hug Fund
- l ProMedica Health Network, Inc., an Ohio for profit corporation, with ProMedica Health System, Inc. as the sole shareholder.
- l ProMedica Innovations, LLC, an Ohio limited liability company with ProMedica Health System as its sole member.
  - u ProMedica Natural Wellness, LLC (the inactive LLC, Nexttech Ohio, LLC, changed its name to ProMedica Natural Wellness, LLC).
  - u ProMedica Longevity and Wellness International, LLC
  - u ProMedica Longevity and Wellness US, LLC

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

## MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

- u Air Diverter Solutions, LLC, an Ohio limited liability company
- u ProMedica Resourceful, LLC, an Ohio limited liability company (formed 1/14/2021)

l Fostoria Hospital Association, an Ohio nonprofit corporation.

l Toledo Innovation Center Leverage Lender LLC

l PHS Toledo Innovation Center Holdings, LLC

- u Toledo Innovation Center Manager, LLC an Ohio limited liability company in which, PHS Toledo Innovation Center Holding, LLC holds 23% interest
  - n Toledo Innovation Center Landlord, LLC, an Ohio limited liability company in which, Toledo Innovation Center Manager, LLC holds 99% interest and Toledo Innovation Center master Tenant, LLC holds the remaining 1%.
  - n Toledo Innovation Center Master Tenant, LLC, an Ohio limited liability company in which, Toledo Innovation Center Manager holds 1% interest.

Q15.1

l ProMedica Continuum Services f/k/a ProMedica Physicians and Continuum Services f/k/a ProMedica Physician Corporation f/k/a ProMedica Physicians Enterprises, an Ohio nonprofit corporation.

- u ProMedica Continuing Care Services Corporation f/k/a Crestview of Ohio, Inc., an Ohio nonprofit corporation.
- u ProMedica Courier Services, Inc., an Ohio nonprofit corporation.
- u The Surgical Institute of Monroe Ambulatory Surgery Center, LLC, a Michigan limited liability company which ProMedica Continuum Service f/k/a ProMedica Physicians & Continuum Services holds 54% ownership interest and various physicians holding the remaining 46% interest.
- u ProMedica Pharmacy Group, LLC

l ProMedica Physician Group, Inc., an Ohio non-profit corporation.

- u ProMedica Central Corporation of Michigan, a Michigan nonprofit corporation and a wholly-owned subsidiary of ProMedica Physician Group, Inc.
- u ProMedica Central Physicians a Michigan non-profit corporation with ProMedica Physician Group, Inc., as its sole member.
- u ProMedica North Physicians Corporation, a Michigan nonprofit stock corporation and a wholly-owned subsidiary of ProMedica Physician Group, Inc.

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

## MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

- u ProMedica Northwest Ohio Cardiology Consultants a Michigan nonprofit corporation with ProMedica Physician Group, Inc., as its sole member.
- u ProMedica Monroe Cardiology, a Michigan nonprofit corporation with ProMedica Physician Group, Inc., as its sole member.
- u ProMedica Physician Management Services, LLC, an Ohio limited liability company with ProMedica Physician Group, Inc., as its sole member.
- u ProMedica Surgical Services, LLC, an Ohio limited liability company with ProMedica Physician Group, Inc., as its sole member.
- u ProMedica Monroe Physicians a Michigan nonprofit corporation with ProMedica Physician Group, Inc., as its sole member.
- u ProMedica Multi Specialty Physicians, a Michigan nonprofit corporation with ProMedica Physician Group, Inc. as the sole member (converted 1/1/2021)
- u ProMedica Genito-Urinary Surgeons a Michigan non-profit corporation with ProMedica Physician Group, Inc., as its sole member.
- u ProMedica Physicians at Home, Inc., a Michigan non-profit corporation with ProMedica Physician Group, Inc., as its sole member.
- u ProMedica at Home, Inc., a Michigan non-profit corporation with ProMedica Physician Group, Inc., as its sole member.
- u Memorial Professional Services, a Michigan nonprofit corporation with ProMedica Physician Group, Inc., as its sole member.
- u ProMedica Primary Care Providers, a Michigan nonprofit corporation with ProMedica Physician Group, Inc. as its sole member.
- u ProMedica Children’s Specialists, a Michigan nonprofit corporation with ProMedica Physician Group, Inc. as its sole member

Q15.2

- l ProMedica Indemnity Corporation, a Vermont corporation.
- l ProMedica Insurance Corporation f/k/a ProMedica Health Ventures Corporation f/k/a Vanguard Health Ventures, Inc., an Ohio nonprofit corporation.
  - u Paramount Preferred Options, Inc., an Ohio for-profit corporation, which is wholly-owned by ProMedica Insurance Corporation.
    - n Health Management Solutions, Inc., an Ohio for-profit corporation which is wholly-owned by Paramount Preferred Options.
    - n Paramount Preferred Solutions, Inc., an Ohio for-profit corporation which is wholly-owned by Paramount Preferred Options.
    - n CEC Associates, Inc., a Pennsylvania Corporation which is wholly-owned by Paramount Preferred Options
  - u NAIC 95189-Paramount Care, Inc., an Ohio nonprofit health-insuring corporation with ProMedica Insurance Corporation as its sole member.

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

## MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

- u Paramount Benefits Agency, Inc., an Ohio for-profit corporation and a wholly owned subsidiary of ProMedica Insurance Corporation.
- u NAIC 95566-Paramount Care of Michigan, Inc., a Michigan nonprofit corporation with ProMedica Insurance Corporation as its sole shareholder.
- u NAIC 11518-Paramount Insurance Company f/k/a ProMedica Life Insurance Company, a for-profit corporation and a wholly owned subsidiary of ProMedica Insurance Corporation.
- u NAIC 12353-Paramount Advantage, an Ohio nonprofit corporation with ProMedica Insurance Corporation as its sole member.
- u NAIC 96687-Health Resources, Inc., an Indiana for-profit corporation with ProMedica Insurance Corporation as its sole member.
- u NAI 16833-Paramount Care of Indiana, Inc., and Indiana nonprofit Corporation.
- u Paramount Care of Florida, Inc., a Florida nonprofit Corporation with ProMedica Insurance Corporation as its sole member.

Q15.3

- l Bay Park Community Hospital, an Ohio nonprofit corporation.
- l Community Health Center of Branch County, dba ProMedica Coldwater Regional Hospital, a Michigan nonprofit corporation.
- l Defiance Hospital, Inc., an Ohio nonprofit corporation.
  - u Kaitlyn's Cottage, Inc., an Ohio nonprofit corporation with Defiance Hospital, Inc., as its sole member.
- l Emma L. Bixby Medical Center, a Michigan nonprofit corporation ProMedica Health System, Inc. as its sole member.
  - u Herrick Memorial Development Corporation, a Michigan for-profit corporation and a wholly owned subsidiary of Emma L. Bixby Medical Center.
    - n Herrick Memorial Office Plaza Condominium Association, a Michigan nonprofit corporation in which Herrick Memorial Development Corporation holds 71.8% ownership interest with various physicians having the remaining 28.2% interest.
  - u Lenawee Clinical Partners is a Michigan nonprofit corporation in which Emma L. Bixby Medical Center holds 50% ownership interest with various physicians holding the remaining 50% interest.
  - u Wolf Creek Associates, LLC, a Michigan limited liability company with Emma L. Bixby Medical Center as its sole member.
- ● Herrick Memorial Hospital, Inc., a Michigan nonprofit corporation with ProMedica Health System, Inc. as its sole member.

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

## MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

- The Toledo Hospital, an Ohio nonprofit corporation, of which ProMedica Flower Hospital, ProMedica Russell J. Ebeid Children's Hospital f/k/a ProMedica Toledo Children's Hospital f/k/a ProMedica Children's Medical Center of Northwest Ohio and ProMedica Wildwood Orthopaedic and Spine Hospital are divisions.
  - PHS Investments, LLC, an Ohio for-profit limited company with The Toledo Hospital as its sole member.
  - Reynolds Road Surgery Center, LLC, an Ohio limited liability company in which The Toledo Hospital holds 63% ownership interest, with various physicians holding a remaining 37% interest.
  - Northwest Ohio Dedicated Breast MRI, LLC, an Ohio limited liability company in which The Toledo Hospital holds 50% ownership interest with TRA Investment Club, LLC, holding the remaining 50% interest.
  - Arrowhead Behavioral Health, LLC, a Delaware limited liability company in which The Toledo Hospital holds 30% ownership interest and Toledo Holding Company, LLC, holding a remaining 70% interest.
  - West Central Surgical Center, LLC, an Ohio limited liability company of which The Toledo Hospital holds 50% ownership interest and various physicians holding the remaining 50% interest.
  - ProMedica Hickman Cancer Center Pharmacy, LLC, an Ohio limited liability company with The Toledo Hospital as its sole member.
  - ProMedica Pathology Laboratories, LLC, a Delaware limited liability company where The Toledo Hospital holds 51% ownership interest.
  - ProMedica Intuitive Management of Ohio, LLC, a Delaware limited liability company where The Toledo Hospital holds 51% ownership interest.
  - TH Levis MOB I, LLC, an Ohio limited liability company with The Toledo Hospital as its sole member.
- PHS Ventures, LLC f/k/a/ PHS Ventures, Inc., f/k/a BVPH Ventures, Inc., a Delaware LLC with ProMedica Health System, Inc., as its sole member.
- Memorial Hospital, an Ohio nonprofit corporation.
  - Fremont Hospital/Physician Organization d/b/a Cooperative Care, an Ohio for-profit corporation of which Memorial Hospital holds 50% ownership interest and various other physicians hold the remaining 50% interest.
    - Sandusky County Medical Specialists, LLC, and Ohio limited liability company of which Fremont Hospital/Physician Organizations holds 100% ownership interest.
  - East-West Holding, Ltd., and Ohio limited liability company of which Memorial Hospital holds 50% ownership interest with The Bellevue Hospital, an Ohio nonprofit corporation holding the remaining 50% interest.

Q15.4

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

## MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

- Mercy Memorial Hospital Corporation, a Michigan nonprofit corporation d/b/a ProMedica Monroe Regional Hospital.
  - Monroe Health Ventures, Inc., a Michigan for-profit corporation.
  - Mercy Memorial Surgical Co-Management Company, LLC, a Michigan limited liability company of which Monroe Regional Hospital holds a 50% ownership interest and various other physicians hold the remaining 50% interest.
- 300 Madison Building, LLC, an Ohio limited liability company.
- ProMedica Active Mobility, LLC, an Ohio limited liability company.
- ProMedica International, LLC, an Ohio limited liability company.
- ProMedica Manager Member, LLC, an Ohio limited liability company.
  - ProMedica Downton Campus Landlord, LLC, an Ohio limited liability company, an Ohio LLC that ProMedica Manger Member, LLC holds 90% interest and ProMedica Tenant, LLC holds the remaining 10%.
    - ProMedica Master Tenant, LLC, an Ohio limited liability company, which ProMedica Downtown Campus Landlord, LLC holds 1% ownership interest.
- 1611 Monroe Investors, LLC, an Ohio limited liability company.
- Marina District Development, LLC, an Ohio limited liability company.
- IST Theatre, LLC, an Ohio limited liability company in which ProMedica Health System holds 100% ownership interest.
- Ball Park Properties, LLC, an Ohio limited liability company in which ProMedica Health System holds 100% ownership interest.
- Kapios, LLC, an Ohio limited liability company in which ProMedica Health System, Inc. holds 100% ownership interest.
- Toledo Riverfront, LLC, an Ohio limited liability company in which ProMedica Health System, Inc. holds 100% ownership interest.
- Fort Industry JV Partner, LLC, an Ohio limited liability company which ProMedica Health System holds 100% interest
  - Fort Industry Manager, LLC an Ohio limited liability company in which Fort Industry JV Partner, LLC holds 30% ownership interest.

Q15.5

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

## MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

- HCR ManorCare, Inc. an Ohio nonprofit corporation
  - Well PM Properties, LLC, a limited liability company where HCR ManorCare, Inc. holds 20% ownership interest.
  - Well PM Properties II, LLC, a limited liability company where HCR ManorCare, Inc. holds 20% ownership interest.
  - HCR Healthcare, LLC
    - Ancillary Services Management, LLC
    - HCR Home Health Care and Hospice, LLC
    - HCR Canterbury Village, LLC
    - HCR Home Health Care and Hospice, LLC
      - HCR Manor Care Services of Florida III, LLC
      - HCR Manor Care Services of Florida, LLC
      - ProMedica Hospice of Marion County, FL, LLC
      - ProMedica Hospice of Palm Beach County, FL, LLC
      - Home Health Care Services, LLC
      - The Pharmacy Counter, LLC
      - Heartland Hospice Services, LLC
        - Erie West Hospice and Palliative Care, Ltd., an Ohio limited liability company.
    - HCR II Healthcare, LLC
      - HCR III Healthcare, LLC (**See list of HCR III Healthcare, LLC OpCos)**
        - HCR IV Healthcare, LLC (**see list of HCR IV Healthcare, LLC OpCos)**

Q15.6

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

## MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

- HCR Manor Care Services, LLC
  - Heartland Care, LLC (which holds 2.3% interest in Ohio Employee health Partnership , LTD)
- Health Care and Retirement Corporation of America, LLC
- ProMedica Employment Services, LLC
- Heartland Rehabilitation Services, LLC
  - HCR ManorCare Medical Services of Florida, LLC
    - ProMedica Senior Care Medical Services I, LLC (formed 2/8/2021)
  - Heartland Home Care, LLC
  - Heartland Rehabilitation Services of Michigan, LLC
- Heartland Services, LLC
  - Heartland Healthcare Services, LLC- Joint Venture where Heartland Services, LLC has 50% interest (its disregarded entities: Heartland Pharmacy of Illinois, LLC, Heartland Pharmacy of Pennsylvania, LLC, and Sun Pharmacy, LLC)
- Industrial Wastes, LLC
- Manor Care Aviation, LLC
- Manor Care of Delaware County, LLC (which holds 50% interest in Mercy/Manor Partnership)
- Manor Care Supply, LLC
- ManorCare Health Services of Oklahoma, LLC (which holds 60.5% ownership interest in Norman Specialty Hospital, LLC)
- ManorCare Health Services of Toledo OH, LLC
  - ProMedica of Sylvania OH, LLC (NOTE: this was f/k/a Arden Courts of Germantown MD, LLC and previously fell under ManorCare Health Services, LLC)

Q15.7

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

## MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

- § ProMedica of Adrian MI, LLC (Note: this was f/k/a Arden Courts of Centerville VA, LLC and previously fell under ManorCare Health Services, LLC)
- § Monroe Community Health Services, a Michigan nonprofit corporation
- § Lenawee Long Term Care, a Michigan nonprofit corporation.
- § HCRMC- ProMedica, LLC, dba Heartland at ProMedica Flower Hospital, a Delaware limited liability company in which ManorCare Health Services of Toledo OH, LLC holds 100% interest

n ManorCare Health Services, LLC

- § Heartland of Toledo OH, LLC
- § In Home Health, LLC
  - o Visiting Nurse Hospice and Health Care, an Ohio nonprofit corporation
- § Manor Care of Lacey WA, Association
- § Manor Care of Salmon Creek WA, Association
- § Winter Park Nursing Center, LLC
  - o Manor Care of Winter Park FL, LLC- Winter Park Nursing Center, LLC has 50% interest

n Portfolio One, LLC

n Forum Purchasing, LLC, a limited liability company in which HCR Healthcare, LLC holds 27.3% ownership interest.

Q15.8

Other Affiliated Entities

Ø Lima Memorial Joint Operating Company, an Ohio nonprofit corporation, in which Lima Memorial Hospital, an Ohio nonprofit corporation and PHS Ventures, LLC, each hold 50% ownership interest.

Ø ProMedica Orthopedic Co-Management Company, LLC, an Ohio limited liability company is which The Toledo Hospital and Bay Park Community Hospital share 40% ownership interest with various physicians holding the remaining 60% interest.

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

## MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

- Ø Interactive Physical Therapy, an Ohio limited liability company in which ProMedica Health System, Inc., holds 50% ownership interest and various individuals holding the remaining 50% interest.
- Ø ProMedica Surgical Services Co-Management Company, LLC, an Ohio limited liability company in which The Toledo Hospital and Bay Park Community Hospital share 50% ownership interest with various physicians holding the remaining 50% interest.
- Ø Monroe Community Ambulance, a Michigan nonprofit corporation in which ProMedica Continuing Care Services Corporation holds 25% ownership interest, Monroe Regional Hospital holds 25% interest, and various other corporations hold the remaining 50% interest.
- Ø Front Health Holdco, LLC, an Ohio limited liability company in which ProMedica Health System holds 50% ownership interest.
- Ø AAA HealthConnect, LLC, a DE limited liability company in which ProMedica Health System, Inc., hold 50% ownership interest.
- Ø Healthonomy, an OH limited liability company, in which ProMedica Health System, Inc. holds 33.3% interest.
- Ø Senior & Rehab Care at MetroHealth, LLC an Ohio limited liability company in which ProMedica holds 51% ownership interest
- Ø ProMedica Senior Care of Georgia, LLC, an Ohio limited liability company in which ProMedica hold 90% ownership interest.

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

## MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

| Entity Name | State Formed | Date Formed | EIN | State Qual. | Member |
|---|---|---|---|---|---|
| Arden Courts of Avon CT, LLC | DE | 07/24/07 | 26-0625113 | CT | HCR III Healthcare, LLC |
| Arden Courts of Farmington CT, LLC | DE | 07/24/07 | 26-0625092 | CT | HCR III Healthcare, LLC |
| Manor Care-Pike Creek of Wilmington DE, LLC | DE | 07/24/07 | 26-0623346 | N/A---- | HCR III Healthcare, LLC |
| Arden Courts of Wilmington DE, LLC | DE | 07/24/07 | 26-0625127 | N/A---- | HCR III Healthcare, LLC |
| Manor Care of Wilmington DE, LLC | DE | 07/24/07 | 26-0623367 | N/A---- | HCR III Healthcare, LLC |
| Heartland of Boca Raton FL, LLC | DE | 07/24/07 | 26-0623949 | FL | HCR III Healthcare, LLC |
| Manor Care of Boca Raton FL, LLC | DE | 07/24/07 | 26-0624217 | FL | HCR III Healthcare, LLC |
| Heartland of Boynton Beach FL, LLC | DE | 07/24/07 | 26-0623523 | FL | HCR III Healthcare, LLC |
| Manor Care of Boynton Beach FL, LLC | DE | 07/24/07 | 26-0624241 | FL | HCR III Healthcare, LLC |
| Manor Care-Carrollwood of Tampa FL, LLC | DE | 07/24/07 | 26-0624118 | FL | HCR III Healthcare, LLC |
| Arden Courts of Delray Beach FL, LLC | DE | 07/24/07 | 26-0625237 | FL | HCR III Healthcare, LLC |
| Manor Care of Delray Beach FL, LLC | DE | 07/24/07 | 26-0624068 | FL | HCR III Healthcare, LLC |
| Manor Care of Dunedin FL, LLC | DE | 07/24/07 | 26-0624190 | FL | HCR III Healthcare, LLC |
| Arden Courts of Ft. Myers FL, LLC | DE | 07/24/07 | 26-0625314 | FL | HCR III Healthcare, LLC |
| Heartland of Fort Myers FL, LLC | DE | 07/24/07 | 26-0623726 | FL | HCR III Healthcare, LLC |
| Manor Care of Ft. Myers FL, LLC | DE | 07/24/07 | 26-0624272 | FL | HCR III Healthcare, LLC |
| Heartland-South Jacksonville of Jacksonville FL, LLC | DE | 07/24/07 | 26-0623559 | FL | HCR III Healthcare, LLC |
| Heartland of Jacksonville FL, LLC | DE | 07/24/07 | 26-0623590 | FL | HCR III Healthcare, LLC |
| Heartland of Kendall FL, LLC | DE | 07/24/07 | 26-0623392 | FL | HCR III Healthcare, LLC |
| Kensington Manor-Sarasota FL, LLC | DE | 07/24/07 | 26-0623931 | FL | HCR III Healthcare, LLC |
| Arden Courts of Largo FL, LLC | DE | 07/24/07 | 26-0625141 | FL | HCR III Healthcare, LLC |
| Heartland of Lauderhill FL, LLC | DE | 07/24/07 | 26-0623998 | FL | HCR III Healthcare, LLC |
| Arden Courts-Lely Palms of Naples FL, LLC | DE | 07/24/07 | 26-0625279 | FL | HCR III Healthcare, LLC |
| Manor Care-Lely Palms of Naples FL (SH), LLC | DE | 07/24/07 | 26-0625295 | FL | HCR III Healthcare, LLC |
| Heartland-Miami Lakes of Hialeah FL, LLC | DE | 07/24/07 | 26-0623652 | FL | HCR III Healthcare, LLC |
| Manor Care of Naples FL, LLC | DE | 07/24/07 | 26-0624049 | FL | HCR III Healthcare, LLC |
| Heartland of Orange Park FL, LLC | DE | 07/24/07 | 26-0623613 | FL | HCR III Healthcare, LLC |
| Arden Courts of Palm Harbor FL, LLC | DE | 07/24/07 | 26-0625222 | FL | HCR III Healthcare, LLC |
| Manor Care of Palm Harbor FL, LLC | DE | 07/24/07 | 26-0624018 | FL | HCR III Healthcare, LLC |
| Manor Care of Plantation FL, LLC | DE | 07/24/07 | 26-0624255 | FL | HCR III Healthcare, LLC |
| Heartland-Prosperity Oaks of Palm Beach Gardens FL, LLC | DE | 07/24/07 | 26-0623909 | FL | HCR III Healthcare, LLC |
| Arden Courts of Sarasota FL, LLC | DE | 07/24/07 | 26-0625246 | FL | HCR III Healthcare, LLC |
| Heartland of Sarasota FL, LLC | DE | 07/24/07 | 26-0623968 | FL | HCR III Healthcare, LLC |
| Manor Care Nursing Center of Sarasota FL, LLC | DE | 07/24/07 | 26-0624159 | FL | HCR III Healthcare, LLC |
| Arden Courts of Seminole FL, LLC | DE | 07/24/07 | 26-0625266 | FL | HCR III Healthcare, LLC |
| Heartland of Tamarac FL, LLC | DE | 07/24/07 | 26-0623500 | FL | HCR III Healthcare, LLC |
| Arden Courts of Tampa FL, LLC | DE | 07/24/07 | 26-0625330 | FL | HCR III Healthcare, LLC |
| Manor Care of Venice FL, LLC | DE | 07/24/07 | 26-0624092 | FL | HCR III Healthcare, LLC |
| Arden Courts of W. Palm Beach FL, LLC | DE | 07/24/07 | 26-0625258 | FL | HCR III Healthcare, LLC |
| Manor Care of W. Palm Beach FL, LLC | DE | 07/24/07 | 26-0624142 | FL | HCR III Healthcare, LLC |
| Arden Courts of Winter Springs FL, LLC | DE | 07/24/07 | 26-0625340 | FL | HCR III Healthcare, LLC |

Q15.10

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

## MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

| Entity Name con't | State Formed | Date Formed | EIN | State Qual. | Member |
|---|---|---|---|---|---|
| Heartland of Zephyrhills FL, LLC | DE | 07/24/07 | 26-0623476 | FL | HCR III Healthcare, LLC |
| Manor Care Rehabilitation Center of Decatur GA, LLC | DE | 07/24/07 | 26-0624293 | GA | HCR III Healthcare, LLC |
| Manor Care of Marietta GA, LLC | DE | 07/24/07 | 26-0624336 | GA | HCR III Healthcare, LLC |
| Manor Care of Cedar Rapids IA, LLC | DE | 07/24/07 | 26-0624378 | IA | HCR III Healthcare, LLC |
| Manor Care of Davenport IA, LLC | DE | 07/24/07 | 26-0624394 | IA | HCR III Healthcare, LLC |
| Manor Care of Dubuque IA, LLC | DE | 07/24/07 | 26-0624416 | IA | HCR III Healthcare, LLC |
| Manor Care of Waterloo IA, LLC | DE | 07/24/07 | 26-0624363 | IA | HCR III Healthcare, LLC |
| Manor Care of West Des Moines IA, LLC | DE | 07/24/07 | 26-0624438 | IA | HCR III Healthcare, LLC |
| Heartland of Adelphi MD, LLC | DE | 07/24/07 | 26-0620015 | MD | HCR III Healthcare, LLC |
| Manor Care of Bethesda MD, LLC | DE | 07/24/07 | 26-0620122 | MD | HCR III Healthcare, LLC |
| Manor Care of Chevy Chase MD, LLC | DE | 07/24/07 | 26-0620158 | MD | HCR III Healthcare, LLC |
| Heartland of Hyattsville MD, LLC | DE | 07/24/07 | 26-0619980 | MD | HCR III Healthcare, LLC |
| Arden Courts of Kensington MD, LLC | DE | 07/24/07 | 26-0622568 | MD | HCR III Healthcare, LLC |
| Manor Care-Largo MD, LLC | DE | 07/24/07 | 26-0620266 | MD | HCR III Healthcare, LLC |
| Arden Courts of Pikesville MD, LLC | DE | 07/24/07 | 26-0622121 | MD | HCR III Healthcare, LLC |
| Springhouse of Pikesville MD, LLC | DE | 07/24/07 | 26-0620079 | MD | HCR III Healthcare, LLC |
| Arden Courts of Potomac MD, LLC | DE | 07/24/07 | 26-0622198 | MD | HCR III Healthcare, LLC |
| Manor Care of Potomac MD, LLC | DE | 07/24/07 | 26-0620187 | MD | HCR III Healthcare, LLC |
| Manor Care-Rossville MD, LLC | DE | 07/24/07 | 26-0620310 | MD | HCR III Healthcare, LLC |
| Manor Care-Roland Park MD, LLC | DE | 07/24/07 | 26-0620341 | MD | HCR III Healthcare, LLC |
| Manor Care-Ruxton MD, LLC | DE | 07/24/07 | 26-0620431 | MD | HCR III Healthcare, LLC |
| Arden Courts of Silver Spring MD, LLC | DE | 07/24/07 | 26-0622164 | MD | HCR III Healthcare, LLC |
| Manor Care of Silver Spring MD, LLC | DE | 07/24/07 | 26-0620058 | MD | HCR III Healthcare, LLC |
| Arden Courts of Towson MD, LLC | DE | 07/24/07 | 26-0622661 | MD | HCR III Healthcare, LLC |
| Manor Care of Towson, LLC | DE | 07/24/07 | 26-0620456 | MD | HCR III Healthcare, LLC |
| Manor Care of Wheaton MD, LLC | DE | 07/24/07 | 26-0620376 | MD | HCR III Healthcare, LLC |
| Arden Courts of Cherry Hill NJ, LLC | DE | 07/24/07 | 26-0623009 | NJ | HCR III Healthcare, LLC |
| Manor Care of Mountainside NJ, LLC | DE | 07/24/07 | 26-0612791 | NJ | HCR III Healthcare, LLC |
| Manor Care of Voorhees NJ, LLC | DE | 07/24/07 | 26-0612955 | NJ | HCR III Healthcare, LLC |
| Arden Courts of Wayne NJ, LLC | DE | 07/24/07 | 26-0622912 | NJ | HCR III Healthcare, LLC |
| Manor Care-West Deptford of Paulsboro NJ, LLC | DE | 07/24/07 | 26-0612993 | NJ | HCR III Healthcare, LLC |
| Arden Courts of W. Orange NJ, LLC | DE | 07/24/07 | 26-0622938 | NJ | HCR III Healthcare, LLC |
| Arden Courts of Whippany NJ, LLC | DE | 07/24/07 | 26-0623155 | NJ | HCR III Healthcare, LLC |
| Arden Courts of Allentown PA, LLC | DE | 07/24/07 | 26-0623965 | PA | HCR III Healthcare, LLC |
| Manor Care of Allentown PA, LLC | DE | 07/24/07 | 26-0610673 | PA | HCR III Healthcare, LLC |
| Manor Care of Bethel Park PA, LLC | DE | 07/24/07 | 26-0622002 | PA | HCR III Healthcare, LLC |
| Manor Care of Bethlehem PA (2021), LLC | DE | 07/24/07 | 26-0614878 | PA | HCR III Healthcare, LLC |
| Manor Care of Bethlehem PA (2029), LLC | DE | 07/24/07 | 26-0621845 | PA | HCR III Healthcare, LLC |
| Manor Care of Camp Hill PA, LLC | DE | 07/24/07 | 26-0623070 | PA | HCR III Healthcare, LLC |
| Manor Care of Carlisle PA, LLC | DE | 07/24/07 | 26-0610623 | PA | HCR III Healthcare, LLC |
| Manor Care of Chambersburg PA, LLC | DE | 07/24/07 | 26-0614915 | PA | HCR III Healthcare, LLC |

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

## MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

| Entity Name con't | State Formed | Date Formed | EIN | State Qual. | Member |
|---|---|---|---|---|---|
| Manor Care of Dallastown PA, LLC | DE | 07/24/07 | 26-0614534 | PA | HCR III Healthcare, LLC |
| Donahoe Manor-Bedford PA, LLC | DE | 07/24/07 | 26-0623108 | PA | HCR III Healthcare, LLC |
| Manor Care of Easton PA, LLC | DE | 07/24/07 | 26-0621877 | PA | HCR III Healthcare, LLC |
| Manor Care-Greentree of Pittsburgh PA, LLC | DE | 07/24/07 | 26-0622713 | PA | HCR III Healthcare, LLC |
| Hampton House-Wilkes Barre, PA, LLC | DE | 07/24/07 | 26-0610244 | PA | HCR III Healthcare, LLC |
| Manor Care of Huntingdon Valley PA, LLC | DE | 07/24/07 | 26-0610582 | PA | HCR III Healthcare, LLC |
| Arden Courts of Jefferson Hills PA, LLC | DE | 07/24/07 | 26-0624075 | PA | HCR III Healthcare, LLC |
| Manor Care of Jersey Shore PA, LLC | DE | 07/24/07 | 26-0614957 | PA | HCR III Healthcare, LLC |
| Arden Courts of King of Prussia PA, LLC | DE | 07/24/07 | 26-0624032 | PA | HCR III Healthcare, LLC |
| Manor Care of King of Prussia PA, LLC | DE | 07/24/07 | 26-0610645 | PA | HCR III Healthcare, LLC |
| Manor Care of Kingston PA, LLC | DE | 07/24/07 | 26-0615323 | PA | HCR III Healthcare, LLC |
| Manor Care-Kingston Court of York PA, LLC | DE | 07/24/07 | 26-0610561 | PA | HCR III Healthcare, LLC |
| Manor Care of Lancaster PA, LLC | DE | 07/24/07 | 26-0621637 | PA | HCR III Healthcare, LLC |
| Manor Care-Lansdale of Montgomeryville PA, LLC | DE | 07/24/07 | 26-0614451 | PA | HCR III Healthcare, LLC |
| Manor Care of Laureldale PA, LLC | DE | 07/24/07 | 26-0615380 | PA | HCR III Healthcare, LLC |
| Manor Care of Lebanon PA, LLC | DE | 07/24/07 | 26-0615358 | PA | HCR III Healthcare, LLC |
| Manor Care-Linden Village of Lebanon PA, LLC | DE | 07/24/07 | 26-0621960 | PA | HCR III Healthcare, LLC |
| Manor Care of McMurray PA, LLC | DE | 07/24/07 | 26-0614341 | PA | HCR III Healthcare, LLC |
| Arden Courts of Monroeville PA, LLC | DE | 07/24/07 | 26-0623898 | PA | HCR III Healthcare, LLC |
| Manor Care of Monroeville PA, LLC | DE | 07/24/07 | 26-0614497 | PA | HCR III Healthcare, LLC |
| Arden Courts-North Hills of Pittsburgh PA, LLC | DE | 07/24/07 | 26-0623920 | PA | HCR III Healthcare, LLC |
| Manor Care-North Hills of Pittsburgh PA, LLC | DE | 07/24/07 | 26-0610604 | PA | HCR III Healthcare, LLC |
| Old Orchard Health Care Center-Easton PA, LLC | DE | 07/24/07 | 26-0623007 | PA | HCR III Healthcare, LLC |
| Heartland of Pittsburgh PA, LLC | DE | 07/24/07 | 26-0610260 | PA | HCR III Healthcare, LLC |
| Manor Care of Pottstown PA, LLC | DE | 07/24/07 | 26-0615421 | PA | HCR III Healthcare, LLC |
| Manor Care of Pottsville PA, LLC | DE | 07/24/07 | 26-0615453 | PA | HCR III Healthcare, LLC |
| Shadyside Nursing and Rehabilitation Center-Pittsburgh PA, LLC | DE | 07/24/07 | 26-0610325 | PA | HCR III Healthcare, LLC |
| Manor Care of Sinking Spring PA, LLC | DE | 07/24/07 | 26-0621908 | PA | HCR III Healthcare, LLC |
| Sky Vue Terrace-Pittsburgh PA, LLC | DE | 07/24/07 | 26-0610347 | PA | HCR III Healthcare, LLC |
| Manor Care of Sunbury PA, LLC | DE | 07/24/07 | 26-0615499 | PA | HCR III Healthcare, LLC |
| Arden Courts-Susquehanna of Harrisburg PA, LLC | DE | 07/24/07 | 26-0624065 | PA | HCR III Healthcare, LLC |
| Wallingford Nursing and Rehabilitation Center-Walllingford PA, LLC | DE | 07/24/07 | 26-0610542 | PA | HCR III Healthcare, LLC |
| Manor Care of West Reading PA, LLC | DE | 07/24/07 | 26-0615529 | PA | HCR III Healthcare, LLC |
| Arden Courts-Warminster of Hatboro PA, LLC | DE | 07/24/07 | 26-0623869 | PA | HCR III Healthcare, LLC |
| Whitehall Borough-Pittsburgh PA, LLC | DE | 07/24/07 | 26-0622805 | PA | HCR III Healthcare, LLC |
| Manor Care of Williamsport PA (North), LLC | DE | 07/24/07 | 26-0621747 | PA | HCR III Healthcare, LLC |
| Manor Care of Williamsport PA (South), LLC | DE | 07/24/07 | 26-0621778 | PA | HCR III Healthcare, LLC |
| Arden Courts of Yardley PA, LLC | DE | 07/24/07 | 26-0623944 | PA | HCR III Healthcare, LLC |
| Manor Care of Yardley PA, LLC | DE | 07/24/07 | 26-0614171 | PA | HCR III Healthcare, LLC |
| Manor Care of Yeadon PA, LLC | DE | 07/24/07 | 26-0621815 | PA | HCR III Healthcare, LLC |
| Manor Care of York PA (North), LLC | DE | 07/24/07 | 26-0622887 | PA | HCR III Healthcare, LLC |

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

## MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

| Entity Name con't | State Formed | Date Formed | EIN | State Qual. | Member |
|---|---|---|---|---|---|
| Manor Care of York PA (South), LLC | DE | 07/24/07 | 26-0622947 | PA | HCR III Healthcare, LLC |
| Heartland-Charleston of Hanahan SC, LLC | DE | 07/24/07 | 26-0623167 | SC | HCR III Healthcare, LLC |
| Columbia Rehabilitation and Nursing Center-Columbia SC, LLC | DE | 07/24/07 | 26-0623408 | SC | HCR III Healthcare, LLC |
| Oakmont East-Greenville SC, LLC | DE | 07/24/07 | 26-0623316 | SC | HCR III Healthcare, LLC |
| Oakmont West-Greenville SC, LLC | DE | 07/24/07 | 26-0623335 | SC | HCR III Healthcare, LLC |
| Oakmont of Union SC, LLC | DE | 07/24/07 | 26-0623208 | SC | HCR III Healthcare, LLC |
| West Ashley Rehabilitation and Nursing Center-Charleston SC, LLC | DE | 07/24/07 | 26-0623364 | SC | HCR III Healthcare, LLC |
| Manor Care of Fond Du Lac WI, LLC | DE | 07/24/07 | 26-0624802 | WI | HCR III Healthcare, LLC |
| Manor Care of Green Bay WI (East), LLC | DE | 07/24/07 | 26-0624767 | WI | HCR III Healthcare, LLC |
| Manor Care of Green Bay WI (West), LLC | DE | 07/24/07 | 26-0624786 | WI | HCR III Healthcare, LLC |
| Heartland-Pewaukee of Waukesha WI, LLC | DE | 07/24/07 | 26-0624873 | WI | HCR III Healthcare, LLC |
| Heartland of Platteville WI, LLC | DE | 07/24/07 | 26-0624818 | WI | HCR III Healthcare, LLC |
| Heartland-Washington Manor of Kenosha WI, LLC | DE | 07/24/07 | 26-0624859 | WI | HCR III Healthcare, LLC |
| ProMedica Senior Care of Brightwood, MD, LLC | DE | 12/23/20 | 86-1310885 | MD | HCR III Healthcare, LLC |
| ProMedica Senior Care of Exton, PA,LLC | DE | 12/14/20 | 86-1376199 | PA | HCR III Healthcare, LLC |
| ProMedica Senior Care of Lafayette, CO, LLC | DE | 12/14/20 | 86-1504827 | CO | HCR III Healthcare, LLC |
| ProMedica Senior Care of Lakewood, CO, LLC | DE | 12/22/20 | 86-4395571 | CO | HCR III Healthcare, LLC |
| ProMedica Senior Care of Moorestpwn, NJ, LLC | DE | 12/14/20 | 86-1448854 | NJ | HCR III Healthcare, LLC |
| ProMedica Senior Care of Philadelphia, PA, LLC | DE | 12/14/20 | 86-1430242 | PA | HCR III Healthcare, LLC |
| ProMedica Senior Care of Piscataway NJ, Inc | DE | 12/22/20 | 86-1179270 | NJ | HCR III Healthcare, LLC |
| ProMedica Senior Care of Voorhees NJ, LLC | DE | 12/22/20 | 86-1243633 | NJ | HCR III Healthcare, LLC |
| ProMedica Senior Care of Willow Grove, PA, LLC | DE | 12/23/20 | 86-1360692 | PA | HCR III Healthcare, LLC |
| Manor Care of Citrus Heights CA, LLC | DE | 07/24/07 | 26-0622564 | CA | HCR IV Healthcare. LLC |
| Manor Care of Fountain Valley CA, LLC | DE | 07/24/07 | 26-0622988 | CA | HCR IV Healthcare, LLC |
| Manor Care of Hemet CA, LLC | DE | 07/24/07 | 26-0623107 | CA | HCR IV Healthcare. LLC |
| Manor Care of Palm Desert CA, LLC | DE | 07/24/07 | 26-0623221 | CA | HCR IV Healthcare. LLC |
| Manor Care of Sunnyvale CA, LLC | DE | 07/24/07 | 26-0623034 | CA | HCR IV Healthcare, LLC |
| Manor Care-Tice Valley CA, LLC | DE | 07/24/07 | 26-0622591 | CA | HCR IV Healthcare, LLC |
| Manor Care of Walnut Creek CA, LLC | DE | 07/24/07 | 26-0623196 | CA | HCR IV Healthcare, LLC |
| Manor Care of Denver CO, LLC | DE | 07/24/07 | 26-0623262 | CO | HCR IV Healthcare, LLC |
| Manor Care of Boulder CO, LLC | DE | 07/24/07 | 26-0623287 | CO | HCR IV Healthcare, LLC |
| Heartland of Canton IL, LLC | DE | 07/24/07 | 26-0604153 | IL | HCR IV Healthcare, LLC |
| Heartland of Champaign IL, LLC | DE | 07/24/07 | 26-0615806 | IL | HCR IV Healthcare, LLC |
| Heartland of Decatur IL, LLC | DE | 07/24/07 | 26-0615541 | IL | HCR IV Healthcare, LLC |
| Manor Care of Elk Grove Village IL, LLC | DE | 07/24/07 | 26-0618782 | IL | HCR IV Healthcare, LLC |
| Heartland of Galesburg IL, LLC | DE | 07/24/07 | 26-0624455 | IL | HCR IV Healthcare, LLC |
| Arden Courts of Geneva IL, LLC | DE | 07/24/07 | 26-0625428 | IL | HCR IV Healthcare, LLC |
| Arden Courts of Glen Ellyn IL, LLC | DE | 07/24/07 | 26-0625418 | IL | HCR IV Healthcare, LLC |
| Heartland of Henry IL, LLC | DE | 07/24/07 | 26-0614845 | IL | HCR IV Healthcare, LLC |
| Manor Care of Hinsdale IL, LLC | DE | 07/24/07 | 26-0615984 | IL | HCR IV Healthcare, LLC |
| Manor Care of Homewood IL, LLC | DE | 07/24/07 | 26-0614920 | IL | HCR IV Healthcare, LLC |

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

## MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

| Entity Name con't | State Formed | Date Formed | EIN | State Qual. | Member |
|---|---|---|---|---|---|
| Manor Care of Libertyville IL, LLC | DE | 07/24/07 | 26-0615859 | IL | HCR IV Healthcare, LLC |
| Heartland of Macomb IL, LLC | DE | 07/24/07 | 26-0624476 | IL | HCR IV Healthcare, LLC |
| Heartland of Moline IL, LLC | DE | 07/24/07 | 26-0624491 | IL | HCR IV Healthcare, LLC |
| Manor Care of Naperville IL, LLC | DE | 07/24/07 | 26-0615638 | IL | HCR IV Healthcare, LLC |
| Heartland of Normal IL, LLC | DE | 07/24/07 | 26-0615386 | IL | HCR IV Healthcare, LLC |
| Manor Care of Northbrook IL, LLC | DE | 07/24/07 | 26-0618960 | IL | HCR IV Healthcare, LLC |
| Manor Care of Oak Lawn (East) IL, LLC | DE | 07/24/07 | 26-0615929 | IL | HCR IV Healthcare, LLC |
| Manor Care of Oak Lawn (West) IL, LLC | DE | 07/24/07 | 26-0616038 | IL | HCR IV Healthcare, LLC |
| Manor Care of Palos Heights IL, LLC | DE | 07/24/07 | 26-0615889 | IL | HCR IV Healthcare, LLC |
| Manor Care of Palos Heights (West) IL, LLC | DE | 07/24/07 | 26-0618879 | IL | HCR IV Healthcare, LLC |
| Heartland of Paxton IL, LLC | DE | 07/24/07 | 26-0614884 | IL | HCR IV Healthcare, LLC |
| Heartland of Peoria IL, LLC | DE | 07/24/07 | 26-0615478 | IL | HCR IV Healthcare, LLC |
| Heartland-Riverview of East Peoria IL (SNF), LLC | DE | 07/24/07 | 26-0619009 | IL | HCR IV Healthcare, LLC |
| Manor Care of Rolling Meadows IL, LLC | DE | 07/24/07 | 26-0619150 | IL | HCR IV Healthcare, LLC |
| Arden Courts of South Holland IL, LLC | DE | 07/24/07 | 26-0622045 | IL | HCR IV Healthcare, LLC |
| Manor Care of South Holland IL, LLC | DE | 07/24/07 | 26-0615010 | IL | HCR IV Healthcare, LLC |
| Manor Care of Westmont IL, LLC | DE | 07/24/07 | 26-0619027 | IL | HCR IV Healthcare, LLC |
| Arden Courts of Palos Heights IL, LLC | DE | 07/24/07 | 26-0625390 | IL | HCR IV Healthcare, LLC |
| Arden Courts of Elk Grove Village IL, LLC | DE | 07/24/07 | 26-0625405 | IL | HCR IV Healthcare, LLC |
| Arden Courts of Northbrook IL, LLC | DE | 07/24/07 | 26-0625378 | IL | HCR IV Healthcare, LLC |
| Manor Care of Indy (South) IN, LLC | DE | 07/24/07 | 26-0619623 | IN | HCR IV Healthcare, LLC |
| Manor Care-Summer Trace of Carmel IN, LLC | DE | 07/24/07 | 26-0619716 | IN | HCR IV Healthcare, LLC |
| Manor Care of Topeka KS, LLC | DE | 07/24/07 | 26-0619810 | KS | HCR IV Healthcare, LLC |
| Manor Care of Wichita KS, LLC | DE | 07/24/07 | 26-0619870 | KS | HCR IV Healthcare, LLC |
| Heartland of Allen Park MI, LLC | DE | 07/24/07 | 26-0611286 | MI | HCR IV Healthcare, LLC |
| Heartland of Ann Arbor MI, LLC | DE | 07/24/07 | 26-0612384 | MI | HCR IV Healthcare, LLC |
| Heartland of Battle Creek MI, LLC | DE | 07/24/07 | 26-0612206 | MI | HCR IV Healthcare, LLC |
| Arden Courts of Bingham Farms MI, LLC | DE | 07/24/07 | 26-0622828 | MI | HCR IV Healthcare, LLC |
| Heartland-Briarwood MI, LLC | DE | 07/24/07 | 26-0611711 | MI | HCR IV Healthcare, LLC |
| Heartland of Canton MI, LLC | DE | 07/24/07 | 26-0620527 | MI | HCR IV Healthcare, LLC |
| Heartland of Dearborn Heights MI, LLC | DE | 07/24/07 | 26-0611231 | MI | HCR IV Healthcare, LLC |
| Fostrian Courts Assisted Living-Flushing MI, LLC | DE | 07/24/07 | 26-0622894 | MI | HCR IV Healthcare, LLC |
| Heartland-Fostrian of Flushing MI, LLC | DE | 07/24/07 | 26-0611818 | MI | HCR IV Healthcare, LLC |
| Heartland-Georgian East of Grosse Pointe MI, LLC | DE | 07/24/07 | 26-0611334 | MI | HCR IV Healthcare, LLC |
| Heartland-Hampton of Bay City MI, LLC | DE | 07/24/07 | 26-0611865 | MI | HCR IV Healthcare, LLC |
| Manor Care of Kingsford MI, LLC | DE | 07/24/07 | 26-0611592 | MI | HCR IV Healthcare, LLC |
| Arden Courts of Livonia MI, LLC | DE | 07/24/07 | 26-0622866 | MI | HCR IV Healthcare, LLC |
| Heartland-Oakland MI, LLC | DE | 07/24/07 | 26-0620480 | MI | HCR IV Healthcare, LLC |
| Arden Courts of Sterling Heights MI, LLC | DE | 07/24/07 | 26-0622772 | MI | HCR IV Healthcare, LLC |
| Heartland of Three Rivers MI, LLC | DE | 07/24/07 | 26-0612325 | MI | HCR IV Healthcare, LLC |
| Heartland-University of Livonia MI, LLC | DE | 07/24/07 | 26-0611184 | MI | HCR IV Healthcare, LLC |

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

## MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

| Entity Name con't | State Formed | Date Formed | EIN | State Qual. | Member |
|---|---|---|---|---|---|
| Manor Care of Fargo ND, LLC | DE | 07/24/07 | 26-0612718 | ND | HCR IV Healthcare, LLC |
| Arden Courts of Akron OH, LLC | DE | 07/24/07 | 26-0623857 | OH | HCR IV Healthcare, LLC |
| Manor Care of Akron OH, LLC | DE | 07/24/07 | 26-0610034 | OH | HCR IV Healthcare, LLC |
| Manor Care of Barberton OH, LLC | DE | 07/24/07 | 26-0609528 | OH | HCR IV Healthcare, LLC |
| Heartland-Beavercreek of Dayton OH, LLC | DE | 07/24/07 | 26-0609445 | OH | HCR IV Healthcare, LLC |
| Heartland of Bucyrus OH, LLC | DE | 07/24/07 | 26-0614610 | OH | HCR IV Healthcare, LLC |
| Arden Courts-Anderson of Cincinnati OH, LLC | DE | 07/24/07 | 26-0623677 | OH | HCR IV Healthcare, LLC |
| Arden Courts-Bainbridge of Chagrin Falls OH, LLC | DE | 07/24/07 | 26-0623202 | OH | HCR IV Healthcare, LLC |
| Manor Care-Belden Village of Canton OH, LLC | DE | 07/24/07 | 26-0613074 | OH | HCR IV Healthcare, LLC |
| Heartland of Bellefontaine OH, LLC | DE | 07/24/07 | 26-0609497 | OH | HCR IV Healthcare, LLC |
| Heartland of Centerville OH, LLC | DE | 07/24/07 | 26-0609683 | OH | HCR IV Healthcare, LLC |
| Heartland of Chillicothe OH, LLC | DE | 07/24/07 | 26-0609311 | OH | HCR IV Healthcare, LLC |
| Manor Care-Euclid Beach of Cleveland OH, LLC | DE | 07/24/07 | 26-0609550 | OH | HCR IV Healthcare, LLC |
| Heartland of Greenville OH, LLC | DE | 07/24/07 | 26-0614250 | OH | HCR IV Healthcare, LLC |
| Heartland of Hillsboro OH, LLC | DE | 07/24/07 | 26-0609351 | OH | HCR IV Healthcare, LLC |
| Heartland-Holly Glen of Toledo OH, LLC | DE | 07/24/07 | 26-0614404 | OH | HCR IV Healthcare, LLC |
| Heartland of Jackson OH, LLC | DE | 07/24/07 | 26-0614303 | OH | HCR IV Healthcare, LLC |
| Arden Courts of Kenwood OH, LLC | DE | 07/24/07 | 26-0623245 | OH | HCR IV Healthcare, LLC |
| Heartland of Kettering OH, LLC | DE | 07/24/07 | 26-0609231 | OH | HCR IV Healthcare, LLC |
| Heartland of Madeira OH, LLC | DE | 07/24/07 | 26-0609604 | OH | HCR IV Healthcare, LLC |
| Heartland of Marion OH, LLC | DE | 07/24/07 | 26-0613105 | OH | HCR IV Healthcare, LLC |
| Heartland of Marietta OH, LLC | DE | 07/24/07 | 26-0609259 | OH | HCR IV Healthcare, LLC |
| Manor Care of Mayfield Heights OH, LLC | DE | 07/24/07 | 26-0609565 | OH | HCR IV Healthcare, LLC |
| Heartland of Mentor OH, LLC | DE | 07/24/07 | 26-0610122 | OH | HCR IV Healthcare, LLC |
| Heartland of Miamisburg OH, LLC | DE | 07/24/07 | | OH | HCR IV Healthcare, LLC |
| Manor Care of North Olmsted OH, LLC | DE | 07/24/07 | 26-0610082 | OH | HCR IV Healthcare, LLC |
| Heartland-Oak Pavilion of Cincinnati OH, LLC | DE | 07/24/07 | 26-0614533 | OH | HCR IV Healthcare, LLC |
| Heartland of Oregon OH, LLC | DE | 07/24/07 | 26-0609590 | OH | HCR IV Healthcare, LLC |
| Arden Courts of Parma OH, LLC | DE | 07/24/07 | 26-0623801 | OH | HCR IV Healthcare, LLC |
| Manor Care of Parma OH, LLC | DE | 07/24/07 | 26-0609661 | OH | HCR IV Healthcare, LLC |
| Heartland of Piqua OH, LLC | DE | 07/24/07 | 26-0609466 | OH | HCR IV Healthcare, LLC |
| Heartland of Perrysburg OH, LLC | DE | 07/24/07 | 26-0609189 | OH | HCR IV Healthcare, LLC |
| Perrysburg Commons Senior Housing-Perrysburg OH, LLC | DE | 07/24/07 | 26-0623264 | OH | HCR IV Healthcare, LLC |
| Heartland of Portsmouth OH, LLC | DE | 07/24/07 | 26-0609290 | OH | HCR IV Healthcare, LLC |
| Heartland-Riverview of South Point OH, LLC | DE | 07/24/07 | 26-0609484 | OH | HCR IV Healthcare, LLC |
| Heartland of Springfield OH, LLC | DE | 07/24/07 | 26-0609416 | OH | HCR IV Healthcare, LLC |
| Heartland of Waterville OH, LLC | DE | 07/24/07 | 26-0609511 | OH | HCR IV Healthcare, LLC |
| Heartland of Wauseon OH, LLC | DE | 07/24/07 | 26-0614568 | OH | HCR IV Healthcare, LLC |
| Heartland Village of Westerville OH (NC), LLC | DE | 07/24/07 | 26-0609323 | OH | HCR IV Healthcare, LLC |
| Heartland Village of Westerville OH (RC), LLC | DE | 07/24/07 | 26-0609337 | OH | HCR IV Healthcare, LLC |
| Manor Care of Westerville OH, LLC | DE | 07/24/07 | 26-0609626 | OH | HCR IV Healthcare, LLC |

# SCHEDULE Y - INFORMATION CONCERNING ACTIVITIES OF INSURER

## MEMBERS OF A HOLDING COMPANY GROUP

## PART 1 - ORGANIZATIONAL CHART

| Entity Name con't | State Formed | Date Formed | EIN | State Qual. | Member |
|---|---|---|---|---|---|
| Arden Courts of Westlake OH, LLC | DE | 07/24/07 | 26-0623289 | OH | HCR IV Healthcare, LLC |
| Manor Care of Willoughby OH, LLC | DE | 07/24/07 | 26-0610097 | OH | HCR IV Healthcare, LLC |
| Heartland-Woodridge of Fairfield OH, LLC | DE | 07/24/07 | 26-0623327 | OH | HCR IV Healthcare, LLC |
| Arden Courts of Austin TX, LLC | DE | 07/24/07 | 26-0624145 | TX | HCR IV Healthcare, LLC |
| Arden Courts of Richardson TX, LLC | DE | 07/24/07 | 26-0624214 | TX | HCR IV Healthcare, LLC |
| Arden Courts of San Antonio TX, LLC | DE | 07/24/07 | 26-0624189 | TX | HCR IV Healthcare, LLC |
| Manor Care of Alexandria VA, LLC | DE | 07/24/07 | 26-0624590 | VA | HCR IV Healthcare, LLC |
| Arden Courts of Annandale VA, LLC | DE | 07/24/07 | 26-0624314 | VA | HCR IV Healthcare, LLC |
| Manor Care of Arlington VA, LLC | DE | 07/24/07 | 26-0624619 | VA | HCR IV Healthcare, LLC |
| Arden Courts-Fair Oaks of Fairfax VA, LLC | DE | 07/24/07 | 26-0624353 | VA | HCR IV Healthcare, LLC |
| Manor Care-Fair Oaks of Fairfax VA, LLC | DE | 07/24/07 | 26-0624605 | VA | HCR IV Healthcare, LLC |
| Manor Care-Imperial of Richmond VA, LLC | DE | 07/24/07 | 26-0624643 | VA | HCR IV Healthcare, LLC |
| Medical Care Center-Lynchburg VA, LLC | DE | 07/24/07 | 26-0624567 | VA | HCR IV Healthcare, LLC |
| Manor Care-Stratford Hall of Richmond VA, LLC | DE | 07/24/07 | 26-0624664 | VA | HCR IV Healthcare, LLC |
| Manor Care of Gig Harbor WA, LLC | DE | 07/24/07 | 26-0624719 | WA | HCR IV Healthcare, LLC |
| Manor Care of Lynwood WA, Association | DE | 07/24/07 | 26-0624675 | WA | HCR IV Healthcare, LLC |
| Manor Care of Spokane WA, Association | DE | 07/24/07 | 26-0624687 | WA | HCR IV Healthcare, LLC |
| Manor Care of Tacoma WA, Association | DE | 07/24/07 | 26-0624696 | WA | HCR IV Healthcare, LLC |
| Arden Courts-Richmond, VA, LLC | DE | 12/01/20 | 85-4214133 | VA | HCR IV Healthcare, LLC |
| Arden Courts-Virginia Beach, VA, LLC | DE | 12/01/20 | 85-4220787 | VA | HCR IV Healthcare, LLC |

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 00000 | 34-1517672 | | | | ProMedica Foundation | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1517672 | | | | Mission Pointe Golf Course, LLC | MI | NIA | ProMedica Foundation | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 52-2031975 | | | | HCR ManorCare Foundation Inc. | OH | NIA | ProMedica Foundation | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 27-0497199 | | | | Heartland Hospice Memorial Fund, Inc. | OH | NIA | ProMedica Foundation | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 20-2272848 | | | | The Hug Fund | OH | NIA | ProMedica Foundation | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 47-4006496 | | | | ProMedica Health Network, Inc. | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1517671 | | | | ProMedica Innovations, LLC | OH | NIA | ProMedica Health Network, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 82-1587026 | | | | ProMedica Natural Welness, LLC | OH | NIA | ProMedica Innovations, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 87-3850599 | | | | ProMedica Longevity and Wellness International, LLC | OH | NIA | ProMedica Innovations, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 87-3874203 | | | | ProMedica Longevity and Wellness US LLC | OH | NIA | ProMedica Innovations, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 85-3725776 | | | | Air Diverter Solutions, LLC | OH | NIA | ProMedica Innovations, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 86-1651504 | | | | ProMedica Resourceful, LLC | OH | NIA | ProMedica Innovations, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-0898745 | | | | Fostoria Hospital Association | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 87-1386349 | | | | Toledo Innovation Center Leverage Lender LLC | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00001 | 87-1433009 | | | | PHS Toledo Innovation Center Holdings, LLC | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00002 | 87-1343313 | | | | Toledo Innovation Center Manager, LLC | OH | NIA | ProMedica Health System, Inc. | Ownership | 23.0 | ProMedica Health System, Inc. | No | |
| | | 00003 | 87-1343313 | | | | Toledo Innovation Center Manager, LLC | OH | NIA | Others | Ownership | 77.0 | Others | No | 0000001 |
| | | 00004 | 87-1277852 | | | | Toledo Innovation Center Landlord LLC | OH | NIA | Toledo Innovation Center Manager, LLC | Ownership | 99.0 | ProMedica Health System, Inc. | No | |
| | | 00005 | 87-1277852 | | | | Toledo Innovation Center Landlord LLC | OH | NIA | Toledo Center Master Tenant, LLC | Ownership | 1.0 | ProMedica Health System, Inc. | No | |
| | | 00006 | 87-1364401 | | | | Toledo Center Master Trust Tenant, LLC | OH | NIA | Toledo Innovation Center Manager, LLC | Ownership | 1.0 | ProMedica Health System, Inc. | No | |
| | | 00007 | 87-1364401 | | | | Toledo Center Master Trust Tenant, LLC | OH | NIA | Others | Ownership | 99.0 | Others | No | 0000001 |
| | | 00008 | 34-1880767 | | | | ProMedica Continuum Services | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-4492440 | | | | ProMedica Continuing Care Services Corporation | OH | NIA | ProMedica Continuum Services | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0324790 | | | | ProMedica Courier Services, Inc. | OH | NIA | ProMedica Continuum Services | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 27-0843485 | | | | The Surgical Institute of Monroe Ambulatory Surgery Center, LLC | MI | NIA | ProMedica Continuum Services | Ownership | 54.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 27-0843485 | | | | The Surgical Institute of Monroe Ambulatory Surgery Center, LLC | MI | OTH | Various Physicians | Ownership | 46.0 | Various Physicians | No | 0000001 |

Q16

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 00000 | 34-1880767 | | | | ProMedica Pharmacy Group, LLC | OH | NIA | ProMedica Continuum Services | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1899439 | | | | ProMedica Physician Group, Inc. | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 38-3322278 | | | | ProMedica Central Corporation of Michigan | MI | NIA | ProMedica Physician Group, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1881137 | | | | ProMedica Central Physicians | MI | NIA | ProMedica Physician Group, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 38-3482148 | | | | ProMedica North Physicians Corporation | MI | NIA | ProMedica Physician Group, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-3888045 | | | | ProMedica Northwest Ohio Cardiology Consultants | MI | NIA | ProMedica Physician Group, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 27-2920342 | | | | ProMedica Monroe Cardiology | MI | NIA | ProMedica Physician Group, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 45-3230331 | | | | ProMedica Physician Management Services, LLC | OH | NIA | ProMedica Physician Group, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1899439 | | | | ProMedica Surgical Services, LLC | OH | NIA | ProMedica Physician Group, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 46-1111822 | | | | ProMedica Monroe Physicians | MI | NIA | ProMedica Physician Group, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 45-4976786 | | | | ProMedica Multi Specialty Physicians, LLC | MI | NIA | ProMedica Physician Group, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 46-1120436 | | | | ProMedica Genito-Urinary Surgeons | MI | NIA | ProMedica Physician Group, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1899439 | | | | ProMedica Physicians at Home, Inc | MI | NIA | ProMedica Physician Group, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1899439 | | | | ProMedica at Home, Inc | MI | NIA | ProMedica Physician Group, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 27-3763993 | | | | Memorial Professional Services | MI | NIA | ProMedica Physician Group, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 83-1731861 | | | | ProMedica Primary Care Providers | MI | NIA | ProMedica Physician Group, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 20-8734161 | | | | ProMedica Children's Specialists | MI | NIA | ProMedica Physician Group, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1931936 | | | | ProMedica Indemnity Corporation | VT | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1570675 | | | | ProMedica Insurance Corporation | OH | UDP | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1623220 | | | | Paramount Preferred Options, Inc. | OH | NIA | ProMedica Insurance Corporation | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 31-1463193 | | | | Health Management Solutions, Inc. | OH | NIA | Paramount Preferred Options, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 47-3952430 | | | | Paramount Preferred Solutions, Inc. | OH | NIA | Paramount Preferred Options, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 23-2267042 | | | | CEC Associates, Inc. | PA | NIA | Paramount Preferred Options, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| 1212 | ProMedica Insurance Corp | 95189 | 34-1549926 | | | | Paramount Care, Inc. | OH | RE | ProMedica Insurance Corporation | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1773766 | | | | Paramount Benefits Agency, Inc. | OH | NIA | ProMedica Insurance Corporation | Ownership | 100.0 | ProMedica Health System, Inc. | No | |

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1212 | ProMedica Insurance Corp | 95566 | 38-3200310 | | | | Paramount Care of Michigan, Inc. | MI | IA | ProMedica Insurance Corporation | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| 1212 | ProMedica Insurance Corp | 11518 | 01-0580404 | | | | Paramount Insurance Company | OH | IA | ProMedica Insurance Corporation | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| 1212 | ProMedica Insurance Corp | 12353 | 20-3376102 | | | | Paramount Advantage | OH | IA | ProMedica Insurance Corporation | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| 1212 | ProMedica Insurance Corp | 96687 | 35-1682400 | | | | Health Resources Inc. | IN | IA | ProMedica Insurance Corporation | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| 1212 | ProMedica Insurance Corp | 16833 | 36-4956006 | | | | Paramount Care of Indiana, Inc | IN | IA | ProMedica Insurance Corporation | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 85-4374415 | | | | Paramount Care of Florida | FL | IA | ProMedica Insurance Corporation | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1883132 | | | | Bay Park Community Hospital | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 38-6108110 | | | | Community Health Center of Branch County | MI | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-4446484 | | | | Defiance Hospital, Inc. | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 45-4781053 | | | | Kaitlyn's Cottage, Inc. | OH | NIA | Defiance Hospital, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 38-2796005 | | | | Emma L. Bixby Medical Center | MI | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 38-3146907 | | | | Herrick Memorial Development Corporation | MI | NIA | Emma L. Bixby Medical Center | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 38-3639616 | | | | Herrick Memorial Office Plaza Condominium Association | MI | NIA | Herrick Memorial Development Corporation | Ownership | 71.8 | ProMedica Health System, Inc. | No | |
| | | 00000 | 38-3639616 | | | | Herrick Memorial Office Plaza Condominium Association | MI | OTH | Various Physicians | Ownership | 28.2 | Various Physicians | No | 0000001 |
| | | 00000 | 82-1072366 | | | | Lenawee Clinical Partners | MI | NIA | Emma L. Bixby Medical Center | Ownership | 50.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 82-1072366 | | | | Lenawee Clinical Partners | MI | OTH | Various Physicians | Ownership | 50.0 | Various Physicians | No | 0000001 |
| | | 00000 | 38-3164818 | | | | Wolf Creek Associates, LLC | MI | NIA | Emma L. Bixby Medical Center | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 38-3049015 | | | | Herrick Memorial Hospital, Inc. | MI | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-4428256 | | | | The Toledo Hospital | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-4428256 | | | | PHS Investments, LLC | OH | NIA | The Toledo Hospital | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 31-1569454 | | | | Reynolds Road Surgery Center, LLC | OH | NIA | The Toledo Hospital | Ownership | 63.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 31-1569454 | | | | Reynolds Road Surgery Center, LLC | OH | OTH | Various Physicians | Ownership | 37.0 | Various Physicians | No | 0000001 |
| | | 00000 | 26-0679898 | | | | Northwest Ohio Dedicated Breast MRI, LLC | OH | NIA | The Toledo Hospital | Ownership | 50.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0679898 | | | | Northwest Ohio Dedicated Breast MRI, LLC | OH | OTH | TRA Investment Club, LLC | Ownership | 50.0 | TRA Investment Club, LLC | No | 0000001 |
| | | 00000 | 27-0608044 | | | | Arrowhead Behavioral Health, LLC | DE | NIA | The Toledo Hospital | Ownership | 30.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 27-0608044 | | | | Arrowhead Behavioral Health, LLC | OH | OTH | Toledo Holding Company, LLC | Ownership | 70.0 | Toledo Holding Company, LLC | No | 0000001 |

Q16.2

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 00000 | 20-0088459 | | | | West Central Surgical Center, LLC | OH | NIA | The Toledo Hospital | Ownership | 50.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 20-0088459 | | | | West Central Surgical Center, LLC | OH | OTH | Various Physicians | Ownership | 50.0 | Various Physicians | No | 0000001 |
| | | 00000 | 34-4428256 | | | | ProMedica Hickman Cancer Center Pharmacy, LLC | OH | NIA | The Toledo Hospital | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 83-1022842 | | | | ProMedica Pathology Laboratories, LLC | DE | NIA | The Toledo Hospital | Ownership | 51.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 83-1022842 | | | | ProMedica Pathology Laboratories, LLC | DE | OTH | Others | Ownership | 49.0 | Others | No | 0000001 |
| | | 00000 | 85-2085627 | | | | ProMedica Intuitive Management of Ohio, LLC | DE | NIA | The Toledo Hospital | Ownership | 51.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 85-2085627 | | | | ProMedica Intuitive Management of Ohio, LLC | DE | OTH | Others | Ownership | 49.0 | Others | No | 0000001 |
| | | 00000 | 88-2454853 | | | | TH Levis MOB I, LLC | OH | NIA | The Toledo Hospital | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1880473 | | | | PHS Ventures, LLC. | VT | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-4430849 | | | | Memorial Hospital | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1770910 | | | | Fremont Hospital Physician Organization | OH | NIA | Memorial Hospital | Ownership | 50.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1770910 | | | | Fremont Hospital Physician Organization | OH | OTH | Fremont Physicians Associations | Ownership | 50.0 | Various Physicians | No | 0000001 |
| | | 00000 | 34-1770910 | | | | Sandusky County Medical Specialist, LLC | OH | NIA | Fremont Hospital Physician Organization | Ownership | 100.0 | Fremont Hospital Physician Organization | No | 0000001 |
| | | 00000 | 20-4066818 | | | | East-West Holdings, Ltd. | OH | NIA | Memorial Hospital | Ownership | 50.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 20-4066818 | | | | East-West Holdings, Ltd. | OH | OTH | Bellevue Hospital | Ownership | 50.0 | Bellevue Hospital | No | 0000001 |
| | | 00000 | 38-1984289 | | | | Mercy Memorial Hospital | MI | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 38-2704426 | | | | Monroe Health Ventures, Inc. | MI | NIA | Monroe Regional Hospital | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 46-4315135 | | | | Mercy Memorial Surgical Co-Management Company, LLC | MI | NIA | Monroe Regional Hospital | Ownership | 50.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 46-4315135 | | | | Mercy Memorial Surgical Co-Management Company, LLC | MI | OTH | Various Physicians | Ownership | 50.0 | Various Physicians | No | 0000001 |
| | | 00000 | 34-1517671 | | | | 300 Madison Building, LLC | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 81-5178173 | | | | ProMedica Active Mobility, LLC | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1517671 | | | | ProMedica International, LLC | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 47-5168737 | | | | ProMedica Manager Member, LLC | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 47-3163945 | | | | ProMedica Downtown Campus Landlord, LLC | OH | NIA | ProMedica Manager Member, LLC | Ownership | 90.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 47-3163945 | | | | ProMedica Downtown Campus Landlord, LLC | OH | NIA | ProMedica Master Tentant, LLC | Ownership | 10.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 47-5288490 | | | | ProMedica Master Tentant, LLC | OH | NIA | ProMedica Downtown Campus Landlord, LLC | Ownership | 1.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1517671 | | | | 1611 Monroe Investors, LLC | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 00000 | 34-1517671 | | | | Marina District Development, LLC | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1517671 | | | | IST Theatre, LLC | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1517671 | | | | Ball Park Properties, LLC | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 46-4918876 | | | | Kapios LLC | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1517671 | | | | Toledo Riverfront, LLC | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 84-4675266 | | | | Fort Industry JV Partner | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1517671 | | | | Fort Industry Manager, LLC | OH | NIA | ProMedica Health System, Inc. | Ownership | 30.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1517671 | | | | Fort Industry Manager, LLC | OH | OTH | Others | Ownership | 70.0 | Others | No | 0000001 |
| | | 00000 | 82-5373223 | | | | HCR ManorCare, Inc. | OH | NIA | ProMedica Health System, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-1264270 | | | | Well PM Properties, LLC | DE | NIA | HCR ManorCare, Inc. | Ownership | 20.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-1264270 | | | | Well PM Properties, LLC | DE | OTH | Others | Ownership | 80.0 | Others | No | 0000001 |
| | | 00000 | 26-0618832 | | | | Well PM Properties II, LLC | DE | NIA | HCR ManorCare, Inc. | Ownership | 20.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0618832 | | | | Well PM Properties II, LLC | DE | OTH | Others | Ownership | 80.0 | Others | No | 0000001 |
| | | 00000 | 26-0624435 | | | | HCR Healthcare, LLC | DE | NIA | HCR ManorCare, Inc. | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1636874 | | | | Ancillary Services Management, LLC | OH | NIA | HCR HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 38-2032536 | | | | HCR Canterbury Village, LLC | DE | NIA | HCR HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1787978 | | | | HCR Home Health Care and Hospice, LLC | OH | NIA | HCR HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 45-2507279 | | | | HCR Manor Care Services of Florida III, LLC | FL | NIA | HCR Home Health Care and Hospice, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 74-3193136 | | | | HCR Manor Care Services of Florida, LLC | FL | NIA | HCR Home Health Care and Hospice, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 87-2414012 | | | | ProMedica Hospice of Marion County FL, LLC | OH | NIA | HCR Home Health Care and Hospice, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 87-2417068 | | | | ProMedica Hospice of Palm Beach County FL, LLC | OH | NIA | HCR Home Health Care and Hospice, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1787967 | | | | Home Health Care Services, LLC | OH | NIA | HCR Home Health Care and Hospice, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 27-1325141 | | | | The Pharmacy Counter, LLC. | OH | NIA | HCR Home Health Care and Hospice, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1788398 | | | | Heartland Hospice Services, LLC | OH | NIA | HCR Home Health Care and Hospice, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 20-5752995 | | | | Erie West Hospice and Palliative Care | OH | NIA | Heartland Hospice Services, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-1250342 | | | | HCR II HealthCare, LLC | DE | NIA | HCR HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |

Q16.4

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 00000 | 26-0624411 | | | | HCR III HealthCare, LLC | DE | NIA | HCR II HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625113 | | | | Arden Courts of Avon CT, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625092 | | | | Arden Courts of Farmington CT, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623346 | | | | Manor Care-Pike Creek of Wilmington DE, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625127 | | | | Arden Courts of Wilmington DE, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623367 | | | | Manor Care of Wilmington DE, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623949 | | | | Heartland of Boca Raton FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624217 | | | | Manor Care of Boca Raton FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623523 | | | | Heartland of Boynton Beach FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624241 | | | | Manor Care of Boynton Beach FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624118 | | | | Manor Care-Carrollwood of Tampa FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625237 | | | | Arden Courts of Delray Beach FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624068 | | | | Manor Care of Delray Beach FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624190 | | | | Manor Care of Dunedin FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625314 | | | | Arden Courts of Ft. Myers FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623726 | | | | Heartland of Fort Myers FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624272 | | | | Manor Care of Ft. Myers FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623559 | | | | Heartland-South Jacksonville of Jacksonville FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623590 | | | | Heartland of Jacksonville FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623392 | | | | Heartland of Kendall FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623931 | | | | Kensington Manor-Sarasota FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625141 | | | | Arden Courts of Largo FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623998 | | | | Heartland of Lauderhill FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625279 | | | | Arden Courts-Lely Palms of Naples FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625295 | | | | Manor Care-Lely Palms of Naples FL (SH), LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |

Q16.5

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 00000 | 26-0623652 | | | | Heartland-Miami Lakes of Hialeah FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624049 | | | | Manor Care of Naples FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623613 | | | | Heartland of Orange Park FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625222 | | | | Arden Courts of Palm Harbor FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624018 | | | | Manor Care of Palm Harbor FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624255 | | | | Manor Care of Plantation FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623909 | | | | Heartland-Prosperity Oaks of Palm Beach Gardens FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625246 | | | | Arden Courts of Sarasota FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623968 | | | | Heartland of Sarasota FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624159 | | | | Manor Care Nursing Center of Sarasota FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625266 | | | | Arden Courts of Seminole FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623500 | | | | Heartland of Tamarac FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625330 | | | | Arden Courts of Tampa FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624092 | | | | Manor Care of Venice FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625258 | | | | Arden Courts of W. Palm Beach FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624142 | | | | Manor Care of W. Palm Beach FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625340 | | | | Arden Courts of Winter Springs FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623476 | | | | Heartland of Zephyrhills FL, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624293 | | | | Manor Care Rehabilitation Center of Decatur GA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624336 | | | | Manor Care of Marietta GA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624378 | | | | Manor Care of Cedar Rapids IA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624394 | | | | Manor Care of Davenport IA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624416 | | | | Manor Care of Dubuque IA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624363 | | | | Manor Care of Waterloo IA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624438 | | | | Manor Care of West Des Moines IA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |

Q16.6

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 00000 | 26-0620015 | | | | Heartland of Adelphi MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0620122 | | | | Manor Care of Bethesda MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0620158 | | | | Manor Care of Chevy Chase MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0619980 | | | | Heartland of Hyattsville MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622568 | | | | Arden Courts of Kensington MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0620266 | | | | Manor Care-Largo MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622121 | | | | Arden Courts of Pikesville MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0620079 | | | | Springhouse of Pikesville MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622198 | | | | Arden Courts of Potomac MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0620187 | | | | Manor Care of Potomac MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0620310 | | | | Manor Care-Rossville MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0620341 | | | | Manor Care-Roland Park MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0620431 | | | | Manor Care-Ruxton MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622164 | | | | Arden Courts of Silver Spring MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0620058 | | | | Manor Care of Silver Spring MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622661 | | | | Arden Courts of Towson MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0620456 | | | | Manor Care of Towson, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0620376 | | | | Manor Care of Wheaton MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623009 | | | | Arden Courts of Cherry Hill NJ, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0612791 | | | | Manor Care of Mountainside NJ, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0612955 | | | | Manor Care of Voorhees NJ, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622912 | | | | Arden Courts of Wayne NJ, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0612993 | | | | Manor Care-West Deptford of Paulsboro NJ, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622938 | | | | Arden Courts of W. Orange NJ, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623155 | | | | Arden Courts of Whippany NJ, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 00000 | 26-0623965 | | | | Arden Courts of Allentown PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0610673 | | | | Manor Care of Allentown PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622002 | | | | Manor Care of Bethel Park PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0614878 | | | | Manor Care of Bethlehem PA (2021), LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0621845 | | | | Manor Care of Bethlehem PA (2029), LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623070 | | | | Manor Care of Camp Hill PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0610623 | | | | Manor Care of Carlisle PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0614915 | | | | Manor Care of Chambersburg PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0614534 | | | | Manor Care of Dallastown PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623108 | | | | Donahoe Manor-Bedford PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0621877 | | | | Manor Care of Easton PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622713 | | | | Manor Care-Greentree of Pittsburgh PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0610244 | | | | Hampton House-Wilkes Barre, PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0610582 | | | | Manor Care of Huntingdon Valley PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624075 | | | | Arden Courts of Jefferson Hills PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0614957 | | | | Manor Care of Jersey Shore PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624032 | | | | Arden Courts of King of Prussia PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0610645 | | | | Manor Care of King of Prussia PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0615323 | | | | Manor Care of Kingston PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0610561 | | | | Manor Care-Kingston Court of York PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0621637 | | | | Manor Care of Lancaster PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0614451 | | | | Manor Care-Lansdale of Montgomeryville PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0615380 | | | | Manor Care of Laureldale PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0615358 | | | | Manor Care of Lebanon PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0621960 | | | | Manor Care-Linden Village of Lebanon PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |

Q16.8

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 00000 | 26-0614341 | | | | Manor Care of McMurray PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623898 | | | | Arden Courts of Monroeville PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0614497 | | | | Manor Care of Monroeville PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623920 | | | | Arden Courts-North Hills of Pittsburgh PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0610604 | | | | Manor Care-North Hills of Pittsburgh PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623007 | | | | Old Orchard Health Care Center-Easton PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0610260 | | | | Heartland of Pittsburgh PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0615421 | | | | Manor Care of Pottstown PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0615453 | | | | Manor Care of Pottsville PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0610325 | | | | Shadyside Nursing and Rehabilitation Center-Pittsburgh PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0621908 | | | | Manor Care of Sinking Spring PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0610347 | | | | Sky Vue Terrace-Pittsburgh PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0615499 | | | | Manor Care of Sunbury PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624065 | | | | Arden Courts-Susquehanna of Harrisburg PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0610542 | | | | Wallingford Nursing and Rehabilitation Center-Walllingford PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0615529 | | | | Manor Care of West Reading PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623869 | | | | Arden Courts-Warminster of Hatboro PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622805 | | | | Whitehall Borough-Pittsburgh PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0621747 | | | | Manor Care of Williamsport PA (North), LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0621778 | | | | Manor Care of Williamsport PA (South), LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623944 | | | | Arden Courts of Yardley PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0614171 | | | | Manor Care of Yardley PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0621815 | | | | Manor Care of Yeadon PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622887 | | | | Manor Care of York PA (North), LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622947 | | | | Manor Care of York PA (South), LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 00000 | 26-0623167 | | | | Heartland-Charleston of Hanahan SC, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623408 | | | | Columbia Rehabilitation and Nursing Center-Columbia SC, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623316 | | | | Oakmont East-Greenville SC, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623335 | | | | Oakmont West-Greenville SC, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623208 | | | | Oakmont of Union SC, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623364 | | | | West Ashley Rehabilitation and Nursing Center-Charleston SC, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624802 | | | | Manor Care of Fond Du Lac WI, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624767 | | | | Manor Care of Green Bay WI (East), LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624786 | | | | Manor Care of Green Bay WI (West), LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624873 | | | | Heartland-Pewaukee of Waukesha WI, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624818 | | | | Heartland of Platteville WI, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624859 | | | | Heartland-Washington Manor of Kenosha WI, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 86-1310885 | | | | ProMedica Senior Care of Brightwood, MD, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 86-1376199 | | | | ProMedica Senior Care of Exton, PA,LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 86-1504827 | | | | ProMedica Senior Care of Lafayette, CO, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 86-4395571 | | | | ProMedica Senior Care of Lakewood, CO, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 86-1448854 | | | | ProMedica Senior Care of Moorestpwn, NJ, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 86-1430242 | | | | ProMedica Senior Care of Philadelphia, PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 86-1179270 | | | | ProMedica Senior Care of Piscataway, NJ, Inc | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 86-1243633 | | | | ProMedica Senior Care of Voorhees NJ, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 86-1360692 | | | | ProMedica Senior Care of Willow Grove, PA, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-1283803 | | | | HCR IV HealthCare, LLC | DE | NIA | HCR III HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622564 | | | | Manor Care of Citrus Heights CA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622988 | | | | Manor Care of Fountain Valley CA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623107 | | | | Manor Care of Hemet CA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 00000 | 26-0623221 | | | | Manor Care of Palm Desert CA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623034 | | | | Manor Care of Sunnyvale CA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622591 | | | | Manor Care-Tice Valley CA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623196 | | | | Manor Care of Walnut Creek CA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623262 | | | | Manor Care of Denver CO, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623287 | | | | Manor Care of Boulder CO, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0604153 | | | | Heartland of Canton IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0615806 | | | | Heartland of Champaign IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0615541 | | | | Heartland of Decatur IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0618782 | | | | Manor Care of Elk Grove Village IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624455 | | | | Heartland of Galesburg IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625428 | | | | Arden Courts of Geneva IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625418 | | | | Arden Courts of Glen Ellyn IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0614845 | | | | Heartland of Henry IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0615984 | | | | Manor Care of Hinsdale IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0614920 | | | | Manor Care of Homewood IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0615859 | | | | Manor Care of Libertyville IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624476 | | | | Heartland of Macomb IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624491 | | | | Heartland of Moline IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0615638 | | | | Manor Care of Naperville IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0615386 | | | | Heartland of Normal IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0618960 | | | | Manor Care of Northbrook IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0615929 | | | | Manor Care of Oak Lawn (East) IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0616038 | | | | Manor Care of Oak Lawn (West) IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0615889 | | | | Manor Care of Palos Heights IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |

Q16.11

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 00000 | 26-0618879 | | | | Manor Care of Palos Heights (West) IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0614884 | | | | Heartland of Paxton IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0615478 | | | | Heartland of Peoria IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0619009 | | | | Heartland-Riverview of East Peoria IL (SNF), LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0619150 | | | | Manor Care of Rolling Meadows IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622045 | | | | Arden Courts of South Holland IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0615010 | | | | Manor Care of South Holland IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0619027 | | | | Manor Care of Westmont IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625390 | | | | Arden Courts of Palos Heights IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625405 | | | | Arden Courts of Elk Grove Village IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0625378 | | | | Arden Courts of Northbrook IL, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0619623 | | | | Manor Care of Indy (South) IN, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0619716 | | | | Manor Care-Summer Trace of Carmel IN, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0619810 | | | | Manor Care of Topeka KS, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0619870 | | | | Manor Care of Wichita KS, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0611286 | | | | Heartland of Allen Park MI, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0612384 | | | | Heartland of Ann Arbor MI, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0612206 | | | | Heartland of Battle Creek MI, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622828 | | | | Arden Courts of Bingham Farms MI, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0611711 | | | | Heartland-Briarwood MI, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0620527 | | | | Heartland of Canton MI, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0611231 | | | | Heartland of Dearborn Heights MI, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622894 | | | | Fostrian Courts Assisted Living-Flushing MI, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0611818 | | | | Heartland-Fostrian of Flushing MI, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0611334 | | | | Heartland-Georgian East of Grosse Pointe MI, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 00000 | 26-0611865 | | | | Heartland-Hampton of Bay City MI, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0611592 | | | | Manor Care of Kingsford MI, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622866 | | | | Arden Courts of Livonia MI, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0620480 | | | | Heartland-Oakland MI, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0622772 | | | | Arden Courts of Sterling Heights MI, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0612325 | | | | Heartland of Three Rivers MI, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0611184 | | | | Heartland-University of Livonia MI, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0612718 | | | | Manor Care of Fargo ND, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623857 | | | | Arden Courts of Akron OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0610034 | | | | Manor Care of Akron OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609528 | | | | Manor Care of Barberton OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609445 | | | | Heartland-Beavercreek of Dayton OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0614610 | | | | Heartland of Bucyrus OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623677 | | | | Arden Courts-Anderson of Cincinnati OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623202 | | | | Arden Courts-Bainbridge of Chagrin Falls OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0613074 | | | | Manor Care-Belden Village of Canton OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609497 | | | | Heartland of Bellefontaine OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609683 | | | | Heartland of Centerville OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609311 | | | | Heartland of Chillicothe OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609550 | | | | Manor Care-Euclid Beach of Cleveland OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0614250 | | | | Heartland of Greenville OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609351 | | | | Heartland of Hillsboro OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0614404 | | | | Heartland-Holly Glen of Toledo OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0614303 | | | | Heartland of Jackson OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623245 | | | | Arden Courts of Kenwood OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |

Q16.13

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 00000 | 26-0609231 | | | | Heartland of Kettering OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609604 | | | | Heartland of Madeira OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0613105 | | | | Heartland of Marion OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609259 | | | | Heartland of Marietta OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609565 | | | | Manor Care of Mayfield Heights OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0610122 | | | | Heartland of Mentor OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0794075 | | | | Heartland of Miamisburg OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0610082 | | | | Manor Care of North Olmsted OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0614533 | | | | Heartland-Oak Pavilion of Cincinnati OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609590 | | | | Heartland of Oregon OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623801 | | | | Arden Courts of Parma OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609661 | | | | Manor Care of Parma OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609466 | | | | Heartland of Piqua OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609189 | | | | Heartland of Perrysburg OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623264 | | | | Perrysburg Commons Senior Housing-Perrysburg OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609290 | | | | Heartland of Portsmouth OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609484 | | | | Heartland-Riverview of South Point OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609416 | | | | Heartland of Springfield OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609511 | | | | Heartland of Waterville OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0614568 | | | | Heartland of Wauseon OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609323 | | | | Heartland Village of Westerville OH (NC), LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609337 | | | | Heartland Village of Westerville OH (RC), LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0609626 | | | | Manor Care of Westerville OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0623289 | | | | Arden Courts of Westlake OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0610097 | | | | Manor Care of Willoughby OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |

Q16.14

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 00000 | 26-0623327 | | | | Heartland-Woodridge of Fairfield OH, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624145 | | | | Arden Courts of Austin TX, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624214 | | | | Arden Courts of Richardson TX, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624189 | | | | Arden Courts of San Antonio TX, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624590 | | | | Manor Care of Alexandria VA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624314 | | | | Arden Courts of Annandale VA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624619 | | | | Manor Care of Arlington VA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624353 | | | | Arden Courts-Fair Oaks of Fairfax VA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624605 | | | | Manor Care-Fair Oaks of Fairfax VA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624643 | | | | Manor Care-Imperial of Richmond VA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624567 | | | | Medical Care Center-Lynchburg VA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624664 | | | | Manor Care-Stratford Hall of Richmond VA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624719 | | | | Manor Care of Gig Harbor WA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624675 | | | | Manor Care of Lynwood WA, Association | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624687 | | | | Manor Care of Spokane WA, Association | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624696 | | | | Manor Care of Tacoma WA, Association | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 85-4214133 | | | | Arden Courts-Richmond, VA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 85-4220787 | | | | Arden Courts-Virginia Beach, VA, LLC | DE | NIA | HCR IV HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1838217 | | | | HCR Manor Care Services, LLC | OH | NIA | HCR HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 32-0091717 | | | | Heartland Care, LLC | OH | NIA | HCR Manor Care Services, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1477840 | | | | Ohio Employee Health Partnership, LTD | OH | NIA | Heartland Care, LLC | Ownership | 2.3 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1477840 | | | | Ohio Employee Health Partnership, LTD | OH | OTH | Others | Ownership | 97.7 | Others | No | 0000001 |
| | | 00000 | 26-1305723 | | | | Health Care and Retirement Corporation of America, LLC | DE | NIA | HCR HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1903270 | | | | ProMedica Employment Services, LLC | OH | NIA | HCR HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1280619 | | | | Heartland Rehabilitation Services, LLC | OH | NIA | HCR HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |

Q16.15

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 00000 | 65-0666550 | | | | HCR ManorCare Medical Services of Florida, LLC | FL | NIA | Heartland Rehabilitation Services, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 86-2223807 | | | | ProMedica Senior Care Medical Services I, LLC | DE | NIA | HCR ManorCare Medical Services of Florida, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1787895 | | | | Heartland Home Care, LLC | OH | NIA | Heartland Rehabilitation Services, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 30-0535129 | | | | Heartland Rehabilitation Services of Michigan, LLC | DE | NIA | Heartland Rehabilitation Services, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1760503 | | | | Heartland Services, LLC | OH | NIA | HCR HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1766299 | | | | Heartland Healthcare Services, LLC | OH | NIA | Heartland Services, LLC | Ownership | 50.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1766299 | | | | Heartland Healthcare Services, LLC | OH | OTH | Others | Ownership | 50.0 | Others | No | 0000001 |
| | | 00000 | 25-1457630 | | | | Industrial Wastes, LLC | DE | NIA | HCR HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 52-1462072 | | | | Manor Care Aviation, LLC | DE | NIA | HCR HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 52-1916053 | | | | Manor Care of Delaware County, LLC | DE | NIA | HCR HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 52-1931012 | | | | Mercy/Manor Partnership | PA | NIA | Manor Care of Delaware County, LLC | Ownership | 50.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 52-1931012 | | | | Mercy/Manor Partnership | PA | OTH | Others | Ownership | 50.0 | Others | No | 0000001 |
| | | 00000 | 52-2055097 | | | | Manor Care Supply, LLC | DE | NIA | HCR HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 52-2055078 | | | | ManorCare Health Services of Oklahoma, LLC | DE | NIA | HCR HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 42-1627672 | | | | Norman Specialty Hospital, LLC | DE | NIA | ManorCare Health Services of Oklahoma, LLC | Ownership | 60.5 | ProMedica Health System, Inc. | No | |
| | | 00000 | 42-1627672 | | | | Norman Specialty Hospital, LLC | DE | OTH | Others | Ownership | 39.5 | Others | No | 0000001 |
| | | 00000 | 90-0904333 | | | | ManorCare Health Services of Toledo OH, LLC | DE | NIA | HCR HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 61-1771805 | | | | ProMedica of Sylvania OH, LLC | DE | NIA | ManorCare Health Services of Toledo OH, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 38-3985660 | | | | ProMedica of Adrian MI, LLC | DE | NIA | ManorCare Health Services of Toledo OH, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 38-2934134 | | | | Monroe Community Health Services | MI | NIA | ManorCare Health Services of Toledo OH, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 38-2879330 | | | | Lenawee Long Term Care Corporation | MI | NIA | ManorCare Health Services of Toledo OH, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 46-1343453 | | | | HCRMC-ProMedica, LLC | OH | NIA | ManorCare Health Services of Toledo OH, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-1305666 | | | | ManorCare Health Services, LLC | DE | NIA | HCR HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 30-1202528 | | | | Heartland of Toledo OH, LLC | OH | NIA | ManorCare Health Services, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 41-1458213 | | | | In Home Health, LLC | MN | NIA | ManorCare Health Services, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1831624 | | | | Visiting Nurse Hospice & Health Care | OH | NIA | In Home Health, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |

# SCHEDULE Y

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

| 1<br>Group Code | 2<br>Group Name | 3<br>NAIC Company Code | 4<br>ID Number | 5<br>FEDERAL RSSD | 6<br>CIK | 7<br>Name of Securities Exchange if Publicly Traded (U.S. or International) | 8<br>Names of Parent, Subsidiaries or Affiliates | 9<br>Domiciliary Location | 10<br>Relationship to Reporting Entity | 11<br>Directly Controlled by (Name of Entity / Person) | 12<br>Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other) | 13<br>If Control is Ownership Provide Percentage | 14<br>Ultimate Controlling Entity(ies) / Person(s) | 15<br>Is an SCA Filing Required? (Yes/No) | 16<br>* |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | 00000 | 26-0624391 | | | | Manor Care of Lacey WA, Association | DE | NIA | ManorCare Health Services, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-0624375 | | | | Manor Care of Salmon Creek WA, Association | DE | NIA | ManorCare Health Services, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 37-1019107 | | | | Winter Park Nursing Center, LLC | DE | NIA | ManorCare Health Services, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 36-2899194 | | | | Manor Care of Winter Park, FL, LLC | DE | NIA | Winter Park Nursing Center, LLC | Ownership | 50.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 36-2899194 | | | | Manor Care of Winter Park, FL, LLC | DE | NIA | ManorCare Health Services, LLC | Ownership | 50.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 22-1604502 | | | | Portfolio One, LLC | OH | NIA | HCR HealthCare, LLC | Ownership | 100.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 22-3874333 | | | | Forum Purchasing LLC | DE | NIA | HCR HealthCare, LLC | Ownership | 27.3 | ProMedica Health System, Inc. | No | |
| | | 00000 | 22-3874333 | | | | Forum Purchasing LLC | DE | OTH | Others | Ownership | 72.7 | Others | No | 0000001 |
| | | 00000 | 34-1883284 | | | | Lima Memorial Joint Operating Company | OH | NIA | PHS Ventures, LLC. | Ownership | 50.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 34-1883284 | | | | Lima Memorial Joint Operating Company | OH | OTH | Lima Memorial Hospital | Ownership | 50.0 | Lima Memorial Hospital | No | 0000001 |
| | | 00000 | 26-4105613 | | | | ProMedica Orthopedic Co-Management Company, LLC | OH | NIA | The Toledo Hospital, Bay Park Community Hospital | Ownership | 40.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 26-4105613 | | | | ProMedica Orthopedic Co-Management Company, LLC | OH | OTH | Various Physicians | Ownership | 60.0 | Various Physicians | No | 0000001 |
| | | 00000 | 45-4810767 | | | | Interactive Physical Therapy | OH | NIA | ProMedica Health System, Inc. | Ownership | 50.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 45-4810767 | | | | Interactive Physical Therapy | OH | OTH | Various Individuals | Ownership | 50.0 | Various Individuals | No | 0000001 |
| | | 00000 | 46-1989695 | | | | ProMedica Surgical Services Co-Management Company, LLC | OH | NIA | The Toledo Hospital, Bay Park Community Hospital | Ownership | 50.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 46-1989695 | | | | ProMedica Surgical Services Co-Management Company, LLC | OH | OTH | Various Physicians | Ownership | 50.0 | Various Physicians | No | 0000001 |
| | | 00000 | 02-0753921 | | | | Monroe Community Ambulance | MI | NIA | ProMedica Continuing Care Services Corporation | Ownership | 25.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 02-0753921 | | | | Monroe Community Ambulance | MI | NIA | Monroe Regional Hospital | Ownership | 25.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 02-0753921 | | | | Monroe Community Ambulance | MI | OTH | Others | Ownership | 50.0 | Huron Valley Ambulance | No | 0000001 |
| | | 00000 | 84-3852791 | | | | Front Health Holdco, LLC | OH | NIA | ProMedica Health System, Inc. | Ownership | 50.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 84-3852791 | | | | Front Health Holdco, LLC | OH | OTH | Others | Ownership | 50.0 | Others | No | 0000001 |
| | | 00000 | 86-1364813 | | | | AAA HealthConnect, LLC | DE | NIA | ProMedica Health System, Inc. | Ownership | 50.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 86-1364813 | | | | AAA HealthConnect, LLC | DE | OTH | Others | Ownership | 50.0 | Others | No | 0000001 |
| | | 00000 | 85-3949811 | | | | Healthonomy | OH | NIA | ProMedica Health System, Inc. | Ownership | 33.3 | ProMedica Health System, Inc. | No | |
| | | 00000 | 85-3949811 | | | | Healthonomy | OH | OTH | Others | Ownership | 66.7 | Others | No | 0000001 |
| | | 00000 | 87-2465544 | | | | Senior & Rehab Care at MetroHealth, LLC | OH | NIA | ProMedica Health System, Inc. | Ownership | 51.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 87-2465544 | | | | Senior & Rehab Care at MetroHealth, LLC | OH | OTH | Others | Ownership | 49.0 | Others | No | 0000001 |
| | | 00000 | 87-1802834 | | | | ProMedica Senior Care of Georgia, LLC | OH | NIA | ProMedica Health System, Inc. | Ownership | 90.0 | ProMedica Health System, Inc. | No | |
| | | 00000 | 87-1802834 | | | | ProMedica Senior Care of Georgia, LLC | OH | OTH | Others | Ownership | 10.0 | Others | No | 0000001 |

| Asterisk | Explanation |
|---|---|
| 0000001 | Non-related entity |

# 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 |
| AUGUST FILING | |
| 2. Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1? The response for 1st and 3rd quarters should be N/A. A NO response resulting with a bar code is only appropriate in the 2nd quarter. | Yes |

Explanations:

Bar Codes:

Medicare Part D Coverage Supplement

9518920223650000 2022 Document Code: 365

## OVERFLOW PAGE FOR WRITE-INS

## SCHEDULE A - VERIFICATION

**Real Estate**

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

NONE

## SCHEDULE B - VERIFICATION

**Mortgage Loans**

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

NONE

## SCHEDULE BA - VERIFICATION

**Other Long-Term Invested Assets**

| | | 1<br>Year To Date | 2<br>Prior Year Ended December 31 |
|---|---|---|---|
| 1. | Book/adjusted carrying value, December 31 of prior year | 439,738 | 387,255 |
| 2. | Cost of acquired: | | |
| | 2.1 Actual cost at time of acquisition | | |
| | 2.2 Additional investment made after acquisition | | 61,368 |
| 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 | | 8,885 |
| 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) | 439,738 | 439,738 |
| 12. | Deduct total nonadmitted amounts | 439,738 | 439,738 |
| 13. | Statement value at end of current period (Line 11 minus Line 12) | | |

## SCHEDULE D - VERIFICATION

**Bonds and Stocks**

| | | 1<br>Year To Date | 2<br>Prior Year Ended December 31 |
|---|---|---|---|
| 1. | Book/adjusted carrying value of bonds and stocks, December 31 of prior year | 4,040,658 | 4,082,348 |
| 2. | Cost of bonds and stocks acquired | 889,580 | 3,048,608 |
| 3. | Accrual of discount | 2,621 | 2,777 |
| 4. | Unrealized valuation increase (decrease) | | |
| 5. | Total gain (loss) on disposals | (14,159) | 971 |
| 6. | Deduct consideration for bonds and stocks disposed of | 916,576 | 3,087,729 |
| 7. | Deduct amortization of premium | 7,530 | 15,738 |
| 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 | 492 | 9,421 |
| 11. | Book/adjusted carrying value at end of current period (Lines 1 + 2 + 3 + 4 + 5 - 6 - 7 + 8 - 9 + 10) | 3,995,086 | 4,040,658 |
| 12. | Deduct total nonadmitted amounts | | |
| 13. | Statement value at end of current period (Line 11 minus Line 12) | 3,995,086 | 4,040,658 |

# 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<br>Book/Adjusted Carrying Value Beginning of Current Quarter | 2<br>Acquisitions During Current Quarter | 3<br>Dispositions During Current Quarter | 4<br>Non-Trading Activity During Current Quarter | 5<br>Book/Adjusted Carrying Value End of First Quarter | 6<br>Book/Adjusted Carrying Value End of Second Quarter | 7<br>Book/Adjusted Carrying Value End of Third Quarter | 8<br>Book/Adjusted Carrying Value December 31 Prior Year |
|---|---|---|---|---|---|---|---|---|
| **BONDS** | | | | | | | | |
| 1. NAIC 1 (a) | 3,316,313 | 466,738 | 372,501 | (588) | 3,316,313 | 3,409,962 | | 3,313,272 |
| 2. NAIC 2 (a) | 663,054 | | 76,789 | (1,141) | 663,054 | 585,124 | | 727,386 |
| 3. NAIC 3 (a) | | | | | | | | |
| 4. NAIC 4 (a) | | | | | | | | |
| 5. NAIC 5 (a) | | | | | | | | |
| 6. NAIC 6 (a) | | | | | | | | |
| 7. Total Bonds | 3,979,367 | 466,738 | 449,290 | (1,729) | 3,979,367 | 3,995,086 | | 4,040,658 |
| **PREFERRED STOCK** | | | | | | | | |
| 8. NAIC 1 | | | | | | | | |
| 9. NAIC 2 | | | | | | | | |
| 10. NAIC 3 | | | | | | | | |
| 11. NAIC 4 | | | | | | | | |
| 12. NAIC 5 | | | | | | | | |
| 13. NAIC 6 | | | | | | | | |
| 14. Total Preferred Stock | | | | | | | | |
| 15. Total Bonds & Preferred Stock | 3,979,367 | 466,738 | 449,290 | (1,729) | 3,979,367 | 3,995,086 | | 4,040,658 |

(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

**SI03 Schedule DA Part 1 . . . . . NONE**

**SI03 Schedule DA Verification . . . . . NONE**

**SI04 Schedule DB - Part A Verification . . . . . NONE**

**SI04 Schedule DB - Part B Verification . . . . . NONE**

**SI05 Schedule DB Part C Section 1 . . . . . NONE**

**SI06 Schedule DB Part C Section 2 . . . . . NONE**

**SI07 Schedule DB - Verification . . . . . NONE**

# SCHEDULE E - PART 2 - VERIFICATION

**(Cash Equivalents)**

| | | 1<br>Year To Date | 2<br>Prior Year Ended December 31 |
|---|---|---|---|
| 1. | Book/adjusted carrying value, December 31 of prior year | 126,266 | 87,106 |
| 2. | Cost of cash equivalents acquired | 715,895 | 3,259,685 |
| 3. | Accrual of discount | | |
| 4. | Unrealized valuation increase (decrease) | | |
| 5. | Total gain (loss) on disposals | | |
| 6. | Deduct consideration received on disposals | 750,582 | 3,220,525 |
| 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) | 91,579 | 126,266 |
| 11. | Deduct total nonadmitted amounts | | |
| 12. | Statement value at end of current period (Line 10 minus Line 11) | 91,579 | 126,266 |

**E01 Schedule A Part 2 . . . . . NONE**

**E01 Schedule A Part 3 . . . . . NONE**

**E02 Schedule B Part 2 . . . . . NONE**

**E02 Schedule B Part 3 . . . . . NONE**

**E03 Schedule BA Part 2 . . . . . NONE**

**E03 Schedule BA Part 3 . . . . . NONE**

# SCHEDULE D - PART 3

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

| 1<br>CUSIP Identification | 2<br>Description | 3<br>Foreign | 4<br>Date Acquired | 5<br>Name of Vendor | 6<br>Number of Shares of Stock | 7<br>Actual Cost | 8<br>Par Value | 9<br>Paid for Accrued Interest and Dividends | 10<br>NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol |
|---|---|---|---|---|---|---|---|---|---|
| **Bonds - U.S. Governments** | | | | | | | | | |
| 912828ZW3 | T 0.25% 30 JUN 2025 | | 06/29/2022 | VARIOUS | X X X | 182,632 | 198,000 | 101 | 1.A |
| 91282CBE0 | T 0.125% 15 JAN 2024 | | 04/28/2022 | CITADEL SECURITIES INC | X X X | 56,624 | 59,000 | 22 | 1.A |
| 0109999999 Subtotal - Bonds - U.S. Governments | | | | | X X X | 239,256 | 257,000 | 123 | X X X |
| **Bonds - U.S. Special Revenue, Special Assessment** | | | | | | | | | |
| 3137F15D6 | FHR 4690 VK 15-Sep-2028 3.500 | | 05/20/2022 | JPMORGAN SECURITIES INC | X X X | 16,615 | 16,486 | 38 | 1.A |
| 54627RAL4 | LASGOV 3.615% 01 FEB 2029 | | 05/19/2022 | JPMORGAN SECURITIES INC, NEW YORK | X X X | 11,000 | 11,000 | | 1.A FE |
| 57563RSN0 | MASEDU 3.991% 01 JUL 2026 | | 06/03/2022 | RBC CAPITAL MARKETS | X X X | 10,000 | 10,000 | | 1.C FE |
| 0909999999 Subtotal - Bonds - U.S. Special Revenue, Special Assessment | | | | | X X X | 37,615 | 37,486 | 38 | X X X |
| **Bonds - Industrial and Miscellaneous (Unaffiliated)** | | | | | | | | | |
| 023135CE4 | AMZN 3.0% 13 APR 2025 | | 04/11/2022 | JP MORGAN SECURITIES LLC | X X X | 19,968 | 20,000 | | 1.D FE |
| 12630BAZ1 | COMM 2013-CR13 A3 10-Nov-2046 3.928 | | 04/20/2022 | CREDIT SUISSE SECURITIES (USA) | X X X | 14,340 | 14,221 | 33 | 1.A |
| 17252MAP5 | CTAS 3.45% 01 MAY 2025 | | 04/26/2022 | PERSHING LLC, JERSEY CITY | X X X | 15,996 | 16,000 | | 1.G FE |
| 35563PKG3 | SCRT 2019-2 MA 25-Aug-2058 3.500 | | 04/18/2022 | BNY MELLON CAPITAL MKTS | X X X | 9,936 | 9,890 | 17 | 1.A |
| 45866FAT1 | INTERCONTINENTAL 3.65% 23 MAY 2025 | | 05/20/2022 | WELLS FARGO SECURITIES | X X X | 25,971 | 26,000 | | 1.G FE |
| 571748BF8 | MMC 3.875% 15 MAR 2024 | | 05/24/2022 | JEFFERIES & CO | X X X | 17,197 | 17,000 | 130 | 1.G FE |
| 61763UAY8 | MSBAM 2014-C17 A4 15-Aug-2047 3.443 | | 05/09/2022 | MORGAN STANLEY & CO INC, NY | X X X | 7,516 | 7,555 | 7 | 1.A |
| 693342AA5 | PCG 3.594% 01 JUN 2032 A-1 | | 05/03/2022 | CITIGROUP GLOBAL MARKETS | X X X | 13,000 | 13,000 | | 1.A FE |
| 74456QBL9 | PEG 3.0% 15 MAY 2025 MTN | | 05/09/2022 | CITIGROUP GLOBAL MARKETS | X X X | 16,804 | 17,000 | 249 | 1.F FE |
| 907818DV7 | UNP 3.75% 15 MAR 2024 | | 06/15/2022 | SCOTIA CAPITAL | X X X | 13,968 | 14,000 | 134 | 1.G FE |
| 91324PEG3 | UNH 3.7% 15 MAY 2027 | | 05/17/2022 | MERRILL LYNCH PIERCE FENNER | X X X | 9,995 | 10,000 | | 1.F FE |
| 94989WAS6 | WFCM 2015-C31 A4 15-Nov-2048 3.695 | | 05/13/2022 | WELLS FARGO SECURITIES LLC, CHARLOTTE | X X X | 10,897 | 11,000 | 18 | 1.A |
| 95000U2K8 | WFC 2.164% 11 FEB 2026 MTN | | 04/28/2022 | DEUTSCHE BANK SECURITIES | X X X | 14,279 | 15,000 | 70 | 1.E FE |
| 1109999999 Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) | | | | | X X X | 189,867 | 190,666 | 658 | X X X |
| 2509999997 Subtotal - Bonds - Part 3 | | | | | X X X | 466,738 | 485,152 | 819 | X X X |
| 2509999998 Summary Item from Part 5 for Bonds (N/A to Quarterly) | | | | | X X X | X X X | X X X | X X X | X X X |
| 2509999999 Subtotal - Bonds | | | | | X X X | 466,738 | 485,152 | 819 | X X X |
| 4509999998 Summary Item from Part 5 for Preferred Stocks (N/A to Quarterly) | | | | | X X X | X X X | X X X | X X X | X X X |
| 4509999999 Subtotal - Preferred Stocks | | | | | X X X | | X X X | | X X X |
| 5989999998 Summary Item from Part 5 for Common Stocks (N/A to Quarterly) | | | | | X X X | X X X | X X X | X X X | X X X |
| 5989999999 Subtotal - Common Stocks | | | | | X X X | | X X X | | X X X |
| 5999999999 Subtotal - Preferred and Common Stocks | | | | | X X X | | X X X | | X X X |
| 6009999999 Total - Bonds, Preferred and Common Stocks | | | | | X X X | 466,738 | X X X | 819 | X X X |

# SCHEDULE D - PART 4

## Show All Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed of During the 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 | 15 | | | | | | | |
| CUSIP Identification | Description | Foreign | Disposal Date | Name of Purchaser | Number of Shares of Stock | Consideration | Par Value | Actual Cost | Prior Year Book/ Adjusted Carrying Value | Unrealized Valuation Increase/ (Decrease) | Current Year's (Amortization)/ Accretion | Current Year's Other Than Temporary Impairment Recognized | Total Change in B./A.C.V. (11 + 12 - 13) | Total Foreign Exchange Change in B./A.C.V. | Book/ Adjusted Carrying Value at Disposal Date | Foreign Exchange Gain (Loss) on Disposal | Realized Gain (Loss) on Disposal | Total Gain (Loss) on Disposal | Bond Interest/ Stock Dividends Received During Year | Stated Contractual Maturity Date | NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol |
| **Bonds - U.S. Governments** | | | | | | | | | | | | | | | | | | | | | |
| 83162CUA9 | SBAP 2011-20E 1 01-May-2031 3.790 | | 05/01/2022 | MBS PAYDOWN | XXX | 1,243 | 1,243 | 1,269 | 1,263 | | (20) | | (20) | | 1,243 | | | | | 05/01/2031 | 1.A |
| 83162CUH4 | SBAP 2011-20J 1 01-Oct-2031 2.760 | | 04/01/2022 | MBS PAYDOWN | XXX | 1,433 | 1,433 | 1,455 | 1,451 | | (18) | | (18) | | 1,433 | | | | | 10/01/2031 | 1.A |
| 912828V23 | T 2.25% 31 DEC 2023 | | 06/15/2022 | DEUTSCHE BANK SECURITIES | XXX | 13,792 | 14,000 | 14,611 | 14,322 | | (73) | | (73) | | 14,249 | | (456) | (456) | 145 | 12/31/2023 | 1.A |
| 912828ZF0 | T 0.5% 31 MAR 2025 | | 05/13/2022 | VARIOUS | XXX | 48,747 | 52,000 | 51,334 | 51,366 | | 71 | | 71 | | 51,436 | | (2,689) | (2,689) | 162 | 03/31/2025 | 1.A |
| 912828ZW3 | T 0.25% 30 JUN 2025 | | 05/09/2022 | CITADEL SECURITIES LLC, CHICAGO | XXX | 32,194 | 35,000 | 32,502 | | | 64 | | 64 | | 32,566 | | (371) | (371) | 31 | 06/30/2025 | 1.A |
| 91282CBE0 | T 0.125% 15 JAN 2024 | | 06/02/2022 | CITADEL SECURITIES INC | XXX | 9,629 | 10,000 | 9,982 | 9,988 | | 3 | | 3 | | 9,990 | | (361) | (361) | 11 | 01/15/2024 | 1.A |
| 91282CBV2 | T 0.375% 15 APR 2024 | | 05/24/2022 | DEUTSCHE BK SECS INC, NY | XXX | 15,383 | 16,000 | 16,018 | 16,014 | | (2) | | (2) | | 16,012 | | (628) | (628) | 37 | 04/15/2024 | 1.A |
| 91282CCN9 | Treasury Note 0.125% 31 JUL 2023 | | 05/09/2022 | BARCLAYS CAPITAL INC, NEW YORK | XXX | 5,846 | 6,000 | 5,972 | 5,973 | | 6 | | 6 | | 5,979 | | (133) | (133) | 6 | 07/31/2023 | 1.A |
| 91282CCT6 | T 0.375% 15 AUG 2024 | | 04/11/2022 | CITADEL SECURITIES INC | XXX | 26,561 | 28,000 | 27,892 | 27,901 | | 11 | | 11 | | 27,912 | | (1,352) | (1,352) | 69 | 08/15/2024 | 1.A |
| 0109999999 Subtotal - Bonds - U.S. Governments | | | | | XXX | 154,828 | 163,676 | 161,035 | 128,278 | | 42 | | 42 | | 160,820 | | (5,990) | (5,990) | 461 | XXX | XXX |
| **Bonds - U.S. Special Revenue, Special Assessment** | | | | | | | | | | | | | | | | | | | | | |
| 30297PAF0 | FRESB 2018-SB55 A5H 25-Jul-2038 3.300 | | 06/01/2022 | MBS PAYDOWN | XXX | 675 | 675 | 671 | 671 | | 4 | | 4 | | 675 | | | | 9 | 07/25/2038 | 1.A |
| 30298LAB7 | FRESB 2019-SB65 A5H 25-May-2039 2.130 | | 06/01/2022 | MBS PAYDOWN | XXX | 1,252 | 1,252 | 1,258 | 1,257 | | (5) | | (5) | | 1,252 | | | | 11 | 05/25/2039 | 1.A |
| 30309LAG3 | FRESB 2019-SB61 A5H 25-Feb-2039 2.950 | | 06/01/2022 | MBS PAYDOWN | XXX | 702 | 702 | 706 | 704 | | (2) | | (2) | | 702 | | | | 6 | 02/25/2039 | 1.A |
| 31288QEM8 | FH POOL 841040 01-Jul-2043 2.415 | | 06/01/2022 | MBS PAYDOWN | XXX | 336 | 336 | 338 | 352 | | (17) | | (17) | | 336 | | | | 2 | 07/01/2043 | 1.A |
| 31288QF62 | FH POOL 841089 01-Jun-2047 2.275 | | 06/01/2022 | MBS PAYDOWN | XXX | 1,135 | 1,135 | 1,189 | 1,181 | | (46) | | (46) | | 1,135 | | | | 7 | 06/01/2047 | 1.A |
| 31288QFT2 | FH POOL 841078 01-Apr-2045 2.907 | | 06/01/2022 | MBS PAYDOWN | XXX | 642 | 642 | 668 | 668 | | (26) | | (26) | | 642 | | | | 6 | 04/01/2045 | 1.A |
| 31288QFZ8 | FH POOL 841084 01-Aug-2047 2.479 | | 06/01/2022 | MBS PAYDOWN | XXX | 644 | 644 | 673 | 672 | | (28) | | (28) | | 644 | | | | 5 | 08/01/2047 | 1.A |
| 31288QJR2 | FH POOL 841172 01-Feb-2047 2.118 | | 06/01/2022 | MBS PAYDOWN | XXX | 908 | 908 | 954 | 908 | | | | | | 908 | | | | 6 | 02/01/2047 | 1.A |
| 31326KX69 | FH POOL 2B5201 01-Mar-2046 2.142 | | 05/19/2022 | VARIOUS | XXX | 5,144 | 5,062 | 3,521 | 5,105 | | (5) | | (5) | | 5,099 | | 45 | 45 | 56 | 03/01/2046 | 1.A |
| 3132A84T3 | FR POOL ZS8034 01-Jun-2033 3.000 | | 06/01/2022 | MBS PAYDOWN | XXX | 765 | 765 | 822 | 816 | | (51) | | (51) | | 765 | | | | 8 | 06/01/2033 | 1.A |
| 3136AGAY8 | FNR 2013-96 YA 25-Sep-2038 3.500 | | 06/01/2022 | MBS PAYDOWN | XXX | 1,717 | 1,717 | 1,759 | 1,754 | | (37) | | (37) | | 1,717 | | | | 21 | 09/25/2038 | 1.A |
| 3136ASFR2 | FNR 2016-24 LB 25-Jun-2042 2.500 | | 06/01/2022 | MBS PAYDOWN | XXX | 272 | 272 | 273 | 273 | | (1) | | (1) | | 272 | | | | 2 | 06/25/2042 | 1.A |
| 3137F15D6 | FHR 4690 VK 15-Sep-2028 3.500 | | 06/01/2022 | MBS PAYDOWN | XXX | 194 | 194 | 196 | | | (2) | | (2) | | 194 | | | | 1 | 09/15/2028 | 1.A |
| 3138EMV40 | FN POOL AL5134 01-Apr-2044 2.366 | | 06/01/2022 | MBS PAYDOWN | XXX | 1,777 | 1,777 | 1,835 | 1,825 | | (48) | | (48) | | 1,777 | | | | 11 | 04/01/2044 | 1.A |
| 3140EU2J7 | FN POOL BC0776 01-Mar-2046 2.203 | | 05/19/2022 | VARIOUS | XXX | 8,011 | 7,851 | 7,939 | 7,926 | | (2) | | (2) | | 7,924 | | 87 | 87 | 77 | 03/01/2046 | 1.A |
| 3140J5RF8 | FN POOL BM1385 01-Jul-2047 2.594 | | 05/19/2022 | VARIOUS | XXX | 4,668 | 4,576 | 4,588 | 4,576 | | 9 | | 9 | | 4,585 | | 83 | 83 | 55 | 07/01/2047 | 1.A |
| 3140J7RJ6 | FN POOL BM3188 01-Apr-2047 2.161 | | 06/01/2022 | MBS PAYDOWN | XXX | 730 | 730 | 739 | 737 | | (7) | | (7) | | 730 | | | | 6 | 04/01/2047 | 1.A |
| 3140J7WE1 | FN POOL BM3344 01-Dec-2047 3.164 | | 06/01/2022 | MBS PAYDOWN | XXX | 356 | 356 | 357 | 356 | | (1) | | (1) | | 356 | | | | 3 | 12/01/2047 | 1.A |
| 3140J8EG4 | FN POOL BM3734 01-Jan-2046 2.113 | | 06/01/2022 | MBS PAYDOWN | XXX | 332 | 332 | 345 | 332 | | | | | | 332 | | | | 2 | 01/01/2046 | 1.A |
| 3140J9B83 | FN POOL BM4562 01-May-2047 2.643 | | 06/01/2022 | MBS PAYDOWN | XXX | 2,814 | 2,814 | 2,894 | | | (81) | | (81) | | 2,814 | | | | 6 | 05/01/2047 | 1.A |
| 3140J9CN9 | FN POOL BM4576 01-Nov-2047 2.639 | | 06/01/2022 | MBS PAYDOWN | XXX | 254 | 254 | 250 | 250 | | 4 | | 4 | | 254 | | | | 2 | 11/01/2047 | 1.A |
| 3140JA5B0 | FN POOL BM6241 01-Feb-2044 2.367 | | 06/01/2022 | MBS PAYDOWN | XXX | 681 | 681 | 717 | 681 | | | | | | 681 | | | | 4 | 02/01/2044 | 1.A |
| 3140JBCG9 | FN POOL BM6370 01-Jul-2042 2.410 | | 06/01/2022 | MBS PAYDOWN | XXX | 297 | 297 | 315 | 314 | | (18) | | (18) | | 297 | | | | 2 | 07/01/2042 | 1.A |
| 3140X3B31 | FN POOL FM0057 01-May-2032 2.500 | | 06/01/2022 | MBS PAYDOWN | XXX | 327 | 327 | 347 | 345 | | (17) | | (17) | | 327 | | | | 3 | 05/01/2032 | 1.A |
| 3140X52J1 | FN POOL FM2576 01-Mar-2035 3.000 | | 06/01/2022 | MBS PAYDOWN | XXX | 485 | 485 | 516 | 514 | | (28) | | (28) | | 485 | | | | 5 | 03/01/2035 | 1.A |
| 3140X8HU4 | FN POOL FM4742 01-Mar-2035 4.000 | | 06/01/2022 | MBS PAYDOWN | XXX | 344 | 344 | 371 | 369 | | (24) | | (24) | | 344 | | | | 4 | 03/01/2035 | 1.A |
| 0909999999 Subtotal - Bonds - U.S. Special Revenue, Special Assessment | | | | | XXX | 35,462 | 35,128 | 34,241 | 32,586 | | (429) | | (429) | | 35,247 | | 215 | 215 | 320 | XXX | XXX |
| **Bonds - Industrial and Miscellaneous (Unaffiliated)** | | | | | | | | | | | | | | | | | | | | | |
| 02665WCY5 | AMERICAN HONDA FINANCE 2.2% 27 JUN 22 | | 06/27/2022 | MATURITY at 100.0000 | XXX | 10,000 | 10,000 | 9,991 | 9,998 | | 2 | | 2 | | 10,000 | | | | 110 | 06/27/2022 | 1.G FE |
| 12596JAC7 | CNH 2019-A A3 15-Apr-2024 3.010 | | 06/15/2022 | MBS PAYDOWN | XXX | 552 | 552 | 567 | 561 | | (9) | | (9) | | 552 | | | | 6 | 04/15/2024 | 1.A FE |
| 12624PAE5 | COMM 2012-CR3 A3 15-Oct-2045 2.822 | | 06/01/2022 | MBS PAYDOWN | XXX | 5,380 | 5,380 | 5,448 | 5,392 | | (12) | | (12) | | 5,380 | | | | 59 | 10/15/2045 | 1.A |
| 12624QAR4 | COMM 2012-CR4 A3 15-Oct-2045 2.853 | | 06/01/2022 | MBS PAYDOWN | XXX | 1,602 | 1,602 | 1,629 | 1,610 | | (8) | | (8) | | 1,602 | | | | 14 | 10/15/2045 | 1.A |
| 12625KAD7 | COMM 2013-CR8 A4 10-Jun-2046 3.334 | | 06/01/2022 | MBS PAYDOWN | XXX | 189 | 189 | 196 | 192 | | (3) | | (3) | | 189 | | | | 3 | 06/10/2046 | 1.A |

# SCHEDULE D - PART 4

## Show All Long-Term Bonds and Stocks Sold, Redeemed or Otherwise Disposed of During the 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 | 15 | | | | | | | |
| CUSIP Identification | Description | Foreign | Disposal Date | Name of Purchaser | Number of Shares of Stock | Consideration | Par Value | Actual Cost | Prior Year Book/ Adjusted Carrying Value | Unrealized Valuation Increase/ (Decrease) | Current Year's (Amortization)/ Accretion | Current Year's Other Than Temporary Impairment Recognized | Total Change in B./A.C.V. (11 + 12 - 13) | Total Foreign Exchange Change in B./A.C.V. | Book/ Adjusted Carrying Value at Disposal Date | Foreign Exchange Gain (Loss) on Disposal | Realized Gain (Loss) on Disposal | Total Gain (Loss) on Disposal | Bond Interest/ Stock Dividends Received During Year | Stated Contractual Maturity Date | NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol |
| 166764BV1 | CHEVRON CORP 1.141% 11 MAY 2023 | | 06/29/2022 | PERSHING LLC, JERSEY CITY | XXX | 10,809 | 11,000 | 11,000 | 11,000 | | | | | | 11,000 | | (191) | (191) | 80 | 05/11/2023 | 1.D FE |
| 316773CU2 | FITB 2.6% 15 JUN 2022 | | 05/10/2022 | 05/10/2022 SECURITY CALLED AT 100.000 | XXX | 7,000 | 7,000 | 7,022 | 7,000 | | | | | | 7,000 | | | | 76 | 06/15/2022 | 2.A FE |
| 35563PKG3 | SCRT 2019-2 MA 25-Aug-2058 3.500 | | 06/01/2022 | MBS PAYDOWN | XXX | 415 | 415 | 417 | | | (2) | | (2) | | 415 | | | | 1 | 08/25/2058 | 1.A |
| 43815NAC8 | HAROT 2019-3 A3 15-Aug-2023 1.780 | | 06/15/2022 | MBS PAYDOWN | XXX | 4,028 | 4,028 | 4,083 | 4,056 | | (27) | | (27) | | 4,028 | | | | 26 | 08/15/2023 | 1.A FE |
| 46634SAC9 | JPMCC 2012-C6 A3 15-May-2045 3.507 | | 04/01/2022 | MBS PAYDOWN | XXX | 3,345 | 3,345 | 3,344 | 3,344 | | 1 | | 1 | | 3,345 | | | | 44 | 05/15/2045 | 1.D |
| 46637WAD5 | JPMCC 2012-CBX A4 15-Jun-2045 3.483 | | 04/01/2022 | MBS PAYDOWN | XXX | 5,172 | 5,172 | 5,267 | 5,192 | | (12) | | (12) | | 5,180 | | (9) | (9) | 64 | 06/15/2045 | 1.A |
| 47789KAC7 | JDOT 2020-A A3 15-Aug-2024 1.100 | | 06/15/2022 | MBS PAYDOWN | XXX | 3,270 | 3,270 | 3,270 | 3,270 | | | | | | 3,270 | | | | 12 | 08/15/2024 | 1.A FE |
| 548661CW5 | LOWES CO 3.12% 15 APR 2022 | | 04/15/2022 | MATURITY at 100.0000 | XXX | 33,000 | 33,000 | 32,484 | 32,952 | | 48 | | 48 | | 33,000 | | | | 515 | 04/15/2022 | 2.A FE |
| 61744YAH1 | MS 2.75% 19 MAY 2022 | | 05/19/2022 | MATURITY at 100.0000 | XXX | 34,000 | 34,000 | 33,902 | 33,987 | | 13 | | 13 | | 34,000 | | | | 468 | 05/19/2022 | 1.G FE |
| 61761AAZ1 | MSBAM 2012-C5 A4 15-Aug-2045 3.176 | | 04/01/2022 | MBS PAYDOWN | XXX | 13,473 | 13,473 | 13,801 | 13,529 | | (27) | | (27) | | 13,502 | | (28) | (28) | 144 | 08/15/2045 | 1.A |
| 61765LAT7 | MSBAM 2015-C24 A3 15-May-2048 3.479 | | 06/01/2022 | MBS PAYDOWN | XXX | 1,181 | 1,181 | 1,181 | | | | | | | 1,181 | | | | 5 | 05/15/2048 | 1.A |
| 65479JAD5 | NAROT 2019-C A3 15-Jul-2024 1.930 | | 06/15/2022 | MBS PAYDOWN | XXX | 2,935 | 2,935 | 2,935 | 2,935 | | | | | | 2,935 | | | | 20 | 07/15/2024 | 1.A FE |
| 655844BJ6 | NORFOLK SOUTHERN 3.0% 01 APR 2022 | | 04/01/2022 | MATURITY at 100.0000 | XXX | 22,000 | 22,000 | 21,970 | 21,996 | | 4 | | 4 | | 22,000 | | | | 330 | 04/01/2022 | 2.A FE |
| 70450YAF0 | PYPL 1.35% 01 JUN 2023 | | 05/23/2022 | DIRECT | XXX | 10,891 | 11,000 | 10,990 | 10,995 | | 1 | | 1 | | 10,997 | | (106) | (106) | 71 | 06/01/2023 | 1.G FE |
| 91159JAA4 | USB 2.95% 15 JUL 2022 MTN | | 06/15/2022 | 06/15/2022 SECURITY CALLED AT 100.000 | XXX | 15,000 | 15,000 | 14,831 | 14,959 | | 34 | | 34 | | 14,993 | | 7 | 7 | 406 | 07/15/2022 | 1.F FE |
| 92348TAA2 | VZOT 2020-A A1A 22-Jul-2024 1.850 | | 06/29/2022 | VARIOUS | XXX | 44,753 | 44,887 | 45,030 | 44,947 | | (38) | | (38) | | 44,910 | | (157) | (157) | 414 | 07/22/2024 | 1.A FE |
| 94974BGH7 | WFC 3.0% 19 FEB 2025 MTN | | 04/28/2022 | DEUTSCHE BANK SECURITIES | XXX | 13,790 | 14,000 | 14,989 | 14,880 | | (91) | | (91) | | 14,789 | | (999) | (999) | 292 | 02/19/2025 | 2.A FE |
| 98163EAD8 | WOART 2018-C A3 15-Nov-2023 3.130 | | 06/15/2022 | MBS PAYDOWN | XXX | 2,424 | 2,424 | 2,424 | 2,424 | | | | | | 2,424 | | | | 32 | 11/15/2023 | 1.A FE |
| 98163MAD0 | WOART 2020-A A3 15-Apr-2025 1.100 | | 06/15/2022 | MBS PAYDOWN | XXX | 6,531 | 6,531 | 6,529 | 6,530 | | 1 | | 1 | | 6,531 | | | | 25 | 04/15/2025 | 1.A FE |
| 1109999999 Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) | | XXX | | | XXX | 251,740 | 252,384 | 253,300 | 251,749 | | (125) | | (125) | | 253,223 | | (1,483) | (1,483) | 3,217 | XXX | XXX |
| 2509999997 Subtotal - Bonds - Part 4 | | XXX | | | XXX | 442,030 | 451,188 | 448,576 | 412,613 | | (512) | | (512) | | 449,290 | | (7,258) | (7,258) | 3,998 | XXX | XXX |
| 2509999998 Summary Item from Part 5 for Bonds (N/A to Quarterly) | | XXX | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 2509999999 Subtotal - Bonds | | XXX | | | XXX | 442,030 | 451,188 | 448,576 | 412,613 | | (512) | | (512) | | 449,290 | | (7,258) | (7,258) | 3,998 | XXX | XXX |
| 4509999998 Summary Item from Part 5 for Preferred Stocks (N/A to Quarterly) | | XXX | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 4509999999 Subtotal - Preferred Stocks | | XXX | | | XXX | | XXX | | | | | | | | | | | | | XXX | XXX |
| 5989999998 Summary Item from Part 5 for Common Stocks (N/A to Quarterly) | | XXX | | | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX | XXX |
| 5989999999 Subtotal - Common Stocks | | XXX | | | XXX | | XXX | | | | | | | | | | | | | XXX | XXX |
| 5999999999 Subtotal - Preferred and Common Stocks | | XXX | | | XXX | | XXX | | | | | | | | | | | | | XXX | XXX |
| 6009999999 Total - Bonds, Preferred and Common Stocks | | XXX | | | XXX | 442,030 | XXX | 448,576 | 412,613 | | (512) | | (512) | | 449,290 | | (7,258) | (7,258) | 3,998 | XXX | XXX |

E06 Schedule DB Part A Section 1 . . . . . NONE

E07 Schedule DB Part B Section 1 . . . . . NONE

E08 Schedule DB Part D Section 1 . . . . . NONE

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

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

E10 Schedule DB Part E . . . . . NONE

E11 Schedule DL - Part 1 - Securities Lending Collateral Assets . . . . . NONE

E12 Schedule DL - Part 2 - Securities Lending Collateral Assets . . . . . NONE

# SCHEDULE E - PART 1 - CASH

**Month End Depository Balances**

| 1<br>Depository | 2<br>Code | 3<br>Rate of Interest | 4<br>Amount of Interest Received During Current Quarter | 5<br>Amount of Interest Accrued at Current Statement Date | Book Balance at End of Each Month During Current Quarter<br>6<br>First Month | <br>7<br>Second Month | <br>8<br>Third Month | 9<br>* |
|---|---|---|---|---|---|---|---|---|
| **open depositories** | | | | | | | | |
| Huntington Bank ..... Maumee, Oh ..... ..... | ..... | ..... | ..... | ..... | ... 58,964,097 | ... 71,994,004 | ... 52,554,853 | X X X |
| 0199998 Deposits in .....0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - open depositories | X X X | ... X X X .. | ..... | ..... | ..... | ..... | ..... | X X X |
| 0199999 Totals - Open Depositories | X X X | ... X X X .. | ..... | ..... | ... 58,964,097 | ... 71,994,004 | ... 52,554,853 | X X X |
| 0299998 Deposits in .....0 depositories that do not exceed the allowable limit in any one depository (see Instructions) - suspended depositories | X X X | ... X X X .. | ..... | ..... | ..... | ..... | ..... | X X X |
| 0299999 Totals - Suspended Depositories | X X X | ... X X X .. | ..... | ..... | ..... | ..... | ..... | X X X |
| 0399999 Total Cash On Deposit | X X X | ... X X X .. | ..... | ..... | ... 58,964,097 | ... 71,994,004 | ... 52,554,853 | X X X |
| 0499999 Cash in Company's Office | X X X | ... X X X .. | . X X X . | ... X X X .. | ..... 367 | ..... 367 | ..... 367 | X X X |
| 0599999 Total Cash | X X X | ... X X X .. | ..... | ..... | ... 58,964,464 | ... 71,994,371 | ... 52,555,220 | X X X |

# SCHEDULE E - PART 2 - CASH EQUIVALENTS

**Show Investments Owned End of Current Quarter**

| 1<br>CUSIP | 2<br>Description | 3<br>Code | 4<br>Date Acquired | 5<br>Rate of Interest | 6<br>Maturity Date | 7<br>Book/Adjusted Carrying Value | 8<br>Amount of Interest Due & Accrued | 9<br>Amount Received During Year |
|---|---|---|---|---|---|---|---|---|
| **Exempt Money Market Mutual Funds - as Identified by SVO** | | | | | | | | |
| 09248U718 | BLCKRCK LIQ FND T-FND-INST | | 06/30/2022 | 1.000 | X X X | 91,072 | | 55 |
| 8209999999 Subtotal - Exempt Money Market Mutual Funds - as Identified by SVO | | | | | | 91,072 | | 55 |
| **All Other Money Market Mutual Funds** | | | | | | | | |
| 60934N104 | FEDERATED HERMES GOVERNMENT OB | | 06/30/2022 | 1.000 | X X X | 507 | | |
| 8309999999 Subtotal - All Other Money Market Mutual Funds | | | | | | 507 | | |
| 8609999999 Total Cash Equivalents | | | | | | 91,579 | | 55 |

95189202222200102 2022 Document Code: 222

# Communication of Internal Control Related Matters Noted in an Audit