

ANNUAL STATEMENT

OF THE

COSE Health and Wellness Trust

TO THE

Insurance Department

OF THE

STATE OF

Ohio

FOR THE YEAR ENDED
DECEMBER 31, 2023

HEALTH

2023



HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2023
OF THE CONDITION AND AFFAIRS OF THE

COSE Health and Wellness Trust

NAIC Group Code00000000NAIC Company Code00122Employer's ID Number81-6240902

(Current)(Prior)

Organized under the Laws ofOhio, State of Domicile or Port of EntryOH

Country of DomicileUnited States of America

Licensed as business type:Health

Is HMO Federally Qualified? Yes [] No []

Incorporated/Organized02/18/2016Commenced Business08/22/2016

Statutory Home Office1240 Huron Road E., Ste. 200Cleveland, OH, US 44115-1355

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

Main Administrative Office1240 Huron Road E., Ste. 200Cleveland, OH, US 44115-1355216-592-2200

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

Mail Address1240 Huron Road E., Ste. 200Cleveland, OH, US 44115-1355

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

Primary Location of Books and Records1240 Huron Road E., Ste. 200Cleveland, OH, US 44115-1355216-592-2200

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

Internet Website Addresswww.cosemewa.com

Statutory Statement ContactTimothy E. DiPlacido216-592-2292

(Name)(Area Code) (Telephone Number)

Tdiplacido@greatercle.com(FAX Number)

(E-mail Address)

OFFICERS

ChairmanTimothy Maynard Reynolds

Vice ChairmanRobert Richard Nicolay III

Plan AdministratorJohn Luteran

SecretaryJames Frederick Harmon

OTHER

DIRECTORS OR TRUSTEES

Martha Judith Lanning

Laura Lynn McPhee

Michael Reed Canty

Jeffery Raymond Gwinnell

State ofOhio

County ofCuyahoga

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.

Timothy Maynard Reynolds

John Luteran

Chairman

Plan Administrator

Subscribed and sworn to before me this

a. Is this an original filing?Yes [X] No []

day of

b. If no,

1. State the amendment number.....

2. Date filed

3. Number of pages attached.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	14,915,924		14,915,924	13,934,770
2. Stocks (Schedule D):				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens			0	0
3.2 Other than first liens.....			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances)			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Cash (\$ 73,006 , Schedule E - Part 1), cash equivalents (\$ 8,121,298 , Schedule E - Part 2) and short-term investments (\$ 0 , Schedule DA)	8,194,304		8,194,304	10,421,090
6. Contract loans, (including \$ premium notes)			0	0
7. Derivatives (Schedule DB)			0	0
8. Other invested assets (Schedule BA)			0	0
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets (Schedule DL)			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	23,110,228	0	23,110,228	24,355,859
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	136,686		136,686	107,859
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	888,547		888,547	445,049
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)			0	0
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)			0	0
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	1,061,539		1,061,539	501,673
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts	50,889,615		50,889,615	24,718,839
17. Amounts receivable relating to uninsured plans			0	0
18.1 Current federal and foreign income tax recoverable and interest thereon			0	0
18.2 Net deferred tax asset			0	0
19. Guaranty funds receivable or on deposit			0	0
20. Electronic data processing equipment and software			0	0
21. Furniture and equipment, including health care delivery assets (\$)			0	0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
23. Receivables from parent, subsidiaries and affiliates			0	0
24. Health care (\$ 336,366) and other amounts receivable	511,704	175,338	336,366	22,772
25. Aggregate write-ins for other than invested assets	57,903	57,903	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	76,656,221	233,241	76,422,979	50,152,050
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	76,656,221	233,241	76,422,979	50,152,050
DETAILS OF WRITE-INS				
1101. Prepaid Business Insurance			0	0
1102. Prepaid State Certification Fee			0	0
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Prepaid Business Insurance	42,404	42,404	0	0
2502. Prepaid State Certification Fee	1,000	1,000	0	0
2503. Prepaid State Domestic Assessment Fee	14,500	14,500	0	0
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	57,903	57,903	0	0

LIABILITIES, CAPITAL AND SURPLUS

	Current Year			Prior Year
	1	2	3	4
	Covered	Uncovered	Total	Total
1. Claims unpaid (less \$ 34,740,000 reinsurance ceded)	10,990,410		10,990,410	10,268,001
2. Accrued medical incentive pool and bonus amounts			0	0
3. Unpaid claims adjustment expenses.....	1,544,000		1,544,000	1,549,600
4. Aggregate health policy reserves, including the liability of \$0 for medical loss ratio rebate per the Public Health Service Act			0	0
5. Aggregate life policy reserves.....			0	0
6. Property/casualty unearned premium reserves.....			0	0
7. Aggregate health claim reserves.....			0	0
8. Premiums received in advance.....	2,528,734		2,528,734	2,806,183
9. General expenses due or accrued.....	201,236		201,236	210,503
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized capital gains (losses)) ..	100		100	65,024
10.2 Net deferred tax liability.....			0	0
11. Ceded reinsurance premiums payable.....	45,260,826		45,260,826	21,339,239
12. Amounts withheld or retained for the account of others.....			0	0
13. Remittances and items not allocated.....			0	0
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current).....			0	0
15. Amounts due to parent, subsidiaries and affiliates.....			0	0
16. Derivatives.....			0	0
17. Payable for securities.....			0	0
18. Payable for securities lending			0	0
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$0 unauthorized reinsurers and \$0 certified reinsurers).....			0	0
20. Reinsurance in unauthorized and certified (\$) companies			0	0
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans.....			0	0
23. Aggregate write-ins for other liabilities (including \$ current).....	0	0	0	0
24. Total liabilities (Lines 1 to 23).....	60,525,305	0	60,525,305	36,238,551
25. Aggregate write-ins for special surplus funds.....	XXX	XXX	0	0
26. Common capital stock.....	XXX	XXX		
27. Preferred capital stock.....	XXX	XXX		
28. Gross paid in and contributed surplus.....	XXX	XXX		
29. Surplus notes.....	XXX	XXX	5,000,004	5,833,336
30. Aggregate write-ins for other than special surplus funds.....	XXX	XXX	0	0
31. Unassigned funds (surplus).....	XXX	XXX	10,897,670	8,080,163
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	15,897,674	13,913,499
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	76,422,979	50,152,050
DETAILS OF WRITE-INS				
2301.				
2302.				
2303.				
2398. Summary of remaining write-ins for Line 23 from overflow page	0	0	0	0
2399. Totals (Lines 2301 thru 2303 plus 2398)(Line 23 above)	0	0	0	0
2501.	XXX	XXX		
2502.	XXX	XXX		
2503.	XXX	XXX		
2598. Summary of remaining write-ins for Line 25 from overflow page	XXX	XXX	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	XXX	XXX	0	0
3001.	XXX	XXX		
3002.	XXX	XXX		
3003.	XXX	XXX		
3098. Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX	0	0
3099. Totals (Lines 3001 thru 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year		Prior Year
	1 Uncovered	2 Total	3 Total
1. Member Months.....	XXX.....	741,447	733,754
2. Net premium income (including \$ non-health premium income)	XXX.....	69,199,376	66,813,727
3. Change in unearned premium reserves and reserve for rate credits	XXX.....	0	
4. Fee-for-service (net of \$ medical expenses)	XXX.....	0	
5. Risk revenue	XXX.....	0	
6. Aggregate write-ins for other health care related revenues	XXX.....	0	0
7. Aggregate write-ins for other non-health revenues	XXX.....	0	0
8. Total revenues (Lines 2 to 7)	XXX.....	69,199,376	66,813,727
Hospital and Medical:			
9. Hospital/medical benefits		202,951,150	186,747,930
10. Other professional services		11,490,807	12,616,257
11. Outside referrals		1,160,764	560,398
12. Emergency room and out-of-area		43,056,485	42,858,328
13. Prescription drugs		60,178,311	51,197,967
14. Aggregate write-ins for other hospital and medical.....	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts		0	
16. Subtotal (Lines 9 to 15)	0	318,837,518	293,980,879
Less:			
17. Net reinsurance recoveries		290,722,390	266,951,922
18. Total hospital and medical (Lines 16 minus 17)	0	28,115,128	27,028,958
19. Non-health claims (net)			
20. Claims adjustment expenses, including \$0 cost containment expenses		(5,600)	53,600
21. General administrative expenses		39,167,551	38,068,483
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only)		0	0
23. Total underwriting deductions (Lines 18 through 22).....	0	67,277,079	65,151,040
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX.....	1,922,297	1,662,687
25. Net investment income earned (Exhibit of Net Investment Income, Line 17)		1,344,593	527,950
26. Net realized capital gains (losses) less capital gains tax of \$		(7,154)	3,097
27. Net investment gains (losses) (Lines 25 plus 26)	0	1,337,439	531,047
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	0	0	0
30. Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX.....	3,259,736	2,193,734
31. Federal and foreign income taxes incurred	XXX.....	536,580	201,000
32. Net income (loss) (Lines 30 minus 31)	XXX	2,723,157	1,992,734
DETAILS OF WRITE-INS			
0601.	XXX.....		
0602.	XXX.....		
0603.	XXX.....		
0698. Summary of remaining write-ins for Line 6 from overflow page	XXX.....	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698)(Line 6 above)	XXX	0	0
0701.	XXX.....		
0702.	XXX.....		
0703.	XXX.....		
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX.....	0	0
0799. Totals (Lines 0701 thru 0703 plus 0798)(Line 7 above)	XXX	0	0
1401.			
1402.			
1403.			
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499. Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above)	0	0	0
2901.			
2902.			
2903.			
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0
2999. Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	0	0

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year	2 Prior Year
CAPITAL AND SURPLUS ACCOUNT		
33. Capital and surplus prior reporting year.....	13,913,499	12,964,155
34. Net income or (loss) from Line 32	2,723,157	1,992,734
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	94,351	(210,058)
40. Change in unauthorized and certified reinsurance	0	0
41. Change in treasury stock	0	0
42. Change in surplus notes	(833,332)	(833,332)
43. Cumulative effect of changes in accounting principles.....		
44. Capital Changes:		
44.1 Paid in	0	0
44.2 Transferred from surplus (Stock Dividend).....	0	0
44.3 Transferred to surplus.....		
45. Surplus adjustments:		
45.1 Paid in	0	0
45.2 Transferred to capital (Stock Dividend)		
45.3 Transferred from capital		
46. Dividends to stockholders		
47. Aggregate write-ins for gains or (losses) in surplus	0	0
48. Net change in capital and surplus (Lines 34 to 47)	1,984,175	949,344
49. Capital and surplus end of reporting period (Line 33 plus 48)	15,897,674	13,913,499
DETAILS OF WRITE-INS		
4701.		
4702.		
4703.		
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0
4799. Totals (Lines 4701 thru 4703 plus 4798)(Line 47 above)	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

CASH FLOW

	1	2
	Current Year	Prior Year
Cash from Operations		
1. Premiums collected net of reinsurance	66,229,239	69,853,091
2. Net investment income	1,244,470	442,728
3. Miscellaneous income	0	0
4. Total (Lines 1 through 3)	67,473,709	70,295,820
5. Benefit and loss related payments	28,174,530	28,542,663
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7. Commissions, expenses paid and aggregate write-ins for deductions	39,176,819	38,056,106
8. Dividends paid to policyholders		
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	601,504	135,976
10. Total (Lines 5 through 9)	67,952,852	66,734,745
11. Net cash from operations (Line 4 minus Line 10)	(479,143)	3,561,075
Cash from Investments		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds	4,793,241	3,501,280
12.2 Stocks	0	0
12.3 Mortgage loans	0	0
12.4 Real estate	0	0
12.5 Other invested assets	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0
12.7 Miscellaneous proceeds	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	4,793,241	3,501,280
13. Cost of investments acquired (long-term only):		
13.1 Bonds	5,710,253	9,924,771
13.2 Stocks	0	0
13.3 Mortgage loans	0	0
13.4 Real estate	0	0
13.5 Other invested assets	0	0
13.6 Miscellaneous applications	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	5,710,253	9,924,771
14. Net increase/(decrease) in contract loans and premium notes	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(917,012)	(6,423,490)
Cash from Financing and Miscellaneous Sources		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes	(833,332)	(833,332)
16.2 Capital and paid in surplus, less treasury stock	0	0
16.3 Borrowed funds	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0
16.5 Dividends to stockholders	0	0
16.6 Other cash provided (applied)	2,702	215,251
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	(830,631)	(618,081)
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)	(2,226,785)	(3,480,497)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year	10,421,090	13,901,586
19.2 End of year (Line 18 plus Line 19.1)	8,194,304	10,421,090

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

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ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Net premium income	69,199,376		69,199,376											
2. Change in unearned premium reserves and reserve for rate credit	0													
3. Fee-for-service (net of \$														
medical expenses)	0													XXX.
4. Risk revenue	0													XXX.
5. Aggregate write-ins for other health care related revenues	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX.
6. Aggregate write-ins for other non-health care related revenues	0	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	0
7. Total revenues (Lines 1 to 6)	69,199,376	0	69,199,376	0	0	0	0	0	0	0	0	0	0	0
8. Hospital/medical benefits	202,951,150		202,951,150											XXX.
9. Other professional services	11,490,807		11,490,807											XXX.
10. Outside referrals	1,160,764		1,160,764											XXX.
11. Emergency room and out-of-area	43,056,485		43,056,485											XXX.
12. Prescription drugs	60,178,311		60,178,311											XXX.
13. Aggregate write-ins for other hospital and medical incentive pool, withhold adjustments and bonus amounts	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX.
15. Subtotal (Lines 8 to 14)	318,837,518	0	318,837,518	0	0	0	0	0	0	0	0	0	0	XXX.
16. Net reinsurance recoveries	290,722,390		290,722,390											XXX.
17. Total medical and hospital (Lines 15 minus 16).....	28,115,128	0	28,115,128	0	0	0	0	0	0	0	0	0	0	XXX.
18. Non-health claims (net)	0	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
19. Claims adjustment expenses including \$	(5,600)		(5,600)											
cost containment expenses														
20. General administrative expenses	39,167,551		39,167,551											
21. Increase in reserves for accident and health contracts	0													XXX.
22. Increase in reserves for life contracts	0	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
23. Total underwriting deductions (Lines 17 to 22)	67,277,079	0	67,277,079	0	0	0	0	0	0	0	0	0	0	0
24. Net underwriting gain or (loss) (Line 7 minus Line 23)	1,922,297	0	1,922,297	0	0	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS														
0501.														XXX.
0502.														XXX.
0503.														XXX.
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX.
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX
0601.		XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
0602.		XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
0603.		XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	
0698. Summary of remaining write-ins for Line 6 from overflow page	0	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	XXX.	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
1301.														XXX.
1302.														XXX.
1303.														XXX.
1398. Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX.
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

	1	2	3	4
Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1 + 2 - 3)
1. Comprehensive (hospital and medical) individual				.0
2. Comprehensive (hospital and medical) group	353,197,731		283,998,355	69,199,376
3. Medicare Supplement				.0
4. Vision only				.0
5. Dental only				.0
6. Federal Employees Health Benefits Plan	.0			.0
7. Title XVIII - Medicare	.0			.0
8. Title XIX - Medicaid	.0			.0
9. Credit A&H				.0
10. Disability Income				.0
11. Long-Term Care				.0
12. Other health				.0
13. Health subtotal (Lines 1 through 12)	353,197,731	.0	283,998,355	69,199,376
14. Life	.0			.0
15. Property/casualty	.0			.0
16. Totals (Lines 13 to 15)	353,197,731	0	283,998,355	69,199,376

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Payments during the year:														
1.1 Direct	318,115,109		318,115,109											
1.2 Reinsurance assumed	0													
1.3 Reinsurance ceded	290,722,390		290,722,390											
1.4 Net	27,392,719	0	27,392,719	0	0	0	0	0	0	0	0	0	0	0
2. Paid medical incentive pools and bonuses	0													
3. Claim liability December 31, current year from Part 2A:														
3.1 Direct	10,990,410	0	10,990,410	0	0	0	0	0	0	0	0	0	0	0
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
3.4 Net	10,990,410	0	10,990,410	0	0	0	0	0	0	0	0	0	0	0
4. Claim reserve December 31, current year from Part 2D:														
4.1 Direct	0													
4.2 Reinsurance assumed	0													
4.3 Reinsurance ceded	0													
4.4 Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0
5. Accrued medical incentive pools and bonuses, current year	0													
6. Net health care receivables (a)	0													
7. Amounts recoverable from reinsurers December 31, current year	0													
8. Claim liability December 31, prior year from Part 2A:														
8.1 Direct	10,268,001	0	10,268,001	0	0	0	0	0	0	0	0	0	0	0
8.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
8.4 Net	10,268,001	0	10,268,001	0	0	0	0	0	0	0	0	0	0	0
9. Claim reserve December 31, prior year from Part 2D:														
9.1 Direct	0													
9.2 Reinsurance assumed	0													
9.3 Reinsurance ceded	0													
9.4 Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10. Accrued medical incentive pools and bonuses, prior year	0													
11. Amounts recoverable from reinsurers December 31, prior year	0													
12. Incurred Benefits:														
12.1 Direct	318,837,518	0	318,837,518	0	0	0	0	0	0	0	0	0	0	0
12.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
12.3 Reinsurance ceded	290,722,390	0	290,722,390	0	0	0	0	0	0	0	0	0	0	0
12.4 Net	28,115,128	0	28,115,128	0	0	0	0	0	0	0	0	0	0	0
13. Incurred medical incentive pools and bonuses	0	0	0	0	0	0	0	0	0	0	0	0	0	0

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

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14
		2	3											
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health
1. Reported in Process of Adjustment:														
1.1 Direct	0													
1.2 Reinsurance assumed	0													
1.3 Reinsurance ceded	0													
1.4 Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0
2. Incurred but Unreported:														
2.1 Direct	10,990,410		10,990,410											
2.2 Reinsurance assumed	0													
2.3 Reinsurance ceded	0													
2.4 Net	10,990,410	0	10,990,410	0	0	0	0	0	0	0	0	0	0	0
3. Amounts Withheld from Paid Claims and Capitations:														
3.1 Direct	0													
3.2 Reinsurance assumed	0													
3.3 Reinsurance ceded	0													
3.4 Net	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4. TOTALS:														
4.1 Direct	10,990,410	0	10,990,410	0	0	0	0	0	0	0	0	0	0	0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0	0	0	0
4.4 Net	10,990,410	0	10,990,410	0	0	0	0	0	0	0	0	0	0	0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

Line of Business	Claims Paid During the Year		Claim Reserve and Claim Liability December 31 of Current Year		5	6
	1	2	3	4		
	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid December 31 of Prior Year	On Claims Incurred During the Year	Claims Incurred In Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical) individual					0	0
2. Comprehensive (hospital and medical) group	9,787,845	17,604,874	76,079	10,914,331	9,863,924	10,268,001
3. Medicare Supplement					0	0
4. Vision Only					0	0
5. Dental Only					0	0
6. Federal Employees Health Benefits Plan					0	0
7. Title XVIII - Medicare					0	0
8. Title XIX - Medicaid					0	0
9. Credit A&H					0	0
10. Disability Income					0	0
11. Long-Term Care					0	0
12. Other health					0	0
13. Health subtotal (Lines 1 to 12)	9,787,845	17,604,874	76,079	10,914,331	9,863,924	10,268,001
14. Health care receivables (a)					0	0
15. Other non-health					0	0
16. Medical incentive pools and bonus amounts					0	0
17. Totals (Lines 13 - 14 + 15 + 16)	9,787,845	17,604,874	76,079	10,914,331	9,863,924	10,268,001

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

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)

Section A - Paid Health Claims - Comprehensive (Hospital & Medical)

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2019	2 2020	3 2021	4 2022	5 2023
1.	Prior	16,896	16,896	16,915	16,915	16,849
2.	2019	190,516	275,571	302,125	302,125	302,061
3.	2020	XXX	20,450	23,928	24,142	24,127
4.	2021	XXX	XXX	19,628	23,027	23,156
5.	2022	XXX	XXX	XXX	24,205	27,568
6.	2023	XXX	XXX	XXX	XXX	24,046

Section B - Incurred Health Claims - Comprehensive (Hospital & Medical)

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2019	2 2020	3 2021	4 2022	5 2023
1.	Prior	17,443	17,443	17,443	17,443	127,035
2.	2019	225,934	226,336	226,442	226,442	302,125
3.	2020	XXX	24,056	24,098	30,427	30,431
4.	2021	XXX	XXX	27,628	33,327	33,448
5.	2022	XXX	XXX	XXX	27,029	34,075
6.	2023	XXX	XXX	XXX	XXX	28,115

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Comprehensive (Hospital & Medical)

Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1. 2019	255,796	302,061		0.0	302,061	118.1		1,364	303,425	118.6
2. 2020	69,977	24,127		0.0	24,127	34.5		64	24,191	34.6
3. 2021	64,533	23,156		0.0	23,156	35.9	43	68	23,267	36.1
4. 2022	66,814	27,568		0.0	27,568	41.3	33	54	27,655	41.4
5. 2023	69,199	24,046		0.0	24,046	34.7	10,914	(6)	34,954	50.5

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS
(\$000 Omitted)

Section A - Paid Health Claims - Grand Total

Year in Which Losses Were Incurred		Cumulative Net Amounts Paid				
		1 2019	2 2020	3 2021	4 2022	5 2023
1.	Prior	16,896	16,896	16,915	16,915	16,849
2.	2019	190,516	275,571	302,125	302,125	302,061
3.	2020	XXX	20,450	23,928	24,142	24,127
4.	2021	XXX	XXX	19,628	23,027	23,156
5.	2022	XXX	XXX	XXX	24,205	27,568
6.	2023	XXX	XXX	XXX	XXX	24,046

Section B - Incurred Health Claims - Grand Total

Year in Which Losses Were Incurred		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year				
		1 2019	2 2020	3 2021	4 2022	5 2023
1.	Prior	17,443	17,443	17,443	17,443	127,035
2.	2019	225,934	226,336	226,442	226,442	302,125
3.	2020	XXX	24,056	24,098	30,427	30,431
4.	2021	XXX	XXX	27,628	33,327	33,448
5.	2022	XXX	XXX	XXX	27,029	34,075
6.	2023	XXX	XXX	XXX	XXX	28,115

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Grand Total

Years in which Premiums were Earned and Claims were Incurred		1	2	3	4	5	6	7	8	9	10
		Premiums Earned	Claims Payment	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	(Col. 5/1) Percent	Claims Unpaid	Unpaid Claims Adjustment Expenses	Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1.	2019	255,796	302,061	0	0.0	302,061	118.1	0	1,364	303,425	118.6
2.	2020	69,977	24,127	0	0.0	24,127	34.5	0	64	24,191	34.6
3.	2021	64,533	23,156	0	0.0	23,156	35.9	43	68	23,267	36.1
4.	2022	66,814	27,568	0	0.0	27,568	41.3	33	54	27,655	41.4
5.	2023	69,199	24,046	0	0.0	24,046	34.7	10,914	(6)	34,954	50.5

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2D - AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13
		2	3										
	Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other
1. Unearned premium reserves													
2. Additional policy reserves (a)													
3. Reserve for future contingent benefits													
4. Reserve for rate credits or experience rating refunds (including \$ for investment income) ..													
5. Aggregate write-ins for other policy reserves													
6. Totals (gross)													
7. Reinsurance ceded													
8. Totals (Net)(Page 3, Line 4)													
9. Present value of amounts not yet due on claims													
10. Reserve for future contingent benefits													
11. Aggregate write-ins for other claim reserves													
12. Totals (gross)													
13. Reinsurance ceded													
14. Totals (Net)(Page 3, Line 7)													
DETAILS OF WRITE-INS													
0501.													
0502.													
0503.													
0598. Summary of remaining write-ins for Line 5 from overflow page.....													
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)													
1101.													
1102.													
1103.													
1198. Summary of remaining write-ins for Line 11 from overflow page													
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)													

(a) Includes \$ premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

UNDERWRITING AND INVESTMENT EXHIBIT

PART 3 - ANALYSIS OF EXPENSES					
	Claim Adjustment Expenses		3	4	5
	1 Cost Containment Expenses	2 Other Claim Adjustment Expenses			
			General Administrative Expenses	Investment Expenses	Total
1. Rent (\$ for occupancy of own building)					0
2. Salary, wages and other benefits					0
3. Commissions (less \$ ceded plus \$ assumed)					0
4. Legal fees and expenses			40,519		40,519
5. Certifications and accreditation fees			1,000		1,000
6. Auditing, actuarial and other consulting services ...			274,489		274,489
7. Traveling expenses					0
8. Marketing and advertising					0
9. Postage, express and telephone					0
10. Printing and office supplies			256		256
11. Occupancy, depreciation and amortization					0
12. Equipment					0
13. Cost or depreciation of EDP equipment and software			10,951		10,951
14. Outsourced services including EDP, claims, and other services			38,332,730		38,332,730
15. Boards, bureaus and association fees					0
16. Insurance, except on real estate			172,316		172,316
17. Collection and bank service charges			55,697		55,697
18. Group service and administration fees					0
19. Reimbursements by uninsured plans					0
20. Reimbursements from fiscal intermediaries					0
21. Real estate expenses					0
22. Real estate taxes					0
23. Taxes, licenses and fees:					
23.1 State and local insurance taxes			47,083		47,083
23.2 State premium taxes			29,000		29,000
23.3 Regulatory authority licenses and fees			203,511		203,511
23.4 Payroll taxes					0
23.5 Other (excluding federal income and real estate taxes)					0
24. Investment expenses not included elsewhere				(43,455)	(43,455)
25. Aggregate write-ins for expenses	0	(5,600)	0	0	(5,600)
26. Total expenses incurred (Lines 1 to 25)	0	(5,600)	39,167,551	(43,455)	(a) 39,118,496
27. Less expenses unpaid December 31, current year		1,544,000	201,236		1,745,236
28. Add expenses unpaid December 31, prior year		1,549,600	210,503		1,760,103
29. Amounts receivable relating to uninsured plans, prior year					0
30. Amounts receivable relating to uninsured plans, current year					0
31. Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	0	0	39,176,819	(43,455)	39,133,364
DETAILS OF WRITE-INS					
2501. Claims Adjustment Expense		(5,600)			(5,600)
2502.					
2503.					
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	0	(5,600)	0	0	(5,600)

(a) Includes management fees of \$ to affiliates and \$ to non-affiliates.

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

EXHIBIT OF NET INVESTMENT INCOME

		1	2
		Collected During Year	Earned During Year
1.	U.S. government bonds	(a) 256,711	 294,059
1.1	Bonds exempt from U.S. tax	(a) .....	.....
1.2	Other bonds (unaffiliated)	(a) 97,074	 90,829
1.3	Bonds of affiliates	(a) .....	.....
2.1	Preferred stocks (unaffiliated)	(b) .....	.....
2.11	Preferred stocks of affiliates	(b) .....	.....
2.2	Common stocks (unaffiliated) .....	.....	.....
2.21	Common stocks of affiliates .....	.....	.....
3.	Mortgage loans	(c) .....	.....
4.	Real estate	(d) .....	.....
5	Contract Loans .....	.....	.....
6	Cash, cash equivalents and short-term investments	(e) 909,065	 916,250
7	Derivative instruments	(f) .....	.....
8.	Other invested assets .....	.....	.....
9.	Aggregate write-ins for investment income	 0	 0
10.	Total gross investment income	1,262,850	1,301,139
11.	Investment expenses		(g) (43,455)
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g) 0
13.	Interest expense		(h)
14.	Depreciation on real estate and other invested assets		(i)
15.	Aggregate write-ins for deductions from investment income		 0
16.	Total deductions (Lines 11 through 15)		 (43,455)
17.	Net investment income (Line 10 minus Line 16)		1,344,593
DETAILS OF WRITE-INS			
0901.	.....		
0902.	.....		
0903.	.....		
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0
1501.	.....		
1502.	.....		
1503.	.....		
1598.	Summary of remaining write-ins for Line 15 from overflow page		0
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		0

- (a) Includes \$82,869 accrual of discount less \$11,573 amortization of premium and less \$45,339 paid for accrued interest on purchases.
- (b) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ 0 paid for accrued dividends on purchases.
- (c) Includes \$ 0 accrual of discount less \$ 0 amortization of premium and less \$ paid for accrued interest on purchases.
- (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
- (e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (f) Includes \$ accrual of discount less \$ amortization of premium.
- (g) Includes \$. investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ interest on surplus notes and \$ interest on capital notes.
- (i) Includes \$0 depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
		Realized Gain (Loss) On Sales or Maturity	Other Realized Adjustments	Total Realized Capital Gain (Loss) (Columns 1 + 2)	Change in Unrealized Capital Gain (Loss)	Change in Unrealized Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds	 0	 0	 0	 0	 0
1.1	Bonds exempt from U.S. tax .....	.....	.....	..... 0	.....	.....
1.2	Other bonds (unaffiliated)	 (7,154)	 0	 (7,154)	 0	 0
1.3	Bonds of affiliates	 0	 0	 0	 0	 0
2.1	Preferred stocks (unaffiliated)	 0	 0	 0	 0	 0
2.11	Preferred stocks of affiliates	 0	 0	 0	 0	 0
2.2	Common stocks (unaffiliated)	 0	 0	 0	 0	 0
2.21	Common stocks of affiliates	 0	 0	 0	 0	 0
3.	Mortgage loans .....	.....	..... 0	 0	 0	 0
4.	Real estate .....	.....	..... 0	 0	.....	..... 0
5.	Contract loans .....	.....	.....	..... 0	.....	.....
6.	Cash, cash equivalents and short-term investments .....	.....	.....	..... 0	.....	.....
7.	Derivative instruments .....	.....	.....	..... 0	.....	.....
8.	Other invested assets .....	.....	..... 0	 0	 0	 0
9.	Aggregate write-ins for capital gains (losses)	 0	 0	 0	 0	 0
10.	Total capital gains (losses)	(7,154)	0	(7,154)	0	0
DETAILS OF WRITE-INS						
0901.	.....					
0902.	.....					
0903.	.....					
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

EXHIBIT OF NON-ADMITTED ASSETS

	1	2	3
	Current Year Total Nonadmitted Assets	Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D)			0
2. Stocks (Schedule D):			
2.1 Preferred stocks			0
2.2 Common stocks			0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens			0
3.2 Other than first liens			0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company			0
4.2 Properties held for the production of income			0
4.3 Properties held for sale			0
5. Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)			0
6. Contract loans			0
7. Derivatives (Schedule DB)			0
8. Other invested assets (Schedule BA)			0
9. Receivables for securities			0
10. Securities lending reinvested collateral assets (Schedule DL)			0
11. Aggregate write-ins for invested assets	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	0	0	0
13. Title plants (for Title insurers only)			0
14. Investment income due and accrued			0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection			0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due ..			0
15.3 Accrued retrospective premiums and contracts subject to redetermination			0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers			0
16.2 Funds held by or deposited with reinsured companies			0
16.3 Other amounts receivable under reinsurance contracts			0
17. Amounts receivable relating to uninsured plans			0
18.1 Current federal and foreign income tax recoverable and interest thereon			0
18.2 Net deferred tax asset			0
19. Guaranty funds receivable or on deposit			0
20. Electronic data processing equipment and software			0
21. Furniture and equipment, including health care delivery assets			0
22. Net adjustment in assets and liabilities due to foreign exchange rates			0
23. Receivable from parent, subsidiaries and affiliates			0
24. Health care and other amounts receivable	175,338	266,987	91,649
25. Aggregate write-ins for other than invested assets	57,903	60,605	2,702
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	233,241	327,592	94,351
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0
28. Total (Lines 26 and 27)	233,241	327,592	94,351
DETAILS OF WRITE-INS			
1101.			
1102.			
1103.			
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0
2501. Prepaid Business Insurance	42,404	45,105	2,702
2502. Prepaid State Certification Fee	1,000	1,000	0
2503. Prepaid State Domestic Assessment Fee	14,500	14,500	0
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	57,903	60,605	2,702

EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

Source of Enrollment	Total Members at End of					6 Current Year Member Months
	1 Prior Year	2 First Quarter	3 Second Quarter	4 Third Quarter	5 Current Year	
1. Health Maintenance Organizations						
2. Provider Service Organizations	60,912	59,529	62,201	63,069	63,589	741,447
3. Preferred Provider Organizations						
4. Point of Service						
5. Indemnity Only						
6. Aggregate write-ins for other lines of business.....	0	0	0	0	0	0
7. Total	60,912	59,529	62,201	63,069	63,589	741,447
DETAILS OF WRITE-INS						
0601.						
0602.						
0603.						
0698. Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

EXHIBIT 2 - ACCIDENT AND HEALTH PREMIUMS DUE AND UNPAID

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0199999 Total individuals.....						
Group Subscribers:						
Alta Mira	32,451					32,451
Adult Advocacy Center	22,927					22,927
Alpha Tool & Mold Inc.	21,635					21,635
Donovan Digital Solutions	21,528					21,528
Hoge Lumber Company	17,978					17,978
Murrubber Technologies	13,860					13,860
Level 6 Holdings Inc	12,298					12,298
Hapco Inc	10,159					10,159
Exact Machine Corporaton	10,153					10,153
0299997. Group subscriber subtotal	162,987	0	0	0	0	162,987
0299998. Premiums due and unpaid not individually listed	129,274					129,274
0299999. Total group	292,261	0	0	0	0	292,261
0399999. Premiums due and unpaid from Medicare entities						
0499999. Premiums due and unpaid from Medicaid entities						
.....						
.....						
.....						
.....						
.....						
.....						
.....						
.....						
0599999 Accident and health premiums due and unpaid (Page 2, Line 15)	292,261	0	0	0	0	292,261

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

EXHIBIT 3 - HEALTH CARE RECEIVABLES

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
Medical Mutual of Ohio	511,704				175,338	336,366
0199998. Aggregate Pharmaceutical Rebate Receivables Not Individually Listed						
0199999. Total Pharmaceutical Rebate Receivables	511,704	0	0	0	175,338	336,366
0299998. Aggregate Claim Overpayment Receivables Not Individually Listed						
0299999. Total Claim Overpayment Receivables	0	0	0	0	0	0
0399998. Aggregate Loans and Advances to Providers Not Individually Listed						
0399999. Total Loans and Advances to Providers	0	0	0	0	0	0
0499998. Aggregate Capitation Arrangement Receivables Not Individually Listed						
0499999. Total Capitation Arrangement Receivables	0	0	0	0	0	0
0599998. Aggregate Risk Sharing Receivables Not Individually Listed						
0599999. Total Risk Sharing Receivables	0	0	0	0	0	0
0699998. Aggregate Other Health Care Receivables Not Individually Listed						
0699999. Total Other Health Care Receivables	0	0	0	0	0	0
.....						
.....						
.....						
.....						
.....						
.....						
0799999 Gross health care receivables	511,704	0	0	0	175,338	336,366

EXHIBIT 3A - ANALYSIS OF HEALTH CARE RECEIVABLES COLLECTED AND ACCRUED

Type of Health Care Receivable	Health Care Receivables Collected or Offset During the Year		Health Care Receivables Accrued as of December 31 of Current Year		5	6
	1 On Amounts Accrued Prior to January 1 of Current Year	2 On Amounts Accrued During the Year	3 On Amounts Accrued December 31 of Prior Year	4 On Amounts Accrued During the Year	Health Care Receivables from Prior Years (Columns 1 + 3)	Estimated Health Care Receivables Accrued as of December 31 of Prior Year
1. Pharmaceutical rebate receivables	289,759	2,103,438		511,704	289,759	289,759
2. Claim overpayment receivables					0	0
3. Loans and advances to providers					0	0
4. Capitation arrangement receivables					0	0
5. Risk sharing receivables					0	0
6. Other health care receivables.....					0	0
7. Totals (Lines 1 through 6)	289,759	2,103,438	0	511,704	289,759	289,759

Note that the accrued amounts in Columns 3, 4, and 6 are the total health care receivables, not just the admitted portion.

EXHIBIT 4 - CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (Reported and Unreported)

[illegible]

Exhibit 5 - Amounts Due From Parent, Subsidiaries and Affiliates

N O N E

Exhibit 6 - Amounts Due To Parent, Subsidiaries and Affiliates

N O N E

EXHIBIT 7 PART 1- SUMMARY OF TRANSACTIONS WITH PROVIDERS

Payment Method	1 Direct Medical Expense Payment	2 Column 1 as a % of Total Payments	3 Total Members Covered	4 Column 3 as a % of Total Members	5 Column 1 Expenses Paid to Affiliated Providers	6 Column 1 Expenses Paid to Non-Affiliated Providers
Capitation Payments:						
1. Medical groups	0	0.0		0.0		
2. Intermediaries	0	0.0		0.0		
3. All other providers	0	0.0		0.0		
4. Total capitation payments	0	0.0	0	0.0	0	0
Other Payments:						
5. Fee-for-service	520,756	0.2	XXX	XXX	520,756	
6. Contractual fee payments	303,562,979	99.8	XXX	XXX	303,562,979	
7. Bonus/withhold arrangements - fee-for-service	0	0.0	XXX	XXX		
8. Bonus/withhold arrangements - contractual fee payments	0	0.0	XXX	XXX		
9. Non-contingent salaries	0	0.0	XXX	XXX		
10. Aggregate cost arrangements	0	0.0	XXX	XXX		
11. All other payments	0	0.0	XXX	XXX		
12. Total other payments	304,083,735	100.0	XXX	XXX	304,083,735	0
13. TOTAL (Line 4 plus Line 12)	304,083,735	100%	XXX	XXX	304,083,735	0

EXHIBIT 7 - PART 2 - SUMMARY OF TRANSACTIONS WITH INTERMEDIARIES

[illegible]

EXHIBIT 8 - FURNITURE, EQUIPMENT AND SUPPLIES OWNED

		1	2	3	4	5	6
Description		Cost	Improvements	Accumulated Depreciation	Book Value Less Encumbrances	Assets Not Admitted	Net Admitted Assets
1.	Administrative furniture and equipment	NONE					
2.	Medical furniture, equipment and fixtures						
3.	Pharmaceuticals and surgical supplies						
4.	Durable medical equipment						
5.	Other property and equipment						
6.	Total						

NOTES TO FINANCIAL STATEMENTS

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices
Company input

	SSAP #	F/S Page	F/S Line #	2023	2022
NET INCOME					
(1) State basis (Page 4, Line 32, Columns 2 & 3)	XXX	XXX	XXX	\$ 2,723,157	\$ 1,992,734
(2) State Prescribed Practices that are an increase/ (decrease) from NAIC SAP:					
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 2,723,157	\$ 1,992,734
SURPLUS					
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 15,897,674	\$ 13,913,499
(6) State Prescribed Practices that are an increase/(decrease) from NAIC SAP:					
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 15,897,674	\$ 13,913,499

- B. Use of Estimates in the Preparation of the Financial Statements
Reasonable and conservative estimates from the Trust's Actuaries were used to determine the IBNR and Claims Adjustment amounts. No other balance required estimating.
- C. Accounting Policy
These financial statements have been prepared in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures Manual.
- D. Going Concern
There is no substantial doubt by Management or the Trustees about the COSE Health and Wellness Trust's ability to continue as a going concern.

NOTE 2 Accounting Changes and Corrections of Errors

No significant changes.

NOTE 3 Business Combinations and Goodwill

Not applicable

NOTE 4 Discontinued Operations

Not applicable

NOTE 5 Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans
Not applicable
- B. Debt Restructuring
Not applicable
- C. Reverse Mortgages
Not applicable
- D. Loan-Backed Securities
Not applicable
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions
Not applicable
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing
Not applicable
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing
Not applicable
- H. Repurchase Agreements Transactions Accounted for as a Sale
Not applicable
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale
Not applicable
- J. Real Estate
Not applicable
- K. Low Income Housing tax Credits (LIHTC)
Not applicable
- L. Restricted Assets
Not applicable
- M. Working Capital Finance Investments
Not applicable
- N. Offsetting and Netting of Assets and Liabilities
Not applicable
- O. 5GI Securities

NOTES TO FINANCIAL STATEMENTS

- Not applicable
- P. Short Sales
Not applicable
- Q. Prepayment Penalty and Acceleration Fees
Not applicable
- R. Reporting Entity's Share of Cash Pool by Asset Type

	Asset Type	Percent Share
(1)	Cash	1.0%
(2)	Cash Equivalents	99.0%
(3)	Short-Term Investments	
(4)	Total (Must equal 100%)	100.0%

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies
Not applicable

- NOTE 7 Investment Income
- A. No investment income was classified for exclusion.
- B. Not applicable
- C. The gross, nonadmitted and admitted amounts for interest income due and accrued.

Interest Income Due and Accrued	Amount
1. Gross	\$ 136,686
2. Nonadmitted	
3. Admitted	\$ 136,686

- D. The aggregate deferred interest.
- | | |
|-----------------------------|--------|
| Aggregate Deferred Interest | Amount |
|-----------------------------|--------|

- E. The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance.
- | | |
|--|--------|
| Cumulative amounts of PIK interest included in the current principal balance | Amount |
| | \$ - |

NOTE 8 Derivative Instruments
Not applicable

- NOTE 9 Income Taxes
- A. The components of the net deferred tax asset/(liability) at the end of current period are as follows:
Not applicable
- B. Not applicable

- C. Current income taxes incurred consist of the following major components:

	(1) As of End of Current Period	(2) 12/31/2022	(3) (Col. 1 - 2) Change
1. Current Income Tax			
(a) Federal	\$ 536,580	\$ 201,000	\$ 335,580
(b) Foreign			\$ -
(c) Subtotal (1a+1b)	\$ 536,580	\$ 201,000	\$ 335,580
(d) Federal income tax on net capital gains			\$ -
(e) Utilization of capital loss carry-forwards			\$ -
(f) Other			\$ -
(g) Federal and foreign income taxes incurred (1c+1d+1e+1f)	\$ 536,580	\$ 201,000	\$ 335,580
2. Deferred Tax Assets:			
(a) Ordinary:			
(1) Discounting of unpaid losses			\$ -
(2) Unearned premium reserve			\$ -
(3) Policyholder reserves			\$ -
(4) Investments			\$ -
(5) Deferred acquisition costs			\$ -
(6) Policyholder dividends accrual			\$ -
(7) Fixed assets			\$ -
(8) Compensation and benefits accrual			\$ -
(9) Pension accrual			\$ -
(10) Receivables - nonadmitted			\$ -
(11) Net operating loss carry-forward			\$ -
(12) Tax credit carry-forward			\$ -
(13) Other			\$ -
(99) Subtotal (sum of 2a1 through 2a13)	\$ -	\$ -	\$ -
(b) Statutory valuation allowance adjustment			\$ -
(c) Nonadmitted			\$ -
(d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$ -	\$ -	\$ -
(e) Capital:			
(1) Investments			\$ -
(2) Net capital loss carry-forward			\$ -
(3) Real estate			\$ -
(4) Other			\$ -
(99) Subtotal (2e1+2e2+2e3+2e4)	\$ -	\$ -	\$ -
(f) Statutory valuation allowance adjustment			\$ -
(g) Nonadmitted			\$ -
(h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$ -	\$ -	\$ -

NOTES TO FINANCIAL STATEMENTS

(i) Admitted deferred tax assets (2d + 2h)	\$	-	\$	-	\$	-
3. Deferred Tax Liabilities:						
(a) Ordinary:						
(1) Investments					\$	-
(2) Fixed assets					\$	-
(3) Deferred and uncollected premium					\$	-
(4) Policyholder reserves					\$	-
(5) Other					\$	-
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	\$	-	\$	-	\$	-
(b) Capital:						
(1) Investments					\$	-
(2) Real estate					\$	-
(3) Other					\$	-
(99) Subtotal (3b1+3b2+3b3)	\$	-	\$	-	\$	-
(c) Deferred tax liabilities (3a99 + 3b99)	\$	-	\$	-	\$	-
4. Net deferred tax assets/liabilities (2i - 3c)	\$	-	\$	-	\$	-
D. Not applicable						
E. Not applicable						
F. Not applicable						
G. Not applicable						
H. Repatriation Transition Tax (RTT)						
Not applicable						
I. Alternative Minimum Tax (AMT) Credit						
Not applicable						

	Amount
(1) Gross AMT Credit Recognized as:	
a. Current year recoverable	
b. Deferred tax asset (DTA)	
(2) Beginning Balance of AMT Credit Carryforward	\$ -
(3) Amounts Recovered	
(4) Adjustments	
(5) Ending Balance of AMT Credit Carryforward (5=2-3-4)	\$ -
(6) Reduction for Sequestration	
(7) Nonadmitted by Reporting Entity	
(8) Reporting Entity Ending Balance (8=5-6-7)	\$ -

NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. Not applicable

NOTE 11 Debt

A. Not applicable

NOTE 12 Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

Not applicable

NOTE 13 Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

A. A Surplus Note Payment occurred in December in the amount of \$208,333.00.

J. The portion of unassigned funds (surplus) represented or reduced by cumulative unrealized gains and losses is

K. The Company issued the following surplus debentures or similar obligations:

1	2	3	4	5	6	7	8
Item Number	Date Issued	Interest Rate	Original Issue Amount of Note	Is Surplus Note Holder a Related Party (Y/N)	Carrying Value of Note Prior Year	Carrying Value of Note Current Year*	Unapproved Interest And/Or Principal
	10/02/2019	0.000%	\$ 7,000,000	No	\$ 5,444,448	\$ 4,666,672	
	10/01/2019	0.000%	\$ 500,000	No	\$ 388,888	\$ 333,332	
Total	XXX	XXX	\$ 7,500,000	XXX	\$ 5,833,336	\$ 5,000,004	\$ -

* Total should agree with Page 3, Line 29.

1	9	10	11	12	13	14
Item Number	Current Year Interest Expense Recognized	Life-To-Date Interest Expense Recognized	Current Year Interest Offset Percentage (not including amounts paid to a 3rd party liquidity provider)	Current Year Principal Paid	Life-To-Date Principal Paid	Date of Maturity
				\$ 777,776	\$ 2,333,328	12/31/2029
				\$ 55,556	\$ 166,668	12/31/2029
Total	\$ -	\$ -	XXX	\$ 833,332	\$ 2,499,996	XXX

NOTES TO FINANCIAL STATEMENTS

1	15	16	17	18	19
Item Number	Are Surplus Note Payments Contractually Linked? (Y/N)	Surplus Note Payments Subject to Administrative Offsetting Provisions? (Y/N)	Were Surplus Note Proceeds Used to Purchase an Asset Directly From the Holder of the Surplus Note? (Y/N)	Is Asset Issuer a Related Party (Y/N)	Type of Assets Received Upon Issuance
	Yes	No	No	No	Cash
	Yes	No	No	No	Cash
Total	XXX	XXX	XXX	XXX	XXX

1	20	21	22
Item Number	Principal Amount of Assets Received Upon Issuance	Book/Adjusted Carry Value of Assets	Is Liquidity Source a Related Party to the Surplus Note Issuer? (Y/N)
	\$ 7,000,000	\$ 7,000,000	No
	\$ 500,000	\$ 500,000	No
Total	\$ 7,500,000	\$ 7,500,000	XXX

NOTE 14 Liabilities, Contingencies and Assessments

A. Contingent Commitments
Not applicable

NOTE 15 Leases

Not applicable

NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

Not applicable

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

Not applicable

NOTE 18 Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

Not applicable

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

Not applicable

NOTE 20 Fair Value Measurements

A. (3) The Trust restated or reported no assets or liabilities at fair value as of December 31st, 2023.

B. Not applicable

C. Aggregate fair value for all financial instruments and the level within the fair value hierarchy in which the fair value measurements in their entirety fall.

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 12,273,149	\$ 12,332,472	\$ 12,273,149				
US Special Revenued Bo	\$ 237,695	\$ 243,855		\$ 237,695			
Industrial and Miscellaneous Bonds	\$ 2,320,576	\$ 2,339,597		\$ 2,320,576			

D. Not Practicable to Estimate Fair Value

Type or Class of Financial Instrument	Carrying Value	Effective Interest Rate	Maturity Date	Explanation

NOTE 21 Other Items

Not applicable

NOTE 22 Events Subsequent

Type I – Recognized Subsequent Events:
Subsequent events have been considered thru March 18th, 2024 for these statutory financial statements which are to be issued on March 31st, 2024. There were no events occurring subsequent to the end of the year that merited recognition or disclosure in these statements.

Type II – Nonrecognized Subsequent Events:
Not applicable

NOTE 23 Reinsurance

A. Ceded Reinsurance Report
During 2023, the Trust has been subject to a quota share reinsurance agreement with Medical Mutual of Ohio to cede 90% of the Trust's health business.

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. Company input

B. Company input

NOTES TO FINANCIAL STATEMENTS

C. Company input

D. Medical loss ratio rebates required pursuant to the Public Health Service Act.

	1	2	3	4	5
	Individual	Small Group Employer	Large Group Employer	Other Categories with Rebates	Total
Prior Reporting Year					
(1) Medical loss ratio rebates incurred	\$ -	\$ -	\$ -	\$ -	\$ -
(2) Medical loss ratio rebates paid	\$ -	\$ -	\$ -	\$ -	\$ -
(3) Medical loss ratio rebates unpaid	\$ -	\$ -	\$ -	\$ -	\$ -
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	
(6) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ -
Current Reporting Year-to-Date					
(7) Medical loss ratio rebates incurred	\$ -	\$ -	\$ -	\$ -	\$ -
(8) Medical loss ratio rebates paid	\$ -	\$ -	\$ -	\$ -	\$ -
(9) Medical loss ratio rebates unpaid	\$ -	\$ -	\$ -	\$ -	\$ -
(10) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	
(11) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	
(12) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ -

E. Risk Sharing Provisions of the Affordable Care Act

(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions (YES/NO)? Yes [] No [X]

(2) Impact of Risk Sharing Provisions of the Affordable Care Act on Admitted Assets, Liabilities and Revenue for the Current Year Amount

- a. Permanent ACA Risk Adjustment Program
- Assets
1. Premium adjustments receivable due to ACA Risk Adjustment (including high risk pool payments)
- Liabilities
2. Risk adjustment user fees payable for ACA Risk Adjustment
3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premium)
- Operations (Revenue & Expense)
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)
- b. Transitional ACA Reinsurance Program
- Assets
1. Amounts recoverable for claims paid due to ACA Reinsurance
2. Amounts recoverable for claims unpaid due to ACA Reinsurance (Contra Liability)
3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance
- Liabilities
4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium
5. Ceded reinsurance premiums payable due to ACA Reinsurance
6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance
- Operations (Revenue & Expense)
7. Ceded reinsurance premiums due to ACA Reinsurance
8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments
9. ACA Reinsurance contributions – not reported as ceded premium
- c. Temporary ACA Risk Corridors Program
- Assets
1. Accrued retrospective premium due to ACA Risk Corridors
- Liabilities
2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors
- Operations (Revenue & Expense)
3. Effect of ACA Risk Corridors on net premium income (paid/received)
4. Effect of ACA Risk Corridors on change in reserves for rate credits

(3) Roll forward of prior year ACA risk sharing provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to prior year balance.

	Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments			Unsettled Balances as of the Reporting Date	
					Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	Payable	Receivable	Payable	Receivable	Payable	Receivable	Payable	Ref	Receivable	Payable
a. Permanent ACA Risk Adjustment Program											
1. Premium adjustments receivable (including high risk pool payments)					\$ -	\$ -			A	\$ -	\$ -
2. Premium adjustments (payable) (including high risk pool premium)					\$ -	\$ -			B	\$ -	\$ -
3. Subtotal ACA Permanent Risk Adjustment Program	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -
b. Transitional ACA Reinsurance Program											
1. Amounts recoverable for claims paid					\$ -	\$ -			C	\$ -	\$ -
2. Amounts recoverable for claims unpaid (contra liability)					\$ -	\$ -			D	\$ -	\$ -
3. Amounts receivable relating to uninsured plans					\$ -	\$ -			E	\$ -	\$ -

NOTES TO FINANCIAL STATEMENTS

4. Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium					\$ -	\$ -				F	\$ -	\$ -
5. Ceded reinsurance premiums payable					\$ -	\$ -				G	\$ -	\$ -
6. Liability for amounts held under uninsured plans					\$ -	\$ -				H	\$ -	\$ -
7. Subtotal ACA Transitional Reinsurance Program	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -
c. Temporary ACA Risk Corridors Program												
1. Accrued retrospective premium					\$ -	\$ -				I	\$ -	\$ -
2. Reserve for rate credits or policy experience rating refunds					\$ -	\$ -				J	\$ -	\$ -
3. Subtotal ACA Risk Corridors Program	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -
d. Total for ACA Risk Sharing Provisions	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -

Explanations of Adjustments

- A.
- B.
- C.
- D.
- E.
- F.
- G.
- H.
- I.
- J.

(4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year

	Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments			Unsettled Balances as of the Reporting Date	
					Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	Payable	Receivable	Payable	Receivable	Payable	Receivable	Payable	Ref	Receivable	Payable
a. 2014											
1. Accrued retrospective premium					\$ -	\$ -			A	\$ -	\$ -
2. Reserve for rate credits or policy experience rating refunds					\$ -	\$ -			B	\$ -	\$ -
b. 2015											
1. Accrued retrospective premium					\$ -	\$ -			C	\$ -	\$ -
2. Reserve for rate credits or policy experience rating refunds					\$ -	\$ -			D	\$ -	\$ -
c. 2016											
1. Accrued retrospective premium					\$ -	\$ -			E	\$ -	\$ -
2. Reserve for rate credits or policy experience rating refunds					\$ -	\$ -			F	\$ -	\$ -
d. Total for Risk Corridors	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		\$ -	\$ -

Explanations of Adjustments

- A.
- B.
- C.
- D.
- E.
- F.

24E(4)d (Columns 1 through 10) should equal 24E(3)c3 (Column 1 through 10 respectively)

(5) ACA Risk Corridors Receivable as of Reporting Date

NOTES TO FINANCIAL STATEMENTS

Risk Corridors Program Year	1 Estimated Amount to be Filed or Final Amount Filed with CMS	2 Non-Accrued Amounts for Impairment or Other Reasons	3 Amounts received from CMS	4 Asset Balance (Gross of Non-admissions) (1-2-3)	5 Non-admitted Amount	6 Net Admitted Asset (4 - 5)
a. 2014				\$ -		\$ -
b. 2015				\$ -		\$ -
c. 2016				\$ -		\$ -
d. Total (a + b + c)	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -

24E(5)d (Column 4) should equal 24E(3)c1 (Column 9)

24E(5)d (Column 6) should equal 24E(2)c1

NOTE 25 Change in Incurred Claims and Claim Adjustment Expenses

The Trust's outside Actuary continues to analyze reserves on a monthly basis, and Management continues to exercise a conservative approach to the Trust's reserves. Reserves for December 31st, 2023, were \$38.383million. As of December 31st, 2023, \$27.393 million has been paid for claims in the current year, and \$10.990million reserve(IBNR) attributable to insured events for the current year incurred in the future periods. A reserve of \$10.268 million was established in 2022 for the prior year claims, Claims paid in 2023 associated with this reserve were \$9.864million. The IBNR level of reserve was calculated and verified by the Trust's outside Actuary.

NOTE 26 Intercompany Pooling Arrangements

Not applicable

NOTE 27 Structured Settlements

Not applicable

NOTE 28 Health Care Receivables

A. Pharmaceutical Rebate Receivables

Accrued Pharmacy Rebates for 2023 \$2,103,438 Pharmacy Rebates paid by Third Party Provider \$1,591,734 Pharmacy Rebate Receivables \$511,704.

Date	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
12/31/2023	\$ 621				
09/30/2023	\$ 516	\$ 553	\$ 536		
06/30/2023	\$ 463	\$ 516	\$ 509	\$ 9	
03/31/2023	\$ 495	\$ 467	\$ 466	\$ 15	\$ 1
12/31/2022	\$ 485	\$ 485	\$ 471	\$ 6	
09/30/2022	\$ 476	\$ 463	\$ 386	\$ 11	\$ 51
06/30/2022	\$ 448	\$ 499	\$ 378	\$ 11	\$ 26
03/31/2022	\$ 401	\$ 470	\$ 367		\$ 15

B. Risk-Sharing Receivables

Calendar Year	Evaluation Period Year Ending	Risk Sharing Receivable as Estimated in the Prior Year	Risk Sharing Receivable as Estimated in the Current Year	Risk Sharing Receivable Billed	Risk Sharing Receivable Not Yet Billed	Actual Risk Sharing Amounts Received in Year Billed	Actual Risk Sharing Amounts Received First Year Subsequent	Actual Risk Sharing Amounts Received Second Year Subsequent	Actual Risk Sharing Amounts Received - All Other

NOTE 29 Participating Policies

Not applicable

NOTE 30 Premium Deficiency Reserves

No reserve was determined necessary as of December 31st, 2023.

NOTE 31 Anticipated Salvage and Subrogation

Not applicable

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES
GENERAL

1.1

Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?
If yes, complete Schedule Y, Parts 1, 1A, 2 and 3.

Yes [] No [X]

1.2

If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations?

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

1.3

State Regulating?

1.4

Is the reporting entity publicly traded or a member of a publicly traded group?

Yes [] No [X]

1.5

If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

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

State as of what date the latest financial examination of the reporting entity was made or is being made.

12/19/2021

3.2

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

3.3

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).

05/25/2022

3.4

By what department or departments?
Risk Assessment

3.5

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]

3.6

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

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

4.1

During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity), receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.11 sales of new business?
4.12 renewals?

Yes [] No [X]
Yes [] No [X]

4.2

During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
4.21 sales of new business?
4.22 renewals?

Yes [] No [X]
Yes [] No [X]

5.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?
If yes, complete and file the merger history data file with the NAIC.

Yes [] No []

5.2

If yes, provide the name of the 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 Name of Entity	2 NAIC Company Code	3 State of Domicile

6.1

Has the 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]

6.2

If yes, give full information:

7.1

Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity?

Yes [] No [X]

7.2

If yes,
7.21 State the percentage of foreign control; %
7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

GENERAL INTERROGATORIES

- 8.1

Is the company a subsidiary of a depository institution holding company (DIHC) or a DIHC itself, regulated by the Federal Reserve Board?

Yes [] No [X]
- 8.2

If the response to 8.1 is yes, please identify the name of the DIHC.
- 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	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	OCC	FDIC	SEC

- 8.5

Is the reporting entity a depository institution holding company with significant insurance operations as defined by the Board of Governors of Federal Reserve System or a subsidiary of the depository institution holding company?

Yes [] No [X]
- 8.6

If response to 8.5 is no, is the reporting entity a company or subsidiary of a company that has otherwise been made subject to the Federal Reserve Board's capital rule?

Yes [] No [X] N/A []
9.

What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
- 10.1

Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation?

Yes [] No [X]
- 10.2

If the response to 10.1 is yes, provide information related to this exemption:
- 10.3

Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation?

Yes [] No [X]
- 10.4

If the response to 10.3 is yes, provide information related to this exemption:
- 10.5

Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws?

Yes [] No [X] N/A []
- 10.6

If the response to 10.5 is no or n/a, please explain.
Trustees perform the role of the Audit Committee.
11.

What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
Lewis & Ellis, Inc.
11225 College Boulevard Ste 320
Overland Park, KS 66210-2798
- 12.1

Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?

Yes [] No [X]
- 12.11

Name of real estate holding company ...
- 12.12

Number of parcels involved
- 12.13

Total book/adjusted carrying value

\$
- 12.2

If yes, provide explanation
13.

FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:
- 13.1

What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?
- 13.2

Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located?

Yes [] No []
- 13.3

Have there been any changes made to any of the trust indentures during the year?

Yes [] No []
- 13.4

If answer to (13.3) is yes, has the domiciliary or entry state approved the changes?

Yes [] No [] N/A []
- 14.1

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.
- 14.11

If the response to 14.1 is No, please explain:
- 14.2

Has the code of ethics for senior managers been amended?

Yes [] No [X]
- 14.21

If the response to 14.2 is yes, provide information related to amendment(s).
- 14.3

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

Yes [] No [X]
- 14.31

If the response to 14.3 is yes, provide the nature of any waiver(s).

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

GENERAL INTERROGATORIES

- 15.1

Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?

Yes [] No [X]
- 15.2

If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount

BOARD OF DIRECTORS

16.

Is the purchase or sale of all investments of the reporting entity passed upon either by the board of directors or a subordinate committee thereof?

Yes [] No [X]
17.

Does the reporting entity keep a complete permanent record of the proceedings of its board of directors and all subordinate committees thereof?

Yes [X] No []
18.

Has the reporting entity an established procedure for disclosure to its board of directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person?

Yes [X] No []

FINANCIAL

19.

Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)?

Yes [] No [X]
- 20.1

Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11 To directors or other officers.....\$

20.12 To stockholders not officers.....\$

20.13 Trustees, supreme or grand (Fraternal Only)\$
- 20.2

Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21 To directors or other officers.....\$

20.22 To stockholders not officers.....\$

20.23 Trustees, supreme or grand (Fraternal Only)\$
- 21.1

Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement?

Yes [] No [X]
- 21.2

If yes, state the amount thereof at December 31 of the current year:

21.21 Rented from others.....\$

21.22 Borrowed from others.....\$

21.23 Leased from others\$

21.24 Other\$
- 22.1

Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments?

Yes [] No [X]
- 22.2

If answer is yes:

22.21 Amount paid as losses or risk adjustment \$

22.22 Amount paid as expenses\$

22.23 Other amounts paid\$
- 23.1

Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement?

Yes [] No [X]
- 23.2

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

\$
- 24.1

Does the insurer utilize third parties to pay agent commissions in which the amounts advanced by the third parties are not settled in full within 90 days?

Yes [] No [X]
- 24.2

If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are a related party.

Name of Third-Party	Is the Third-Party Agent a Related Party (Yes/No)

INVESTMENT

- 25.01

Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date? (other than securities lending programs addressed in 25.03).....

Yes [X] No []

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

GENERAL INTERROGATORIES

25.02 If no, give full and complete information, relating thereto

25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided)

25.04 For the reporting entity's securities lending program, report amount of collateral for conforming programs as outlined in the Risk-Based Capital Instructions. \$

25.05 For the reporting entity's securities lending program, report amount of collateral for other programs. \$

25.06 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]

25.07 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]

25.08 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities lending Agreement (MSLA) to conduct securities lending? Yes [] No [] N/A [X]

25.09 For the reporting entity's securities lending program state the amount of the following as of December 31 of the current year:

25.091 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2. \$ 0

25.092 Total book/adjusted carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2 \$ 0

25.093 Total payable for securities lending reported on the liability page. \$ 0

26.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 25.03). Yes [] No [X]

26.2 If yes, state the amount thereof at December 31 of the current year:

26.21 Subject to repurchase agreements \$ 0

26.22 Subject to reverse repurchase agreements \$ 0

26.23 Subject to dollar repurchase agreements \$ 0

26.24 Subject to reverse dollar repurchase agreements \$ 0

26.25 Placed under option agreements \$ 0

26.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock \$ 0

26.27 FHLB Capital Stock \$ 0

26.28 On deposit with states \$ 0

26.29 On deposit with other regulatory bodies \$ 0

26.30 Pledged as collateral - excluding collateral pledged to an FHLB \$ 0

26.31 Pledged as collateral to FHLB - including assets backing funding agreements \$ 0

26.32 Other \$ 0

26.3 For category (26.26) provide the following:

1 Nature of Restriction	2 Description	3 Amount

27.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]

27.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A []
If no, attach a description with this statement.

LINES 27.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONLY:

27.3 Does the reporting entity utilize derivatives to hedge variable annuity guarantees subject to fluctuations as a result of interest rate sensitivity? Yes [] No []

27.4 If the response to 27.3 is YES, does the reporting entity utilize:

27.41 Special accounting provision of SSAP No. 108 Yes [] No []

27.42 Permitted accounting practice Yes [] No []

27.43 Other accounting guidance Yes [] No []

27.5 By responding YES to 27.41 regarding utilizing the special accounting provisions of SSAP No. 108, the reporting entity attests to the following:

The reporting entity has obtained explicit approval from the domiciliary state.

Hedging strategy subject to the special accounting provisions is consistent with the requirements of VM-21.

Actuarial certification has been obtained which indicates that the hedging strategy is incorporated within the establishment of VM-21 reserves and provides the impact of the hedging strategy within the Actuarial Guideline Conditional Tail Expectation Amount.

Financial Officer Certification has been obtained which indicates that the hedging strategy meets the definition of a Clearly Defined Hedging Strategy within VM-21 and that the Clearly Defined Hedging Strategy is the hedging strategy being used by the company in its actual day-to-day risk mitigation efforts.

28.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No [X]

28.2 If yes, state the amount thereof at December 31 of the current year. \$

29. 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 []

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

1 Name of Custodian(s)	2 Custodian's Address
PNC Institutional Asset Management	PNC Center, 1900 E. 9th St., Cleveland, OH 44114

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

GENERAL INTERROGATORIES

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

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

29.03 Have there been any changes, including name changes, in the custodian(s) identified in 29.01 during the current year?..... Yes [] No [X]

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

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

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

1 Name of Firm or Individual	2 Affiliation
PNC Institutional Asset Management	U.....
Group Services Inc.(MEWA Administrator)	A.....

29.0597 For those firms/individuals listed in the table for Question 29.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's invested assets?..... Yes [X] No []

29.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 29.05, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets?..... Yes [X] No []

29.06 For those firms or individuals listed in the table for 29.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
.....	PNC Institutional Asset Management .....	.....	00C	NO.....
.....	Group Services Inc.(MEWA Administrator) .....	.....	.....	NO.....
.....				

30.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])? Yes [] No [X]

30.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
30.2999 - Total		0

30.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

GENERAL INTERROGATORIES

31. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
31.1 Bonds	14,915,924	14,831,419	(84,504)
31.2 Preferred stocks	0		0
31.3 Totals	14,915,924	14,831,419	(84,504)

- 31.4 Describe the sources or methods utilized in determining the fair values:
- 32.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [X] No []
- 32.2 If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [X] No []
- 32.3 If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:
- 33.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []
- 33.2 If no, list exceptions:
34. By self-designating 5GI securities, the reporting entity is certifying the following elements of 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]
35. 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]
36. 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]
37. By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following:
- a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.
 - b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties.
 - c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review.
 - d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 37.c are reported as long-term investments.
- Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria? Yes [] No [] N/A [X]

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

GENERAL INTERROGATORIES

- 38.1 Does the reporting entity directly hold cryptocurrencies? Yes [] No [X]
- 38.2 If the response to 38.1 is yes, on what schedule are they reported?
- 39.1 Does the reporting entity directly or indirectly accept cryptocurrencies as payments for premiums on policies? Yes [] No [X]
- 39.2 If the response to 39.1 is yes, are the cryptocurrencies held directly or are they immediately converted to U.S. dollars?

39.21 Held directly Yes [] No []

39.22 Immediately converted to U.S. dollars Yes [] No []
- 39.3 If the response to 38.1 or 39.1 is yes, list all cryptocurrencies accepted for payments of premiums or that are held directly.

1	2	3
Name of Cryptocurrency	Immediately Converted to USD, Directly Held, or Both	Accepted for Payment of Premiums

OTHER

- 40.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?\$
- 40.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1	2
Name	Amount Paid
- 41.1 Amount of payments for legal expenses, if any?\$40,519
- 41.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1	2
Name	Amount Paid
Baker & Hostetler LLP	40,519
- 42.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?\$
- 42.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers, or departments of government during the period covered by this statement.

1	2
Name	Amount Paid

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

1.1

Does the reporting entity have any direct Medicare Supplement Insurance in force?

Yes [] No [X]

1.2

If yes, indicate premium earned on U.S. business only.

\$

1.3

What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?

\$

1.31

Reason for excluding

.....

1.4

Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above

\$

1.5

Indicate total incurred claims on all Medicare Supplement Insurance.

\$ 0

1.6

Individual policies:

Most current three years:

1.61

Total premium earned

\$ 0

1.62

Total incurred claims

\$ 0

1.63

Number of covered lives

..... 0

All years prior to most current three years:

1.64

Total premium earned

\$ 0

1.65

Total incurred claims

\$ 0

1.66

Number of covered lives

..... 0

1.7

Group policies:

Most current three years:

1.71

Total premium earned

\$ 0

1.72

Total incurred claims

\$ 0

1.73

Number of covered lives

..... 0

All years prior to most current three years:

1.74

Total premium earned

\$ 0

1.75

Total incurred claims

\$ 0

1.76

Number of covered lives

..... 0

2.

Health Test:

1

Current Year

2

Prior Year

2.1

Premium Numerator

69,199,376

66,813,727

2.2

Premium Denominator

69,199,376

66,813,727

2.3

Premium Ratio (2.1/2.2)

1.000

1.000

2.4

Reserve Numerator

10,990,410

10,268,001

2.5

Reserve Denominator

10,990,410

10,268,001

2.6

Reserve Ratio (2.4/2.5)

1.000

1.000

3.1

Has the reporting entity received any endowment or gift from contracting hospitals, physicians, dentists, or others that is agreed will be returned when, as and if the earnings of the reporting entity permits?

Yes [] No [X]

3.2

If yes, give particulars:

.....

4.1

Have copies of all agreements stating the period and nature of hospitals', physicians', and dentists' care offered to subscribers and dependents been filed with the appropriate regulatory agency?

Yes [X] No []

4.2

If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these agreements include additional benefits offered?

Yes [] No [X]

5.1

Does the reporting entity have stop-loss reinsurance?

Yes [X] No []

5.2

If no, explain:

.....

5.3

Maximum retained risk (see instructions)

5.31

Comprehensive Medical

\$ 400,000

5.32

Medical Only

\$

5.33

Medicare Supplement

\$

5.34

Dental & Vision

\$

5.35

Other Limited Benefit Plan

\$

5.36

Other

\$

6.

Describe arrangement which the reporting entity may have to protect subscribers and their dependents against the risk of insolvency including hold harmless provisions, conversion privileges with other carriers, agreements with providers to continue rendering services, and any other agreements:

.....

7.1

Does the reporting entity set up its claim liability for provider services on a service date basis?.....

Yes [X] No []

7.2

If no, give details

.....

8.

Provide the following information regarding participating providers:

8.1

Number of providers at start of reporting year

72,201

8.2

Number of providers at end of reporting year

73,996

9.1

Does the reporting entity have business subject to premium rate guarantees?

Yes [] No [X]

9.2

If yes, direct premium earned:

9.21

Business with rate guarantees between 15-36 months..

\$.....

9.22

Business with rate guarantees over 36 months

\$.....

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

GENERAL INTERROGATORIES

10.1

Does the reporting entity have Incentive Pool, Withhold or Bonus Arrangements in its provider contracts?

Yes [] No [X]

10.2

If yes:

10.21

Maximum amount payable bonuses

\$

10.22

Amount actually paid for year bonuses

\$

10.23

Maximum amount payable withholds

\$

10.24

Amount actually paid for year withholds

\$

11.1

Is the reporting entity organized as:

11.12

A Medical Group/Staff Model,

Yes [] No [X]

11.13

An Individual Practice Association (IPA), or,

Yes [] No [X]

11.14

A Mixed Model (combination of above)?

Yes [] No [X]

11.2

Is the reporting entity subject to Statutory Minimum Capital and Surplus Requirements?

Yes [X] No []

11.3

If yes, show the name of the state requiring such minimum capital and surplus.

11.4

If yes, show the amount required.

\$500,000

11.5

Is this amount included as part of a contingency reserve in stockholder's equity?

Yes [] No [X]

11.6

If the amount is calculated, show the calculation

12. List service areas in which reporting entity is licensed to operate:

1
Name of Service Area

13.1

Do you act as a custodian for health savings accounts?

Yes [] No [X]

13.2

If yes, please provide the amount of custodial funds held as of the reporting date.

\$

13.3

Do you act as an administrator for health savings accounts?

Yes [] No [X]

13.4

If yes, please provide the balance of funds administered as of the reporting date.

\$

14.1

Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers?

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

14.2

If the answer to 14.1 is yes, please provide the following:

1 Company Name	2 NAIC Company Code	3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit		
				5 Letters of Credit	6 Trust Agreements	7 Other

15.

Provide the following for individual ordinary life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded):

15.1

Direct Premium Written

\$

15.2

Total Incurred Claims

\$

15.3

Number of Covered Lives

*Ordinary Life Insurance Includes
Term(whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary gurarantee)
Universal Life (with or without secondary gurarantee)
Variable Universal Life (with or without secondary gurarantee)

16.

Is the reporting entity licensed or chartered, registered, qualified, eligible or writing business in at least two states?

Yes [] No [X]

16.1

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]

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

FIVE-YEAR HISTORICAL DATA

	1 2023	2 2022	3 2021	4 2020	5 2019
Balance Sheet (Pages 2 and 3)					
1. Total admitted assets (Page 2, Line 28)	76,422,979	50,152,050	48,096,043	43,911,990	59,975,526
2. Total liabilities (Page 3, Line 24)	60,525,305	36,238,551	35,131,887	30,273,761	39,313,715
3. Statutory minimum capital and surplus requirement	500,000	500,000	500,000	500,000	5,000,000
4. Total capital and surplus (Page 3, Line 33)	15,897,674	13,913,499	12,964,155	13,638,229	20,661,811
Income Statement (Page 4)					
5. Total revenues (Line 8)	69,199,376	66,813,727	64,533,441	69,977,205	255,795,734
6. Total medical and hospital expenses (Line 18)	28,115,128	27,028,958	27,628,493	24,056,245	225,934,196
7. Claims adjustment expenses (Line 20)	(5,600)	53,600	68,000	64,000	673,469
8. Total administrative expenses (Line 21)	39,167,551	38,068,483	36,906,124	41,600,562	40,394,418
9. Net underwriting gain (loss) (Line 24)	1,922,297	1,662,687	(69,175)	4,256,398	(567,741)
10. Net investment gain (loss) (Line 27)	1,337,439	531,047	259,444	495,962	1,173,399
11. Total other income (Lines 28 plus 29)	0	0	0	0	0
12. Net income or (loss) (Line 32)	2,723,157	1,992,734	111,583	4,502,616	126,709
Cash Flow (Page 6)					
13. Net cash from operations (Line 11)	(479,143)	3,561,075	806,369	(14,228,322)	(3,640,303)
Risk-Based Capital Analysis					
14. Total adjusted capital	15,897,674	13,913,499	12,964,155	13,638,229	20,661,811
15. Authorized control level risk-based capital	1,657,987	1,661,946	1,686,849	1,604,272	9,548,078
Enrollment (Exhibit 1)					
16. Total members at end of period (Column 5, Line 7)	63,589	60,912	60,462	61,431	62,247
17. Total members months (Column 6, Line 7)	741,447	733,754	728,848	744,357	700,170
Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0					
18. Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)	100.0	100.0	100.0	100.0	100.0
19. Total hospital and medical plus other non-health (Lines 18 plus Line 19)	40.6	40.5	42.8	34.4	88.3
20. Cost containment expenses	0.0	0.0	0.0	0.0	0.0
21. Other claims adjustment expenses	0.0	0.1	0.1	0.1	0.3
22. Total underwriting deductions (Line 23)	97.2	97.5	100.1	93.9	100.2
23. Total underwriting gain (loss) (Line 24)	2.8	2.5	(0.1)	6.1	(0.2)
Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24. Total claims incurred for prior years (Line 17, Col. 5)	9,863,924	10,811,474	7,860,847	32,601,199	17,073,430
25. Estimated liability of unpaid claims-[prior year (Line 17, Col. 6)]	10,268,001	11,056,574	7,429,722	35,907,561	17,385,451
Investments In Parent, Subsidiaries and Affiliates					
26. Affiliated bonds (Sch. D Summary, Line 12, Col. 1)			0	0	0
27. Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)			0	0	0
28. Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)			0	0	0
29. Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	0
30. Affiliated mortgage loans on real estate					
31. All other affiliated					
32. Total of above Lines 26 to 31	0	0	0	0	0
33. Total investment in parent included in Lines 26 to 31 above.					

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes [] No []

If no, please explain:



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION COSE Health and Wellness Trust 2. Cleveland, OH

NAIC Group Code		0000		BUSINESS IN THE STATE OF		Ohio		DURING THE YEAR				2023		NAIC Company Code		00122	
		1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	11	12	13	14		
			2	3													
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health		
Total Members at end of:																	
1. Prior Year		60,912		60,912													
2. First Quarter		59,529		59,529													
3. Second Quarter		62,201		62,201													
4. Third Quarter		63,069		63,069													
5. Current Year		63,589		63,589													
6. Current Year Member Months		741,447		741,447													
Total Member Ambulatory Encounters for Year:																	
7 Physician		349,451		349,451													
8. Non-Physician		293,018		293,018													
9. Total		642,469	0	642,469	0	0	0	0	0	0	0	0	0	0	0		
10. Hospital Patient Days Incurred		12,679		12,679													
11. Number of Inpatient Admissions		3,200		3,200													
12. Health Premiums Written (b)		353,197,731		353,197,731													
13. Life Premiums Direct		0															
14. Property/Casualty Premiums Written		0															
15. Health Premiums Earned.....		69,199,376		69,199,376													
16. Property/Casualty Premiums Earned		0															
17. Amount Paid for Provision of Health Care Services.....		304,083,735		304,083,735													
18. Amount Incurred for Provision of Health Care Services		318,837,518		318,837,518													

(a) For health business: number of persons insured under PPO managed care products and number of persons insured under indemnity only products

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

30.0H



ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION (a)

REPORT FOR: 1. CORPORATION COSE Health and Wellness Trust 2. Cleveland, OH

NAIC Group Code		BUSINESS IN THE STATE OF		Grand Total		DURING THE YEAR									(LOCATION)	
0000		1		4		2023									NAIC Company Code	
		Comprehensive (Hospital & Medical)													00122	
		2	3													
		Total	Individual	Group	Medicare Supplement	Vision Only	Dental Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Credit A&H	Disability Income	Long-Term Care	Other Health	Other Non-Health	
Total Members at end of:																
1.	Prior Year	60,912	0	60,912	0	0	0	0	0	0	0	0	0	0	0	
2.	First Quarter	59,529	0	59,529	0	0	0	0	0	0	0	0	0	0	0	
3.	Second Quarter	62,201	0	62,201	0	0	0	0	0	0	0	0	0	0	0	
4.	Third Quarter	63,069	0	63,069	0	0	0	0	0	0	0	0	0	0	0	
5.	Current Year	63,589	0	63,589	0	0	0	0	0	0	0	0	0	0	0	
6.	Current Year Member Months	741,447	0	741,447	0	0	0	0	0	0	0	0	0	0	0	
Total Member Ambulatory Encounters for Year:																
7.	Physician	349,451	0	349,451	0	0	0	0	0	0	0	0	0	0	0	
8.	Non-Physician	293,018	0	293,018	0	0	0	0	0	0	0	0	0	0	0	
9.	Total	642,469	0	642,469	0	0	0	0	0	0	0	0	0	0	0	
10.	Hospital Patient Days Incurred	12,679	0	12,679	0	0	0	0	0	0	0	0	0	0	0	
11.	Number of Inpatient Admissions	3,200	0	3,200	0	0	0	0	0	0	0	0	0	0	0	
12.	Health Premiums Written (b)	353,197,731	0	353,197,731	0	0	0	0	0	0	0	0	0	0	0	
13.	Life Premiums Direct	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
14.	Property/Casualty Premiums Written	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
15.	Health Premiums Earned.....	69,199,376	0	69,199,376	0	0	0	0	0	0	0	0	0	0	0	
16.	Property/Casualty Premiums Earned	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
17.	Amount Paid for Provision of Health Care Services.....	304,083,735	0	304,083,735	0	0	0	0	0	0	0	0	0	0	0	
18.	Amount Incurred for Provision of Health Care Services	318,837,518	0	318,837,518	0	0	0	0	0	0	0	0	0	0	0	

(a) For health business: number of persons insured under PPO managed care products0 and number of persons insured under indemnity only products0 .

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

30.GT

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SCHEDULE S - PART 1 - SECTION 2

Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

[illegible]

SCHEDULE S - PART 2

[illegible]

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SCHEDULE S - PART 3 - SECTION 2

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11	12		
										Current Year	Prior Year		
0399999. Total General Account - Authorized U.S. Affiliates							0	0	0	0	0	0	0
0699999. Total General Account - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0
0799999. Total General Account - Authorized Affiliates							0	0	0	0	0	0	0
29076		01/01/2023	Medical Mutual of Ohio	OH	QA/G	CMM	262,793,373						
29076		01/01/2023	Medical Mutual of Ohio	OH	SSL/G	CMM	20,619,036						
29076		01/01/2023	Medical Mutual of Ohio	OH	ASL/G	CMM	585,946						
0899999. General Account - Authorized U.S. Non-Affiliates							283,998,355	0	0	0	0	0	0
1099999. Total General Account - Authorized Non-Affiliates							283,998,355	0	0	0	0	0	0
1199999. Total General Account Authorized							283,998,355	0	0	0	0	0	0
1499999. Total General Account - Unauthorized U.S. Affiliates							0	0	0	0	0	0	0
1799999. Total General Account - Unauthorized Non-U.S. Affiliates							0	0	0	0	0	0	0
1899999. Total General Account - Unauthorized Affiliates							0	0	0	0	0	0	0
2199999. Total General Account - Unauthorized Non-Affiliates							0	0	0	0	0	0	0
2299999. Total General Account Unauthorized							0	0	0	0	0	0	0
2599999. Total General Account - Certified U.S. Affiliates							0	0	0	0	0	0	0
2899999. Total General Account - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0
2999999. Total General Account - Certified Affiliates							0	0	0	0	0	0	0
3299999. Total General Account - Certified Non-Affiliates							0	0	0	0	0	0	0
3399999. Total General Account Certified							0	0	0	0	0	0	0
3699999. Total General Account - Reciprocal Jurisdiction U.S. Affiliates							0	0	0	0	0	0	0
3999999. Total General Account - Reciprocal Jurisdiction Non-U.S. Affiliates							0	0	0	0	0	0	0
4099999. Total General Account - Reciprocal Jurisdiction Affiliates							0	0	0	0	0	0	0
4399999. Total General Account - Reciprocal Jurisdiction Non-Affiliates							0	0	0	0	0	0	0
4499999. Total General Account Reciprocal Jurisdiction							0	0	0	0	0	0	0
4599999. Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction and Certified							283,998,355	0	0	0	0	0	0
4899999. Total Separate Accounts - Authorized U.S. Affiliates							0	0	0	0	0	0	0
5199999. Total Separate Accounts - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0
5299999. Total Separate Accounts - Authorized Affiliates							0	0	0	0	0	0	0
5599999. Total Separate Accounts - Authorized Non-Affiliates							0	0	0	0	0	0	0
5699999. Total Separate Accounts Authorized							0	0	0	0	0	0	0
5999999. Total Separate Accounts - Unauthorized U.S. Affiliates							0	0	0	0	0	0	0
6299999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates							0	0	0	0	0	0	0
6399999. Total Separate Accounts - Unauthorized Affiliates							0	0	0	0	0	0	0
6699999. Total Separate Accounts - Unauthorized Non-Affiliates							0	0	0	0	0	0	0
6799999. Total Separate Accounts Unauthorized							0	0	0	0	0	0	0
7099999. Total Separate Accounts - Certified U.S. Affiliates							0	0	0	0	0	0	0
7399999. Total Separate Accounts - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0
7499999. Total Separate Accounts - Certified Affiliates							0	0	0	0	0	0	0
7799999. Total Separate Accounts - Certified Non-Affiliates							0	0	0	0	0	0	0
7899999. Total Separate Accounts Certified							0	0	0	0	0	0	0
8199999. Total Separate Accounts - Reciprocal Jurisdiction U.S. Affiliates							0	0	0	0	0	0	0
8499999. Total Separate Accounts - Reciprocal Jurisdiction Non-U.S. Affiliates							0	0	0	0	0	0	0
8599999. Total Separate Accounts - Reciprocal Jurisdiction Affiliates							0	0	0	0	0	0	0
8899999. Total Separate Accounts - Reciprocal Jurisdiction Non-Affiliates							0	0	0	0	0	0	0
8999999. Total Separate Accounts Reciprocal Jurisdiction							0	0	0	0	0	0	0
9099999. Total Separate Accounts Authorized, Unauthorized, Reciprocal Jurisdiction and Certified							0	0	0	0	0	0	0
9199999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)							283,998,355	0	0	0	0	0	0
9299999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999)							0	0	0	0	0	0	0
9999999 - Totals							283,998,355	0	0	0	0	0	0

Schedule S - Part 4

N O N E

Schedule S - Part 4 - Bank Footnote

N O N E

Schedule S - Part 5

N O N E

Schedule S - Part 5 - Bank Footnote

N O N E

SCHEDULE S - PART 6

Five Year Exhibit of Reinsurance Ceded Business (\$000 Omitted)

	1 2023	2 2022	3 2021	4 2020	5 2019
A. OPERATIONS ITEMS					
1. Premiums	283,998	268,647	256,717	239,090	23,168
2. Title XVIII - Medicare	0	0	0	0	0
3. Title XIX - Medicaid	0	0	0	0	0
4. Commissions and reinsurance expense allowance					
5. Total hospital and medical expenses					
B. BALANCE SHEET ITEMS					
6. Premiums receivable					
7. Claims payable	34,740	34,866	33,580	31,768	34,100
8. Reinsurance recoverable on paid losses	1,062	502	66	76	60
9. Experience rating refunds due or unpaid					
10. Commissions and reinsurance expense allowances due					
11. Unauthorized reinsurance offset					
12. Offset for reinsurance with Certified Reinsurers					
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
13. Funds deposited by and withheld from (F)	0	0	0	0	0
14. Letters of credit (L)	0	0	0	0	0
15. Trust agreements (T)	0	0	0	0	0
16. Other (O)	0	0	0	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
17. Multiple Beneficiary Trust				0	0
18. Funds deposited by and withheld from (F)				0	0
19. Letters of credit (L)				0	0
20. Trust agreements (T)				0	0
21. Other (O)				0	0

SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12)	23,110,228		23,110,228
2. Accident and health premiums due and unpaid (Line 15)	888,547		888,547
3. Amounts recoverable from reinsurers (Line 16.1)	1,061,539	(1,061,539)	0
4. Net credit for ceded reinsurance	XXX	1,061,539	1,061,539
5. All other admitted assets (Balance)	51,362,666		51,362,666
6. Total assets (Line 28)	76,422,979	0	76,422,979
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
7. Claims unpaid (Line 1)	10,990,410		10,990,410
8. Accrued medical incentive pool and bonus payments (Line 2)	0		0
9. Premiums received in advance (Line 8)	2,528,734		2,528,734
10. Funds held under reinsurance treaties with authorized and unauthorized reinsurers (Line 19 first inset amount plus second inset amount)	0		0
11. Reinsurance in unauthorized companies (Line 20 minus inset amount)	0		0
12. Reinsurance with Certified Reinsurers (Line 20 inset amount)			0
13. Funds held under reinsurance treaties with Certified Reinsurers (Line 19 third inset amount)	0		0
14. All other liabilities (Balance)	47,006,161		47,006,161
15. Total liabilities (Line 24)	60,525,305	0	60,525,305
16. Total capital and surplus (Line 33)	15,897,674	XXX	15,897,674
17. Total liabilities, capital and surplus (Line 34)	76,422,979	0	76,422,979
NET CREDIT FOR CEDED REINSURANCE			
18. Claims unpaid	0		
19. Accrued medical incentive pool	0		
20. Premiums received in advance	0		
21. Reinsurance recoverable on paid losses	1,061,539		
22. Other ceded reinsurance recoverables	0		
23. Total ceded reinsurance recoverables	1,061,539		
24. Premiums receivable	0		
25. Funds held under reinsurance treaties with authorized and unauthorized reinsurers	0		
26. Unauthorized reinsurance	0		
27. Reinsurance with Certified Reinsurers	0		
28. Funds held under reinsurance treaties with Certified Reinsurers	0		
29. Other ceded reinsurance payables/offsets	0		
30. Total ceded reinsurance payables/offsets	0		
31. Total net credit for ceded reinsurance	1,061,539		

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories											
		1	Direct Business Only								
			2	3	4	5	6	7	8	9	10
States, etc.		Active Status (a)	Accident and Health Premiums	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Federal Employees Health Benefits Program Premiums	Life and Annuity Premiums & Other Considerations	Property/ Casualty Premiums	Total Columns 2 Through 8	Deposit-Type Contracts
1.	Alabama	AL	N.....							0	
2.	Alaska	AK	N.....							0	
3.	Arizona	AZ	N.....							0	
4.	Arkansas	AR	N.....							0	
5.	California	CA	N.....							0	
6.	Colorado	CO	N.....							0	
7.	Connecticut	CT	N.....							0	
8.	Delaware	DE	N.....							0	
9.	District of Columbia	DC	N.....							0	
10.	Florida	FL	N.....							0	
11.	Georgia	GA	N.....							0	
12.	Hawaii	HI	N.....							0	
13.	Idaho	ID	N.....							0	
14.	Illinois	IL	N.....							0	
15.	Indiana	IN	N.....							0	
16.	Iowa	IA	N.....							0	
17.	Kansas	KS	N.....							0	
18.	Kentucky	KY	N.....							0	
19.	Louisiana	LA	N.....							0	
20.	Maine	ME	N.....							0	
21.	Maryland	MD	N.....							0	
22.	Massachusetts	MA	N.....							0	
23.	Michigan	MI	N.....							0	
24.	Minnesota	MN	N.....							0	
25.	Mississippi	MS	N.....							0	
26.	Missouri	MO	N.....							0	
27.	Montana	MT	N.....							0	
28.	Nebraska	NE	N.....							0	
29.	Nevada	NV	N.....							0	
30.	New Hampshire	NH	N.....							0	
31.	New Jersey	NJ	N.....							0	
32.	New Mexico	NM	N.....							0	
33.	New York	NY	N.....							0	
34.	North Carolina	NC	N.....							0	
35.	North Dakota	ND	N.....							0	
36.	Ohio	OH	L.....	353, 197, 731						353, 197, 731	
37.	Oklahoma	OK	N.....							0	
38.	Oregon	OR	N.....							0	
39.	Pennsylvania	PA	N.....							0	
40.	Rhode Island	RI	N.....							0	
41.	South Carolina	SC	N.....							0	
42.	South Dakota	SD	N.....							0	
43.	Tennessee	TN	N.....							0	
44.	Texas	TX	N.....							0	
45.	Utah	UT	N.....							0	
46.	Vermont	VT	N.....							0	
47.	Virginia	VA	N.....							0	
48.	Washington	WA	N.....							0	
49.	West Virginia	WV	N.....							0	
50.	Wisconsin	WI	N.....							0	
51.	Wyoming	WY	N.....							0	
52.	American Samoa	AS	N.....							0	
53.	Guam	GU	N.....							0	
54.	Puerto Rico	PR	N.....							0	
55.	U.S. Virgin Islands ..	VI	N.....							0	
56.	Northern Mariana Islands	MP	N.....							0	
57.	Canada	CAN	N.....							0	
58.	Aggregate Other Aliens	OT	XXX.....	0	0	0	0	0	0	0	0
59.	Subtotal	XXX	353, 197, 731	0	0	0	0	0	0	353, 197, 731	0
60.	Reporting Entity Contributions for Employee Benefit Plans	XXX								0	
61.	Totals (Direct Business)	XXX	353, 197, 731	0	0	0	0	0	0	353, 197, 731	0
DETAILS OF WRITE-INS											
58001.	.....	XXX.....									
58002.	.....	XXX.....									
58003.	.....	XXX.....									
58998.	Summary of remaining write-ins for Line 58 from overflow page	XXX.....	0	0	0	0	0	0	0	0	0
58999.	Totals (Lines 58001 through 58003 plus 58998)(Line 58 above)	XXX	0	0	0	0	0	0	0	0	0

(a) Active Status Counts:

1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 1

2. R - Registered - Non-domiciled RRGs..... 0

3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state. 0

4. Q - Qualified - Qualified or accredited reinsurer..... 0

5. N - None of the above - Not allowed to write business in the state..... 56

(b) Explanation of basis of allocation by states, premiums by state, etc.
N/A

Schedule T - Part 2 - Interstate Compact

N O N E

Schedule Y - Part 1
N O N E

Schedule Y - Part 1A - Detail of Insurance Holding Company System

N O N E

Schedule Y - Part 1A - Explanations

N O N E

Schedule Y - Part 2

N O N E

Schedule Y - Part 3

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

REQUIRED FILINGS

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED 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.

		Responses
MARCH FILING		
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	SEE EXPLANATION
2.	Will an actuarial opinion be filed by March 1?	SEE EXPLANATION
3.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?.....	WAIVED
4.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	SEE EXPLANATION
APRIL FILING		
5.	Will Management's Discussion and Analysis be filed by April 1?	WAIVED
6.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
7.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
JUNE FILING		
8.	Will an audited financial report be filed by June 1?	SEE EXPLANATION
9.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	SEE EXPLANATION

SUPPLEMENTAL FILINGS

The following supplemental reports are required to be filed as part of your annual statement filing **if your company is engaged in the type of business covered by the supplement. 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.

MARCH FILING		
10.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
11.	Will the Supplemental Life data due March 1 be filed with the state of domicile and the NAIC?	NO
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?.....	NO
13.	Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 on Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
14.	Will the actuarial opinion on non-guaranteed elements as required in Interrogatory 3 to Exhibit 5 to Life Supplement be filed with the state of domicile and electronically with the NAIC by March 1?.....	NO
15.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?.....	NO
16.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	NO
17.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
18.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO
19.	Will the Market Conduct Annual Statement (MCAS) Premium Exhibit for Year be filed with the applicable jurisdictions and with the NAIC by March 1?.....	
APRIL FILING		
20.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
21.	Will the Supplemental Life data due April 1 be filed with the state of domicile and the NAIC?	NO
22.	Will the Supplemental Health Care Exhibit (Parts 1 and 2) be filed with the state of domicile and the NAIC by April 1?	YES
23.	Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1?	NO
AUGUST FILING		
24.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES
Explanations:		
1.	By 3/31/2024	
2.	By 3/31/2024	
4.	By 3/31/2024	
8.	By 6/30/2024	
9.	By 6/30/2024	
10.		
11.		
12.		
13.		
14.		
15.		
16.		
17.		
18.		
20.		
21.		
23.		

Bar Codes:

3.	Risk-based Capital Report [Document Identifier 390]	
5.	Management's Discussion and Analysis [Document Identifier 350]	
10.	Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]	
11.	Life Supplement [Document Identifier 205]	
12.	SIS Stockholder Information Supplement [Document Identifier 420]	
13.	Participating Opinion for Exhibit 5 [Document Identifier 371]	
14.	Non-Guaranteed Opinion for Exhibit 5 [Document Identifier 370]	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

15.	Medicare Part D Coverage Supplement [Document Identifier 365]	 001222023365000000
16.	Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]	 001222023224000000
17.	Relief from the one-year cooling off period for independent CPA [Document Identifier 225]	 001222023225000000
18.	Relief from the Requirements for Audit Committees [Document Identifier 226]	 001222023226000000
20.	Long-Term Care Experience Reporting Forms [Document Identifier 306]	 001222023306000000
21.	Life Supplement [Document Identifier 211]	 001222023211000000
23.	Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 [Document Identifier 290]	 001222023290000000

NONE

SUMMARY INVESTMENT SCHEDULE

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement			
	1	2	3	4	5	6
	Amount	Percentage of Column 1 Line 13	Amount	Securities Lending Reinvested Collateral Amount	Total (Col. 3 + 4) Amount	Percentage of Column 5 Line 13
1. Long-Term Bonds (Schedule D, Part 1):						
1.01 U.S. governments	12,332,472	53.364	12,332,472		12,332,472	53.364
1.02 All other governments		0.000			0	0.000
1.03 U.S. states, territories and possessions, etc. guaranteed		0.000			0	0.000
1.04 U.S. political subdivisions of states, territories, and possessions, guaranteed		0.000			0	0.000
1.05 U.S. special revenue and special assessment obligations, etc. non-guaranteed	243,855	1.055	243,855		243,855	1.055
1.06 Industrial and miscellaneous	2,339,597	10.124	2,339,597		2,339,597	10.124
1.07 Hybrid securities		0.000			0	0.000
1.08 Parent, subsidiaries and affiliates		0.000			0	0.000
1.09 SVO identified funds		0.000			0	0.000
1.10 Unaffiliated bank loans		0.000			0	0.000
1.11 Unaffiliated certificates of deposit		0.000			0	0.000
1.12 Total long-term bonds	14,915,924	64.543	14,915,924	0	14,915,924	64.543
2. Preferred stocks (Schedule D, Part 2, Section 1):						
2.01 Industrial and miscellaneous (Unaffiliated)		0.000			0	0.000
2.02 Parent, subsidiaries and affiliates		0.000			0	0.000
2.03 Total preferred stocks	0	0.000	0	0	0	0.000
3. Common stocks (Schedule D, Part 2, Section 2):						
3.01 Industrial and miscellaneous Publicly traded (Unaffiliated)		0.000			0	0.000
3.02 Industrial and miscellaneous Other (Unaffiliated)		0.000			0	0.000
3.03 Parent, subsidiaries and affiliates Publicly traded		0.000			0	0.000
3.04 Parent, subsidiaries and affiliates Other		0.000			0	0.000
3.05 Mutual funds		0.000			0	0.000
3.06 Unit investment trusts		0.000			0	0.000
3.07 Closed-end funds		0.000			0	0.000
3.08 Exchange traded funds		0.000			0	0.000
3.09 Total common stocks	0	0.000	0	0	0	0.000
4. Mortgage loans (Schedule B):						
4.01 Farm mortgages	0	0.000			0	0.000
4.02 Residential mortgages	0	0.000			0	0.000
4.03 Commercial mortgages	0	0.000			0	0.000
4.04 Mezzanine real estate loans	0	0.000			0	0.000
4.05 Total valuation allowance		0.000			0	0.000
4.06 Total mortgage loans	0	0.000	0	0	0	0.000
5. Real estate (Schedule A):						
5.01 Properties occupied by company		0.000	0		0	0.000
5.02 Properties held for production of income		0.000	0		0	0.000
5.03 Properties held for sale		0.000	0		0	0.000
5.04 Total real estate	0	0.000	0	0	0	0.000
6. Cash, cash equivalents and short-term investments:						
6.01 Cash (Schedule E, Part 1)	73,006	0.316	73,006		73,006	0.316
6.02 Cash equivalents (Schedule E, Part 2)	8,121,298	35.142	8,121,298		8,121,298	35.142
6.03 Short-term investments (Schedule DA)		0.000	0		0	0.000
6.04 Total cash, cash equivalents and short-term investments	8,194,304	35.457	8,194,304	0	8,194,304	35.457
7. Contract loans	0	0.000	0		0	0.000
8. Derivatives (Schedule DB)	0	0.000	0		0	0.000
9. Other invested assets (Schedule BA)	0	0.000	0		0	0.000
10. Receivables for securities	0	0.000	0		0	0.000
11. Securities Lending (Schedule DL, Part 1).....	0	0.000	0	XXX	XXX	XXX
12. Other invested assets (Page 2, Line 11)	0	0.000	0		0	0.000
13. Total invested assets	23,110,228	100.000	23,110,228	0	23,110,228	100.000

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SCHEDULE A - VERIFICATION BETWEEN YEARS

Real Estate

1. Book/adjusted carrying value, December 31 of prior year

2. Cost of acquired:

2.1 Actual cost at time of acquisition (Part 2, Column 6)

2.2 Additional investment made after acquisition (Part 2, Column 9)

3. Current year change in encumbrances:

3.1 Totals, Part 1, Column 13

3.2 Totals, Part 3, Column 11

4. Total gain (loss) on disposals, Part 3, Column 18

5. Deduct amounts received on disposals, Part 3, Column 15

6. Total foreign exchange change in book/adjusted carrying value:

6.1 Totals, Part 1, Column 15

6.2 Totals, Part 3, Column 13

7. Deduct current year's other than temporary impairment recognized:

7.1 Totals, Part 1, Column 12

7.2 Totals, Part 3, Column 10

8. Deduct current year's depreciation:

8.1 Totals, Part 1, Column 11

8.2 Totals, Part 3, Column 9

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 BETWEEN YEARS

Mortgage Loans

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 (Part 2, Column 7)

2.2 Additional investment made after acquisition (Part 2, Column 8)

3. Capitalized deferred interest and other:

3.1 Totals, Part 1, Column 12

3.2 Totals, Part 3, Column 11

4. Accrual of discount

5. Unrealized valuation increase/(decrease):

5.1 Totals, Part 1, Column 9

5.2 Totals, Part 3, Column 8

6. Total gain (loss) on disposals, Part 3, Column 18

7. Deduct amounts received on disposals, Part 3, Column 15

8. Deduct amortization of premium and mortgage interest points and commitment fees

9. Total foreign exchange change in book value/recorded investment excluding accrued interest:

9.1 Totals, Part 1, Column 13

9.2 Totals, Part 3, Column 13

10. Deduct current year's other than temporary impairment recognized:

10.1 Totals, Part 1, Column 11

10.2 Totals, Part 3, Column 10

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 12)

14. Deduct total nonadmitted amounts

15. Statement value of mortgages owned at end of current period (Line 13 minus Line 14)

NONE

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SCHEDULE BA - VERIFICATION BETWEEN YEARS

Other Long-Term Invested Assets

1.	Book/adjusted carrying value, December 31 of prior year	
2.	Cost of acquired:	
	2.1 Actual cost at time of acquisition (Part 2, Column 8)	
	2.2 Additional investment made after acquisition (Part 2, Column 9)	
3.	Capitalized deferred interest and other:	
	3.1 Totals, Part 1, Column 16	
	3.2 Totals, Part 3, Column 12	
4.	Accrual of discount	
5.	Unrealized valuation increase/(decrease):	
	5.1 Totals, Part 1, Column 13	
	5.2 Totals, Part 3, Column 9	
6.	Total gain (loss) on disposals, Part 3, Column 19	
7.	Deduct amounts received on disposals, Part 3, Column 16	
8.	Deduct amortization of premium and depreciation	
9.	Total foreign exchange change in book/adjusted carrying value:	
	9.1 Totals, Part 1, Column 17	
	9.2 Totals, Part 3, Column 14	
10.	Deduct current year's other than temporary impairment recognized:	
	10.1 Totals, Part 1, Column 15	
	10.2 Totals, Part 3, Column 11	
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 BETWEEN YEARS

Bonds and Stocks

1.	Book/adjusted carrying value, December 31 of prior year	13,934,770
2.	Cost of bonds and stocks acquired, Part 3, Column 7	5,710,253
3.	Accrual of discount	82,869
4.	Unrealized valuation increase/(decrease):	
	4.1. Part 1, Column 12	0
	4.2. Part 2, Section 1, Column 15	
	4.3. Part 2, Section 2, Column 13	
	4.4. Part 4, Column 11	0
5.	Total gain (loss) on disposals, Part 4, Column 19	(7,154)
6.	Deduction consideration for bonds and stocks disposed of, Part 4, Column 7	4,793,241
7.	Deduct amortization of premium	11,573
8.	Total foreign exchange change in book/adjusted carrying value:	
	8.1. Part 1, Column 15	0
	8.2. Part 2, Section 1, Column 19	
	8.3. Part 2, Section 2, Column 16	
	8.4. Part 4, Column 15	0
9.	Deduct current year's other than temporary impairment recognized:	
	9.1. Part 1, Column 14	0
	9.2. Part 2, Section 1, Column 17	
	9.3. Part 2, Section 2, Column 14	
	9.4. Part 4, Column 13	0
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees, Note 5Q, Line 2	0
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	14,915,924
12.	Deduct total nonadmitted amounts	0
13.	Statement value at end of current period (Line 11 minus Line 12)	14,915,924

SCHEDULE D - SUMMARY BY COUNTRY

Long-Term Bonds and Stocks OWNED December 31 of Current Year

Description		1 Book/Adjusted Carrying Value	2 Fair Value	3 Actual Cost	4 Par Value of Bonds
BONDS					
Governments (Including all obligations guaranteed by governments)	1. United States	12,332,472	12,273,149	12,261,137	12,575,000
	2. Canada				
	3. Other Countries				
	4. Totals	12,332,472	12,273,149	12,261,137	12,575,000
U.S. States, Territories and Possessions (Direct and guaranteed)	5. Totals				
U.S. Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	6. Totals				
U.S. Special Revenue and Special Assessment Obligations and all Non-Guaranteed Obligations of Agencies and Authorities of Governments and their Political Subdivisions	7. Totals	243,855	237,695	236,110	250,000
Industrial and Miscellaneous, SVO Identified Funds, Unaffiliated Bank Loans, Unaffiliated Certificates of Deposit and Hybrid Securities (unaffiliated)	8. United States	2,339,597	2,320,576	2,339,818	2,375,000
	9. Canada				
	10. Other Countries				
	11. Totals	2,339,597	2,320,576	2,339,818	2,375,000
Parent, Subsidiaries and Affiliates	12. Totals				
	13. Total Bonds	14,915,924	14,831,419	14,837,064	15,200,000
PREFERRED STOCKS					
Industrial and Miscellaneous (unaffiliated)	14. United States				
	15. Canada				
	16. Other Countries				
	17. Totals	0	0	0	
Parent, Subsidiaries and Affiliates	18. Totals				
	19. Total Preferred Stocks	0	0	0	
COMMON STOCKS					
Industrial and Miscellaneous (unaffiliated), Mutual Funds, Unit Investment Trusts, Closed-End Funds and Exchange Traded Funds	20. United States				
	21. Canada				
	22. Other Countries				
	23. Totals	0	0	0	
Parent, Subsidiaries and Affiliates	24. Totals				
	25. Total Common Stocks	0	0	0	
	26. Total Stocks	0	0	0	
	27. Total Bonds and Stocks	14,915,924	14,831,419	14,837,064	

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SCHEDULE D - PART 1A - SECTION 1

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
1. U.S. Governments												
1.1 NAIC 1	3,414,492	8,917,980	0	0	0	XXX	12,332,472	82.7	8,045,223	56.8	12,332,472	0
1.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.7 Totals	3,414,492	8,917,980	0	0	0	XXX	12,332,472	82.7	8,045,223	56.8	12,332,472	0
2. All Other Governments												
2.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3. U.S. States, Territories and Possessions etc., Guaranteed												
3.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4. U.S. Political Subdivisions of States, Territories and Possessions , Guaranteed												
4.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5. U.S. Special Revenue & Special Assessment Obligations, etc., Non-Guaranteed												
5.1 NAIC 1	0	243,855	0	0	0	XXX	243,855	1.6	2,262,969	16.0	243,855	0
5.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.7 Totals	0	243,855	0	0	0	XXX	243,855	1.6	2,262,969	16.0	243,855	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
6. Industrial & Miscellaneous (Unaffiliated)												
6.1 NAIC 1	501,233	1,688,162	0	0	0	XXX	2,189,395	14.7	3,700,015	26.1	2,189,395	0
6.2 NAIC 2	150,202	0	0	0	0	XXX	150,202	1.0	150,714	1.1	150,202	0
6.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.7 Totals	651,435	1,688,162	0	0	0	XXX	2,339,597	15.7	3,850,729	27.2	2,339,597	0
7. Hybrid Securities												
7.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8. Parent, Subsidiaries and Affiliates												
8.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
9. SVO Identified Funds												
9.1 NAIC 1	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
9.2 NAIC 2	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
9.3 NAIC 3	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
9.4 NAIC 4	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
9.5 NAIC 5	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
9.6 NAIC 6	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
9.7 Totals	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	0	0
10. Unaffiliated Bank Loans												
10.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
11. Unaffiliated Certificates of Deposit												
11.1 NAIC 1	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
11.2 NAIC 2	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
11.3 NAIC 3	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
11.4 NAIC 4	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
11.5 NAIC 5	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
11.6 NAIC 6	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
11.7 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SCHEDULE D - PART 1A - SECTION 1 (Continued)

Quality and Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Types of Issues and NAIC Designations

NAIC Designation	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.7	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed (a)
12. Total Bonds Current Year												
12.1 NAIC 1	(d) 3,915,725	 10,849,998	 0	 0	 0	 0	 14,765,722	 99.0	 XXX.	 XXX.	 14,765,722	 0
12.2 NAIC 2	(d) 150,202	 0	 0	 0	 0	 0	 150,202	 1.0	 XXX.	 XXX.	 150,202	 0
12.3 NAIC 3	(d) 0	 0	 0	 0	 0	 0	 0	 0.0	 XXX.	 XXX.	 0	 0
12.4 NAIC 4	(d) 0	 0	 0	 0	 0	 0	 0	 0.0	 XXX.	 XXX.	 0	 0
12.5 NAIC 5	(d) 0	 0	 0	 0	 0	 0	(c) 0	 0.0	 XXX.	 XXX.	 0	 0
12.6 NAIC 6	(d) 0	 0	 0	 0	 0	 0	(c) 0	 0.0	 XXX.	 XXX.	 0	 0
12.7 Totals	 4,065,926	 10,849,998	 0	 0	 0	 0	(b) 14,915,924	 100.0	 XXX.	 XXX.	 14,915,924	 0
12.8 Line 12.7 as a % of Col. 7	 27.3	 72.7	 0.0	 0.0	 0.0	 0.0	 100.0	 XXX	 XXX	 XXX	 100.0	 0.0
13. Total Bonds Prior Year												
13.1 NAIC 1	 4,868,606	 9,139,601	 0	 0	 0	 0	 XXX.	 XXX.	 14,008,206	 98.9	 14,008,206	 0
13.2 NAIC 2	 0	 150,714	 0	 0	 0	 0	 XXX.	 XXX.	 150,714	 1.1	 150,714	 0
13.3 NAIC 3							 XXX.	 XXX.	 0	 0.0	 0	 0
13.4 NAIC 4							 XXX.	 XXX.	 0	 0.0	 0	 0
13.5 NAIC 5							 XXX.	 XXX.	(c) 0	 0.0	 0	 0
13.6 NAIC 6							 XXX.	 XXX.	(c) 0	 0.0	 0	 0
13.7 Totals	 4,868,606	 9,290,314	 0	 0	 0	 0	 XXX.	 XXX.	(b) 14,158,920	 100.0	 14,158,920	 0
13.8 Line 13.7 as a % of Col. 9	 34.4	 65.6	 0.0	 0.0	 0.0	 0.0	 XXX	 XXX	 100.0	 XXX	 100.0	 0.0
14. Total Publicly Traded Bonds												
14.1 NAIC 1	 3,915,725	 10,849,998	 0	 0	 0	 0	 14,765,722	 99.0	 14,008,206	 98.9	 14,765,722	 XXX.
14.2 NAIC 2	 150,202	 0	 0	 0	 0	 0	 150,202	 1.0	 150,714	 1.1	 150,202	 XXX.
14.3 NAIC 3	 0	 0	 0	 0	 0	 0	 0	 0.0	 0	 0.0	 0	 XXX.
14.4 NAIC 4	 0	 0	 0	 0	 0	 0	 0	 0.0	 0	 0.0	 0	 XXX.
14.5 NAIC 5	 0	 0	 0	 0	 0	 0	 0	 0.0	 0	 0.0	 0	 XXX.
14.6 NAIC 6	 0	 0	 0	 0	 0	 0	 0	 0.0	 0	 0.0	 0	 XXX.
14.7 Totals	 4,065,926	 10,849,998	 0	 0	 0	 0	 14,915,924	 100.0	 14,158,920	 100.0	 14,915,924	 XXX.
14.8 Line 14.7 as a % of Col. 7	 27.3	 72.7	 0.0	 0.0	 0.0	 0.0	 100.0	 XXX.	 XXX.	 XXX.	 100.0	 XXX.
14.9 Line 14.7 as a % of Line 12.7, Col. 7, Section 12	 27.3	 72.7	 0.0	 0.0	 0.0	 0.0	 100.0	 XXX	 XXX	 XXX	 100.0	 XXX
15. Total Privately Placed Bonds												
15.1 NAIC 1	 0	 0	 0	 0	 0	 0	 0	 0.0	 0	 0.0	 XXX.	 0
15.2 NAIC 2	 0	 0	 0	 0	 0	 0	 0	 0.0	 0	 0.0	 XXX.	 0
15.3 NAIC 3	 0	 0	 0	 0	 0	 0	 0	 0.0	 0	 0.0	 XXX.	 0
15.4 NAIC 4	 0	 0	 0	 0	 0	 0	 0	 0.0	 0	 0.0	 XXX.	 0
15.5 NAIC 5	 0	 0	 0	 0	 0	 0	 0	 0.0	 0	 0.0	 XXX.	 0
15.6 NAIC 6	 0	 0	 0	 0	 0	 0	 0	 0.0	 0	 0.0	 XXX.	 0
15.7 Totals	 0	 0	 0	 0	 0	 0	 0	 0.0	 0	 0.0	 XXX.	 0
15.8 Line 15.7 as a % of Col. 7	 0.0	 0.0	 0.0	 0.0	 0.0	 0.0	 0.0	 XXX.	 XXX.	 XXX.	 XXX.	 0.0
15.9 Line 15.7 as a % of Line 12.7, Col. 7, Section 12	 0.0	 0.0	 0.0	 0.0	 0.0	 0.0	 0.0	 XXX	 XXX	 XXX	 XXX	 0.0

(a) Includes \$0 freely tradable under SEC Rule 144 or qualified for resale under SEC Rule 144A.

(b) Includes \$0 current year of bonds with Z designations and \$ prior year of bonds with Z designations. The letter "Z" means the NAIC designation was not assigned by the Securities Valuation Office (SVO) at the date of the statement.

(c) Includes \$0 current year, \$ prior year of bonds with 5GI designations and \$0 current year, \$ prior year of bonds with 6* designations. "5GI" means the NAIC designation was assigned by the (SVO) in reliance on the insurer's certification that the issuer is current in all principal and interest payments. "6*" means the NAIC designation was assigned by the SVO due to inadequate certification of principal and interest payments.

(d) 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

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SCHEDULE D - PART 1A - SECTION 2

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.09	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed
1. U.S. Governments												
1.01 Issuer Obligations	3,414,492	8,917,980	0	0	0	XXX	12,332,472	82.7	8,045,223	56.8	12,332,472	0
1.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.04 Other Loan-Backed and Structured Securities ...	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
1.05 Totals	3,414,492	8,917,980	0	0	0	XXX	12,332,472	82.7	8,045,223	56.8	12,332,472	0
2. All Other Governments												
2.01 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.04 Other Loan-Backed and Structured Securities ...	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
2.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3. U.S. States, Territories and Possessions, Guaranteed												
3.01 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.04 Other Loan-Backed and Structured Securities ...	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
3.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4. U.S. Political Subdivisions of States, Territories and Possessions, Guaranteed												
4.01 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.04 Other Loan-Backed and Structured Securities ...	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
4.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5. U.S. Special Revenue & Special Assessment Obligations etc., Non-Guaranteed												
5.01 Issuer Obligations	0	243,855	0	0	0	XXX	243,855	1.6	2,262,969	16.0	243,855	0
5.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.04 Other Loan-Backed and Structured Securities ...	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
5.05 Totals	0	243,855	0	0	0	XXX	243,855	1.6	2,262,969	16.0	243,855	0
6. Industrial and Miscellaneous												
6.01 Issuer Obligations	651,435	1,688,162	0	0	0	XXX	2,339,597	15.7	3,850,729	27.2	2,339,597	0
6.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.04 Other Loan-Backed and Structured Securities ...	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
6.05 Totals	651,435	1,688,162	0	0	0	XXX	2,339,597	15.7	3,850,729	27.2	2,339,597	0
7. Hybrid Securities												
7.01 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.04 Other Loan-Backed and Structured Securities ...	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
7.05 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8. Parent, Subsidiaries and Affiliates												
8.01 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.04 Other Loan-Backed and Structured Securities ...	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.05 Affiliated Bank Loans - Issued	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.06 Affiliated Bank Loans - Acquired	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
8.07 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SCHEDULE D - PART 1A - SECTION 2 (Continued)

Maturity Distribution of All Bonds Owned December 31, at Book/Adjusted Carrying Values by Major Type and Subtype of Issues

Distribution by Type	1 1 Year or Less	2 Over 1 Year Through 5 Years	3 Over 5 Years Through 10 Years	4 Over 10 Years Through 20 Years	5 Over 20 Years	6 No Maturity Date	7 Total Current Year	8 Col. 7 as a % of Line 12.09	9 Total from Col. 7 Prior Year	10 % From Col. 8 Prior Year	11 Total Publicly Traded	12 Total Privately Placed
9. SVO Identified Funds												
9.01 Exchange Traded Funds Identified by the SVO	XXX	XXX	XXX	XXX	XXX		0	0.0	0	0.0	0	0
10. Unaffiliated Bank Loans												
10.01 Unaffiliated Bank Loans - Issued	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.02 Unaffiliated Bank Loans - Acquired	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
10.03 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0	0	0
11. Unaffiliated Certificates of Deposit												
11.01 Totals	0	0	0	0	0	XXX	0	0.0	0	0.0		0
12. Total Bonds Current Year												
12.01 Issuer Obligations	4,065,926	10,849,998	0	0	0	XXX	14,915,924	100.0	XXX	XXX	14,915,924	0
12.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	0	0.0	XXX	XXX	0	0
12.06 Affiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.07 Unaffiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.08 Unaffiliated Certificates of Deposit	0	0	0	0	0	XXX	0	0.0	XXX	XXX	0	0
12.09 Totals	4,065,926	10,849,998	0	0	0	0	14,915,924	100.0	XXX	XXX	14,915,924	0
12.10 Line 12.09 as a % of Col. 7	27.3	72.7	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	0.0
13. Total Bonds Prior Year												
13.01 Issuer Obligations	4,868,606	9,290,314	0	0	0	XXX	XXX	XXX	14,158,920	100.0	14,158,920	0
13.02 Residential Mortgage-Backed Securities						XXX	XXX	XXX	0	0.0	0	0
13.03 Commercial Mortgage-Backed Securities						XXX	XXX	XXX	0	0.0	0	0
13.04 Other Loan-Backed and Structured Securities						XXX	XXX	XXX	0	0.0	0	0
13.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX		XXX	XXX	0	0.0	0	0
13.06 Affiliated Bank Loans						XXX	XXX	XXX	0	0.0	0	0
13.07 Unaffiliated Bank Loans						XXX	XXX	XXX	0	0.0	0	0
13.08 Unaffiliated Certificates of Deposit						XXX	XXX	XXX	0	0.0	0	0
13.09 Totals	4,868,606	9,290,314	0	0	0	0	XXX	XXX	14,158,920	100.0	14,158,920	0
13.10 Line 13.09 as a % of Col. 9	34.4	65.6	0.0	0.0	0.0	0.0	XXX	XXX	100.0	XXX	100.0	0.0
14. Total Publicly Traded Bonds												
14.01 Issuer Obligations	4,065,926	10,849,998	0	0	0	XXX	14,915,924	100.0	14,158,920	100.0	14,915,924	XXX
14.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
14.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
14.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
14.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX		0	0.0	0	0.0	0	XXX
14.06 Affiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
14.07 Unaffiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
14.08 Unaffiliated Certificates of Deposit	0	0	0	0	0	XXX	0	0.0	0	0.0	0	XXX
14.09 Totals	4,065,926	10,849,998	0	0	0	0	14,915,924	100.0	14,158,920	100.0	14,915,924	XXX
14.10 Line 14.09 as a % of Col. 7	27.3	72.7	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
14.11 Line 14.09 as a % of Line 12.09, Col. 7, Section 12	27.3	72.7	0.0	0.0	0.0	0.0	100.0	XXX	XXX	XXX	100.0	XXX
15. Total Privately Placed Bonds												
15.01 Issuer Obligations	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.02 Residential Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.03 Commercial Mortgage-Backed Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.04 Other Loan-Backed and Structured Securities	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.05 SVO Identified Funds	XXX	XXX	XXX	XXX	XXX	0	0	0.0	0	0.0	XXX	0
15.06 Affiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.07 Unaffiliated Bank Loans	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.08 Unaffiliated Certificates of Deposit	0	0	0	0	0	XXX	0	0.0	0	0.0	XXX	0
15.09 Totals	0	0	0	0	0	0	0	0.0	0	0.0	XXX	0
15.10 Line 15.09 as a % of Col. 7	0.0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0
15.11 Line 15.09 as a % of Line 12.09, Col. 7, Section 12	0.0	0.0	0.0	0.0	0.0	0.0	0.0	XXX	XXX	XXX	XXX	0.0

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SCHEDULE DA - VERIFICATION BETWEEN YEARS

Short-Term Investments

	1	2	3	4	5
	Total	Bonds	Mortgage Loans	Other Short-term Investment Assets (a)	Investments in Parent, Subsidiaries and Affiliates
1. Book/adjusted carrying value, December 31 of prior year	224,150	224,150	0	0	0
2. Cost of short-term investments acquired	0	0	0	0	0
3. Accrual of discount	850	850	0	0	0
4. Unrealized valuation increase/(decrease)	0	0	0	0	0
5. Total gain (loss) on disposals	0	0	0	0	0
6. Deduct consideration received on disposals	225,000	225,000	0	0	0
7. Deduct amortization of premium	0	0	0	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0	0	0	0
9. Deduct current year's other than temporary impairment recognized	0	0	0	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	0	0	0	0	0
11. Deduct total nonadmitted amounts	0	0	0	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	0	0	0	0	0

(a) Indicate the category of such assets, for example, joint ventures, transportation equipment:

Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards

N O N E

Schedule DB - Part B - Verification - Futures Contracts

N O N E

Schedule DB - Part C - Section 1 - Replication (Synthetic Asset) Transactions (RSATs) Open

N O N E

Schedule DB-Part C-Section 2-Reconciliation of Replication (Synthetic Asset) Transactions Open

N O N E

Schedule DB - Verification - Book/Adjusted Carrying Value, Fair Value and Potential Exposure of
Derivatives

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SCHEDULE E - PART 2 - VERIFICATION BETWEEN YEARS

(Cash Equivalents)

	1	2	3	4
	Total	Bonds	Money Market Mutual funds	Other (a)
1. Book/adjusted carrying value, December 31 of prior year	10,102,477	0	10,102,477	0
2. Cost of cash equivalents acquired	0	0	0	0
3. Accrual of discount	0	0	0	0
4. Unrealized valuation increase/(decrease)	0	0	0	0
5. Total gain (loss) on disposals	(1,981,179)	0	(1,981,179)	0
6. Deduct consideration received on disposals	0	0	0	0
7. Deduct amortization of premium	0	0	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0	0	0
9. Deduct current year's other than temporary impairment recognized	0	0	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	8,121,298	0	8,121,298	0
11. Deduct total nonadmitted amounts	0	0	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	8,121,298	0	8,121,298	0

(a) Indicate the category of such investments, for example, joint ventures, transportation equipment:

Schedule A - Part 1 - Real Estate Owned

N O N E

Schedule A - Part 2 - Real Estate Acquired and Additions Made

N O N E

Schedule A - Part 3 - Real Estate Disposed

N O N E

Schedule B - Part 1 - Mortgage Loans Owned

N O N E

Schedule B - Part 2 - Mortgage Loans Acquired and Additions Made

N O N E

Schedule B - Part 3 - Mortgage Loans Disposed, Transferred or Repaid

N O N E

Schedule BA - Part 1 - Other Long-Term Invested Assets Owned

N O N E

Schedule BA - Part 2 - Other Long-Term Invested Assets Acquired and Additions Made

N O N E

Schedule BA - Part 3 - Other Long-Term Invested Assets Disposed, Transferred or Repaid

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SCHEDULE D - PART 1

Showing All Long-Term BONDS Owned December 31 of Current Year

1	2	Codes			6	7	Fair Value		10	11	Change in Book/Adjusted Carrying Value				Interest					Dates	
		3	4	5			8	9			12	13	14	15	16	17	18	19	20	21	22
CUSIP Identification	Description	C o d e	F o r e i g n	Bond Char	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	Actual Cost	Rate Used to Obtain Fair Value	Fair Value	Par Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Rate of	Effective Rate of	When Paid	Admitted Amount Due and Accrued	Amount Received During Year	Acquired	Stated Contractual Maturity Date
912828-3W-8	US Treasury 2.75% Due 2/15/2028	..SD.			..1.A FE	235,000	..95.5900	238,975	250,000	236,451	..0	1,451	..0	..0	2.750	4.192	FA	2,578	3,438	07/03/2023	02/15/2028
912828-4M-9	US Treasury Note, 2.875%, Due 4/30/2025	..SD.			..1.A FE	505,157	..97.8160	489,080	500,000	502,301	..0	(1,683)	..0	..0	2.875	2.741	AO	2,396	14,375	05/31/2022	04/30/2025
912828-4M-9	US Treasury Note, 2.875%, Due 4/30/2025	..SD.			..1.A FE	501,681	..97.8160	489,080	500,000	500,863	..0	(635)	..0	..0	2.875	2.741	AO	2,396	14,375	05/31/2022	04/30/2025
912828-YG-9	US Treasuray Note 1.625% 9/30/2026	..SD.			..1.A FE	229,043	..93.7580	234,395	250,000	232,038	..0	2,995	..0	..0	1.625	4.425	MS	1,027	2,031	06/30/2023	09/30/2026
91282C-HA-2	US Treasury 3.5% Due 4/30/2028	..SD.			..1.A FE	242,988	..98.4100	246,025	250,000	243,656	..0	667	..0	..0	3.500	4.145	AO	1,466	4,375	07/03/2023	04/30/2028
91282C-GT-2	US Treasury 3.625% Due 3/31/2028	..SD.			..1.A FE	244,277	..98.9100	247,275	250,000	244,811	..0	533	..0	..0	3.625	4.162	MS	2,266	4,531	07/03/2023	03/31/2028
912828-2A-7	US Treasury Note 1.5% 8/15/2026	..SD.			..1.A FE	228,584	..93.5940	233,985	250,000	231,751	..0	3,167	..0	..0	1.500	4.472	FA	1,406	1,875	06/30/2023	08/15/2026
912828-YX-2	US Treasury Note 1.75% 12/31/2026	..SD.			..1.A FE	229,014	..93.6910	234,228	250,000	231,783	..0	2,769	..0	..0	1.750	4.368	JD	..0	..0	06/30/2023	12/31/2026
912828-Y9-5	US Treasury Note 1.875% 7/31/2026	..SD.			..1.A FE	231,523	..94.5980	236,495	250,000	234,279	..0	2,756	..0	..0	1.875	4.470	JJ	1,949	2,344	06/30/2023	07/31/2026
912828-U2-4	US Treasury Note 2.0% 11/15/2026	..SD.			..1.A FE	231,289	..94.5390	236,348	250,000	233,873	..0	2,584	..0	..0	2.000	4.414	MN	632	2,500	06/30/2023	11/15/2026
91282C-EF-4	US Treasury Note 2.5% 3/31/2027	..SD.			..1.A FE	234,346	..95.5740	238,935	250,000	236,274	..0	1,928	..0	..0	2.500	4.326	MS	1,571	3,125	06/30/2023	03/31/2027
91282C-FB-2	US Treasury Note 2.75% 7/31/2027	..SD.			..1.A FE	235,742	..95.9920	239,980	250,000	237,325	..0	1,583	..0	..0	2.750	4.287	JJ	2,858	3,438	06/30/2023	07/31/2027
91282C-GR-6	US Treasury Note 4.625% 3/15/2026	..SD.			..1.A FE	250,322	100.8670	252,168	250,000	250,322	..0	..0	..0	..0	4.625	4.559	MS	3,399	5,781	06/30/2023	03/15/2026
912828-6X-3	US Treasury Note, 2.125%, Due 5/31/2026	..SD.	6		..1.A FE	244,864	..95.4730	238,683	250,000	246,923	..0	1,216	..0	..0	2.125	2.654	MN	443	5,313	04/13/2022	05/31/2026
912828-ST-3	US Treasury Note, 2.625%, Due 12/31/2025	..SD.	6		..1.A FE	250,206	..96.9060	242,265	250,000	250,116	..0	(56)	..0	..0	2.625	2.601	JD	..0	6,563	04/13/2022	12/31/2025
912828-3P-3	US Treasury Notes, 2.25%, Due 12/31/2024	..SD.	6		..1.A FE	496,622	..97.5330	487,665	500,000	498,731	..0	1,238	..0	..0	2.250	2.509	JD	..0	11,250	04/13/2022	12/31/2024
912828-HU-5	US Treasury Notes, 2.5%, Due 5/15/2024	..SD.	6		..1.A FE	501,388	..99.0230	495,115	500,000	500,247	..0	(671)	..0	..0	2.500	2.362	MN	1,597	12,500	04/13/2022	05/15/2024
912828-3F-5	US Treasury Note 2.25% 11/15/2027	..SD.			..1.A FE	230,361	..94.0230	235,058	250,000	232,418	..0	2,057	..0	..0	2.250	4.237	MN	711	2,813	10/13/2023	11/30/2027
912828-5N-6	USA Treasury Notes, 2.875%, Due 11/30/2	..SD.			..1.A FE	400,891	..97.4140	389,656	400,000	400,494	..0	(250)	..0	..0	2.875	2.808	MN	979	11,500	05/31/2022	11/30/2025
91282C-EN-7	USA Treasury Bond 2.75% Due 4/30/2027	..SD.			..1.A FE	93,516	..96.1910	96,191	100,000	93,877	..0	361	..0	..0	2.750	4.756	AO	461	1,375	10/13/2023	04/30/2027
91282C-FZ-9	USA Treasury Bond 3.875% Due 11/30/2027	..SD.			..1.A FE	145,330	..99.7890	149,684	150,000	145,578	..0	248	..0	..0	3.875	4.707	MN	495	2,906	10/13/2023	11/30/2027
91282C-HX-2	USA Treasury Bond 4.375% Due 8/31/2028	..SD.			..1.A FE	197,742	102.1410	204,282	200,000	197,836	..0	94	..0	..0	4.375	4.634	FA	2,933	..0	10/13/2023	08/31/2028
912828-YQ-7	USA Treasury Bonds 1.625% Due 10/31/2026	..SD.			..1.A FE	91,063	..93.6210	93,621	100,000	91,641	..0	578	..0	..0	1.625	4.814	AO	272	813	10/13/2023	10/31/2026
91282C-HE-4	USA Treasury Bonds 3.625% Due 5/31/2028	..SD.	6		..1.A FE	191,523	..98.9410	197,882	200,000	191,908	..0	384	..0	..0	3.625	4.648	MN	614	3,625	10/13/2023	05/31/2028
912828-66-0	USA Treasury Note 2.375% Due 2/29/2024	..SD.			..1.A FE	269,371	..99.5290	273,705	275,000	274,321	..0	3,851	..0	..0	2.375	3.828	FA	2,189	6,531	09/13/2022	02/29/2024
912828-D5-6	USA Treasury Note 2.375% Due 8/15/2024	..SD.			..1.A FE	194,867	..98.3670	196,734	200,000	198,272	..0	2,652	..0	..0	2.375	3.771	FA	1,781	4,750	09/13/2022	08/15/2024
912828-5Z-9	USA Treasury Note 2.50% Due 1/31/2024	..SD.			..1.A FE	245,566	..99.7700	249,425	250,000	249,692	..0	3,213	..0	..0	2.500	3.827	JJ	2,599	6,250	09/13/2022	01/31/2024
912828-XZ-8	USA Treasury Note 2.75% Due 6/30/2025	..SD.			..1.A FE	292,031	..97.5510	292,653	300,000	295,637	..0	2,776	..0	..0	2.750	3.756	JD	..0	8,250	09/13/2022	06/30/2025
912828-Y7-9	USA Treasury Note 2.875% Due 7/31/2025	..SD.			..1.A FE	292,816	..97.6130	292,839	300,000	295,942	..0	2,425	..0	..0	2.875	3.757	JJ	3,586	8,625	09/13/2022	07/31/2025
91282C-GH-8	USA Treasury Note 3.50% 1/31/2028	..SD.			..1.A FE	242,861	..98.4220	246,055	250,000	243,565	..0	704	..0	..0	3.500	4.190	JJ	3,638	4,375	07/03/2023	01/31/2028
91282C-GH-8	USA Treasury Note 3.50% 1/31/2028	..SD.			..1.A FE	192,781	..98.4220	196,844	200,000	193,873	..0	1,091	..0	..0	3.500	4.190	JJ	2,910	3,500	07/03/2023	01/31/2028
91282C-GC-9	USA Treasury Note 3.875% Due 12/31/2027	..SD.			..1.A FE	195,914	..99.8360	199,672	200,000	196,562	..0	648	..0	..0	3.875	4.213	JD	..0	7,686	07/03/2023	12/31/2027
91282C-GC-9	USA Treasury Note 3.875% Due 12/31/2027	..SD.			..1.A FE	246,572	..99.8360	249,590	250,000	246,918	..0	345	..0	..0	3.875	4.213	JD	..0	..0	07/03/2023	12/31/2027
91282C-GL-9	USA Treasury Note 4.0% Due 2/15/2026	..SD.			..1.A FE	196,227	..99.5430	199,086	200,000	197,213	..0	986	..0	..0	4.000	4.693	FA	3,000	4,000	03/07/2023	02/15/2026
912828-W7-1	USA Treasury Note, 2.125%, Due 03/31/202	..SD.			..1.A FE	394,704	..99.2030	396,812	400,000	399,175	..0	3,153	..0	..0	2.125	2.938	MS	2,137	8,500	07/29/2022	03/31/2024
912828-2Y-5	USA Treasury Note, 2.125%, Due 9/30/2024	..SD.	6		..1.A FE	197,758	..99.9490	195,898	200,000	199,296	..0	914	..0	..0	2.125	2.900	MS	1,063	4,250	04/14/2022	09/30/2024
91282C-FM-8	USA Treasury Note, 4.125% Due 9/30/2027	..SD.			..1.A FE	197,781	100.6330	201,266	200,000	198,153	..0	371	..0	..0	4.125	4.393	MS	2,085	8,250	03/07/2023	09/30/2027
912828-3D-0	USA Treasury Notes 2.25%, Due 10/31/2024	..SD.			..1.A FE	495,157	..97.8440	489,220	500,000	498,290	..0	1,987	..0	..0	2.250	2.665	AO	1,885	11,250	05/31/2022	10/31/2024
91282C-EW-7	USA Treasury Notes 3.25%, Due 6/30/2027	..SD.			..1.A FE	285,746	..97.7230	283,169	300,000	287,647	..0	1,901	..0	..0	3.250	4.735	JD	..0	3,250	10/13/2023	06/30/2027
912828-K7-4	USA Treasury Notes, 2.0%, Due 8/15/2025	..SD.	6		..1.A FE	491,212	..96.2310	481,155	500,000	495,635	..0	2,599	..0	..0	2.000	2.552	FA	3,778	10,000	04/13/2022	08/15/2025
912828-XX-3	USA Treasury Notes, 2.00%, Due 6/30/2024	..SD.			..1.A FE	587,173	..98.4410	590,646	600,000	596,467	..0	6,892	..0	..0	2.000	3.806	JD	..0	12,000	09/13/2022	06/30/2024
912828-4F-4	USA Treasury Notes, 2.625%, Due 3/31/202	..SD.			..1.A FE	397,751	..97.6330	390,532	400,000	398,943	..0	808	..0	..0	2.625	2.839	MS	2,639	10,500	07/29/2022	03/31/2025
912828-5C-0	USA Treasury Notes, 3.00%, Due 9/30/2025	..SD.			..1.A FE	402,376	..97.6950	390,780	400,000	401,375	..0	(759)	..0	..0	3.000	2.796	MS	3,033	12,000	07/29/2022	09/30/2025
0019999999	Subtotal - Bonds - U.S. Governments - Issuer Obligations					12,261,137	XXX	12,273,149	12,575,000	12,332,472	0	59,875	0	0	XXX	XXX	XXX	68,772	254,811	XXX	XXX
0109999999	Total - U.S. Government Bonds					12,261,137	XXX	12,273,149	12,575,000	12,332,472	0	59,875	0	0	XXX	XXX	XXX	68,772	254,811	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SCHEDULE D - PART 1

Showing All Long-Term BONDS Owned December 31 of Current Year

1	2	Codes			6	7	Fair Value		10	11	Change in Book/Adjusted Carrying Value				Interest					Dates	
		3	4	5			8	9			12	13	14	15	16	17	18	19	20	21	22
CUSIP Identification	Description	C o d e	F o r e i g n	Bond Char	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	Actual Cost	Rate Used to Obtain Fair Value	Fair Value	Par Value	Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amortization)/ Accretion	Current Year's Other-Than-Temporary Impairment Recognized	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Rate of	Effective Rate of	When Paid	Admitted Amount Due and Accrued	Amount Received During Year	Acquired	Stated Contractual Maturity Date
0309999999. Total - All Other Government Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
0509999999. Total - U.S. States, Territories and Possessions Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
0709999999. Total - U.S. Political Subdivisions Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
313560-3U-5	Federal NatIMTG Assn 0.625% Due 4/22/202	..SD..		6	..1.A FE	236,110	..95.0780	237,695	250,000	243,855	0	4,560	0	0	0.625	2.547	AO	299	1,563	04/13/2022	04/22/2025
0819999999. Subtotal - Bonds - U.S. Special Revenues - Issuer Obligations						236,110	XXX	237,695	250,000	243,855	0	4,560	0	0	XXX	XXX	XXX	299	1,563	XXX	XXX
0909999999. Total - U.S. Special Revenues Bonds						236,110	XXX	237,695	250,000	243,855	0	4,560	0	0	XXX	XXX	XXX	299	1,563	XXX	XXX
02665W-EA-5	American Honda Finance, 1.5% Due 1/13/20	..SD..			..1.G FE	96,174	..96.4780	96,478	100,000	98,451	0	1,453	0	0	1.500	3.033	JJ	700	1,500	05/31/2022	01/13/2025
031162-BV-1	Amgen Inc 3.625%, Due 5/22/2024	..SD..			..2.A FE	150,920	..99.2020	148,803	150,000	150,202	0	(512)	0	0	3.625	3.271	MN	589	5,438	07/29/2022	05/22/2024
037833-ET-3	Apple Inc 4.00% Callable, Due 5/10/2028	..SD..	2		..1.A FE	98,417	..99.7670	99,767	100,000	98,561	0	144	0	0	4.000	4.365	MN	567	2,000	07/03/2023	05/10/2028
037833-BG-4	Apple Inc, 3.20%, Due 05/13/2025	..SD..	6		..1.A FE	50,577	..97.9640	48,982	50,000	50,262	0	(186)	0	0	3.200	2.805	MN	213	1,600	04/13/2022	05/13/2025
06051G-FS-3	Bank of America Corp, 3.875%, Due 8/01/2	..SD..	6		..1.F FE	102,111	..98.4880	98,488	100,000	101,043	0	(635)	0	0	3.875	3.193	FA	1,615	3,875	04/13/2022	08/01/2025
110122-BB-3	Bristol-Myers Squibb, 3.25%, Due 2/27/20	..SD..			..1.F FE	100,522	..96.9590	96,959	100,000	100,367	0	(110)	0	0	3.250	3.126	FA	1,119	3,250	08/03/2022	02/27/2027
14913R-2H-9	Caterpillar Fin Serv, .80%, Due 11/13/20	..SD..			..1.F FE	92,937	..93.3400	93,340	100,000	96,216	0	1,945	0	0	0.800	2.897	MN	107	800	04/13/2022	11/13/2025
14913R-2V-8	Caterpillar Finl Service, 3.40%, Due 5/1	..SD..			..1.F FE	100,689	..98.2900	98,290	100,000	100,345	0	(245)	0	0	3.400	3.138	MN	453	3,400	07/29/2022	05/13/2025
166764-BX-7	Chevron Corp 1.995% Due 5/11/2027	..SD..			..1.C FE	66,661	..92.8050	69,604	75,000	67,097	0	437	0	0	1.995	5.467	MN	206	748	10/18/2023	05/11/2027
19416Q-EG-1	Colgate-Palmolive, 3.25%, Due 3/15/2024	..SD..	6		..1.D FE	50,818	..99.5970	49,799	50,000	50,089	0	(432)	0	0	3.250	2.368	MS	478	1,625	04/13/2022	03/15/2024
38141G-VM-3	Goldman Sachs Grp, 4.0%, Due 3/3/2024	..SD..	6		..1.F FE	101,855	..99.7080	99,708	100,000	100,172	0	(1,000)	0	0	4.000	2.975	MS	1,311	4,000	04/13/2022	03/03/2024
459200-HU-8	IBM Corp, 3.625%, Due 2/12/2024	..SD..	6		..1.G FE	101,553	..99.7560	99,756	100,000	100,098	0	(863)	0	0	3.625	2.742	FA	1,400	3,625	04/13/2022	02/12/2024
24422E-UE-7	John Deere Capital Crp, 3.45%, Due 03/13	..SD..			..1.F FE	75,159	..98.4820	73,862	75,000	75,074	0	(61)	0	0	3.450	3.363	MS	776	2,588	08/09/2022	03/13/2025
478160-CK-8	Johnson & Johnson 2.9% Callab, Due 1/15/	..SD..	2		..1.A FE	94,046	..95.6820	95,682	100,000	94,631	0	585	0	0	2.900	4.364	JJ	1,337	1,450	07/03/2023	01/15/2028
61746B-EF-9	Morgan Stanley 3.625% Due 01/20/2027	..SD..			..1.E FE	94,295	..96.9490	96,949	100,000	95,401	0	1,106	0	0	3.625	5.275	JJ		1,813	03/07/2023	01/20/2027
617446-8C-6	Morgan Stanley, 4.0%, Due 7/23/2025	..SD..			..1.E FE	151,734	..98.5540	147,831	150,000	150,931	0	(572)	0	0	4.000	3.586	JJ	2,633	6,000	08/01/2022	07/23/2025
717081-DM-2	Pfizer Inc, 3.4%, Due 5/15/2024	..SD..	6		..1.F FE	50,954	..99.2750	49,638	50,000	50,174	0	(462)	0	0	3.400	2.451	MN	217	1,700	04/13/2022	05/15/2024
743315-AR-4	Progressive Corp 2.45% Due 1/15/2027	..SD..			..1.F FE	91,032	..93.7890	93,789	100,000	92,783	0	1,751	0	0	2.450	5.041	JJ	1,130	1,225	03/07/2023	01/15/2027
87612E-BD-7	Target Corp., 3.5% Due 7/1/2024	..SD..	6		..1.F FE	202,752	..99.1260	198,252	200,000	200,701	0	(1,374)	0	0	3.500	2.789	JJ	3,500	7,000	06/01/2022	07/01/2024
92826C-AH-5	VISA Inc 2.75% Due 9/15/2027	..SD..			..1.D FE	67,952	..95.1970	71,398	75,000	68,273	0	320	0	0	2.750	5.455	MS	607	0	10/18/2023	09/15/2027
931142-FA-6	Walmart Inc, 4.0%, Callable, Due 4/15/20	..SD..	2		..1.C FE	98,303	..99.4470	99,447	100,000	98,584	0	281	0	0	4.000	4.657	AO	844	1,967	07/03/2023	04/15/2026
254687-FN-1	Walt Disney Company, 3.35%, Due 3/24/202	..SD..			..1.F FE	150,585	..98.1280	147,192	150,000	150,275	0	(220)	0	0	3.350	3.194	MS	1,354	5,025	07/29/2022	03/24/2025
94974B-GP-9	Wells Fargo & Company, 3.55%, Due 9/29/2	..SD..			..1.E FE	149,774	..97.7090	146,564	150,000	149,869	0	68	0	0	3.550	3.600	MS	1,361	5,325	08/01/2022	09/29/2025
1019999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated) - Issuer Obligations						2,339,818	XXX	2,320,576	2,375,000	2,339,597	0	1,418	0	0	XXX	XXX	XXX	24,139	65,952	XXX	XXX
1109999999. Total - Industrial and Miscellaneous (Unaffiliated) Bonds						2,339,818	XXX	2,320,576	2,375,000	2,339,597	0	1,418	0	0	XXX	XXX	XXX	24,139	65,952	XXX	XXX
1309999999. Total - Hybrid Securities						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
1509999999. Total - Parent, Subsidiaries and Affiliates Bonds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
1909999999. Subtotal - Bonds - Unaffiliated Bank Loans						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2419999999. Total - Issuer Obligations						14,837,064	XXX	14,831,419	15,200,000	14,915,924	0	65,854	0	0	XXX	XXX	XXX	93,210	322,326	XXX	XXX
2429999999. Total - Residential Mortgage-Backed Securities						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2439999999. Total - Commercial Mortgage-Backed Securities						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2449999999. Total - Other Loan-Backed and Structured Securities						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2459999999. Total - SVO Identified Funds						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2469999999. Total - Affiliated Bank Loans						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2479999999. Total - Unaffiliated Bank Loans						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2489999999. Total - Unaffiliated Certificates of Deposit						0	XXX	0	0	0	0	0	0	0	XXX	XXX	XXX	0	0	XXX	XXX
2509999999 - Total Bonds						14,837,064	XXX	14,831,419	15,200,000	14,915,924	0	65,854	0	0	XXX	XXX	XXX	93,210	322,326	XXX	XXX

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

1.

Line Number	Book/Adjusted Carrying Value by NAIC Designation Category Footnote:													
1A	1A ...\$	12,819,781	1B ..\$	0	1C ..\$	165,681	1D ..\$	118,361	1E ..\$	396,201	1F ..\$	1,067,149	1G ..\$	198,549
1B	2A ...\$	150,202	2B ..\$	0	2C ..\$	0								
1C	3A ...\$	0	3B ..\$	0	3C ..\$	0								
1D	4A ...\$	0	4B ..\$	0	4C ..\$	0								
1E	5A ...\$	0	5B ..\$	0	5C ..\$	0								
1F	6\$	0												

Schedule D - Part 2 - Section 1 - Preferred Stocks Owned

N O N E

Schedule D - Part 2 - Section 2 - Common Stocks Owned

N O N E

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SCHEDULE D - PART 3

Showing All Long-Term Bonds and Stocks ACQUIRED During Current Year

1	2	3	4	5	6	7	8	9
CUSIP Identification	Description	Foreign	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends
912828-3W-8	US Treasury 2.75% Due 2/15/2028		..07/03/2023 ..	Purchased		235,000	250,000	2,659
912828-YG-9	US Treasuray Note 1.625% 9/30/2026		..06/30/2023 ..	Purchased		229,043	250,000	1,043
91282C-HA-2	US Treasury 3.5% Due 4/30/2028		..07/03/2023 ..	Purchased		242,988	250,000	1,569
91282C-GT-2	US Treasury 3.625% Due 3/31/2028		..07/03/2023 ..	Purchased		244,277	250,000	2,377
912828-2A-7	US Treasury Note 1.5% 8/15/2026		..06/30/2023 ..	Purchased		228,584	250,000	1,430
912828-YX-2	US Treasury Note 1.75% 12/31/2026		..06/30/2023 ..	Purchased		229,014	250,000	36
912828-Y9-5	US Treasury Note 1.875% 7/31/2026		..06/30/2023 ..	Purchased		231,523	250,000	1,981
912828-U2-4	US Treasury Note 2.0% 11/15/2026		..06/30/2023 ..	Purchased		231,289	250,000	666
91282C-EF-4	US Treasury Note 2.5% 3/31/2027		..06/30/2023 ..	Purchased		234,346	250,000	1,605
91282C-FB-2	US Treasury Note 2.75% 7/31/2027		..06/30/2023 ..	Purchased		235,742	250,000	2,906
91282C-GR-6	US Treasury Note 4.625% 3/15/2026		..06/30/2023 ..	Purchased		250,322	250,000	3,456
912828-3F-5	US Tresuary Note 2.25% 11/15/2027		..06/30/2023 ..	Purchased		230,361	250,000	749
91282C-EN-7	USA Treasury Bond 2.75% Due 4/30/2027		..10/13/2023 ..	Purchased		93,516	100,000	1,263
91282C-FZ-9	USA Treasury Bond 3.875% Due 11/30/2027		..10/13/2023 ..	Purchased		145,330	150,000	2,192
91282C-HX-2	USA Treasury Bond 4.375% Due 8/31/2028		..10/13/2023 ..	Purchased		197,742	200,000	1,106
912828-YQ-7	USA Treasury Bonds 1.625% Due 10/31/2026		..10/13/2023 ..	Purchased		91,063	100,000	746
91282C-HE-4	USA Treasury Bonds 3.625% Due 5/31/2028		..10/13/2023 ..	Purchased		191,523	200,000	2,734
91282C-GH-8	USA Treasury Note 3.50% 1/31/2028		..07/03/2023 ..	Purchased		435,643	450,000	4,443
91282C-GC-9	USA Treasury Note 3.875% Due 12/31/2027		..07/03/2023 ..	Purchased		442,486	450,000	1,566
91282C-GL-9	USA Treasury Note 4.0% Due 2/15/2026		..03/07/2023 ..	Purchased		196,227	200,000	464
91282C-FM-8	USA Treasury Note, 4.125% Due 9/30/2027		..03/07/2023 ..	Purchased		197,781	200,000	3,604
91282C-EW-7	USA Treasury Notes 3.25%, Due 6/30/2027		..10/13/2023 ..	Purchased		285,746	300,000	2,157
0109999999. Subtotal - Bonds - U.S. Governments						5,099,547	5,350,000	40,750
037833-ET-3	Apple Inc 4.00% Callable, Due 5/10/2028		..07/03/2023 ..	Purchased		98,417	100,000	622
166764-BX-7	Chevron Corp 1.995% Due 5/11/2027		..10/18/2023 ..	Purchased		66,661	75,000	661
478160-CK-8	Johnson & Johnson 2.9% Callab, Due 1/15/		..07/03/2023 ..	Purchased		94,046	100,000	1,378
61746B-EF-9	Morgan Stanley 3.625% Due 01/20/2027		..03/07/2023 ..	Purchased		94,295	100,000	493
743315-AR-4	Progressive Corp 2.45% Due 1/15/2027		..03/07/2023 ..	Purchased		91,032	100,000	368
92826C-AH-5	VISA Inc 2.75% Due 9/15/2027		..10/18/2023 ..	Purchased		67,952	75,000	201
931142-FA-6	Walmart Inc, 4.0%, Callable, Due 4/15/20		..07/03/2023 ..	Purchased		98,303	100,000	867
1109999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						610,706	650,000	4,589
2509999997. Total - Bonds - Part 3						5,710,253	6,000,000	45,339
2509999998. Total - Bonds - Part 5								
2509999999. Total - Bonds						5,710,253	6,000,000	45,339
4509999997. Total - Preferred Stocks - Part 3						0	XXX	0
4509999998. Total - Preferred Stocks - Part 5							XXX	
4509999999. Total - Preferred Stocks						0	XXX	0
5989999997. Total - Common Stocks - Part 3						0	XXX	0
5989999998. Total - Common Stocks - Part 5							XXX	
5989999999. Total - Common Stocks						0	XXX	0
5999999999. Total - Preferred and Common Stocks						0	XXX	0
6009999999 - Totals						5,710,253	XXX	45,339

ANNUAL STATEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	10	Change In Book/Adjusted Carrying Value					16	17	18	19	20	21
										11	12	13	14	15						
CUSIP Identi- fication	Description	For- eign	Disposal Date	Name of Purchaser	Number of Shares of Stock	Con- sideration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor- tization)/ Accretion	Current Year's Other- Than- Temporary Impairment Recognized	Total Change in Book/ Adjusted Carrying Value (11+12-13)	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	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 Con- tractual Maturity Date
912828-50-8 ..	USA Treasury Note 2.875% Due 9/30/2023		..09/30/2023 ..	Matured		250,000	250,000	247,520	248,237	0	1,763	0	1,763	0	250,000	0	0	0	7,188	..09/30/2023 ..
912828-5P-1 ..	USA Treasury Notes, 2.875%, Due 11/30/20		..11/30/2023 ..	Matured		400,000	400,000	399,657	399,785	0	215	0	215	0	400,000	0	0	0	11,500	..11/30/2023 ..
0109999999. Subtotal - Bonds - U.S. Governments						650,000	650,000	647,176	648,023	0	1,977	0	1,977	0	650,000	0	0	0	18,688	XXX
3137EA-EN-5 ..	FEDERAL HOME LOAN MTG CORP., 2.75%, 6/19 ...		..06/19/2023 ..	Matured		1,000,000	1,000,000	990,201	998,977	0	1,023	0	1,023	0	1,000,000	0	0	0	13,750	..06/19/2023 ..
3135G0-T9-4 ..	FEDERAL NATL MTG ASSN NTS, 2.375% DUE 1/		..01/19/2023 ..	Matured		1,025,000	1,025,000	1,000,727	1,024,697	0	303	0	303	0	1,025,000	0	0	0	12,172	..01/19/2023 ..
0909999999. Subtotal - Bonds - U.S. Special Revenues						2,025,000	2,025,000	1,990,928	2,023,674	0	1,326	0	1,326	0	2,025,000	0	0	0	25,922	XXX
88579Y-AR-2 ..	3M Company, 3.00%, Due 8/7/2025		..07/21/2023 ..	Sold		143,241	150,000	150,603	150,497	0	(102)	0	(102)	0	150,395	0	(7,154)	(7,154)	4,350	..08/07/2025 ..
037833-AK-6 ..	Apple Inc. 2.4% Due 05/03/2023		..05/03/2023 ..	Matured		250,000	250,000	240,383	249,277	0	723	0	723	0	250,000	0	0	0	3,000	..05/03/2023 ..
084670-BR-8 ..	Berkshire Hathaway Inc., 2.75% Due 3/15/		..03/15/2023 ..	Matured		300,000	300,000	293,115	299,672	0	328	0	328	0	300,000	0	0	0	4,125	..03/15/2023 ..
30231G-AR-3 ..	Exxon Mobil Corp., 2.726% Due 3/1/2023,		..03/01/2023 ..	Matured		300,000	300,000	293,586	299,749	0	251	0	251	0	300,000	0	0	0	4,089	..03/01/2023 ..
478160-BH-6 ..	JOHNSON & JOHNSON UNSC, 3.375%, DUE 12/5		..12/05/2023 ..	Matured		300,000	300,000	304,050	300,744	0	(744)	0	(744)	0	300,000	0	0	0	10,125	..12/05/2023 ..
478160-BT-0 ..	JOHNSON & JOHNSON, 2.05%, CALL, DUE 3/1/		..03/01/2023 ..	Matured		275,000	275,000	263,546	274,537	0	463	0	463	0	275,000	0	0	0	2,819	..03/01/2023 ..
584918-AT-1 ..	MICROSOFT CORP., 2.375%, CALL, DUE 5/1/20		..05/01/2023 ..	Matured		250,000	250,000	241,160	249,310	0	690	0	690	0	250,000	0	0	0	2,969	..05/01/2023 ..
58933Y-AF-2 ..	Merck & Co Inc., 2.80%, Due 05/18/2023		..05/18/2023 ..	Matured		300,000	300,000	293,682	299,469	0	531	0	531	0	300,000	0	0	0	4,200	..05/18/2023 ..
1109999999. Subtotal - Bonds - Industrial and Miscellaneous (Unaffiliated)						2,118,241	2,125,000	2,080,125	2,123,256	0	2,139	0	2,139	0	2,125,395	0	(7,154)	(7,154)	35,677	XXX
2509999997. Total - Bonds - Part 4						4,793,241	4,800,000	4,718,229	4,794,953	0	5,442	0	5,442	0	4,800,395	0	(7,154)	(7,154)	80,286	XXX
2509999998. Total - Bonds - Part 5									0											XXX
2509999999. Total - Bonds						4,793,241	4,800,000	4,718,229	4,794,953	0	5,442	0	5,442	0	4,800,395	0	(7,154)	(7,154)	80,286	XXX
4509999997. Total - Preferred Stocks - Part 4						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
4509999998. Total - Preferred Stocks - Part 5							XXX		0											XXX
4509999999. Total - Preferred Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5989999997. Total - Common Stocks - Part 4						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5989999998. Total - Common Stocks - Part 5							XXX		0											XXX
5989999999. Total - Common Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
5999999999. Total - Preferred and Common Stocks						0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX
6009999999 - Totals						4,793,241	XXX	4,718,229	4,794,953	0	5,442	0	5,442	0	4,800,395	0	(7,154)	(7,154)	80,286	XXX

Schedule D - Part 5 - Long Term Bonds and Stocks Acquired and Fully Disposed Of

N O N E

Schedule D-Part 6-Section 1-Valuation of Shares of Subsidiary, Controlled or Affiliated Companies

N O N E

Schedule D - Part 6 - Section 2

N O N E

Schedule DA - Part 1 - Short-Term Investments Owned

N O N E

Schedule DB - Part A - Section 1 - Options, Caps, Floors, Collars, Swaps and Forwards Open

N O N E

Schedule DB - Part A - Section 2 - Options, Caps, Floors, Collars, Swaps and Forwards Terminated

N O N E

Schedule DB - Part B - Section 1 - Futures Contracts Open

N O N E

Schedule DB - Part B - Section 1B - Brokers with whom cash deposits have been made

N O N E

Schedule DB - Part B - Section 2 - Futures Contracts Terminated

N O N E

Schedule DB - Part D - Section 1 - Counterparty Exposure for Derivative Instruments Open

N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged By

N O N E

Schedule DB - Part D-Section 2 - Collateral for Derivative Instruments Open - Pledged To

N O N E

Schedule DB - Part E - Derivatives Hedging Variable Annuity Guarantees as of December 31 of
Current Year

N O N E

Schedule DL - Part 1 - Reinvested Collateral Assets Owned

N O N E

Schedule DL - Part 2 - Reinvested Collateral Assets Owned

N O N E

SCHEDULE E - PART 1 - CASH

TOTALS OF DEPOSITORY BALANCES ON THE LAST DAY OF EACH MONTH DURING THE CURRENT YEAR											
1.	January.....	532,049	4.	April.....	84,017	7.	July.....	251,395	10.	October.....	326,156
2.	February.....	351,157	5.	May.....	495,080	8.	August.....	31,295	11.	November.....	101,114
3.	March.....	(176,792)	6.	June.....	211,827	9.	September.....	40,248	12.	December.....	73,006

SCHEDULE E - PART 2 - CASH EQUIVALENTS

[illegible][illegible]

SCHEDULE E - PART 3 - SPECIAL DEPOSITS

States, Etc.	1	2	Deposits For the Benefit of All Policyholders		All Other Special Deposits	
	Type of Deposit	Purpose of Deposit	3 Book/Adjusted Carrying Value	4 Fair Value	5 Book/Adjusted Carrying Value	6 Fair Value
1. Alabama	AL					
2. Alaska	AK					
3. Arizona	AZ					
4. Arkansas	AR					
5. California	CA					
6. Colorado	CO					
7. Connecticut	CT					
8. Delaware	DE					
9. District of Columbia	DC					
10. Florida	FL					
11. Georgia	GA					
12. Hawaii	HI					
13. Idaho	ID					
14. Illinois	IL					
15. Indiana	IN					
16. Iowa	IA					
17. Kansas	KS					
18. Kentucky	KY					
19. Louisiana	LA					
20. Maine	ME					
21. Maryland	MD					
22. Massachusetts	MA					
23. Michigan	MI					
24. Minnesota	MN					
25. Mississippi	MS					
26. Missouri	MO					
27. Montana	MT					
28. Nebraska	NE					
29. Nevada	NV					
30. New Hampshire	NH					
31. New Jersey	NJ					
32. New Mexico	NM					
33. New York	NY					
34. North Carolina	NC					
35. North Dakota	ND					
36. Ohio	OH					
37. Oklahoma	OK					
38. Oregon	OR					
39. Pennsylvania	PA					
40. Rhode Island	RI					
41. South Carolina	SC					
42. South Dakota	SD					
43. Tennessee	TN					
44. Texas	TX					
45. Utah	UT					
46. Vermont	VT					
47. Virginia	VA					
48. Washington	WA					
49. West Virginia	WV					
50. Wisconsin	WI					
51. Wyoming	WY					
52. American Samoa	AS					
53. Guam	GU					
54. Puerto Rico	PR					
55. U.S. Virgin Islands	VI					
56. Northern Mariana Islands	MP					
57. Canada	CAN					
58. Aggregate Alien and Other	OT	XXX				
59. Subtotal	XXX	XXX				
DETAILS OF WRITE-INS						
5801.						
5802.						
5803.						
5898. Summary of remaining write-ins for Line 58 from overflow page	XXX	XXX				
5899. Totals (Lines 5801 thru 5803 plus 5898)(Line 58 above)	XXX	XXX				



SUPPLEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

ACCIDENT AND HEALTH POLICY EXPERIENCE EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed By April 1)

NAIC Group Code	0000.....	FOR THE STATE OF Ohio										NAIC Company Code 00122.....		
	1	2	3	4	5	6	7	8	9	10	11	12	13	14
	Direct Premiums Written	Direct Premiums Earned	Assumed Premiums Earned	Ceded Premiums Earned	Net Premiums Earned (2+3-4)	Direct Incurred Claims Amount	Assumed Incurred Claims Amount	Ceded Incurred Claims Amount	Net Incurred Claims Amount (6+7-8)	Change in Contract Reserves	Loss Ratio (6+10)/2	Number of Policies or Certificates as of Dec. 31	Number of Covered Lives as of Dec. 31	Member Months
A. INDIVIDUAL BUSINESS														
1. Comprehensive major medical					0				0		0.0			
2.1 Short-Term Medical - 6 Months or Less					0				0		0.0			
2.2 Short-Term Medical - Over 6 Months					0				0		0.0			
2.3 Subtotal Short-Term Medical (2.1+2.2)	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
3. Other Medical (Non-Comprehensive)					0				0		0.0			
4. Specified/Named Disease					0				0		0.0			
5. Limited Benefit					0				0		0.0			
6. Student					0				0		0.0			
7. Accident Only or AD&D					0				0		0.0			
8. Disability Income - Short - Term					0				0		0.0			
9. Disability Income - Long - Term					0				0		0.0			
10. Long-Term Care					0				0		0.0			
11. Medicare Supplement (Medigap)					0				0		0.0			
12. Dental					0				0		0.0			
13. State Children's Health Insurance Program					0				0		0.0			
14. Medicare					0				0		0.0			
15. Medicaid					0				0		0.0			
16. Medicare Part D - Stand-Alone					0				0		0.0			
17. Vision					0				0		0.0			
18. Other Individual Business					0				0		0.0			
19. Grand Total Individual	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
B. GROUP BUSINESS														
Comprehensive Major Medical					0				0		0.0			
1.1 Single Employer - Small Employer					0				0		0.0			
1.2 Single Employer - Other Employer					0				0		0.0			
1.3 Single Employer - Subtotal	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
2. Multiple Employer Assns and Trusts	353,197,731	353,197,731		283,998,355	69,199,376	318,837,518		290,722,390	28,115,128		90.3	33,513	63,589	741,447
3. Other Associations and Discretionary Trusts					0				0		0.0			
4. Other Comprehensive Major Medical					0				0		0.0			
5. Comprehensive/Major Medical Subtotal	353,197,731	353,197,731	0	283,998,355	69,199,376	318,837,518	0	290,722,390	28,115,128	0	90.3	33,513	63,589	741,447
Other Medical (Non-Comprehensive)														
6. Specified/Named Disease					0				0		0.0			
7. Limited Benefit					0				0		0.0			
8. Student					0				0		0.0			
9. Accident Only or AD&D					0				0		0.0			
10. Disability Income - Short-Term					0				0		0.0			
11. Disability Income - Long-Term					0				0		0.0			
12. Long-Term Care					0				0		0.0			
13. Medicare Supplement (Medigap)					0				0		0.0			
14. Federal Employees Health Benefits Plan					0				0		0.0			
15. Tricare					0				0		0.0			
16. Dental					0				0		0.0			
17. Medicare					0				0		0.0			
18. Medicare Part D - Stand-Alone					0				0		0.0			
19. Vision					0				0		0.0			
20. Other Group Care					0				0		0.0			
21. Grand Total Group Business	353,197,731	353,197,731	0	283,998,355	69,199,376	318,837,518	0	290,722,390	28,115,128	0	90.3	33,513	63,589	741,447
C. OTHER BUSINESS														
1. Credit (Individual and Group)					0				0		0.0			
2. Stop Loss/Excess Loss					0				0		0.0			
3. Administrative Services Only	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
4. Administrative Services Contracts	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX			
5. Grand Total Other Business	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
D. TOTAL BUSINESS														
1. Total Non U.S. Policy Forms					0				0		0.0			
2. Grand Total Individual, Group and Other Business	353,197,731	353,197,731	0	283,998,355	69,199,376	318,837,518	0	290,722,390	28,115,128	0	90.3	33,513	63,589	741,447



SUPPLEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

ACCIDENT AND HEALTH POLICY EXPERIENCE EXHIBIT FOR YEAR

For The Year Ended December 31, 2023
(To Be Filed By April 1)

NAIC Group Code 0000.....

FOR THE STATE OF Grand Total

NAIC Company Code 00122.....

	1	2	3	4	5	6	7	8	9	10	11	12	13	14
	Direct Premiums Written	Direct Premiums Earned	Assumed Premiums Earned	Ceded Premiums Earned	Net Premiums Earned (2+3-4)	Direct Incurred Claims Amount	Assumed Incurred Claims Amount	Ceded Incurred Claims Amount	Net Incurred Claims Amount (6+7-8)	Change in Contract Reserves	Loss Ratio (6+10)/2	Number of Policies or Certificates as of Dec. 31	Number of Covered Lives as of Dec. 31	Member Months
A. INDIVIDUAL BUSINESS														
1. Comprehensive major medical	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
2.1 Short-Term Medical - 6 Months or Less	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
2.2 Short-Term Medical - Over 6 Months	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
2.3 Subtotal Short-Term Medical (2.1+2.2)	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
3. Other Medical (Non-Comprehensive)	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
4. Specified/Named Disease	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
5. Limited Benefit	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
6. Student	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
7. Accident Only or AD&D	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
8. Disability Income - Short - Term	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
9. Disability Income - Long - Term	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
10. Long-Term Care	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
11. Medicare Supplement (Medigap)	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
12. Dental	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
13. State Children's Health Insurance Program	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
14. Medicare	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
15. Medicaid	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
16. Medicare Part D - Stand-Alone	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
17. Vision	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
18. Other Individual Business	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
19. Grand Total Individual	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
B. GROUP BUSINESS														
Comprehensive Major Medical														
1.1 Single Employer - Small Employer	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
1.2 Single Employer - Other Employer	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
1.3 Single Employer - Subtotal	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
2. Multiple Employer Assns and Trusts	353,197,731	353,197,731	0	283,998,355	69,199,376	318,837,518	0	290,722,390	28,115,128	0	90.3	33,513	63,589	741,447
3. Other Associations and Discretionary Trusts	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
4. Other Comprehensive Major Medical	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
5. Comprehensive/Major Medical Subtotal	353,197,731	353,197,731	0	283,998,355	69,199,376	318,837,518	0	290,722,390	28,115,128	0	90.3	33,513	63,589	741,447
Other Medical (Non-Comprehensive)														
6. Specified/Named Disease	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
7. Limited Benefit	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
8. Student	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
9. Accident Only or AD&D	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
10. Disability Income - Short-Term	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
11. Disability Income - Long-Term	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
12. Long-Term Care	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
13. Medicare Supplement (Medigap)	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
14. Federal Employees Health Benefits Plan	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
15. Tricare	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
16. Dental	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
17. Medicare	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
18. Medicare Part D - Stand-Alone	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
19. Vision	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
20. Other Group Care	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
21. Grand Total Group Business	353,197,731	353,197,731	0	283,998,355	69,199,376	318,837,518	0	290,722,390	28,115,128	0	90.3	33,513	63,589	741,447
C. OTHER BUSINESS														
1. Credit (Individual and Group)	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
2. Stop Loss/Excess Loss	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
3. Administrative Services Only	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
4. Administrative Services Contracts	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0	0
5. Grand Total Other Business	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
D. TOTAL BUSINESS														
1. Total Non U.S. Policy Forms	0	0	0	0	0	0	0	0	0	0	0.0	0	0	0
2. Grand Total Individual, Group and Other Business	353,197,731	353,197,731	0	283,998,355	69,199,376	318,837,518	0	290,722,390	28,115,128	0	90.3	33,513	63,589	741,447



SUPPLEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

(To Be Filed by April 1 - Not for Rebate Purposes - See Cautionary Statement at https://content.naic.org/sites/default/files/inline-files/committees_e_app_blanks_related_shce_cautionary_statement.pdf)
REPORT FOR: 1. CORPORATION COSE Health and Wellness Trust 2. 1240 Huron Road E., Ste. 200 Cleveland, OH 44115-1355

NAIC Group Code		0000		BUSINESS IN THE STATE OF		Ohio		DURING THE YEAR		2023		(LOCATION)		NAIC Company Code		00122		
		Comprehensive Health Coverage			Business Subject to MLR			Mini-Med Plans		Expatriate Plans		9	10	11	12	13	14	15
		1	2	3	4	5	6	7	8									
										Individual	Small Group Employer								Large Group Employer	Individual	Small Group Employer	Large Group Employer	Small Group	Large Group
		Individual	Small Group Employer	Large Group Employer	Individual	Small Group Employer	Large Group Employer	Small Group	Large Group	Student Health Plans	Government Business (excluded by statute)	Other Health Business	Medicare Advantage Part C and Medicare Part D Stand-Alone Subject to ACA	Subtotal (Cols. 1 through 12)	Uninsured Plans	Total 13 + 14		
1. Premium:																		
1.1 Health premiums earned (From Part 2, Line 1.11)		0	353,197,731	0	0	0	0	0	0	0	0	0	0	353,197,731	XXX	353,197,731		
1.2 Federal high risk pools														0	XXX	0		
1.3 State high risk pools														0	XXX	0		
1.4 Premiums earned including state and federal high risk programs (Lines 1.1 + 1.2 + 1.3)		0	353,197,731	0	0	0	0	0	0	0	0	0	0	353,197,731	XXX	353,197,731		
1.5 Federal taxes and federal assessments														0		0		
1.6 State insurance, premium and other taxes (Similar local taxes of \$ 279,594)														0		0		
1.6a Community Benefit Expenditures (informational only)														0		0		
1.7 Regulatory authority licenses and fees														0		0		
1.8 Adjusted Premiums Earned (Lines 1.4 - 1.5 - 1.6 - 1.7)		0	353,197,731	0	0	0	0	0	0	0	0	0	0	353,197,731	XXX	353,197,731		
1.9 Net Assumed less Ceded reinsurance premiums earned		0	(283,998,355)	0	0	0	0	0	0	0	0	0	0	(283,998,355)	XXX	(283,998,355)		
1.10 Other Adjustments due to MLR calculations - Premiums														0	XXX	0		
1.11 Risk Revenue														0	XXX	0		
1.12 Net adjusted premiums earned after reinsurance (Lines 1.8 + 1.9 + 1.10 + 1.11)		0	69,199,376	0	0	0	0	0	0	0	0	0	0	69,199,376	XXX	69,199,376		
2. Claims:																		
2.1 Incurred claims excluding prescription drugs			258,659,207											258,659,207	XXX	258,659,207		
2.2 Prescription drugs			62,281,749											62,281,749	XXX	62,281,749		
2.3 Pharmaceutical rebates			2,103,438											2,103,438	XXX	2,103,438		
2.4 State stop loss, market stabilization and claim/census based assessments (informational only)														0	XXX	0		
3. Incurred medical incentive pools and bonuses		0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0		
4. Deductible Fraud and Abuse Detection/Recovery Expenses (for MLR use only)														0		0		
5. 5.0 Total Incurred Claims (Lines 2.1 + 2.2 - 2.3 + 3) (From Part 2, Line 2.15)		0	318,837,518	0	0	0	0	0	0	0	0	0	0	318,837,518	XXX	318,837,518		
5.1 Net Assumed less Ceded reinsurance claims incurred		0	(290,722,390)	0	0	0	0	0	0	0	0	0	0	(290,722,390)	XXX	(290,722,390)		
5.2 Other Adjustments due to MLR calculations - Claims														0	XXX	0		
5.3 Rebates paid											XXX	XXX		0	XXX	0		
5.4 Estimated rebates unpaid prior year											XXX	XXX		0	XXX	0		
5.5 Estimated rebates unpaid current year											XXX	XXX		0	XXX	0		
5.6 Fee for service and co-pay revenue														0	XXX	0		
5.7 Net incurred claims after reinsurance (Lines 5.0 + 5.1 + 5.2 + 5.3 - 5.4 + 5.5 - 5.6)		0	28,115,128	0	0	0	0	0	0	0	0	0	0	28,115,128	XXX	28,115,128		
6. Improving Health Care Quality Expenses Incurred:																		
6.1 Improve health outcomes														0		0		
6.2 Activities to prevent hospital readmissions														0		0		
6.3 Improve patient safety and reduce medical errors														0		0		
6.4 Wellness and health promotion activities														0		0		
6.5 Health Information Technology expenses related to health improvement														0		0		
6.6 Total of Defined Expenses Incurred for Improving Health Care Quality (Lines 6.1+6.2+6.3+6.4+6.5)		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		
7. Preliminary Medical Loss Ratio: MLR ((Lines 4 + 5.0 + 6.6 - Footnote 2.0)/Line 1.8		0.000	0.903	0.000	0.000	0.000	0.000	0.000	0.000	0.000	XXX	XXX	0.000	XXX	XXX	XXX		
8. Claims Adjustment Expenses:																		
8.1 Cost containment expenses not included in quality of care expenses in Line 6.6														0		0		
8.2 All other claims adjustment expenses			(5,600)											(5,600)		(5,600)		
8.3 Total claims adjustment expenses (Lines 8.1 + 8.2)		0	(5,600)	0	0	0	0	0	0	0	0	0	0	(5,600)	0	(5,600)		
9. Claims Adjustment Expense Ratio (Line 8.3/Line 1.8)		0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	XXX	XXX	XXX		

216-1 OH

SUPPLEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1 (Continued)

		Business Subject to MLR									10	11	12 Medicare Advantage Part C and Medicare Part D Stand-Alone Subject to ACA	13	14	15
		Comprehensive Health Coverage			Mini-Med Plans			Expatriate Plans		9						
		1 Individual	2 Small Group Employer	3 Large Group Employer	4 Individual	5 Small Group Employer	6 Large Group Employer	7 Small Group	8 Large Group							
10.	General and Administrative (G&A) Expenses:															
	10.1 Direct sales salaries and benefits												0			0
	10.2 Agents and brokers fees and commissions.....												0			0
	10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below).....												0			0
	10.4 Other general and administrative expenses.....		39,167,551										39,167,551			39,167,551
	10.4a Community Benefit Expenditures (informational only)												0			0
	10.5 Total general and administrative (Lines 10.1 +10.2 + 10.3 + 10.4)	0	39,167,551	0	0	0	0	0	0	0	0	0	39,167,551	0		39,167,551
11.	Underwriting Gain/(Loss) (Lines 1.12 - 5.7 - 6.6 - 8.3 - 10.5)	0	1,922,297	0	0	0	0	0	0	0	0	0	1,922,297	XXX		1,922,297
12.	Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX		0
13.	Net investment and other gain/(loss)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,337,439	XXX		1,337,439
14.	Federal income taxes (excluding taxes on Line 1.5 above)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	536,580	XXX		536,580
15.	Net gain or (loss) (Lines 11 + 12 + 13 - 14)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,723,157	XXX		2,723,157
16.	ICD-10 Implementation Expenses (informational only; already included in general expenses and line 10.4)												0			0
16.	16a ICD-10 Implementation Expenses (informational only; already included in line 10.4)												0			0
OTHER INDICATORS:																
1.	Number of certificates/policies		33,513										33,513			33,513
2.	Number of Covered Lives		63,589										63,589			63,589
3.	Number of Groups	XXX	8,196		XXX								8,196			8,196
4.	Member Months		741,447										741,447			741,447

Is run off business reported in Columns 1 through 9 or 12? Yes [] No [] If yes, show the amount of premiums and claims included. Premiums \$ Claims \$

AFFORDABLE CARE ACT (ACA) RECEIPTS, PAYMENTS, RECEIVABLES and PAYABLES				
	Current Year		Prior Year	
	Comprehensive Health Coverage		Comprehensive Health Coverage	
	1 Individual Plans	2 Small Group Employer Plans	3 Individual Plans	4 Small Group Employer Plans
ACA Receivables and Payables				
1. Permanent ACA Risk Adjustment Program				
1.0 Premium adjustments receivable/(payable)				
2. Transitional ACA Reinsurance Program				
2.0 Total amounts recoverable for claims (paid & unpaid)		XXX		XXX
3. Temporary ACA Risk Corridors Program				
3.1 Accrued retrospective premium.....				
3.2 Reserve for rate credits or policy experience refunds				
ACA Receipts and Payments				
4. Permanent ACA Risk Adjustment Program				
4.0 Premium adjustments receipts/(payments)				
5. Transitional ACA Reinsurance Program				
5.0 Amounts received for claims		XXX		XXX
6. Temporary ACA Risk Corridors Program				
6.1 Retrospective premium received.....				
6.2 Rate credits or policy experience refunds paid				

NONE

SUPPLEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

(To Be Filed by April 1 - Not for Rebate Purposes)

REPORT FOR: 1. CORPORATION

COSE Health and Wellness Trust

2. 1240 Huron Road E., Ste. 200 Cleveland, OH 44115-1355

NAIC Group Code		0000		BUSINESS IN THE STATE OF		Ohio		DURING THE YEAR		2023		(LOCATION)		NAIC Company Code		00122	
		Business Subject to MLR								9	10	11	12	13			
		Comprehensive Health Coverage			Mini-Med Plans			Expatriate Plans:									
		1	2	3	4	5	6	7	8								
		Individual	Small Group Employer	Large Group Employer	Individual	Small Group Employer	Large Group Employer	Small Group	Large Group	Student Health Plans	Government Business (excluded by statute)	Other Health Business	Medicare Advantage Part C and Medicare Part D Stand-Alone Subject to ACA	Total (a)			
1. Health Premiums Earned:																	
1.1 Direct premiums written			353,197,731											353,197,731			
1.2 Unearned premium prior year														0			
1.3 Unearned premium current year														0			
1.4 Change in unearned premium (Lines 1.2 - 1.3)		0	0	0	0	0	0	0	0	0	0	0	0	0			
1.5 Paid rate credits														0			
1.6 Reserve for rate credits current year														0			
1.7 Reserve for rate credits prior year														0			
1.8 Change in reserve for rate credits (Lines 1.6 - 1.7)		0	0	0	0	0	0	0	0	0	0	0	0	0			
1.9 Premium balances written off														0			
1.10 Group conversion charge														0			
1.11 Total direct premiums earned (Lines 1.1 + 1.4 - 1.9 + 1.10)		0	353,197,731	0	0	0	0	0	0	0	0	0	0	353,197,731			
1.12 Assumed premiums earned from non-affiliates														0			
1.13 Net Assumed less Ceded premiums earned from affiliates														0			
1.14 Ceded premiums earned to non-affiliates			283,998,355											283,998,355			
1.15 Other Adjustments due to MLR calculation - Premiums														0			
1.16 Net premiums earned (Lines 1.11 - 1.5 - 1.8 + 1.12 + 1.13 - 1.14 + 1.15)		0	69,199,376	0	0	0	0	0	0	0	0	0	0	69,199,376			
2. Direct Claims Incurred:																	
2.1 Paid claims during the year			318,241,109											318,241,109			
2.2 Direct claim liability current year			45,730,410											45,730,410			
2.3 Direct claim liability prior year			45,134,001											45,134,001			
2.4 Direct claim reserves current year														0			
2.5 Direct claim reserves prior year														0			
2.6 Direct contract reserves current year														0			
2.7 Direct contract reserves prior year														0			
2.8 Paid rate credits														0			
2.9 Reserve for rate credits current year														0			
2.10 Reserve for rate credits prior year														0			
2.11 Incurred medical incentive pools and bonuses (Lines 2.11a + 2.11b - 2.11c)		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.11a Paid medical incentive pools and bonuses current year														0			
2.11b Accrued medical incentive pools and bonuses current year														0			
2.11c Accrued medical incentive pools and bonuses prior year														0			
2.12 Net health care receivables (Lines 2.12a - 2.12b)		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.12a Health care receivables current year														0			
2.12b Health care receivables prior year														0			
2.13 Group conversion charge														0			
2.14 Multi-option coverage blended rate adjustment														0			
2.15 Total incurred claims (Lines 2.1 + 2.2 - 2.3 + 2.4 - 2.5 + 2.6 - 2.7 + 2.8 + 2.9 - 2.10 + 2.11 - 2.12 + 2.13 + 2.14)		0	318,837,518	0	0	0	0	0	0	0	0	0	0	318,837,518			
2.16 Assumed incurred claims from non-affiliates														0			
2.17 Net assumed less ceded incurred claims from affiliates														0			
2.18 Ceded incurred claims to non-affiliates			290,722,390											290,722,390			
2.19 Other adjustments due to MLR calculation - Claims														0			
2.20 Net Incurred Claims (Lines 2.15 - 2.8 - 2.9 + 2.10 + 2.16 + 2.17 - 2.18 + 2.19)		0	28,115,128	0	0	0	0	0	0	0	0	0	0	28,115,128			
3. Fraud and Abuse Recoveries that Reduced PAID Claims in Line 2.1 above (informational only)														0			

(a) Column 13, Line 1.1 includes direct written premium of \$ for stand-alone dental and \$ for stand-alone vision policies.



SUPPLEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1

(To Be Filed by April 1 - Not for Rebate Purposes - See Cautionary Statement at https://content.naic.org/sites/default/files/inline-files/committees_e_app_blanks_related_shce_cautionary_statement.pdf)
REPORT FOR: 1. CORPORATION COSE Health and Wellness Trust 2. 1240 Huron Road E., Ste. 200 Cleveland, OH 44115-1355

NAIC Group Code		0000		BUSINESS IN THE STATE OF		Grand Total		DURING THE YEAR		2023		(LOCATION)		NAIC Company Code		00122							
		Comprehensive Health Coverage			Mini-Med Plans			Expatriate Plans		9		10		11		12		13		14		15	
		1	2	3	4	5	6	7	8														
		Individual	Small Group Employer	Large Group Employer	Individual	Small Group Employer	Large Group Employer	Small Group	Large Group	Student Health Plans	Government Business (excluded by statute)	Other Health Business	Medicare Advantage Part C and Medicare Part D Stand-Alone Subject to ACA	Subtotal (Cols. 1 through 12)	Uninsured Plans	Total 13 + 14							
1. Premium:																							
1.1 Health premiums earned (From Part 2, Line 1.11)		0	353,197,731	0	0	0	0	0	0	0	0	0	0	353,197,731	XXX	353,197,731							
1.2 Federal high risk pools		0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0							
1.3 State high risk pools		0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0							
1.4 Premiums earned including state and federal high risk programs (Lines 1.1 + 1.2 + 1.3)		0	353,197,731	0	0	0	0	0	0	0	0	0	0	353,197,731	XXX	353,197,731							
1.5 Federal taxes and federal assessments		0	0	0	0	0	0	0	0	0	0	0	0	0		0							
1.6 State insurance, premium and other taxes (Similar local taxes of \$ 279,594)		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
1.6a Community Benefit Expenditures (informational only)		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
1.7 Regulatory authority licenses and fees		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
1.8 Adjusted Premiums Earned (Lines 1.4 - 1.5 - 1.6 - 1.7)		0	353,197,731	0	0	0	0	0	0	0	0	0	0	353,197,731	XXX	353,197,731							
1.9 Net Assumed less Ceded reinsurance premiums earned		0	(283,998,355)	0	0	0	0	0	0	0	0	0	0	(283,998,355)	XXX	(283,998,355)							
1.10 Other Adjustments due to MLR calculations - Premiums		0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0							
1.11 Risk Revenue		0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0							
1.12 Net adjusted premiums earned after reinsurance (Lines 1.8 + 1.9 + 1.10 + 1.11)		0	69,199,376	0	0	0	0	0	0	0	0	0	0	69,199,376	XXX	69,199,376							
2. Claims:																							
2.1 Incurred claims excluding prescription drugs		0	258,659,207	0	0	0	0	0	0	0	0	0	0	258,659,207	XXX	258,659,207							
2.2 Prescription drugs		0	62,281,749	0	0	0	0	0	0	0	0	0	0	62,281,749	XXX	62,281,749							
2.3 Pharmaceutical rebates		0	2,103,438	0	0	0	0	0	0	0	0	0	0	2,103,438	XXX	2,103,438							
2.4 State stop loss, market stabilization and claim/census based assessments (informational only)		0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0							
3. Incurred medical incentive pools and bonuses		0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0							
4. Deductible Fraud and Abuse Detection/Recovery Expenses (for MLR use only)		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
5. 5.0 Total Incurred Claims (Lines 2.1 + 2.2 - 2.3 + 3) (From Part 2, Line 2.15)		0	318,837,518	0	0	0	0	0	0	0	0	0	0	318,837,518	XXX	318,837,518							
5.1 Net Assumed less Ceded reinsurance claims incurred		0	(290,722,390)	0	0	0	0	0	0	0	0	0	0	(290,722,390)	XXX	(290,722,390)							
5.2 Other Adjustments due to MLR calculations - Claims		0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0							
5.3 Rebates paid		0	0	0	0	0	0	0	0	0	XXX	XXX	0	0	XXX	0							
5.4 Estimated rebates unpaid prior year		0	0	0	0	0	0	0	0	0	XXX	XXX	0	0	XXX	0							
5.5 Estimated rebates unpaid current year		0	0	0	0	0	0	0	0	0	XXX	XXX	0	0	XXX	0							
5.6 Fee for service and co-pay revenue		0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	0							
5.7 Net incurred claims after reinsurance (Lines 5.0 + 5.1 + 5.2 + 5.3 - 5.4 + 5.5 - 5.6)		0	28,115,128	0	0	0	0	0	0	0	0	0	0	28,115,128	XXX	28,115,128							
6. Improving Health Care Quality Expenses Incurred:																							
6.1 Improve health outcomes		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
6.2 Activities to prevent hospital readmissions		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
6.3 Improve patient safety and reduce medical errors		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
6.4 Wellness and health promotion activities		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
6.5 Health Information Technology expenses related to health improvement.....		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
6.6 Total of Defined Expenses Incurred for Improving Health Care Quality (Lines 6.1+6.2+6.3+6.4+6.5)		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
7. Preliminary Medical Loss Ratio: MLR ((Lines 4 + 5.0 + 6.6 - Footnote 2.0)/Line 1.8)		0.000	0.903	0.000	0.000	0.000	0.000	0.000	0.000	0.000	XXX	XXX	0.000	XXX	XXX	XXX							
8. Claims Adjustment Expenses:																							
8.1 Cost containment expenses not included in quality of care expenses in Line 6.6		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0							
8.2 All other claims adjustment expenses.....		0	(5,600)	0	0	0	0	0	0	0	0	0	0	(5,600)	0	(5,600)							
8.3 Total claims adjustment expenses (Lines 8.1 + 8.2)		0	(5,600)	0	0	0	0	0	0	0	0	0	0	(5,600)	0	(5,600)							
9. Claims Adjustment Expense Ratio (Line 8.3/Line 1.8)		0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	XXX	XXX	XXX							

216-1-GT

SUPPLEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 1 (Continued)

	Business Subject to MLR									10	11	12 Medicare Advantage Part C and Medicare Part D Stand-Alone Subject to ACA	13	14	15
	Comprehensive Health Coverage			Mini-Med Plans			Expatriate Plans		9						
	1 Individual	2 Small Group Employer	3 Large Group Employer	4 Individual	5 Small Group Employer	6 Large Group Employer	7 Small Group	8 Large Group								Student Health Plans
10. General and Administrative (G&A) Expenses:															
10.1 Direct sales salaries and benefits	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10.2 Agents and brokers fees and commissions.....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10.3 Other taxes (excluding taxes on Lines 1.5 through 1.7 and Line 14 below).....	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10.4 Other general and administrative expenses.....	0	39,167,551	0	0	0	0	0	0	0	0	0	0	39,167,551	0	39,167,551
10.4a Community Benefit Expenditures (informational only)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
10.5 Total general and administrative (Lines 10.1 +10.2 + 10.3 + 10.4)	0	39,167,551	0	0	0	0	0	0	0	0	0	0	39,167,551	0	39,167,551
11. Underwriting Gain/(Loss) (Lines 1.12 - 5.7 - 6.6 - 8.3 - 10.5)	0	1,922,297	0	0	0	0	0	0	0	0	0	0	1,922,297	XXX	1,922,297
12. Income from fees of uninsured plans	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0	0
13. Net investment and other gain/(loss)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	1,337,439	XXX	1,337,439
14. Federal income taxes (excluding taxes on Line 1.5 above)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	536,580	XXX	536,580
15. Net gain or (loss) (Lines 11 + 12 + 13 - 14)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	2,723,157	XXX	2,723,157
16. ICD-10 Implementation Expenses (informational only; already included in general expenses and line 10.4)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
16. 16a ICD-10 Implementation Expenses (informational only; already included in line 10.4)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
OTHER INDICATORS:															
1. Number of certificates/policies	0	33,513	0	0	0	0	0	0	0	0	0	0	33,513	0	33,513
2. Number of Covered Lives	0	63,589	0	0	0	0	0	0	0	0	0	0	63,589	0	63,589
3. Number of Groups	XXX	8,196	0	XXX	0	0	0	0	0	0	0	0	8,196	0	8,196
4. Member Months	0	741,447	0	0	0	0	0	0	0	0	0	0	741,447	0	741,447

Is run off business reported in Columns 1 through 9 or 12? Yes [] No [] If yes, show the amount of premiums and claims included. Premiums \$0 Claims \$0

AFFORDABLE CARE ACT (ACA) RECEIPTS, PAYMENTS, RECEIVABLES and PAYABLES				
	Current Year		Prior Year	
	Comprehensive Health Coverage		Comprehensive Health Coverage	
	1 Individual Plans	2 Small Group Employer Plans	3 Individual Plans	4 Small Group Employer Plans
ACA Receivables and Payables				
1. Permanent ACA Risk Adjustment Program				
1.0 Premium adjustments receivable/(payable)				
2. Transitional ACA Reinsurance Program				
2.0 Total amounts recoverable for claims (paid & unpaid)		XXX		XXX
3. Temporary ACA Risk Corridors Program				
3.1 Accrued retrospective premium.....				
3.2 Reserve for rate credits or policy experience refunds				
ACA Receipts and Payments				
4. Permanent ACA Risk Adjustment Program				
4.0 Premium adjustments receipts/(payments)				
5. Transitional ACA Reinsurance Program				
5.0 Amounts received for claims		XXX		XXX
6. Temporary ACA Risk Corridors Program				
6.1 Retrospective premium received.....				
6.2 Rate credits or policy experience refunds paid				

NONE

216-3-GT

SUPPLEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

SUPPLEMENTAL HEALTH CARE EXHIBIT - PART 2

(To Be Filed by April 1 - Not for Rebate Purposes)

REPORT FOR: 1. CORPORATION

COSE Health and Wellness Trust

2. 1240 Huron Road E., Ste. 200 Cleveland, OH 44115-1355

NAIC Group Code		0000		BUSINESS IN THE STATE OF		Grand Total		DURING THE YEAR		2023		(LOCATION)		NAIC Company Code		00122	
		Comprehensive Health Coverage			Business Subject to MLR			Expatriate Plans:		9		10	11	12	13		
		Mini-Med Plans							9								
		1	2	3	4	5	6	7		8							
		Individual	Small Group Employer	Large Group Employer	Individual	Small Group Employer	Large Group Employer	Small Group	Large Group	Student Health Plans	Government Business (excluded by statute)	Other Health Business	Medicare Advantage Part C and Medicare Part D Stand-Alone Subject to ACA	Total (a)			
1. Health Premiums Earned:																	
1.1 Direct premiums written		0	353,197,731	0	0	0	0	0	0	0	0	0	0	0	353,197,731		
1.2 Unearned premium prior year		0	0	0	0	0	0	0	0	0	0	0	0	0	0		
1.3 Unearned premium current year		0	0	0	0	0	0	0	0	0	0	0	0	0	0		
1.4 Change in unearned premium (Lines 1.2 - 1.3)		0	0	0	0	0	0	0	0	0	0	0	0	0	0		
1.5 Paid rate credits		0	0	0	0	0	0	0	0	0	0	0	0	0	0		
1.6 Reserve for rate credits current year		0	0	0	0	0	0	0	0	0	0	0	0	0	0		
1.7 Reserve for rate credits prior year		0	0	0	0	0	0	0	0	0	0	0	0	0	0		
1.8 Change in reserve for rate credits (Lines 1.6 - 1.7)		0	0	0	0	0	0	0	0	0	0	0	0	0	0		
1.9 Premium balances written off		0	0	0	0	0	0	0	0	0	0	0	0	0	0		
1.10 Group conversion charge		0	0	0	0	0	0	0	0	0	0	0	0	0	0		
1.11 Total direct premiums earned (Lines 1.1 + 1.4 - 1.9 + 1.10)		0	353,197,731	0	0	0	0	0	0	0	0	0	0	353,197,731			
1.12 Assumed premiums earned from non-affiliates		0	0	0	0	0	0	0	0	0	0	0	0	0	0		
1.13 Net Assumed less Ceded premiums earned from affiliates		0	0	0	0	0	0	0	0	0	0	0	0	0	0		
1.14 Ceded premiums earned to non-affiliates		0	283,998,355	0	0	0	0	0	0	0	0	0	0	283,998,355			
1.15 Other Adjustments due to MLR calculation - Premiums		0	0	0	0	0	0	0	0	0	0	0	0	0	0		
1.16 Net premiums earned (Lines 1.11 - 1.5 - 1.8 + 1.12 + 1.13 - 1.14 + 1.15)		0	69,199,376	0	0	0	0	0	0	0	0	0	0	69,199,376			
2. Direct Claims Incurred:																	
2.1 Paid claims during the year		0	318,241,109	0	0	0	0	0	0	0	0	0	0	318,241,109			
2.2 Direct claim liability current year		0	45,730,410	0	0	0	0	0	0	0	0	0	0	45,730,410			
2.3 Direct claim liability prior year		0	45,134,001	0	0	0	0	0	0	0	0	0	0	45,134,001			
2.4 Direct claim reserves current year		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.5 Direct claim reserves prior year		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.6 Direct contract reserves current year		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.7 Direct contract reserves prior year		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.8 Paid rate credits		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.9 Reserve for rate credits current year		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.10 Reserve for rate credits prior year		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.11 Incurred medical incentive pools and bonuses (Lines 2.11a + 2.11b - 2.11c)		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.11a Paid medical incentive pools and bonuses current year		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.11b Accrued medical incentive pools and bonuses current year		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.11c Accrued medical incentive pools and bonuses prior year		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.12 Net health care receivables (Lines 2.12a - 2.12b)		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.12a Health care receivables current year		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.12b Health care receivables prior year		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.13 Group conversion charge		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.14 Multi-option coverage blended rate adjustment		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.15 Total incurred claims (Lines 2.1 + 2.2 - 2.3 + 2.4 - 2.5 + 2.6 - 2.7 + 2.8 + 2.9 - 2.10 + 2.11 - 2.12 + 2.13 + 2.14)		0	318,837,518	0	0	0	0	0	0	0	0	0	0	318,837,518			
2.16 Assumed incurred claims from non-affiliates		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.17 Net assumed less ceded incurred claims from affiliates		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.18 Ceded incurred claims to non-affiliates		0	290,722,390	0	0	0	0	0	0	0	0	0	0	290,722,390			
2.19 Other adjustments due to MLR calculation - Claims		0	0	0	0	0	0	0	0	0	0	0	0	0			
2.20 Net Incurred Claims (Lines 2.15 - 2.8 - 2.9 + 2.10 + 2.16 + 2.17 - 2.18 + 2.19)		0	28,115,128	0	0	0	0	0	0	0	0	0	0	28,115,128			
3. Fraud and Abuse Recoveries that Reduced PAID Claims in Line 2.1 above (informational only)		0	0	0	0	0	0	0	0	0	0	0	0	0	0		

(a) Column 13, Line 1.1 includes direct written premium of \$0 for stand-alone dental and \$0 for stand-alone vision policies.



Audited Financial Information



Accountant's Letter of Qualifications



Communication of Internal Control Related Matters Noted in Audit



Management's Report of Internal Control Over Financial Reporting



Relief from the five-year rotation requirement for lead audit partner



Relief from the one-year cooling off period for independent CPA



Relief from the Requirements for Audit Committees



SUPPLEMENTAL INVESTMENT RISKS INTERROGATORIES

For The Year Ended December 31, 2023
(To Be Filed by April 1)

Of The COSE Health and Wellness Trust
ADDRESS (City, State and Zip Code) Cleveland , OH 44115-1355
NAIC Group Code 0000 NAIC Company Code 00122 Federal Employer's Identification Number (FEIN) 81-6240902

The Investment Risks Interrogatories are to be filed by April 1. They are also to be included with the Audited Statutory Financial Statements.

Answer the following interrogatories by reporting the applicable U.S. dollar amounts and percentages of the reporting entity's total admitted assets held in that category of investments.

1. Reporting entity's total admitted assets as reported on Page 2 of this annual statement. \$ 76,422,979

2. Ten largest exposures to a single issuer/borrower/investment.

	1	2	3	4
	Issuer	Description of Exposure	Amount	Percentage of Total Admitted Assets
2.01	Morgan Stanley	Bonds	\$ 246,332	0.3 %
2.02	Target Corp	Bonds	\$ 200,701	0.3 %
2.03	Caterpillar Fin Serv	Bonds	\$ 196,561	0.3 %
2.04	Walt Disney Company	Bonds	\$ 150,275	0.2 %
2.05	Amgen Inc	Bonds	\$ 150,202	0.2 %
2.06	Wells Fargo & Company	Bonds	\$ 149,869	0.2 %
2.07	Apple Inc	Bonds	\$ 148,823	0.2 %
2.08	Bank of America Corp	Bonds	\$ 101,043	0.1 %
2.09	Bristol-Meyers Squibb	Bonds	\$ 100,367	0.1 %
2.10	Goldman Sachs Grp	Bonds	\$ 100,172	0.1 %

3. Amounts and percentages of the reporting entity's total admitted assets held in bonds and preferred stocks by NAIC designation.

	Bonds	1	2	Preferred Stocks	3	4
3.01	NAIC 1	\$ 14,765,722	19.3 %	3.07	NAIC 1	\$ 0.0 %
3.02	NAIC 2	\$ 150,202	0.2 %	3.08	NAIC 2	\$ 0.0 %
3.03	NAIC 3	\$ 0	0.0 %	3.09	NAIC 3	\$ 0.0 %
3.04	NAIC 4	\$ 0	0.0 %	3.10	NAIC 4	\$ 0.0 %
3.05	NAIC 5	\$ 0	0.0 %	3.11	NAIC 5	\$ 0.0 %
3.06	NAIC 6	\$ 0	0.0 %	3.12	NAIC 6	\$ 0.0 %

4. Assets held in foreign investments:

4.01 Are assets held in foreign investments less than 2.5% of the reporting entity's total admitted assets? Yes [] No [X]
If response to 4.01 above is yes, responses are not required for interrogatories 5 - 10.

4.02 Total admitted assets held in foreign investments. \$ 0.0 %

4.03 Foreign-currency-denominated investments \$ 0.0 %

4.04 Insurance liabilities denominated in that same foreign currency \$ 0.0 %

SUPPLEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

5. Aggregate foreign investment exposure categorized by NAIC sovereign designation:				
		1	2	
5.01	Countries designated NAIC-1	\$	0.0	%
5.02	Countries designated NAIC-2	\$	0.0	%
5.03	Countries designated NAIC-3 or below	\$	0.0	%
6. Largest foreign investment exposures by country, categorized by the country's NAIC sovereign designation:				
		1	2	
Countries designated NAIC - 1:				
6.01	Country 1:	\$	0.0	%
6.02	Country 2:	\$	0.0	%
Countries designated NAIC - 2:				
6.03	Country 1:	\$	0.0	%
6.04	Country 2:	\$	0.0	%
Countries designated NAIC - 3 or below:				
6.05	Country 1:	\$	0.0	%
6.06	Country 2:	\$	0.0	%
7. Aggregate unhedged foreign currency exposure				
		1	2	
		\$	0.0	%
8. Aggregate unhedged foreign currency exposure categorized by NAIC sovereign designation:				
		1	2	
8.01	Countries designated NAIC-1	\$	0.0	%
8.02	Countries designated NAIC-2	\$	0.0	%
8.03	Countries designated NAIC-3 or below	\$	0.0	%
9. Largest unhedged foreign currency exposures by country, categorized by the country's NAIC sovereign designation:				
		1	2	
Countries designated NAIC - 1:				
9.01	Country 1:	\$	0.0	%
9.02	Country 2:	\$	0.0	%
Countries designated NAIC - 2:				
9.03	Country 1:	\$	0.0	%
9.04	Country 2:	\$	0.0	%
Countries designated NAIC - 3 or below:				
9.05	Country 1:	\$	0.0	%
9.06	Country 2:	\$	0.0	%
10. Ten largest non-sovereign (i.e. non-governmental) foreign issues:				
		1	2	
		Issuer	NAIC Designation	
10.01	.....	.....	\$ .....	0.0 %
10.02	.....	.....	\$ .....	0.0 %
10.03	.....	.....	\$ .....	0.0 %
10.04	.....	.....	\$ .....	0.0 %
10.05	.....	.....	\$ .....	0.0 %
10.06	.....	.....	\$ .....	0.0 %
10.07	.....	.....	\$ .....	0.0 %
10.08	.....	.....	\$ .....	0.0 %
10.09	.....	.....	\$ .....	0.0 %
10.10	.....	.....	\$ .....	0.0 %

SUPPLEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

11. Amounts and percentages of the reporting entity's total admitted assets held in Canadian investments and unhedged Canadian currency exposure:

11.01 Are assets held in Canadian investments less than 2.5% of the reporting entity's total admitted assets? Yes [] No [X]

If response to 11.01 is yes, detail is not required for the remainder of interrogatory 11.

		1	2
11.02	Total admitted assets held in Canadian investments	\$	 0.0 %
11.03	Canadian-currency-denominated investments	\$	 0.0 %
11.04	Canadian-denominated insurance liabilities	\$	 0.0 %
11.05	Unhedged Canadian currency exposure	\$	 0.0 %

12. Report aggregate amounts and percentages of the reporting entity's total admitted assets held in investments with contractual sales restrictions:

12.01 Are assets held in investments with contractual sales restrictions less than 2.5% of the reporting entity's total admitted assets? Yes [] No [X]

If response to 12.01 is yes, responses are not required for the remainder of Interrogatory 12.

	1	2	3
12.02	Aggregate statement value of investments with contractual sales restrictions	\$	 0.0 %
	Largest three investments with contractual sales restrictions:		
12.03	.....	\$ .....	..... 0.0 %
12.04	.....	\$ .....	..... 0.0 %
12.05	.....	\$ .....	..... 0.0 %

13. Amounts and percentages of admitted assets held in the ten largest equity interests:

13.01 Are assets held in equity interests less than 2.5% of the reporting entity's total admitted assets? Yes [] No [X]

If response to 13.01 above is yes, responses are not required for the remainder of Interrogatory 13.

	1	2	3
	Issuer		
13.02		\$	 0.0 %
13.03		\$	 0.0 %
13.04		\$	 0.0 %
13.05		\$	 0.0 %
13.06		\$	 0.0 %
13.07		\$	 0.0 %
13.08		\$	 0.0 %
13.09		\$	 0.0 %
13.10		\$	 0.0 %
13.11		\$	 0.0 %

SUPPLEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

14. Amounts and percentages of the reporting entity’s total admitted assets held in nonaffiliated, privately placed equities:

14.01 Are assets held in nonaffiliated, privately placed equities less than 2.5% of the reporting entity’s total admitted assets? Yes [] No [X]

If response to 14.01 above is yes, responses are not required for 14.02 through 14.05.

	1	2	3	
14.02	Aggregate statement value of investments held in nonaffiliated, privately placed equities .....	\$ .....	.....	0.0 %
	Largest three investments held in nonaffiliated, privately placed equities:			
14.03	.....	\$ .....	.....	0.0 %
14.04	.....	\$ .....	.....	0.0 %
14.05	.....	\$ .....	.....	0.0 %

Ten largest fund managers:

	1	2	3	4
	Fund Manager	Total Invested	Diversified	Nondiversified
14.06		\$0	\$	\$
14.07		\$0	\$	\$
14.08		\$0	\$	\$
14.09		\$0	\$	\$
14.10		\$0	\$	\$
14.11		\$0	\$	\$
14.12		\$0	\$	\$
14.13		\$0	\$	\$
14.14		\$0	\$	\$
14.15		\$0	\$	\$

15. Amounts and percentages of the reporting entity’s total admitted assets held in general partnership interests:

15.01 Are assets held in general partnership interests less than 2.5% of the reporting entity’s total admitted assets? Yes [] No [X]

If response to 15.01 above is yes, responses are not required for the remainder of Interrogatory 15.

	1	2	3	
15.02	Aggregate statement value of investments held in general partnership interests .....	\$ .....	.....	0.0 %
	Largest three investments in general partnership interests:			
15.03	.....	\$ .....	.....	0.0 %
15.04	.....	\$ .....	.....	0.0 %
15.05	.....	\$ .....	.....	0.0 %

SUPPLEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

16. Amounts and percentages of the reporting entity's total admitted assets held in mortgage loans:

16.01 Are mortgage loans reported in Schedule B less than 2.5% of the reporting entity's total admitted assets? Yes [] No [X]

If response to 16.01 above is yes, responses are not required for the remainder of Interrogatory 16 and Interrogatory 17.

	1	2	3
	Type (Residential, Commercial, Agricultural)		
16.02		\$	 0.0 %
16.03		\$	 0.0 %
16.04		\$	 0.0 %
16.05		\$	 0.0 %
16.06		\$	 0.0 %
16.07		\$	 0.0 %
16.08		\$	 0.0 %
16.09		\$	 0.0 %
16.10		\$	 0.0 %
16.11		\$	 0.0 %

Amount and percentage of the reporting entity's total admitted assets held in the following categories of mortgage loans:

		Loans	
16.12	Construction loans	\$	 0.0 %
16.13	Mortgage loans over 90 days past due	\$	 0.0 %
16.14	Mortgage loans in the process of foreclosure	\$	 0.0 %
16.15	Mortgage loans foreclosed	\$	 0.0 %
16.16	Restructured mortgage loans	\$	 0.0 %

17. Aggregate mortgage loans having the following loan-to-value ratios as determined from the most current appraisal as of the annual statement date:

Loan to Value	Residential		Commercial		Agricultural	
	1	2	3	4	5	6
17.01	above 95%..... \$	 0.0 %	\$	 0.0 %	\$	 0.0 %
17.02	91 to 95%..... \$	 0.0 %	\$	 0.0 %	\$	 0.0 %
17.03	81 to 90%..... \$	 0.0 %	\$	 0.0 %	\$	 0.0 %
17.04	71 to 80%..... \$	 0.0 %	\$	 0.0 %	\$	 0.0 %
17.05	below 70%..... \$	 0.0 %	\$	 0.0 %	\$	 0.0 %

18. Amounts and percentages of the reporting entity's total admitted assets held in each of the five largest investments in real estate:

18.01 Are assets held in real estate reported less than 2.5% of the reporting entity's total admitted assets? Yes [] No [X]

If response to 18.01 above is yes, responses are not required for the remainder of Interrogatory 18.

Largest five investments in any one parcel or group of contiguous parcels of real estate.

	Description	2	3
	1		
18.02		\$	 0.0 %
18.03		\$	 0.0 %
18.04		\$	 0.0 %
18.05		\$	 0.0 %
18.06		\$	 0.0 %

19. Report aggregate amounts and percentages of the reporting entity's total admitted assets held in investments held in mezzanine real estate loans:

19.01 Are assets held in investments held in mezzanine real estate loans less than 2.5% of the reporting entity's total admitted assets? Yes [] No [X]

If response to 19.01 is yes, responses are not required for the remainder of Interrogatory 19.

	1	2	3
19.02	Aggregate statement value of investments held in mezzanine real estate loans:	\$	 0.0 %
	Largest three investments held in mezzanine real estate loans:		
19.03	.....	\$ .....	..... 0.0 %
19.04	.....	\$ .....	..... 0.0 %
19.05	.....	\$ .....	..... 0.0 %

SUPPLEMENT FOR THE YEAR 2023 OF THE COSE Health and Wellness Trust

20. Amounts and percentages of the reporting entity’s total admitted assets subject to the following types of agreements:

		At Year End		1st Quarter	At End of Each Quarter		3rd Quarter
		1	2	3	2nd Quarter	4	5
20.01	Securities lending agreements (do not include assets held as collateral for such transactions)	\$	0.0 %	\$	\$	\$	\$
20.02	Repurchase agreements	\$	0.0 %	\$	\$	\$	\$
20.03	Reverse repurchase agreements	\$	0.0 %	\$	\$	\$	\$
20.04	Dollar repurchase agreements	\$	0.0 %	\$	\$	\$	\$
20.05	Dollar reverse repurchase agreements	\$	0.0 %	\$	\$	\$	\$

21. Amounts and percentages of the reporting entity's total admitted assets for warrants not attached to other financial instruments, options, caps, and floors:

		Owned		Written	
		1	2	3	4
21.01	Hedging	\$	0.0 %	\$	0.0 %
21.02	Income generation	\$	0.0 %	\$	0.0 %
21.03	Other	\$	0.0 %	\$	0.0 %

22. Amounts and percentages of the reporting entity's total admitted assets of potential exposure for collars, swaps, and forwards:

		At Year End		1st Quarter	At End of Each Quarter		3rd Quarter
		1	2	3	2nd Quarter	4	5
22.01	Hedging	\$0	0.0 %	\$0	\$0	\$0	\$0
22.02	Income generation	\$0	0.0 %	\$0	\$0	\$0	\$0
22.03	Replications	\$0	0.0 %	\$0	\$0	\$0	\$0
22.04	Other	\$0	0.0 %	\$0	\$0	\$0	\$0

23. Amounts and percentages of the reporting entity's total admitted assets of potential exposure for futures contracts:

		At Year End		1st Quarter	At End of Each Quarter		3rd Quarter
		1	2	3	2nd Quarter	4	5
23.01	Hedging	\$0	0.0 %	\$0	\$0	\$0	\$0
23.02	Income generation	\$	0.0 %	\$	\$	\$	\$
23.03	Replications	\$	0.0 %	\$	\$	\$	\$
23.04	Other	\$	0.0 %	\$	\$	\$	\$