

# QUARTERLY STATEMENT

of the

## OHIO BANKERS BENEFITS TRUST

of

COLUMBUS

in the

STATE OF OHIO

to the

DEPARTMENT OF INSURANCE

of the

state of

OHIO

For the Quarter Ended  
June 30, 2025

2025

2025



QUARTERLY STATEMENT  
AS OF JUNE 30, 2025  
OF THE CONDITION AND AFFAIRS OF THE  
OHIO BANKERS BENEFITS TRUST

NAIC Group Code ..... 0000,..... 0000 ..... NAIC Company Code..... 00000..... Employer's ID Number..... 31-6172509.....

(Current)(Prior)

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

Country of Domicile..... US.....

Licensed as business type:..... Life, Accident & Health..... Is HMO Federally Qualified?..... NO.....

Incorporated/Organized..... 01/01/1997..... Commenced Business..... 01/01/1997.....

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

Main Administrative Office..... 4215 WORTH AVENUE, SUITE 300.....

COLUMBUS, OH, US 43219.....

(Telephone Number)

Mail Address..... 4215 WORTH AVENUE, SUITE 300..... COLUMBUS, OH, US 43219.....

Primary Location of Books and

Records..... 4215 WORTH AVENUE, SUITE 300.....

COLUMBUS, OH, US 43219.....

(Telephone Number)

Internet Website Address.....

Statutory Statement Contact..... GAURI AIRI..... 614-340-7595.....

(Telephone Number)

GAIRI@OHIOBANKERSLEAGUE.COM..... 614-340-7599.....

(E-Mail Address)(Fax Number)

OFFICERS

Gauri Airi, Executive Director.....

DIRECTORS OR TRUSTEES

DEAN MILLER..... PAUL REED.....

TRICIA WALTER..... LEWIS RENOLLET.....

JOHN ESSEN..... MARK MASTERS.....

State of .....

County of ..... SS

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

DocuSigned by:  
xGauri Airi  
BEC/A6750F64748B...

xChris Zeek  
9CCG6A5AEC984BF...

DocuSigned by:  
xJohn Essen  
8861CCE8EB1A465...

Subscribed and sworn to before me

this 7/31/2025 day of

, 2025

Signed by:

xDarrell T Green

73161F850BB041C...

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

ASSETS

		Current Statement Date			4  December 31 Prior Year Net Admitted Assets
		1  Assets	2  Nonadmitted Assets	3  Net Admitted Assets (Cols. 1 - 2)	
1.	Bonds .....	4,717,305		4,717,305	4,779,171
2.	Stocks:				
2.1	Preferred stocks .....				
2.2	Common stocks .....	1,240,986		1,240,986	1,334,574
3.	Mortgage loans on real estate:				
3.1	First liens .....				
3.2	Other than first liens .....				
4.	Real estate:				
4.1	Properties occupied by the company (less \$..... encumbrances) .....				
4.2	Properties held for the production of income (less \$..... encumbrances) .....				
4.3	Properties held for sale (less \$..... encumbrances) .....				
5.	Cash (\$.....2,517,948), cash equivalents (\$.....) and short-term investments (\$.....1,057,102) .....	3,575,051		3,575,051	2,026,727
6.	Contract loans (including \$..... premium notes) .....				
7.	Derivatives .....				
8.	Other invested assets .....				
9.	Receivables for securities .....				
10.	Securities lending reinvested collateral assets .....				
11.	Aggregate write-ins for invested assets .....				
12.	Subtotals, cash and invested assets (Lines 1 to 11) .....	9,533,342		9,533,342	8,140,472
13.	Title plants less \$..... charged off (for Title insurers only) .....				
14.	Investment income due and accrued .....	39,307		39,307	40,183
15.	Premiums and considerations:				
15.1	Uncollected premiums and agents' balances in the course of collection .....				303,354
15.2	Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$..... earned but unbilled premiums) .....				
15.3	Accrued retrospective premiums (\$.....) and contracts subject to redetermination (\$.....) .....				
16.	Reinsurance:				
16.1	Amounts recoverable from reinsurers .....	41,978		41,978	62,238
16.2	Funds held by or deposited with reinsured companies .....				
16.3	Other amounts receivable under reinsurance contracts .....				
17.	Amounts receivable relating to uninsured plans .....				
18.1	Current federal and foreign income tax recoverable and interest thereon .....				
18.2	Net deferred tax asset .....				
19.	Guaranty funds receivable or on deposit .....				
20.	Electronic data processing equipment and software .....				
21.	Furniture and equipment, including health care delivery assets (\$.....) .....				
22.	Net adjustment in assets and liabilities due to foreign exchange rates .....				
23.	Receivables from parent, subsidiaries and affiliates .....				
24.	Health care (\$.....) and other amounts receivable .....	468,478		468,478	657,806
25.	Aggregate write-ins for other-than-invested assets .....	16,500	16,500	—	—
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25) .....	10,099,605	16,500	10,083,105	9,204,054
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts .....				
28.	Total (Lines 26 and 27) .....	10,099,605	16,500	10,083,105	9,204,054
Details of Write-Ins					
1101.	.....				
1102.	.....				
1103.	.....				
1198.	Summary of remaining write-ins for Line 11 from overflow page .....				
1199.	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above) .....				
2501.	Prepaid Assets .....	16,500	16,500	—	—
2502.	.....				
2503.	.....				
2598.	Summary of remaining write-ins for Line 25 from overflow page .....				
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above) .....	16,500	16,500	—	—

LIABILITIES, CAPITAL AND SURPLUS

		Current Period			Prior Year
		1	2	3	4
		Covered	Uncovered	Total	Total
1.	Claims unpaid (less \$..... reinsurance ceded).....	3,706,593		3,706,593	4,248,523
2.	Accrued medical incentive pool and bonus amounts.....				
3.	Unpaid claims adjustment expenses.....	357,000		357,000	414,000
4.	Aggregate health policy reserves, including the liability of \$..... for medical loss ratio rebate per the Public Health Service Act.....				
5.	Aggregate life policy reserves.....				
6.	Property/casualty unearned premium reserve.....				
7.	Aggregate health claim reserves.....				
8.	Premiums received in advance.....	61,785		61,785	
9.	General expenses due or accrued.....	703,615		703,615	358,249
10.1	Current federal and foreign income tax payable and interest thereon (including \$..... on realized gains (losses)).....	229,193		229,193	171,817
10.2	Net deferred tax liability.....	103,358		103,358	110,153
11.	Ceded reinsurance premiums payable.....				
12.	Amounts withheld or retained for the account of others.....				
13.	Remittances and items not allocated.....				
14.	Borrowed money (including \$..... current ) and interest thereon \$..... (including \$..... current).....				
15.	Amounts due to parent, subsidiaries and affiliates.....				
16.	Derivatives.....				
17.	Payable for securities.....				
18.	Payable for securities lending.....				
19.	Funds held under reinsurance treaties (with \$..... authorized reinsurers, \$..... unauthorized reinsurers and \$..... certified reinsurers).....				
20.	Reinsurance in unauthorized and certified (\$.....) companies.....				
21.	Net adjustments in assets and liabilities due to foreign exchange rates.....				
22.	Liability for amounts held under uninsured plans.....				
23.	Aggregate write-ins for other liabilities (including \$..... current).....				
24.	Total liabilities (Lines 1 to 23).....	5,161,543		5,161,543	5,302,743
25.	Aggregate write-ins for special surplus funds.....	XXX	XXX		
26.	Common capital stock.....	XXX	XXX		
27.	Preferred capital stock.....	XXX	XXX		
28.	Gross paid in and contributed surplus.....	XXX	XXX	1,414,878	1,414,878
29.	Surplus notes.....	XXX	XXX		
30.	Aggregate write-ins for other-than-special surplus funds.....	XXX	XXX		
31.	Unassigned funds (surplus).....	XXX	XXX	3,506,683	2,486,433
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	4,921,561	3,901,311
34.	Total liabilities, capital and surplus (Lines 24 and 33).....	XXX	XXX	10,083,105	9,204,054
Details of Write-Ins					
2301.	.....				
2302.	.....				
2303.	.....				
2398.	Summary of remaining write-ins for Line 23 from overflow page.....				
2399.	Totals (Lines 2301 through 2303 plus 2398) (Line 23 above).....				
2501.	.....	XXX	XXX		
2502.	.....	XXX	XXX		
2503.	.....	XXX	XXX		
2598.	Summary of remaining write-ins for Line 25 from overflow page.....	XXX	XXX		
2599.	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	XXX	XXX		
3001.	.....	XXX	XXX		
3002.	.....	XXX	XXX		
3003.	.....	XXX	XXX		
3098.	Summary of remaining write-ins for Line 30 from overflow page.....	XXX	XXX		
3099.	Totals (Lines 3001 through 3003 plus 3098) (Line 30 above).....	XXX	XXX		

STATEMENT OF REVENUE AND EXPENSES

		Current Year to Date		Prior Year To Date	Prior Year Ended December 31
		1	2	3	4
		Uncovered	Total	Total	Total
1.	Member Months .....	XXX	51,300	57,060	113,996
2.	Net premium income (including \$..... non-health premium income) .....	XXX	15,842,089	16,459,129	34,063,442
3.	Change in unearned premium reserves and reserve for rate credits .....	XXX			
4.	Fee-for-service (net of \$..... medical expenses) .....	XXX			
5.	Risk revenue .....	XXX			
6.	Aggregate write-ins for other health care related revenues .....	XXX			
7.	Aggregate write-ins for other non-health revenues .....	XXX	85,348		430,944
8.	Total revenues (Lines 2 to 7) .....	XXX	15,927,437	16,459,129	34,494,386
Hospital and Medical:					
9.	Hospital/medical benefits .....		10,320,113	11,875,531	23,410,890
10.	Other professional services .....		1,717,282	1,939,711	3,801,741
11.	Outside referrals .....			—	
12.	Emergency room and out-of-area .....		841,660	980,969	1,962,760
13.	Prescription drugs .....		2,457,324	2,663,115	6,439,015
14.	Aggregate write-ins for other hospital and medical .....				
15.	Incentive pool, withhold adjustments and bonus amounts .....				
16.	Subtotal (Lines 9 to 15) .....		15,336,379	17,459,327	35,614,407
Less:					
17.	Net reinsurance recoveries .....		253,009	1,830,797	2,239,369
18.	Total hospital and medical (Lines 16 minus 17) .....		15,083,370	15,628,529	33,375,037
19.	Non-health claims (net) .....				
20.	Claims adjustment expenses, including \$.....297,649 cost containment expenses .....		461,471	1,046,230	1,877,991
21.	General administrative expenses .....		150,036	219,185	460,963
22.	Increase in reserves for life and accident and health contracts (including \$..... increase in reserves for life only) .....				
23.	Total underwriting deductions (Lines 18 through 22) .....		15,694,877	16,893,945	35,713,991
24.	Net underwriting gain or (loss) (Lines 8 minus 23) .....	XXX	232,560	(434,816)	(1,219,605)
25.	Net investment income earned .....		148,172	119,457	225,530
26.	Net realized capital gains (losses) less capital gains tax of \$.....29,361 .....		117,446	219,153	173,241
27.	Net investment gains (losses) (Lines 25 plus 26) .....		265,617	338,609	398,771
28.	Net gain or (loss) from agents’ or premium balances charged off [(amount recovered \$.....) (amount charged off \$.....)] .....				
29.	Aggregate write-ins for other income or expenses .....				
30.	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29) .....	XXX	498,177	(96,206)	(820,834)
31.	Federal and foreign income taxes incurred .....	XXX	88,014	36,490	245,007
32.	Net income (loss) (Lines 30 minus 31) .....	XXX	410,163	(132,696)	(1,065,841)
Details of Write-Ins					
0601.	.....	XXX			
0602.	.....	XXX			
0603.	.....	XXX			
0698.	Summary of remaining write-ins for Line 6 from overflow page .....	XXX			
0699.	Totals (Lines 0601 through 0603 plus 0698) (Line 6 above) .....	XXX			
0701.	Commissions earned .....	XXX	85,348		430,944
0702.	.....	XXX			
0703.	.....	XXX			
0798.	Summary of remaining write-ins for Line 7 from overflow page .....	XXX			
0799.	Totals (Lines 0701 through 0703 plus 0798) (Line 7 above) .....	XXX	85,348		430,944
1401.	.....				
1402.	.....				
1403.	.....				
1498.	Summary of remaining write-ins for Line 14 from overflow page .....				
1499.	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above) .....				
2901.	.....				
2902.	.....				
2903.	.....				
2998.	Summary of remaining write-ins for Line 29 from overflow page .....				
2999.	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above) .....				

STATEMENT OF REVENUE AND EXPENSES (CONTINUED)

		1	2	3
		Current Year To Date	Prior Year To Date	Prior Year Ended December 31
CAPITAL & SURPLUS ACCOUNT				
33.	Capital and surplus prior reporting year .....	3,901,311	5,111,439	5,111,439
34.	Net income or (loss) from Line 32 .....	410,163	(132,696)	(1,065,841)
35.	Change in valuation basis of aggregate policy and claim reserves .....			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$.....	(33,978)	(85,390)	44,399
37.	Change in net unrealized foreign exchange capital gain or (loss) .....			
38.	Change in net deferred income tax .....	6,796	17,078	(8,880)
39.	Change in nonadmitted assets .....	637,269	(238,966)	(179,805)
40.	Change in unauthorized and certified reinsurance .....			
41.	Change in treasury stock .....			
42.	Change in surplus notes .....			
43.	Cumulative effect of changes in accounting principles .....			
44.	Capital Changes:			
44.1	Paid in .....			
44.2	Transferred from surplus (Stock Dividend) .....			
44.3	Transferred to surplus .....			
45.	Surplus adjustments:			
45.1	Paid in .....	—	—	—
45.2	Transferred to capital (Stock Dividend) .....			
45.3	Transferred from capital .....			
46.	Dividends to stockholders .....			
47.	Aggregate write-ins for gains or (losses) in surplus .....			
48.	Net change in capital and surplus (Lines 34 to 47) .....	1,020,250	(439,973)	(1,210,128)
49.	Capital and surplus end of reporting period (Line 33 plus 48) .....	4,921,561	4,671,466	3,901,311
Details of Write-Ins				
4701.	.....			
4702.	.....			
4703.	.....			
4798.	Summary of remaining write-ins for Line 47 from overflow page .....			
4799.	Totals (Lines 4701 through 4703 plus 4798) (Line 47 above) .....			

CASH FLOW

	1	2	3
	Current Year To Date	Prior Year To Date	Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	16,207,228	17,727,858	34,006,502
2. Net investment income	153,155	119,213	237,819
3. Miscellaneous income	85,348	—	430,944
4. Total (Lines 1 to 3)	16,445,731	17,847,072	34,675,265
5. Benefit and loss related payments	14,775,580	17,702,513	34,801,303
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	323,141	1,202,845	2,238,503
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$..... tax on capital gains (losses)	60,000	186,870	222,692
10. Total (Lines 5 through 9)	15,158,720	19,092,228	37,262,498
11. Net cash from operations (Line 4 minus Line 10)	1,287,011	(1,245,157)	(2,587,233)
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	1,325,000	1,964,980	5,582,048
12.2 Stocks	343,808	954,272	1,129,641
12.3 Mortgage loans			
12.4 Real estate			
12.5 Other invested assets			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	(4,241)	4,816	28,688
12.7 Miscellaneous proceeds	—	—	—
12.8 Total investment proceeds (Lines 12.1 to 12.7)	1,664,567	2,924,068	6,740,377
13. Cost of investments acquired (long-term only):			
13.1 Bonds	1,270,121	100,102	2,506,212
13.2 Stocks	130,269	434,367	434,367
13.3 Mortgage loans			
13.4 Real estate			
13.5 Other invested assets			
13.6 Miscellaneous applications	—	—	—
13.7 Total investments acquired (Lines 13.1 to 13.6)	1,400,390	534,469	2,940,579
14. Net increase/(decrease) in contract loans and premium notes			
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	264,177	2,389,600	3,799,798
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes			
16.2 Capital and paid in surplus, less treasury stock	—	—	—
16.3 Borrowed funds			
16.4 Net deposits on deposit-type contracts and other insurance liabilities			
16.5 Dividends to stockholders			
16.6 Other cash provided (applied)	(2,863)	4,616	(9,021)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(2,863)	4,616	(9,021)
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)	1,548,325	1,149,059	1,203,545
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	2,026,725	823,181	823,181
19.2 End of period (Line 18 plus Line 19.1)	3,575,051	1,972,240	2,026,725
Note: Supplemental disclosures of cash flow information for non-cash transactions:			
20.0001.			

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Comprehensive (Hospital & Medical)		4	5	6	7	8	9	10	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 .....	9,425		4,881			4,544								
2. First Quarter .....	8,406		4,158			4,248								
3. Second Quarter .....	8,393		4,169			4,224								
4. Third Quarter .....														
5. Current Year .....														
6. Current Year Member Months .....	51,300		25,398			25,902								
Total Member Ambulatory Encounters for Period:														
7. Physician .....														
8. Non-Physician .....														
9. Total .....														
10. Hospital Patient Days Incurred .....														
11. Number of Inpatient Admissions .....														
12. Health Premiums Written (a) .....	17,097,102		16,355,672			741,430								
13. Life Premiums Direct .....														
14. Property/Casualty Premiums Written .....														
15. Health Premiums Earned .....	17,097,102		16,355,672			741,430								
16. Property/Casualty Premiums Earned .....														
17. Amount Paid for Provision of Health Care Services .....	15,878,310		15,227,333			650,976								
18. Amount Incurred for Provision of Health Care Services .....	15,336,379		14,677,816			658,563								

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



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

Aging Analysis of Unpaid Claims

1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims Unpaid (Reported)						
IBNR .....	3,706,593					3,706,593
0199999 – Individually listed claims unpaid .....	3,706,593					3,706,593
0499999 – Subtotals .....	3,706,593					3,706,593
0799999 – Total claims unpaid .....						3,706,593
0899999 – Accrued medical incentive pool and bonus amounts .....						

UNDERWRITING AND INVESTMENT EXHIBIT  
ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

Line of Business	Claims Paid Year to Date		Liability End of Current Quarter		5	6
	1	2	3	4		
	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid Dec. 31 of Prior Year	On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year
1. Comprehensive (hospital and medical) individual.....						
2. Comprehensive (hospital and medical) group.....	2,643,134	11,496,072	155,729	3,466,121	2,798,863	4,197,523
3. Medicare Supplement.....						
4. Vision only.....						
5. Dental only.....	53,014	597,962	3,644	81,100	56,658	51,000
6. Federal Employees Health Benefits Plan.....						
7. Title XVIII – Medicare.....						
8. Title XIX – Medicaid.....						
9. Credit A&H.....						
10. Disability income.....						
11. Long-term care.....						
12. Other health.....						
13. Health subtotal (Lines 1 to 12).....	2,696,148	12,094,034	159,373	3,547,221	2,855,521	4,248,523
14. Health care receivables (a).....		425,447				1,260,565
15. Other non-health.....						
16. Medical incentive pools and bonus amounts.....						
17. Totals (Lines 13-14+15+16).....	2,696,148	11,668,587	159,373	3,547,221	2,855,521	2,987,958

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

Notes to the Financial Statements

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

These financial statement of the Ohio Bankers' Benefit Trust ("OBBT" or the "Arrangement") have been prepared in accordance with the NAIC Annual Statement instructions and Accounting Practices and Procedures Manual, as prescribed by the Ohio Department of Insurance

	SSAP #	F/S Page	F/S Line #	06/30/2025	12/31/2024
Net Income					
(1) State basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ 410,163	\$ (1,065,841)
(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	<u>\$ 410,163</u>	<u>\$ (1,065,841)</u>
Surplus					
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 4,921,561	\$ 3,901,311
(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	<u>\$ 4,921,561</u>	<u>\$ 3,901,311</u>

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

The preparation of financial statements requires management to make estimates and assumptions that affect amounts reported in the financial statements and accompanying notes. Actual results could differ from those estimates.

C. Accounting Policy

(1) Basis for Short-Term Investments

Carrying value using straight line amortization, which approximates the scientific (constant yield) method.

(2) Basis for Bonds and Amortization Schedule

Carrying value using straight line amortization, which approximates the scientific (constant yield) method.

(3) Basis for Common Stocks

Fair Market Value using values provided on monthly investment statements.

(4) Preferred stocks - None

(5) Mortgage loans - None

(6) Asset-backed securities - None

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

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

(9) Derivatives - None

(10) Management utilizes an actuary to assist with determination of the need for a premium deficiency reserve. The actuary considers a high level overview of the impact of investment income on the overall financials in the calculation.

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

Unpaid claims and claims adjustment expenses represent management's best estimate of the ultimate net cost of all reported and unreported claims, less the estimated amount recoverable from claim overpayments and subrogation. The unpaid claims liability is actuarially estimated based on a review of historical claim payment patterns and claim trends. The estimates are subject to the effects of trends in claim severity and frequency, and a reasonable provision for adverse development has been incorporated in management's best estimate. Although considerable variability is inherent in such estimates, management believes that the amounts reported for unpaid claims and claims adjustment expenses are adequate. The estimates are continually reviewed and adjusted as necessary as experience develops or new information becomes known; such adjustments are included in current operations.

(12) The Arrangement has made no modifications to its capitalization policy.

(13) Method Used to Estimate Pharmaceutical Rebate Receivables

Management relies on historical pharmaceutical rebates to calculate a reasonable estimate of future receivables.

D. Going Concern

The Arrangement has neither the intention nor the need to liquidate or materially curtail the scale of its operations.

2. Accounting Changes and Corrections of Errors - None

3. Business Combinations and Goodwill - None

4. Discontinued Operations - None

5. Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans - None

B. Debt Restructuring - None

C. Reverse Mortgages - None

Notes to the Financial Statements

5. Investments (Continued)

- D. Asset-Backed Securities - None
- E. Dollar Repurchase Agreements and/or Securities Lending Transactions - None
- F. Repurchase Agreements Transactions Accounted for as Secured Borrowing - None
- G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing - None
- H. Repurchase Agreements Transactions Accounted for as a Sale - None
- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale - None
- J. Real Estate - None
- K. Investments in Tax Credit Structures (tax credit investments) - None
- L. Restricted Assets - None
- M. Working Capital Finance Investments - None
- N. Offsetting and Netting of Assets and Liabilities - None
- O. 5GI Securities - None
- P. Short Sales - None
- Q. Prepayment Penalty and Acceleration Fees - None
- R. Reporting Entity's Share of Cash Pool by Asset Type - None

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

7. Investment Income

- A. Due and Accrued Income Excluded from Surplus  
Investment income is solely from bonds, common stock and cash holdings of the plan. This income is directly connected to the investments of the plan and are utilized to help fund benefits. Accordingly, no excluded investment income exists.
- B. Total Amount Excluded - None
- C. The gross, nonadmitted and admitted amounts for interest income due and accrued

Interest Income Due and Accrued	Amount
1. Gross.....	\$..... 39,307
2. Nonadmitted.....	\$.....
3. Admitted.....	\$..... 39,307

- D. The aggregate deferred interest

	Amount
Aggregate Deferred Interest.....	\$.....

8. Derivative Instruments - None

9. Income Taxes

As of June 30, 2025 the Arrangement has \$229,193 of income tax liability associated with unrelated business income.

- A. Components of the Net Deferred Tax Asset/(Liability)  
The Net Deferred Tax Liability of \$103,358 was calculated by taking the 20% capital gains tax rate and applying it to the unrealized gains on common stocks which totaled \$516,789 as of 6/30/2025.

(1) Change between years by tax character

	06/30/2025			12/31/2024			Change		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ordinary	Capital	Total (Col 1+2)	Ordinary	Capital	Total (Col 4+5)	Ordinary (Col 1-4)	Capital (Col 2-5)	Total (Col 7+8)
(a) Gross deferred tax assets.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....
(b) Statutory valuation allowance adjustments.....									
(c) Adjusted gross deferred tax assets (1a - 1b).....									
(d) Deferred tax assets nonadmitted.....									
(e) Subtotal net admitted deferred tax asset (1c - 1d).....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....	\$.....
(f) Deferred tax liabilities.....	103,358		103,358	110,153		110,153	(6,796)		(6,796)
(g) Net admitted deferred tax asset/(net deferred tax liability) (1e - 1f).....	<u><u>\$..... (103,358)</u></u>	<u><u>\$.....</u></u>	<u><u>\$..... (103,358)</u></u>	<u><u>\$..... (110,153)</u></u>	<u><u>\$.....</u></u>	<u><u>\$..... (110,153)</u></u>	<u><u>\$..... 6,796</u></u>	<u><u>\$.....</u></u>	<u><u>\$..... 6,796</u></u>

(2) Admission calculation components SSAP No. 101 - None

(3) Ratio used as basis of admissibility - None

(4) Impact of tax-planning strategies - None

- B. Regarding Deferred Tax Liabilities That Are Not Recognized - None

Notes to the Financial Statements

9. Income Taxes (Continued)

C. Major Components of Current Income Taxes Incurred

	(1)	(2)	(3)
	06/30/2025	12/31/2024	Change (1-2)
Current income taxes incurred consist of the following major components:			
1. Current Income Tax			
(a) Federal	\$ 88,014	\$ 245,007	\$ (156,993)
(b) Foreign			
(c) Subtotal (1a+1b)	\$ 88,014	\$ 245,007	\$ (156,993)
(d) Federal income tax on net capital gains	29,361	43,310	(13,949)
(e) Utilization of capital loss carry-forwards			
(f) Other			
(g) Federal and foreign income taxes incurred (1c+1d+1e+1f)	\$ 117,375	\$ 288,317	\$ (170,942)
	(1)	(2)	(3)
	06/30/2025	12/31/2024	Change (1-2)
3. Deferred Tax Liabilities			
(a) Ordinary			
(1) Investments	\$ 103,358	\$ 110,153	\$ (6,796)
(2) Fixed assets			
(3) Deferred and uncollected premium			
(4) Policyholder reserves			
(5) Other			
(99) Subtotal (3a1+3a2+3a3+3a4+3a5)	\$ 103,358	\$ 110,153	\$ (6,796)
(b) Capital			
(1) Investments	\$	\$	\$
(2) Real estate			
(3) Other			
(99) Subtotal (3b1+3b2+3b3)	\$	\$	\$
(c) Deferred tax liabilities (3a99 + 3b99)	\$ 103,358	\$ 110,153	\$ (6,796)
4. Net deferred tax assets/liabilities (2i - 3c)	\$ (103,358)	\$ (110,153)	\$ 6,796

The change in deferred income taxes is comprised of the following (this analysis is exclusive of nonadmitted assets as the Change in Nonadmitted Assets is reported separately from the Change in Net Deferred Income Taxes in the surplus section of the Annual Statement):

	Current Period	Prior Year	Change (Col. 1 - Col. 2)
Adjusted gross deferred tax assets	\$	\$	\$
Total deferred tax liabilities			
Net deferred tax assets (liabilities)			
Statutory valuation allowance adjustment			
Net deferred tax assets (liabilities) after statutory valuation allowance			
Tax effect of unrealized gains (losses)			
Change in net deferred income tax			\$

10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties - None
11. Debt - None
12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans - None
13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations - None
14. Liabilities, Contingencies and Assessments - None
15. Leases - None
16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk - None
17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities - None
18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans - None
19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators - None

Notes to the Financial Statements

20. Fair Value Measurements

A. Fair Value Measurement

(1) Fair value measurements at reporting date

Description for each class of asset or liability	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Total
a. Assets at fair value					
Common Stock .....	\$ ..... 1,240,986	\$ .....	\$ .....	\$ .....	\$ ..... 1,240,986
Total assets at fair value/NAV .....	<u>\$ ..... 1,240,986</u>	<u>\$ .....</u>	<u>\$ .....</u>	<u>\$ .....</u>	<u>\$ ..... 1,240,986</u>
b. Liabilities at fair value					
Total liabilities at fair value .....	<u>\$ .....</u>	<u>\$ .....</u>	<u>\$ .....</u>	<u>\$ .....</u>	<u>\$ .....</u>

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

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

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

(5) Derivatives - None

B. Other Fair Value Disclosures - None

C. Fair Values for All Financial Instruments by Level 1, 2 and 3

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Short-Term Investments .....	\$ ..... 1,056,753	\$ ..... 1,057,102	\$ .....	\$ ..... 1,056,753	\$ .....	\$ .....	\$ .....
Bonds .....	4,677,713	4,717,305		4,677,713			
Common Stock .....	1,240,986	1,240,986	1,240,986				

D. Not Practicable to Estimate Fair Value - None

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

21. Other Items - None

22. Events Subsequent

Subsequent events have been considered through August 12, 2025 for these statutory financial statements which are to be issued by August 15, 2025.

23. Reinsurance

During 2025, the Arrangement is subject to a stop loss reinsurance agreement with Community Insurance Company for medical and prescription drug coverage. The specific stop loss threshold per covered person is from \$350,000 for 2025. Under the aggregate stop loss contract, the reinsurer pays all medical and prescription drug claims in excess of the minimum aggregate stop loss limit, calculated at \$1,646 per employee per month.

A. Ceded Reinsurance Report

Section 1 – General Interrogatories

- (1)

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

Yes ( ) No (X)
- (2)

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

Yes ( ) No (X)

Section 2 – Ceded Reinsurance Report – Part A

- (1)

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

Yes ( ) No (X)
- (2)

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

Yes ( ) No (X)

C. Commutation of Ceded Reinsurance - None

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

E. Reinsurance Credit - None

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. Method Used to Estimate - None

B. Method Used to Record - None

C. Amount and Percent of Net Retrospective Premiums - None

D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act - None

Notes to the Financial Statements

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination (Continued)

E. Risk-Sharing Provisions of the Affordable Care Act (ACA)

- (1) Accident and health insurance premium subject to the Affordable Care Act risk-sharing provisions

Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions? NO

- (2) Impact of Risk-Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year - None

- (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 - None

25. Change in Incurred Claims and Claim Adjustment Expenses - None

26. Intercompany Pooling Arrangements - None

27. Structured Settlements - None

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
06/30/2025	\$ 425,447	\$ 310,833	\$ 310,833	\$	\$
03/31/2025	481,433	918,515	320,954	597,560	
12/31/2024	620,433	1,100,201	885,599	214,602	
09/30/2024	776,763	983,933	350,576	633,357	
06/30/2024	697,953	926,947	344,977	575,195	6,775
03/31/2024	712,930	900,339	350,182	550,157	
12/31/2023	469,348	907,544	276,911	630,633	
09/30/2023	477,303	858,003	274,415	583,587	
06/30/2023	477,303	826,815	311,358	515,457	
03/31/2023	364,100	727,692	276,562	451,129	
12/31/2022	364,000	806,526	260,352	491,914	54,261
09/30/2022	565,980	610,482	231,808	378,674	

B. Risk-Sharing Receivables - None

29. Participating Policies - None

30. Premium Deficiency Reserves - None

31. Anticipated Salvage and Subrogation - None

GENERAL INTERROGATORIES  
PART 1 - COMMON INTERROGATORIES

GENERAL

- 1.1 Did the reporting entity experience any material transactions requiring the filing of Disclosure of Material Transactions with the State of Domicile, as required by the Model Act?..... NO
- 1.2 If yes, has the report been filed with the domiciliary state?.....
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?..... NO
- 2.2 If yes, date of change:.....
- 3.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer?..... NO  
If yes, complete Schedule Y, Parts 1 and 1A.
- 3.2 Have there been any substantial changes in the organizational chart since the prior quarter end?..... NO
- 3.3 If the response to 3.2 is yes, provide a brief description of those changes.  
.....
- 3.4 Is the reporting entity publicly traded or a member of a publicly traded group?..... NO
- 3.5 If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.....
- 4.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?..... NO
- 4.2 If yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

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

5. If the reporting entity is subject to a management agreement, including third-party administrator(s), managing general agent(s), attorney-in-fact, or similar agreement, have there been any significant changes regarding the terms of the agreement or principals involved?..... NO  
If yes, attach an explanation.  
.....
- 6.1 State as of what date the latest financial examination of the reporting entity was made or is being made.....12/31/2021
- 6.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released.....12/31/2021
- 6.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date).....05/01/2023
- 6.4 By what department or departments?  
Ohio Department of Insurance.....
- 6.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with Departments?..... YES
- 6.6 Have all of the recommendations within the latest financial examination report been complied with?..... YES
- 7.1 Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?..... NO
- 7.2 If yes, give full information  
.....
- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?..... NO
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company.  
.....
- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms?..... NO
- 8.4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliates primary federal regulator.

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



GENERAL INTERROGATORIES  
PART 1 - COMMON INTERROGATORIES

- 9.1

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

YES

(a)

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

(b)

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

(c)

Compliance with applicable governmental laws, rules and regulations;

(d)

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

(e)

Accountability for adherence to the code.
- 9.11

If the response to 9.1 is No, please explain:
- 9.2

Has the code of ethics for senior managers been amended?

NO
- 9.21

If the response to 9.2 is Yes, provide information related to amendment(s).
- 9.3

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

NO
- 9.31

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

FINANCIAL

- 10.1

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

NO
- 10.2

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

\$

INVESTMENT

- 11.1

Were any of the stocks, bonds, or other assets of the reporting entity loaned, placed under option agreement, or otherwise made available for use by another person? (Exclude securities under securities lending agreements.)

NO
- 11.2

If yes, give full and complete information relating thereto:
12.

Amount of real estate and mortgages held in other invested assets in Schedule BA: 

\$
13.

Amount of real estate and mortgages held in short-term investments: 

\$
- 14.1

Does the reporting entity have any investments in parent, subsidiaries and affiliates?

NO
- 14.2

If yes, please complete the following:

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

- 15.1

Has the reporting entity entered into any hedging transactions reported on Schedule DB?

NO
- 15.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state?

If no, attach a description with this statement.
16.

For the reporting entity's security lending program, state the amount of the following as of the current statement date:

16.1

Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2

\$

16.2

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

\$

16.3

Total payable for securities lending reported on the liability page

\$
17.

Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC *Financial Condition Examiners Handbook*?

YES

- 17.1

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

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

- 17.2

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

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

- 17.3

Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter?

NO
- 17.4

If yes, give full and complete information relating thereto:

GENERAL INTERROGATORIES  
PART 1 - COMMON INTERROGATORIES

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

17.5 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. This includes both primary and sub-advisors. For assets that are managed internally by employees of the reporting entity, note as such.

1	2
Name of Firm or Individual	Affiliation
HUNTINGTON NATIONAL BANK	U

17.5097 For those firms/individuals listed in the table for Question 17.5, do any firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") manage more than 10% of the reporting entity's invested assets? YES

17.5098 For firms/individuals unaffiliated with the reporting entity (i.e., designated with a "U") listed in the table for Question 17.5, does the total assets under management aggregate to more than 50% of the reporting entity's invested assets? YES

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

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
2305	Huntington National Bank	2WHM8VNH63UN14OL754	OCC	NO

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

18.2 If no, list exceptions:

19. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designated 5GI security:

a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.

b. Issuer or obligor is current on all contracted interest and principal payments.

c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Has the reporting entity self-designated 5GI securities? NO

20. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

a. The security was purchased prior to January 1, 2018.

b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.

c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.

d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Has the reporting entity self-designated PLGI securities? NO

21. By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated FE fund:

a. The shares were purchased prior to January 1, 2019.

b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.

c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019.

d. The fund only or predominantly holds bonds in its portfolio.

e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO.

f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed.

Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? NO

GENERAL INTERROGATORIES  
PART 2 – HEALTH

1. Operating Percentages:
- 1.1 A&H loss percent

97.100 %
- 1.2 A&H cost containment percent

1.900 %
- 1.3 A&H expense percent excluding cost containment expenses

2.000 %
- 2.1 Do you act as a custodian for health savings accounts?

NO
- 2.2 If yes, please provide the amount of custodial funds held as of the reporting date

\$
- 2.3 Do you act as an administrator for health savings accounts?

NO
- 2.4 If yes, please provide the balance of the funds administered as of the reporting date

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

NO
- 3.1 If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting entity?

NO

**SCHEDULE S - CEDED REINSURANCE**  
Showing All New Reinsurance Treaties - Current Year to Date

1	2	3	4	5	6	7	8	9	10
NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Type of Reinsurer	Certified Reinsurer Rating (1 through 6)	Effective Date of Certified Reinsurer Rating
<b>Accident &amp; Health - Non-Affiliates</b>									
..... 10345 .....	31-1440175.....	..... 01/01/2022 .....	Community Insurance Company DBA Anthem.....	..... OH .....	..... SSL/G .....	..... CMM.....	Authorized.....	.....	.....
..... 10345 .....	31-1440175.....	..... 01/01/2022 .....	Community Insurance Company DBA Anthem.....	..... OH .....	..... ASL/G .....	..... CMM.....	Authorized.....	.....	.....

SCHEDULE T – PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

		1	Direct Business Only								
			2	3	4	5	6	7	8	9	10
States, Etc.		Active Status (a)	Accident & Health Premiums	Medicare Title XVIII	Medicaid Title XIX	CHIP Title XXI	Federal Employees Health Benefits Plan Premiums	Life & Annuity Premiums & Other Considerations	Property/ Casualty Premiums	Total Columns 2 Through 8	Deposit–Type Contracts
1.	Alabama	AL N									
2.	Alaska	AK N									
3.	Arizona	AZ N									
4.	Arkansas	AR N									
5.	California	CA N									
6.	Colorado	CO N									
7.	Connecticut	CT N									
8.	Delaware	DE N									
9.	District of Columbia	DC N									
10.	Florida	FL N									
11.	Georgia	GA N									
12.	Hawaii	HI N									
13.	Idaho	ID N									
14.	Illinois	IL N									
15.	Indiana	IN N									
16.	Iowa	IA N									
17.	Kansas	KS N									
18.	Kentucky	KY N									
19.	Louisiana	LA N									
20.	Maine	ME N									
21.	Maryland	MD N									
22.	Massachusetts	MA N									
23.	Michigan	MI N									
24.	Minnesota	MN N									
25.	Mississippi	MS N									
26.	Missouri	MO N									
27.	Montana	MT N									
28.	Nebraska	NE N									
29.	Nevada	NV N									
30.	New Hampshire	NH N									
31.	New Jersey	NJ N									
32.	New Mexico	NM N									
33.	New York	NY N									
34.	North Carolina	NC N									
35.	North Dakota	ND N									
36.	Ohio	OH L	17,097,102							17,097,102	
37.	Oklahoma	OK N									
38.	Oregon	OR N									
39.	Pennsylvania	PA N									
40.	Rhode Island	RI N									
41.	South Carolina	SC N									
42.	South Dakota	SD N									
43.	Tennessee	TN N									
44.	Texas	TX N									
45.	Utah	UT N									
46.	Vermont	VT N									
47.	Virginia	VA N									
48.	Washington	WA N									
49.	West Virginia	WV N									
50.	Wisconsin	WI N									
51.	Wyoming	WY N									
52.	American Samoa	AS N									
53.	Guam	GU N									
54.	Puerto Rico	PR N									
55.	U.S. Virgin Islands	VI N									
56.	Northern Mariana Islands	MP N									
57.	Canada	CAN N									
58.	Aggregate Other Alien	OT XXX									
59.	Subtotal	XXX	17,097,102							17,097,102	
60.	Reporting entity contributions for employee benefits plans	XXX									
61.	Total (Direct Business)	XXX	17,097,102							17,097,102	
Details of Write-Ins											
58001.		XXX									
58002.		XXX									
58003.		XXX									
58998.	Summary of remaining write-ins for Line 58 from overflow page	XXX									
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)	XXX									

(a) Active Status Counts

1. L – Licensed or Chartered - Licensed insurance carrier or domiciled RRG ..... 1 ..... 4. Q – Qualified - Qualified or accredited reinsurer ..... – .....  
2. R – Registered – Non-domiciled RRGs ..... – ..... 5. N – None of the above - Not allowed to write business in the state ..... 56 .....  
3. E – Eligible - Reporting entities eligible or approved to write surplus lines in the state ..... – .....

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

---

**Ohio Bankers Benefits Trust**

Employer’s ID Number: 31-1306485

NAIC Company Code: N/A

State of Domicile: OH

SCHEDULE Y

PART 1A - DETAILS OF INSURANCE HOLDING COMPANY SYSTEM

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

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a “NONE” report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

	Response
1. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC with this statement?.....	NO.....

August Filing

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

EXPLANATION:

1. ....
2. ....

BARCODES:

1. 

000020253650002
2. 

000020242220000



**OVERFLOW PAGE FOR WRITE-INS**

SCHEDULE A – VERIFICATION

Real Estate

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

SCHEDULE B – VERIFICATION

Mortgage Loans

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

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

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

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
		Year to Date	Prior Year Ended December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year .....	6,113,751	9,653,071
2.	Cost of bonds and stocks acquired .....	1,400,390	2,940,579
3.	Accrual of discount .....	6,266	11,886
4.	Unrealized valuation increase / (decrease) .....	(33,978)	44,398
5.	Total gain (loss) on disposals .....	153,930	187,868
6.	Deduct consideration for bonds and stocks disposed of .....	1,668,808	6,711,689
7.	Deduct amortization of premium .....	13,252	12,361
8.	Total foreign exchange change in book / adjusted carrying value .....		—
9.	Deduct current year's other-than-temporary impairment recognized .....	—	—
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees .....		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10) .....	5,958,298	6,113,751
12.	Deduct total nonadmitted amounts .....		
13.	Statement value at end of current period (Line 11 minus Line 12) .....	5,958,298	6,113,751

SCHEDULE D – PART 1B

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

	1	2	3	4	5	6	7	8
NAIC Designation	Book / Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book / Adjusted Carrying Value End of First Quarter	Book / Adjusted Carrying Value End of Second Quarter	Book / Adjusted Carrying Value End of Third Quarter	Book / Adjusted Carrying Value December 31 Prior Year
<b>Issuer Credit Obligations (ICO)</b>								
1. NAIC 1 (a).....	5,647,586	751,214	625,000	608	5,647,586	5,774,408		5,550,675
2. NAIC 2 (a).....	100,199		100,000	(199)	100,199	–		200,973
3. NAIC 3 (a).....								
4. NAIC 4 (a).....								
5. NAIC 5 (a).....								
6. NAIC 6 (a).....								
7. Total ICO.....	5,747,785	751,214	725,000	409	5,747,785	5,774,408		5,751,648
<b>Asset-Backed Securities (ABS)</b>								
8. NAIC 1.....								
9. NAIC 2.....								
10. NAIC 3.....								
11. NAIC 4.....								
12. NAIC 5.....								
13. NAIC 6.....								
14. Total ABS.....								
<b>Preferred Stock</b>								
15. NAIC 1.....								
16. NAIC 2.....								
17. NAIC 3.....								
18. NAIC 4.....								
19. NAIC 5.....								
20. NAIC 6.....								
21. Total Preferred Stock.....								
22. Total ICO, ABS, & Preferred Stock.....	5,747,785	751,214	725,000	409	5,747,785	5,774,408		5,751,648

(a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation:  
NAIC 1 \$ 1,057,102; NAIC 2 \$ ; NAIC 3 \$ ; NAIC 4 \$ ; NAIC 5 \$ ; NAIC 6 \$

SCHEDULE DA - PART 1  
Short-Term Investments

	1	2	3	4	5
	Book / Adjusted Carrying Value	Par Value	Actual Cost	Interest Collected Year To Date	Paid for Accrued Interest Year To Date
7709999999 Total .....	1,057,102	XXX .....	1,039,429	7,944	.....

SCHEDULE DA - VERIFICATION  
Short-Term Investments

		1	2
		Year to Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year .....	1,240,689	504,076
2.	Cost of short-term investments acquired .....	283,841	1,625,065
3.	Accrual of discount .....	12,176	15,786
4.	Unrealized valuation increase / (decrease) .....		
5.	Total gain (loss) on disposals .....	(4,241)	(5,608)
6.	Deduct consideration received on disposals .....	473,907	898,468
7.	Deduct amortization of premium .....	1,457	162
8.	Total foreign exchange change in book / adjusted carrying value .....		
9.	Deduct current year's other-than-temporary impairment recognized .....		
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9) .....	1,057,102	1,240,689
11.	Deduct total nonadmitted amounts .....		
12.	Statement value at end of current period (Line 10 minus Line 11) .....	1,057,102	1,240,689

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

NONE

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

NONE

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

NONE

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

NONE

(SI-07) Schedule DB - Verification

NONE

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

NONE

(E-01) Schedule A - Part 2  
**NONE**

(E-01) Schedule A - Part 3  
**NONE**

(E-02) Schedule B - Part 2  
**NONE**

(E-02) Schedule B - Part 3  
**NONE**

(E-03) Schedule BA - Part 2  
**NONE**

(E-03) Schedule BA - Part 3  
**NONE**

SCHEDULE D - PART 3

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

1	2	3	4	5	6	7	8	9
CUSIP Identification	Description	Date Acquired	Name of Vendor	Number of Shares of Stock	Actual Cost	Par Value	Paid for Accrued Interest and Dividends	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol
Issuer Credit Obligations: Municipal Bonds - General Obligations (Direct and Guaranteed)								
930353-MY-0	Wadsworth OH City Sch Dist	04/03/2025	Stiffel Nicolaus Co.	XXX	50,909	50,000	678	
303603-KP-8	Fairborn OH City Sch Dist	04/15/2025	Wells Fargo Bank	XXX	75,621	75,000	1,117	
388568-JA-6	Granville OH EXMP VLG SCH Dist	04/15/2025	DBTC Americas/PNC Bank	XXX	191,841	190,000	3,536	
960028-MZ-8	Westerville OH City Sch Dist	04/28/2025	Pershings LLC	XXX	87,959	85,000	1,735	
407846-DP-6	Hamilton OH WTRWKS REV WTR	05/07/2025	Morgan Stanley and Co., Incorporated	XXX	111,225	110,000	269	
87122N-FT-1	Sycamore OH CMNTY SCH DIST	06/23/2025	Wedbush SEC Inc	XXX	103,120	100,000	244	
87122N-FS-3	Sycamore OH CMNTY SCH DIST	06/25/2025	Stiffel Nicolaus Co.	XXX	76,351	75,000	200	
547048-DJ-4	Louisville OH LTGO	06/24/2025	Wedbush SEC Inc	XXX	51,295	50,000		
0049999999 – Issuer Credit Obligations: Municipal Bonds - General Obligations (Direct and Guaranteed)					748,321	735,000	7,779	XXX
0489999999 – Subtotal - Issuer Obligations (Unaffiliated)					748,321	735,000	7,779	XXX
0509999997 – Subtotals - Issuer Credit Obligations - Part 3					748,321	735,000	7,779	XXX
0509999998 – Summary Item from Part 5 for Issuer Credit Obligations (N/A to Quarterly)					XXX	XXX	XXX	XXX
0509999999 – Subtotals - Issuer Credit Obligations					748,321	735,000	7,779	XXX
2009999999 – Subtotals - Issuer Credit Obligations and Asset-Backed Securities					748,321	735,000	7,779	XXX
Common Stocks: Industrial and Miscellaneous (Unaffiliated) Publicly Traded								
22788C-10-5	Crowdstrike Holdings Inc	04/29/2025	Cowen Execution Services	78.000	33,015	XXX	–	XXX
38141G-10-4	Goldman Sachs Group Inc	04/29/2025	Cowen Execution Services	50.000	27,572	XXX	–	XXX
594918-10-4	Microsoft Corp	04/29/2025	Cowen Execution Services	52.000	20,230	XXX	–	XXX
872540-10-9	TJX Companies Inc	04/29/2025	Cowen Execution Services	250.000	31,933	XXX	–	XXX
H1467J-10-4	Chubb Limited	04/29/2025	Cowen Execution Services	62.000	17,520	XXX	–	XXX
5019999999 – Common Stocks: Industrial and Miscellaneous (Unaffiliated) Publicly Traded					130,269	XXX	–	XXX
5989999997 – Subtotals - Common Stocks - Part 3					130,269	XXX	–	XXX
5989999998 – Summary Item from Part 5 for Common Stocks (N/A to Quarterly)					XXX	XXX	XXX	XXX
5989999999 – Subtotals Common Stocks					130,269	XXX	–	XXX
5999999999 – Subtotals Preferred and Common Stocks					130,269	XXX	–	XXX
6009999999 – Totals					878,590	XXX	7,779	XXX

SCHEDULE D - PART 4

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

1	2	3	4	5	6	7	8	9	Change in Book / Adjusted Carrying Value					15	16	17	18	19	20	21
									10	11	12	13	14							
CUSIP Identification	Description	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consideration	Par Value	Actual Cost	Prior Year Book / Adjusted Carrying Value	Unrealized Valuation Increase / (Decrease)	Current Year's (Amortization) / Accretion	Current Year's Other-Than- Temporary Impairment Recognized	Total Change in B. / A.C.V. (10+11-12)	Total Foreign Exchange Change in B./A.C.V.	Book / Adjusted Carrying Value at Disposal Date	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Bond Interest / Stock Dividends Received During Year	Stated Contractual Maturity Date	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol
Issuer Credit Obligations: U.S. Government Obligations (Exempt from RBC)																				
3135G0-3U-5	FNMA	04/22/2025	Matured	XXX	100,000	100,000	100,088	100,007		(7)	—	(7)		100,000		—	—	313	04/22/2025	
912828-ZL-7	US TREASURY	04/30/2025	Matured	XXX	100,000	100,000	98,619	99,868		132		132		100,000		—	—	188	04/30/2025	
91282C-HD-6	US Treasury	06/02/2025	Matured	XXX	175,000	175,000	174,330	174,862		138		138		175,000		—	—	3,719	06/02/2025	
91282C-HL-8	US Treasury	06/30/2025	Matured	XXX	250,000	250,000	248,584	249,634		366		366		250,000		—	—	5,781	06/30/2025	
0019999999 – Issuer Credit Obligations: U.S. Government Obligations (Exempt from RBC)					625,000	625,000	621,621	624,371		629	—	629		625,000		—	—	10,001	XXX	XXX
Issuer Credit Obligations: Corporate Bonds (Unaffiliated)																				
532457-BH-0	ELI LILLY & CO	06/02/2025	Matured	XXX	100,000	100,000	104,716	100,488		(488)	—	(488)		100,000				1,375	06/02/2025	
0089999999 – Issuer Credit Obligations: Corporate Bonds (Unaffiliated)					100,000	100,000	104,716	100,488		(488)	—	(488)		100,000				1,375	XXX	XXX
0489999999 – Subtotal - Issuer Obligations (Unaffiliated)					725,000	725,000	726,337	724,859		141	—	141		725,000		—	—	11,376	XXX	XXX
0509999997 – Subtotals - Issuer Credit Obligations - Part 4					725,000	725,000	726,337	724,859		141	—	141		725,000		—	—	11,376	XXX	XXX
0509999998 – Summary Item from Part 5 for Issuer Credit Obligations (N/A to Quarterly)					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0509999999 – Subtotals - Issuer Credit Obligations					725,000	725,000	726,337	724,859		141	—	141		725,000		—	—	11,376	XXX	XXX
2009999999 – Subtotals - Issuer Credit Obligations and Asset-Backed Securities					725,000	725,000	726,337	724,859		141	—	141		725,000		—	—	11,376	XXX	XXX
Common Stocks: Industrial and Miscellaneous (Unaffiliated) Publicly Traded																				
G1151C-10-1	ACCENTURE PLC CL A	04/29/2025	Cowen Execution Services	67.000	19,721	XXX	16,621	23,570	(6,949)			(6,949)		16,621		3,099	3,099	—	XXX	XXX
5019999999 – Common Stocks: Industrial and Miscellaneous (Unaffiliated) Publicly Traded					19,721	XXX	16,621	23,570	(6,949)			(6,949)		16,621		3,099	3,099	—	XXX	XXX
5989999997 – Subtotals - Common Stocks - Part 4					19,721	XXX	16,621	23,570	(6,949)			(6,949)		16,621		3,099	3,099	—	XXX	XXX
5989999998 – Summary Item from Part 5 for Common Stocks (N/A to Quarterly)					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5989999999 – Subtotals Common Stocks					19,721	XXX	16,621	23,570	(6,949)			(6,949)		16,621		3,099	3,099	—	XXX	XXX
5999999999 – Subtotals Preferred and Common Stocks					19,721	XXX	16,621	23,570	(6,949)			(6,949)		16,621		3,099	3,099	—	XXX	XXX
6009999999 – Totals					744,721	XXX	742,958	748,429	(6,949)	141	—	(6,808)		741,621		3,099	3,099	11,376	XXX	XXX



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

NONE

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

NONE

(E-06) Schedule DB - Part A - Section 1 - Financial or Economic Impact of The Hedge at the End of the Reporting Period

NONE

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

NONE

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

NONE

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

NONE

(E-07) Schedule DB - Part B - Section 1 - Financial or Economic Impact of The Hedge at the End of the Reporting Period

NONE

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

NONE

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

NONE

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

NONE

(E-10) Schedule DB - Part E

NONE

(E-11) Schedule DL - Part 1

NONE

(E-12) Schedule DL - Part 2

NONE

SCHEDULE E - PART 1 - CASH  
Month End Depository Balances

1  Depository	2  Restricted Asset Code	3  Rate of Interest	4  Amount of Interest Received During Current Quarter	5  Amount of Interest Accrued at Current Statement Date	Book Balance at End of Each Month During Current Quarter			9  *
					6	7	8	
					First Month	Second Month	Third Month	
Huntington National Bank – 106 South Main St, 5th Floor, Akron, Ohio 44308.....		4.160	7,723	2,601	590,363	490,329	844,177	XXX
LCNB: Operating – PO Box 59, Lebanon, Ohio 45036.....		–	–	–	75,000	57,705	63,970	XXX
LCNB: Money Market – PO Box 59, Lebanon, Ohio 45036.....		2.400	14,169	–	1,103,545	644,421	1,531,577	XXX
LCNB: FSA – PO Box 59, Lebanon, Ohio 45036.....		–	–	–	109,431	83,314	78,224	XXX
0199998 – Deposits in depositories that do not exceed the allowable limit in any one depository (see Instructions) - Open Depositories.....								XXX
0199999 – Total Open Depositories.....			21,892	2,601	1,878,339	1,275,769	2,517,948	XXX
0299998 – Deposits in depositories that do not exceed the allowable limit in any one depository (see Instructions) - Suspended Depositories.....								XXX
0299999 – Total Suspended Depositories.....								XXX
0399999 – Total Cash on Deposit.....			21,892	2,601	1,878,339	1,275,769	2,517,948	XXX
0499999 – Cash in Company's Office.....			XXX	XXX				XXX
0599999 – Total.....			21,892	2,601	1,878,339	1,275,769	2,517,948	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

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

NONE