

QUARTERLY STATEMENT

of the

OHIO BANKERS BENEFITS TRUST

of

COLUMBUS

in the

STATE OF OHIO

to the

DEPARTMENT OF INSURANCE

of the

state of

OHIO

For the Quarter Ended
September 30, 2022

2022

2022



HEALTH COMPANIES – ASSOCIATION EDITION

QUARTERLY STATEMENT
 AS OF SEPTEMBER 30, 2022
 OF THE CONDITION AND AFFAIRS OF THE
OHIO BANKERS BENEFITS TRUST

NAIC Group Code.....0000.....0000.....NAIC Company Code.....00000....Employer's ID Number.....31-1306485.....
 (Current) (Prior)

Organized under the Laws of.....OH.....State of Domicile or Port of Entry.....OH.....
 Country of Domicile.....US.....

Licensed as business type:.....OTHER.....Is HMO Federally Qualified?.....NO.....
 Incorporated/Organized.....01/01/1997.....Commenced Business.....01/01/1997.....

Statutory Home Office.....4215 WORTH AVENUE, SUITE 300.....COLUMBUS, OH, US 43219.....
 Main Administrative Office.....4215 WORTH AVENUE, SUITE 300.....COLUMBUS, OH, US 43219.....
 COLUMBUS, OH, US 43219.....

Mail Address.....4215 WORTH AVENUE, SUITE 300.....COLUMBUS, OH, US 43219.....
 Primary Location of Books and
 Records.....4215 WORTH AVENUE, SUITE 300.....COLUMBUS, OH, US 43219.....
 COLUMBUS, OH, US 43219.....

(Telephone Number)

Internet Website Address.....

Statutory Statement Contact.....GAURI AIRI.....614-340-7595.....
 (Telephone Number)

GARI@OHIOBANKERSLEAGUE.COM.....614-340-7599.....
 (E-Mail Address).....(Fax Number)

OFFICERS

.....Gauri Airi, Executive Director.....

DIRECTORS OR TRUSTEES

.....DEAN MILLER.....PAUL REED.....
.....RON ZIMMERLY.....LEWIS RENOLLET.....
.....JOHN ESSEN.....MARK MASTERS.....

State of
 County of 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.

DocuSigned by:


 x BECA6750F64748B...
 Gauri Airi

DocuSigned by:


 x 39C66A5AEC004DF...
 Chris Zeek

DocuSigned by:


 x 214A0F56543048B...
 Lewis Renollet

Subscribed and sworn to before me

this day of

DocuSigned by:
 x Stephen R. Riddle
 2780DE25A066452...

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

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds.....	10,282,538		10,282,538	6,940,179
2. Stocks:				
2.1 Preferred stocks.....				
2.2 Common stocks.....	1,819,251		1,819,251	1,954,328
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 \$ encumbrances).....				
4.2 Properties held for the production of income (less \$ encumbrances).....				
4.3 Properties held for sale (less \$ encumbrances).....				
5. Cash (\$ 5,044,316), cash equivalents (\$) and short-term investments (\$ 194,590).....	5,238,906		5,238,906	10,051,318
6. Contract loans (including \$ premium notes).....				
7. Derivatives.....				
8. Other invested assets.....				
9. Receivables for securities.....				
10. Securities lending reinvested collateral assets.....				
11. Aggregate write-ins for invested assets.....				
12. Subtotals, cash and invested assets (Lines 1 to 11).....	17,340,695		17,340,695	18,945,825
13. Title plants less \$ charged off (for Title insurers only).....				
14. Investment income due and accrued.....	73,292		73,292	30,131
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	34,634		34,634	
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums).....				
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$).....				
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.....				
18.1 Current federal and foreign income tax recoverable and interest thereon.....				
18.2 Net deferred tax asset.....				
19. Guaranty funds receivable or on deposit.....				
20. Electronic data processing equipment and software.....				
21. Furniture and equipment, including health care delivery assets (\$).....				
22. Net adjustment in assets and liabilities due to foreign exchange rates.....				
23. Receivables from parent, subsidiaries and affiliates.....				
24. Health care (\$) and other amounts receivable.....	565,980		565,980	565,980
25. Aggregate write-ins for other-than-invested assets.....				
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	18,014,601		18,014,601	19,541,936
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....				
28. Total (Lines 26 and 27).....	18,014,601		18,014,601	19,541,936
Details of Write-Ins				
1101.....				
1102.....				
1103.....				
1198. Summary of remaining write-ins for Line 11 from overflow page.....				
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....				
2501.....				
2502.....				
2503.....				
2598. Summary of remaining write-ins for Line 25 from overflow page.....				
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....				

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ reinsurance ceded).....	1,950,500		1,950,500	1,353,650
2. Accrued medical incentive pool and bonus amounts.....				
3. Unpaid claims adjustment expenses.....	365,000		365,000	195,000
4. Aggregate health policy reserves, including the liability of \$ for medical loss ratio rebate per the Public Health Service Act.....				
5. Aggregate life policy reserves.....				
6. Property/casualty unearned premium reserve.....				
7. Aggregate health claim reserves.....				
8. Premiums received in advance.....				38,358
9. General expenses due or accrued.....	216,084		216,084	
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses)).....	154,367		154,367	
10.2 Net deferred tax liability.....				
11. Ceded reinsurance premiums payable.....				
12. Amounts withheld or retained for the account of others.....				
13. Remittances and items not allocated.....				
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current).....				
15. Amounts due to parent, subsidiaries and affiliates.....				
16. Derivatives.....				
17. Payable for securities.....				
18. Payable for securities lending.....				
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers).....				
20. Reinsurance in unauthorized and certified (\$) companies.....				
21. Net adjustments in assets and liabilities due to foreign exchange rates.....				
22. Liability for amounts held under uninsured plans.....				
23. Aggregate write-ins for other liabilities (including \$ current).....				
24. Total liabilities (Lines 1 to 23).....	2,685,951		2,685,951	1,587,008
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		
29. Surplus notes.....	XXX	XXX		
30. Aggregate write-ins for other-than-special surplus funds.....	XXX	XXX		
31. Unassigned funds (surplus).....	XXX	XXX	15,328,650	17,954,928
32. Less treasury stock, at cost:				
32.1 shares common (value included in Line 26 \$).....	XXX	XXX		
32.2 shares preferred (value included in Line 27 \$).....	XXX	XXX		
33. Total capital and surplus (Lines 25 to 31 minus Line 32).....	XXX	XXX	15,328,650	17,954,928
34. Total liabilities, capital and surplus (Lines 24 and 33).....	XXX	XXX	18,014,601	19,541,936
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
				4
	Uncovered	Total	Total	Total
1. Member Months.....	XXX.....	37,680	13,638	18,383
2. Net premium income (including \$ non-health premium income).....	XXX.....	18,216,716	14,911,666	20,106,998
3. Change in unearned premium reserves and reserve for rate credits.....	XXX.....			
4. Fee-for-service (net of \$ medical expenses).....	XXX.....			
5. Risk revenue.....	XXX.....			
6. Aggregate write-ins for other health care related revenues.....	XXX.....	—	64,764	
7. Aggregate write-ins for other non-health revenues.....	XXX.....	—	1,204,438	1,526,128
8. Total revenues (Lines 2 to 7).....	XXX.....	18,216,716	16,180,868	21,633,126
Hospital and Medical:				
9. Hospital/medical benefits.....		12,490,955	8,521,265	11,917,931
10. Other professional services.....		1,378,119		
11. Outside referrals.....				
12. Emergency room and out-of-area.....		987,255		
13. Prescription drugs.....		4,229,838	3,970,435	5,457,002
14. Aggregate write-ins for other hospital and medical.....			(276,000)	(208,000)
15. Incentive pool, withhold adjustments and bonus amounts.....				
16. Subtotal (Lines 9 to 15).....		19,086,167	12,215,700	17,166,933
Less:				
17. Net reinsurance recoveries.....		291,887		70,388
18. Total hospital and medical (Lines 16 minus 17).....		18,794,280	12,215,700	17,096,545
19. Non-health claims (net).....				
20. Claims adjustment expenses, including \$817,221 cost containment expenses.....		1,242,573	814,561	1,015,848
21. General administrative expenses.....		297,708	1,002,488	1,319,383
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only).....				
23. Total underwriting deductions (Lines 18 through 22).....		20,334,561	14,032,749	19,431,776
24. Net underwriting gain or (loss) (Lines 8 minus 23).....	XXX.....	(2,117,845)	2,148,119	2,201,350
25. Net investment income earned.....		(468,554)	377,451	641,390
26. Net realized capital gains (losses) less capital gains tax of \$.....		114,488		39,254
27. Net investment gains (losses) (Lines 25 plus 26).....		(354,066)	377,451	680,644
28. Net gain or (loss) from agents' or premium balances charged off [(amount recovered \$) (amount charged off \$)].....				
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.....	(2,471,911)	2,525,570	2,881,994
31. Federal and foreign income taxes incurred.....	XXX.....	154,367		
32. Net income (loss) (Lines 30 minus 31).....	XXX.....	(2,626,278)	2,525,570	2,881,994
Details of Write-Ins				
0601. Misc Income.....	XXX.....	—	64,764	
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.....	—	64,764	
0701. Prescription rebate revenue.....	XXX.....	—	1,204,438	1,526,128
0702. Miscellaneous income.....	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.....	—	1,204,438	1,526,128
1401. CHANGE IN IBNR.....			(276,000)	(208,000)
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).....			(276,000)	(208,000)
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)

CAPITAL & SURPLUS ACCOUNT	1	2	3
	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
33. Capital and surplus prior reporting year.....	17,954,928	15,072,934	15,072,934
34. Net income or (loss) from Line 32.....	(2,626,278)	2,525,570	2,881,994
35. Change in valuation basis of aggregate policy and claim reserves.....			
36. Change in net unrealized capital gains (losses) less capital gains tax of \$.....			
37. Change in net unrealized foreign exchange capital gain or (loss).....			
38. Change in net deferred income tax.....			
39. Change in nonadmitted assets.....			
40. Change in unauthorized and certified reinsurance.....			
41. Change in treasury stock.....			
42. Change in surplus notes.....			
43. Cumulative effect of changes in accounting principles.....			
44. Capital Changes:			
44.1 Paid in.....			
44.2 Transferred from surplus (Stock Dividend).....			
44.3 Transferred to surplus.....			
45. Surplus adjustments:			
45.1 Paid in.....			
45.2 Transferred to capital (Stock Dividend).....			
45.3 Transferred from capital.....			
46. Dividends to stockholders.....			
47. Aggregate write-ins for gains or (losses) in surplus.....			
48. Net change in capital and surplus (Lines 34 to 47).....	(2,626,278)	2,525,570	2,881,994
49. Capital and surplus end of reporting period (Line 33 plus 48).....	15,328,650	17,598,504	17,954,928
Details of Write-Ins			
4701.....			
4702.....			
4703.....			
4798. Summary of remaining write-ins for Line 47 from overflow page.....			
4799. Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)			

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance.....	18,143,724	16,091,784	21,575,126
2. Net investment income.....	(496,022)	390,282	696,751
3. Miscellaneous income.....	—	—	—
4. Total (Lines 1 to 3).....	17,647,702	16,482,066	22,271,877
5. Benefit and loss related payments.....	18,197,430	14,142,364	19,634,842
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	—	—	—
7. Commissions, expenses paid and aggregate write-ins for deductions.....	1,154,197	—	—
8. Dividends paid to policyholders.....	—	—	—
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses).....	—	—	—
10. Total (Lines 5 through 9).....	19,351,627	14,142,364	19,634,842
11. Net cash from operations (Line 4 minus Line 10).....	(1,703,925)	2,339,702	2,637,035
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.....	675,193	1,000,000	1,250,000
12.2 Stocks.....	610,546	229,700	281,297
12.3 Mortgage loans.....	—	—	—
12.4 Real estate.....	—	—	—
12.5 Other invested assets.....	659,126	—	(444,818)
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....	—	(211,391)	—
12.7 Miscellaneous proceeds.....	—	—	—
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	1,944,865	1,018,309	1,086,479
13. Cost of investments acquired (long-term only):			
13.1 Bonds.....	4,031,023	3,043,019	3,665,923
13.2 Stocks.....	1,022,329	196,875	265,196
13.3 Mortgage loans.....	—	—	—
13.4 Real estate.....	—	—	—
13.5 Other invested assets.....	—	—	—
13.6 Miscellaneous applications.....	—	—	—
13.7 Total investments acquired (Lines 13.1 to 13.6).....	5,053,353	3,239,894	3,931,119
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).....	(3,108,488)	(2,221,585)	(2,844,640)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes.....	—	—	—
16.2 Capital and paid in surplus, less treasury stock.....	—	—	—
16.3 Borrowed funds.....	—	—	—
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....	—	—	—
16.5 Dividends to stockholders.....	—	—	—
16.6 Other cash provided (applied).....	—	—	—
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6).....	—	—	—
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).....	(4,812,413)	118,117	(207,605)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year.....	10,051,318	10,258,923	10,258,923
19.2 End of period (Line 18 plus Line 19.1).....	5,238,905	10,377,040	10,051,318

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

20.0001.....	—	—	—
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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.....	2,891		1,629				1,262			
2. First Quarter.....	2,042		2,042							
3. Second Quarter.....	2,076		2,076							
4. Third Quarter.....	4,770			4,770						
5. Current Year.....										
6. Current Year Member Months.....	37,680		37,680							
Total Member Ambulatory Encounters for Period:										
7. Physician.....										
8. Non-Physician.....										
9. Total.....										
10. Hospital Patient Days Incurred.....										
11. Number of Inpatient Admissions.....										
12. Health Premiums Written (a).....	18,216,716		18,216,716							
13. Life Premiums Direct.....										
14. Property/Casualty Premiums Written.....										
15. Health Premiums Earned.....	18,216,716		18,216,716							
16. Property/Casualty Premiums Earned.....										
17. Amount Paid for Provision of Health Care Services.....	18,359,317		18,359,317							
18. Amount Incurred for Provision of Health Care Services.....	19,086,167		19,086,167							

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

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (REPORTED AND UNREPORTED)

Aging Analysis of Unpaid Claims

1 Account	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 91 - 120 Days	6 Over 120 Days	7 Total
Claims Unpaid (Reported)						
0199999 - Individually listed claims unpaid	1,950,500					1,950,500
0499999 - Subtotals	1,950,500					1,950,500
0799999 - Total claims unpaid						1,950,500
0899999 - Accrued medical incentive pool and bonus amounts						

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

	Claims Paid Year to Date		Liability End of Current Quarter		5	6
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical).....	1,175,273	16,228,380	16,544	1,911,896	1,191,817	1,330,650
2. Medicare Supplement.....						
3. Dental only.....	13,932	779,846	60	22,000	13,992	23,000
4. Vision only.....						
5. Federal Employees Health Benefits Plan.....						
6. Title XVIII – Medicare.....						
7. Title XIX – Medicaid.....						
8. Other health.....						
9. Health subtotal (Lines 1 to 8).....	1,189,205	17,008,226	16,604	1,933,896	1,205,809	1,353,650
10. Health care receivables (a).....						
11. Other non-health.....						
12. Medical incentive pools and bonus amounts.....						
13. Totals (Lines 9-10+11+12).....	1,189,205	17,008,226	16,604	1,933,896	1,205,809	1,353,650

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

Notes to the Financial Statements

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

	SSAP #	F/S Page	F/S Line #	09/30/2022	12/31/2021
Net Income					
(1) State basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ (2,626,278)	\$ 2,881,994
(2) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(3) State permitted practices that are an increase / (decrease) from NAIC SAP:	XXX	XXX	XXX	\$ (2,626,278)	\$ 2,881,994
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ (2,626,278)	\$ 2,881,994
Surplus					
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 15,328,650	\$ 17,954,928
(6) State prescribed practices that are an increase / (decrease) from NAIC SAP:					
(7) State permitted practices that are an increase / (decrease) from NAIC SAP:	XXX	XXX	XXX	\$ 15,328,650	\$ 17,954,928
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 15,328,650	\$ 17,954,928

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

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

C. Accounting Policy

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

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

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

Receivables

The Plan entered into a contractual pharmaceutical rebate program, which provides rebates to the plan based upon the volume within each prescription category contained within the agreement. The program began in 2019 when the plan switched third party administrators, accordingly, the history of the rebate program is continuing to build and develop. The rebates are received on a consistent, steady basis each quarter. In accordance with Statutory Issue Paper No. 107, items 12-15, the amount is being reported as an admitted assets.

(1) Basis for Short-Term Investments

As stated above, short term investments not included in cash, are reflected at fair market value. Holdings maturing less than a year are reported as cash holdings.

(2) Basis for Bonds and Amortization Schedule

As stated above, bonds are carried at amortized cost.

(3) Basis for Common Stocks

As status, above, common stocks are reflected at fair market value.

(4) Preferred stocks - None

(5) Mortgage loans - None

(6) Loan-backed securities - None

(7) Investments in subsidiaries, controlled and affiliated entities - None

(8) Investments in joint ventures, partnerships and limited liability companies - None

(9) Derivatives - None

(10) Investment income as a factor in the premium deficiency calculation - None

(11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss/Claim Adjustment Expenses

Management utilizes actuary to assist with determination of benefit obligations and estimated losses for claim adjustment expenses.

(12) Changes in capitalization policy - None

(13) Pharmaceutical rebate receivables - None

D. Going Concern

No going concern issues.

Notes to the Financial Statements

2. Accounting Changes and Corrections of Errors - None

3. Business Combinations and Goodwill - None

4. Discontinued Operations - None

5. Investments - None

6. Joint Ventures, Partnerships and Limited Liability Companies - None

7. Investment Income - None

8. Derivative Instruments - None

9. Income Taxes

The arrangement has a tax liability of \$154,367 based on investment income earned.

10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties - None

11. Debt - None

12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans - None

13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations - None

14. Liabilities, Contingencies and Assessments - None

15. Leases - None

16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk - None

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities - None

18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans - None

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators - None

20. Fair Value Measurements

A. Fair Value Measurement

(1) Fair value measurements at reporting date

Description for each class of asset or liability	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Total
a. Assets at fair value					
Investments (bonds, stocks, CDs)	\$ 16,534,822	\$	\$	\$	\$ 16,534,822
Total assets at fair value/NAV	<u>\$ 16,534,822</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$ 16,534,822</u>
b. Liabilities at fair value					
Total liabilities at fair value	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>	<u>\$</u>

(2) Fair value measurements in Level 3 of the fair value hierarchy - None

(3) Policy on transfers into and out of Level 3 - None

(4) Inputs and techniques used for Level 2 and Level 3 fair values - None

(5) Fair Value Disclosures

As defined in the applicable accounting guidance for fair value measurements and disclosures, fair value is the price to sell an asset or transfer a liability in an orderly transaction between market participants in the principal market. In other words, fair value represents an exit price at the measurement date. Market participants are buyers and sellers who are independent, knowledgeable, and willing and able to transact in the principal (or most advantageous) market for the asset or liability being measured. Current market conditions, including imbalances between supply and demand, are considered in determining fair value.

The Plan's assets are valued based on the principal market where each would be sold. The principal market is the forum with the greatest volume and level of activity. In the absence of a principal market, valuation is based on the most advantageous market (i.e., the market where the asset could be sold at a price that maximizes the amount to be received.)

Valuation inputs refer to the assumptions market participants would use in pricing a given asset. Inputs can be observable or unobservable. Observable inputs are assumptions based on market data obtained from an independent source.

Unobservable inputs are assumptions based on the Trustee's own information or assessment of assumptions used by other market participants in pricing the asset. Unobservable inputs are based on the best and most current information available on the measurement date. All inputs, whether observable or unobservable, are ranked in accordance with a prescribed fair value hierarchy that gives the highest ranking to quoted prices in active markets for identical assets (Level 1) and the lowest ranking to unobservable inputs (Level 3). Fair values for assets classified as (Level 2) are based on one or a combination of the following factors: (a) quoted market prices for similar assets in active markets; (b) quoted prices for identical or similar assets in inactive markets; (c) observable inputs, such as interest rates or yield curves; or (d) inputs derived principally from or corroborated by observable market data. The level in the fair value hierarchy ascribed to a fair value measurement in its entirety is based on the lowest level input that is significant to the measurement. The Plan considers an input to be significant if it drives 10% or more of the total fair value of a particular asset. Assets may transfer between levels based on the observable and unobservable inputs used at the valuation date, as the inputs may be influenced by certain market conditions.

B. Other Fair Value Disclosures - None

C. Fair Values for All Financial Instruments by Level 1, 2 and 3 - None

D. Not Practicable to Estimate Fair Value - None

E. Nature and Risk of Investments Reported at NAV - None

Notes to the Financial Statements

21. Other Items - None

22. Events Subsequent

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

The financial impact of COVID-19 is not known at this time, but it is anticipated OBBT certainly will experience some degree of increased claims. Due to the uncertain nature of COVID-19 at this time it is not possible to reasonably estimate what overall potential loss may be experienced. OBBT does have substantial reserves and continues to manage spending in response to the pandemic, but the ultimate affect could be substantial due to increased health care costs. OBBT is also on the forefront of risk assessment, which includes performing stress tests by evaluating the potential effects of natural disasters upon the Plan. The most recent test, conducted on April 1st, using best COVID-19 data available at that time, showed favorable outcomes for the Plan with potential increase in claims of only 4% to 7%. However, the overall ultimate effect is not known but due to the uncertainty of COVID-19, no adjustments have been made to these financial statements.

Subsequent events have been considered through November 14, 2022 for these statutory financial statements which are to be issued on.

23. Reinsurance

During 2022, the Plan was subject to a stop loss reinsurance agreement with Community Insurance Company for medical and prescription drug coverage. The specific stop loss threshold per covered person is from \$350,000 for 2022. Under the aggregate stop loss contract, the reinsurer pays all claims in excess of a fixed per employee per month amount that is the equivalent of 125% of actuarially expected claim costs for the entire Arrangement (net of any specific stop loss reimbursements).

A. Ceded Reinsurance Report

Section 1 – General Interrogatories

(1) Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company?

Yes () No (X)

(2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or any other person not primarily engaged in the insurance business?

Yes () No (X)

Section 2 – Ceded Reinsurance Report – Part A

(1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits?

Yes () No (X)

(2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies?

Yes () No (X)

B. Uncollectible Reinsurance - None

C. Commutation of Reinsurance Reflected in Income and Expenses - None

D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation - None

E. Reinsurance Credit - None

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination - None

25. Change in Incurred Claims and Claim Adjustment Expenses

A. Reasons for Changes in the Provision for Incurred Claim and Claim Adjustment Expenses Attributable to Insured Events of Prior Years

Actuarial determined benefit obligations were \$1,950,500 at quarter end representing a \$596,850 increase from the prior year. Unpaid loss adjustment expenses were \$365,000 at quarter end representing a \$170,000 increase from the prior year.

B. Significant Changes in Methodologies and Assumptions Used in Calculating the Liability for Unpaid Claims and Claim Adjustment Expenses - None

26. Intercompany Pooling Arrangements - None

27. Structured Settlements - None

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
09/30/2022	\$ 565,980	\$ 690,462	\$ 690,462	\$ 690,462	\$ 19,641

B. Risk-Sharing Receivables - None

29. Participating Policies - None

Notes to the Financial Statements

- 30. Premium Deficiency Reserves** - None
- 31. Anticipated Salvage and Subrogation** - None

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?..... NO.....

1.2 If yes, has the report been filed with the domiciliary state?.....

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?..... NO.....

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?..... 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?..... NO.....

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?..... NO.....

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?..... NO.....

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	2	3
Name of Entity	NAIC Company Code	State of Domicile

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

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

6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 05/17/2018.....

6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 05/17/2018.....

6.4 By what department or departments?
Ohio Department of Insurance.

6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments? YES.....

6.6 Have all of the recommendations within the latest financial examination report been complied with? YES.....

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?..... NO.....

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?..... NO.....

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?..... NO.....

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 affiliates primary federal regulator.

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

9.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards?..... YES.....
(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?..... NO.....

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?..... NO.....

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?..... NO.....
10.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount:..... \$.....

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.)..... NO.....

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:..... \$.....

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

14.1 Does the reporting entity have any investments in parent, subsidiaries and affiliates?..... NO.....
14.2 If yes, please complete the following:

GENERAL INTERROGATORIES
PART 1 - COMMON INTERROGATORIES

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

15.1 Has the reporting entity entered into any hedging transactions reported on Schedule DB?..... NO.....
 15.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?..... N/A.....
 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..... \$

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

16.3 Total payable for securities lending reported on the liability page..... \$

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.....

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

1	2
Name of Custodian(s)	Custodian Address
HUNTINGTON NATIONAL BANK.....	106 S. MAIN STREET, AKRON, OHIO 44308.....

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

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

17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?..... NO.....
 17.4 If yes, give full and complete information relating thereto:

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

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

1	2
Name of Firm or Individual	Affiliation
HUNTINGTON NATIONAL BANK - TOBY BLOSSOM.....	U.....

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

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

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
N/A.....	Huntington National Bank.....	OCC.....	NO.....

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? YES

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? NO

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? NO

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? NO

GENERAL INTERROGATORIES**PART 2 – HEALTH**

1.	Operating Percentages:	
1.1	A&H loss percent	107.700 %
1.2	A&H cost containment percent	4.500 %
1.3	A&H expense percent excluding cost containment expenses	4.000 %
2.1	Do you act as a custodian for health savings accounts?	NO
2.2	If yes, please provide the amount of custodial funds held as of the reporting date.	\$
2.3	Do you act as an administrator for health savings accounts?	NO
2.4	If yes, please provide the balance of the funds administered as of the reporting date.	\$
3.	Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?	NO
3.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?	NO

SCHEDULE S - CEDED REINSURANCE

Showing All New Reinsurance Treaties - Current Year to Date

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Type of Reinsurer	9 Certified Reinsurer Rating (1 through 6)	10 Effective Date of Certified Reinsurer Rating
Accident & Health - Non-Affiliates									
10345	31-1440175	01/01/2022	COMMUNITY INSURANCE COMPANY	OH	SSL/G	OM	AUTHORIZED		
10345	31-1440175	01/01/2022	COMMUNITY INSURANCE COMPANY	OH	ASL/G	OM	AUTHORIZED		

SCHEDULE T – PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

States, Etc.	1 Active Status (a)	Direct Business Only								
		2 Accident & Health Premiums, Including Policy, Membership and Other Fees	3 Medicare Title XVIII	4 Medicaid Title XIX	5 CHIP Title XXI	6 Federal Employees Health Benefits Plan Premiums	7 Life & Annuity Premiums & 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	18,216,716						18,216,716	
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. US Virgin Islands	VI	N								
56. Northern Mariana Islands	MP	N								
57. Canada	CAN	N								
58. Aggregate Other Alien	OT	XXX								
59. Subtotal		XXX	18,216,716						18,216,716	
60. Reporting entity contributions for employee benefits plans		XXX								
61. Total (Direct Business)		XXX	18,216,716						18,216,716	

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 – 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

Ohio Bankers Benefit Trust
Employer's ID Number:31-1306485
State of Domicile: OH

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Yes/No)	*
NONE															

Asterisk	Explanation

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?	
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.	N/A

EXPLANATION:

1.
2.

BARCODES:

1. 
0 0 0 0 0 2 0 2 2 3 6 5 0 0 0 3
2.

OVERFLOW PAGE FOR WRITE-INS

SCHEDULE A – VERIFICATION

Real Estate

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

NONE**SCHEDULE B – VERIFICATION**

Mortgage Loans

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

NONE**SCHEDULE D - VERIFICATION**

Bonds and Stocks

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year.....	8,894,507	6,063,491
2. Cost of bonds and stocks acquired.....	5,053,353	3,931,119
3. Accrual of discount.....	3,188	1,863
4. Unrealized valuation increase (decrease).....	(593,467)	444,818
5. Total gain (loss) on disposals.....	48,635	–
6. Deduct consideration for bonds and stocks disposed of.....	1,285,546	1,531,297
7. Deduct amortization of premium.....	18,881	15,487
8. Total foreign exchange change in book / adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees.....		
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7+8-9+10).....	12,101,789	8,894,507
12. Deduct total nonadmitted amounts.....		
13. Statement value at end of current period (Line 11 minus Line 12).....	12,101,789	8,894,507

SCHEDULE D – PART 1B

Showing the Acquisitions, Dispositions and Non-Trading Activity
During the Current Quarter for all Bonds and Preferred Stock by NAIC Designation

NAIC Designation	1 Book / Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book / Adjusted Carrying Value End of First Quarter	6 Book / Adjusted Carrying Value End of Second Quarter	7 Book / Adjusted Carrying Value End of Third Quarter	8 Book / Adjusted Carrying Value December 31 Prior Year
Bonds								
1. NAIC 1 (a).....	9,622,502	887,867	225,000	(2,831)	6,683,964	9,622,502	10,282,538	6,940,179
2. NAIC 2 (a).....								
3. NAIC 3 (a).....								
4. NAIC 4 (a).....								
5. NAIC 5 (a).....								
6. NAIC 6 (a).....								
7. Total Bonds.....	9,622,502	887,867	225,000	(2,831)	6,683,964	9,622,502	10,282,538	6,940,179
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.....	9,622,502	887,867	225,000	(2,831)	6,683,964	9,622,502	10,282,538	6,940,179

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

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

SCHEDULE DA - PART 1

Short-Term Investments

	1 Book / Adjusted Carrying Value	2 Par Value	3 Actual Cost	4 Interest Collected Year To Date	5 Paid for Accrued Interest Year To Date
7709999999 Total.....	194,590	XXX.....	193,746		

SCHEDULE DA - VERIFICATION

Short-Term Investments

	1 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year.....		
2. Cost of short-term investments acquired.....	193,746	
3. Accrual of discount.....	844	
4. Unrealized valuation increase (decrease).....		
5. Total gain (loss) on disposals.....		
6. Deduct consideration received on disposals.....		
7. Deduct amortization of premium.....		
8. Total foreign exchange change in book / adjusted carrying value.....		
9. Deduct current year's other-than-temporary impairment recognized.....		
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9).....	194,590	
11. Deduct total nonadmitted amounts.....		
12. Statement value at end of current period (Line 10 minus Line 11).....	194,590	

(SI-04) Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

NONE

(SI-04) Schedule DB - Part B - Verification - Futures Contracts

NONE

(SI-05) Schedule DB - Part C - Section 1

NONE

(SI-06) Schedule DB - Part C - Section 2

NONE

(SI-07) Schedule DB - Verification

NONE

(SI-08) Schedule E - Part 2 - Verification - Cash Equivalents

NONE

(E-01) Schedule A - Part 2

NONE

(E-01) Schedule A - Part 3

NONE

(E-02) Schedule B - Part 2

NONE

(E-02) Schedule B - Part 3

NONE

(E-03) Schedule BA - Part 2

NONE

(E-03) Schedule BA - Part 3

NONE

SCHEDULE D - PART 3

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

1 CUSIP Identification	2 Description	3 Foreign	4 Date Acquired	5 Name of Vendor	6 Number of Shares of Stock	7 Actual Cost	8 Par Value	9 Paid for Accrued Interest and Dividends	10 NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol
Bonds: U.S. Governments									
91282C-FA-4	US TREASURY N/B 3% 07/31/2024 ON		08/12/2022	The Huntington Trust Company	XXX	199,289	200,000	—	
912828-6X-3	US TREASURY N/B 2.125% 05/31/2026		08/12/2022	The Huntington Trust Company	XXX	96,754	100,000	—	
91282C-FE-6	US TREASURY N/B 3.125% 08/15/2025		08/15/2022	The Huntington Trust Company	XXX	199,938	200,000	—	
91282C-FE-6	US TREASURY N/B 3.125% 08/15/2025		09/09/2022	The Huntington Trust Company	XXX	98,938	100,000	—	
912828-6F-2	US TREASURY N/B 2.5% 02/28/2026 ON		09/09/2022	The Huntington Trust Company	XXX	96,746	100,000	—	
91282C-FG-1	US TREASURY 3.25% 08/31/2024 ON		09/19/2022	The Huntington Trust Company	XXX	98,840	100,000	—	
912828-T2-6	US TREASURY N/B 1.375% 09/30/2023		09/19/2022	The Huntington Trust Company	XXX	97,363	100,000	—	
0109999999 - Bonds: U.S. Governments						887,867	900,000	—	XXX
2509999997 - Subtotals - Bonds - Part 3						887,867	900,000	—	XXX
2509999999 - Subtotals - Bonds						887,867	900,000	—	XXX
Common Stocks: Industrial and Miscellaneous (Unaffiliated) Publicly Traded									
053015-10-3	AUTOMATIC DATA PROCESSING		08/05/2022	The Huntington Trust Company	70.000	16,886	XXX	—	XXX
81762P-10-2	SERVICENOW INC.		08/05/2022	The Huntington Trust Company	26.000	12,047	XXX	—	XXX
674599-10-5	OCCIDENTAL PETROLEUM CORP		08/05/2022	The Huntington Trust Company	258.000	16,295	XXX	—	XXX
5019999999 - Common Stocks: Industrial and Miscellaneous (Unaffiliated) Publicly Traded						45,228	XXX	—	XXX
5989999997 - Subtotals - Common Stocks - Part 3						45,228	XXX	—	XXX
5989999999 - Subtotals Common Stocks						45,228	XXX	—	XXX
5999999999 - Subtotals Preferred and Common Stocks						45,228	XXX	—	XXX
6009999999 - Totals						933,096	XXX	—	XXX

Quarterly Statement as of September 30, 2022 of the OHIO BANKERS BENEFITS TRUST

SCHEDULE D - PART 4

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

1 CUSIP Identification	2 Description	3 Foreign	4 Disposal Date	5 Name of Purchaser	6 Number of Shares	7 Consideration	8 Par Value	9 Actual Cost	10 Prior Year Book / Adjusted Carrying Value	Change in Book / Adjusted Carrying Value					16 Book / Adjusted Carrying Value at Disposal Date	17 Foreign Exchange Gain (Loss) on Disposal	18 Realized Gain (Loss) on Disposal	19 Total Gain (Loss) on Disposal	20 Bond Interest / Stock Dividends Received During Year	21 Stated Contractual Maturity Date	22 NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	
										11 Unrealized Valuation Increase / (Decrease)	12 Current Year's (Amortization) / Accretion	13 Current Year's Other-Than- Temporary Impairment Recognized	14 Total Change in B. / A.C.V. (11+12-13)	15 Total Foreign Exchange Change in B.A.C.V.								
Bonds: U.S. Governments																						
912828-TJ-9	US TREASURY N/B 1.625% 8/15/2022		08/15/2022	The Huntington Trust Company	XXX	175,000	175,000	175,325	176,477	(325)	(1,477)		(1,801)		175,000		–	–	2,844			
0109999999 – Bonds: U.S. Governments						175,000	175,000	175,325	176,477	(325)	(1,477)		(1,801)		175,000		–	–	2,844	XXX	XXX	
Bonds: Industrial and Miscellaneous (Unaffiliated)																						
001055-AM-4	AFLAC INC 3.625% 11/15/2024		09/01/2022	The Huntington Trust Company	XXX	50,000	50,000	49,950	53,383	50	(3,383)		(3,333)		50,000		50	50	1,586			
1109999999 – Bonds: Industrial and Miscellaneous (Unaffiliated)						50,000	50,000	49,950	53,383	50	(3,383)		(3,333)		50,000		50	50	1,586	XXX	XXX	
2509999997 – Subtotals - Bonds - Part 4						225,000	225,000	225,275	229,860	(275)	(4,860)		(5,135)		225,000		50	50	4,430	XXX	XXX	
2509999999 – Subtotals - Bonds						225,000	225,000	225,275	229,860	(275)	(4,860)		(5,135)		225,000		50	50	4,430	XXX	XXX	
Common Stocks: Industrial and Miscellaneous (Unaffiliated) Publicly Traded																						
260557-10-3	DOW INC		08/03/2022	The Huntington Trust Company	390,000	37,455	XXX	26,169	14,123	11,286			11,286		37,455		(5,999)	(5,999)	447	XXX	XXX	
74340W-10-3	PROLOGIS INC		08/03/2022	The Huntington Trust Company	262,000	34,544	XXX	15,536	81,655	19,007			19,007		34,544		15,536	15,536	414	XXX	XXX	
007903-10-7	ADVANCED MICRO DEVICES		08/03/2022	The Huntington Trust Company	238,000	23,278	XXX	17,590	2,924	5,688			5,688		23,278		5,688	5,688	–	XXX	XXX	
166764-10-0	CHEVRON CORPORATION		08/03/2022	The Huntington Trust Company	237,000	37,455	XXX	29,483	17,955	7,972			7,972		37,455		7,972	7,972	435	XXX	XXX	
452308-10-9	ILLINOIS TOOL WORKS		08/03/2022	The Huntington Trust Company	202,000	41,423	XXX	35,597	36,033	5,826			5,826		41,423		5,826	5,826	603	XXX	XXX	
883556-10-2	THERMO FISHER SCIENTIFIC INC		08/03/2022	The Huntington Trust Company	61,000	35,981	XXX	16,420	72,729	19,561			19,561		35,981		19,561	19,561	52	XXX	XXX	
5019999999 – Common Stocks: Industrial and Miscellaneous (Unaffiliated) Publicly Traded						210,137	XXX	140,796	225,018	69,341			69,341		210,137		48,585	48,585	1,951	XXX	XXX	
5989999997 – Subtotals - Common Stocks - Part 4						210,137	XXX	140,796	225,018	69,341			69,341		210,137		48,585	48,585	1,951	XXX	XXX	
5989999999 – Subtotals Common Stocks						210,137	XXX	140,796	225,018	69,341			69,341		210,137		48,585	48,585	1,951	XXX	XXX	
5999999999 – Subtotals Preferred and Common Stocks						210,137	XXX	140,796	225,018	69,341			69,341		210,137		48,585	48,585	1,951	XXX	XXX	
6009999999 – Totals						435,137	XXX	366,071	454,878	69,066	(4,860)		64,206		435,137		48,635	48,635	6,381	XXX	XXX	

(E-06) Schedule DB - Part A - Section 1

NONE

(E-06) Schedule DB - Part A - Section 1 - Description of Hedged Risk(s)

NONE

(E-06) Schedule DB - Part A - Section 1 - Financial or Economic Impact of The Hedge

NONE

(E-07) Schedule DB - Part B - Section 1

NONE

(E-07) Schedule DB - Part B - Section 1 - Broker Name

NONE

(E-07) Schedule DB - Part B - Section 1 - Description of Hedged Risk(s)

NONE

(E-07) Schedule DB - Part B - Section 1 - Financial or Economic Impact of The Hedge

NONE

(E-08) Schedule DB - Part D - Section 1

NONE

(E-09) Schedule DB - Part D - Section 2 - By Reporting Entity

NONE

(E-09) Schedule DB - Part D - Section 2 - To Reporting Entity

NONE

(E-10) Schedule DB - Part E

NONE

(E-11) Schedule DL - Part 1

NONE

(E-12) Schedule DL - Part 2

NONE

SCHEDULE E - PART 1 - CASH

Month End Depository Balances

1 Depository	2 Code	3 Rate of Interest	4 Amount of Interest Received During Current Quarter	5 Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9 *
					6 First Month	7 Second Month	8 Third Month	
HUNTINGTON NAT'L BANK -		1.270	1,435	619	493,725	452,308	326,707	XXX
LCNB NATIONAL BANK -		-	-	-	1,169,776	304,070	121,565	XXX
CF BANK CD -		0.100	64	-	250,000	250,000	250,000	XXX
BANKWEST INC. -		1.770	1,268	175	250,000	250,000	250,000	XXX
BMW BANK NORTH AMERICA -		3.090	1,537	-	100,000	-	-	XXX
CENTENNIAL BANK -		1.500	756	-	200,000	200,000	-	XXX
CF BANK -		1.720	1,071	140	250,000	250,000	250,000	XXX
CHOICE BANK OSHKOSH WI -		2.180	1,084	165	200,000	200,000	200,000	XXX
CITIBANK, DUE 8/14/23 -		3.320	-	-	100,000	100,000	100,000	XXX
CITIBANK -		3.600	1,636	1,254	99,600	99,600	99,600	XXX
COMENITY CAPITAL BANK -		2.300	769	-	200,000	-	-	XXX
CONTINENTAL BANK -		0.550	209	7	250,000	250,000	250,000	XXX
CROSSFIRST BANK -		2.390	1,185	129	200,000	200,000	200,000	XXX
DENVER SAVINGS BANK -		2.260	1,386	60	250,000	250,000	250,000	XXX
FNB OF ALBANY -		0.200	249	-	-	-	-	XXX
FIRST PREMIER BANK -		3.350	1,636	475	100,000	100,000	100,000	XXX
FLAGSTAR BANK -		0.530	620	255	250,000	250,000	250,000	XXX
HORIZON BANK WAVERLY -		1.740	722	-	250,000	250,000	250,000	XXX
INDUSTRIAL & COM BK CHNA -		2.510	409	188	96,250	96,250	96,250	XXX
LIVE OAK BANKING CO. -		1.860	907	286	200,000	200,000	200,000	XXX
MEDALLION BANK UTAH -		3.230	1,613	281	200,194	200,194	200,194	XXX
MIDWEST BANK -		-	-	-	-	-	-	XXX
MORGAN STANLEY -		3.110	-	3,159	250,000	250,000	250,000	XXX
PARKSIDE FINANCIAL BANK & TRUST -		2.180	1,084	82	200,000	200,000	200,000	XXX
SALLIE MAE BANK -		2.570	2,479	707	200,000	200,000	200,000	XXX
SIGNATURE BANK AR -		2.250	1,386	30	250,000	250,000	250,000	XXX
SMARTBANK CD -		0.260	209	3	250,000	250,000	250,000	XXX
SPRING BANK -		2.150	1,084	188	200,000	200,000	200,000	XXX
UBS BANK -		3.510	882	221	100,000	100,000	100,000	XXX
WESTERN STATE BANK -		1.790	882	19	200,000	200,000	200,000	XXX
0199998 - Deposits in depositories that do not exceed the allowable limit in any one depository (see Instructions) - Open Depositories								XXX
0199999 - Total Open Depositories			26,565	8,443	6,759,545	5,552,422	5,044,316	XXX
0299998 - Deposits in depositories that do not exceed the allowable limit in any one depository (see Instructions) - Suspended Depositories								XXX
0299999 - Total Suspended Depositories								XXX
0399999 - Total Cash on Deposit			26,565	8,443	6,759,545	5,552,422	5,044,316	XXX
0499999 - Cash in Company's Office			XXX	XXX				XXX
0599999 - Total			26,565	8,443	6,759,545	5,552,422	5,044,316	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

1 CUSIP	2 Description	3 Code	4 Date Acquired	5 Rate of Interest	6 Maturity Date	7 Book / Adjusted Carrying Value	8 Amount of Interest Due and Accrued	9 Amount Received During Year
8609999999 - Total Cash Equivalents.....								

NONE