



QUARTERLY STATEMENT

AS OF SEPTEMBER 30, 2022
OF THE CONDITION AND AFFAIRS OF THE

UDC OHIO, INC.

NAIC Group Code 00549 (Current Period), 00549 (Prior Period) NAIC Company Code 52022 Employer's ID Number 74-2609036

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

Country of Domicile United States

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

Incorporated/Organized 04/20/1990 Commenced Business 05/17/1990

Statutory Home Office 4400 Easton Commons Way, Suite 125 (Street and Number), Columbus, OH, US 43219 (City or Town, State, Country and Zip Code)

Main Administrative Office 96 Worcester Street (Street and Number), Wellesley Hills, MA, US 02481 (City or Town, State, Country and Zip Code) 781-416-3184 (Area Code) (Telephone Number)

Mail Address 96 Worcester Street (Street and Number or P.O. Box), Wellesley Hills, MA, US 02481 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 96 Worcester Street (Street and Number), Wellesley Hills, MA, US 02481 (City or Town, State, Country and Zip Code) 781-416-3184 (Area Code) (Telephone Number)

Internet Web Site Address N/A

Statutory Statement Contact Janelle Randall (Name), 781-446-1514 (Area Code) (Telephone Number) (Extension) 781-446-1779 (FAX Number)

state.filings@sunlife.com (E-Mail Address)

OFFICERS

Name	Title	Name	Title
DAVID L. RILEY	PRESIDENT	COLLEEN LOUISE KALLAS	SECRETARY
AMY JO GOERKE	TREASURER	MATTHEW A. SILVERSTEIN	ACTUARY

OTHER OFFICERS

DIRECTORS OR TRUSTEES

DAVID L. RILEY

State of MISSOURI

County of JACKSON

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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.

DAVID L. RILEY PRESIDENT	COLLEEN LOUISE KALLAS SECRETARY	AMY JO GOERKE TREASURER
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Subscribed and sworn to before me this 21st day of October, 2022

Robin L. Pierce, Notary Public
September 23, 2024



ROBIN L. PIERCE
My Commission Expires
September 23, 2024
Clay County
Commission #12616812

- 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