



HEALTH QUARTERLY STATEMENT

AS OF JUNE 30, 2025
OF THE CONDITION AND AFFAIRS OF THE

Molina Healthcare of Ohio, Inc.

NAIC Group Code 1531 1531 NAIC Company Code 12334 Employer's ID Number 20-0750134
(Current) (Prior)

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

Country of Domicile United States of America

Licensed as business type: Health Maintenance Organization

Is HMO Federally Qualified? Yes [] No [X]

Incorporated/Organized 11/19/2003 Commenced Business 10/24/2005

Statutory Home Office 3000 Corporate Exchange Drive, Columbus, OH, US 43231
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 3000 Corporate Exchange Drive
(Street and Number)
Columbus, OH, US 43231, 888-562-5442
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address 3000 Corporate Exchange Drive, Columbus, OH, US 43231
(Street and Number or P.O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 3000 Corporate Exchange Drive
(Street and Number)
Columbus, OH, US 43231, 888-562-5442
(City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Website Address www.molinahealthcare.com

Statutory Statement Contact Aarati M. Mehta, 614-540-3488
(Name) (Area Code) (Telephone Number)
aarati.mehta@molinahealthcare.com,
(E-mail Address) (FAX Number)

OFFICERS

President Ami Lee Cole Secretary Jeffrey Don Barlow
Chief Financial Officer Cassie Lynn Lighton Actuary _____

OTHER

DIRECTORS OR TRUSTEES
Mark William Bloom M.D. John Patrick Sivori Ami Lee Cole

State of Ohio SS:
County of Franklin

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.

Ami Lee Cole Cassie Lynn Lighton Jeffrey Don Barlow
Ami Lee Cole Cassie Lynn Lighton Jeffrey Don Barlow
President Chief Financial Officer Secretary

Subscribed and sworn to before me this
15th day of July 2025
Linda A. Gulley



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



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(Name) (Area Code) (Telephone Number)
aarati.mehta@molinahealthcare.com,
(E-mail Address) (FAX Number)

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Ami Lee Cole
President

Cassie Lynn Lighton
Chief Financial Officer


Jeffrey Don Barlow
Secretary

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

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California
County of Sacramento

Subscribed and sworn to (or affirmed) before me on this 16th
day of July, 2025, by Jeff Barlow

_____,
proved to me on the basis of satisfactory evidence to be the
person(s) who appeared before me.



(Seal)

Signature

Sandra Moses

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	460,033,687		460,033,687	440,552,851
2. Stocks:				
2.1 Preferred stocks			0	0
2.2 Common stocks			0	0
3. Mortgage loans on real estate:				
3.1 First liens			0	0
3.2 Other than first liens.....			0	0
4. Real estate:				
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 (\$ 61,056,492), cash equivalents (\$ 91,211,097) and short-term investments (\$)	152,267,589		152,267,589	107,152,942
6. Contract loans (including \$ premium notes)			0	0
7. Derivatives			0	0
8. Other invested assets			0	0
9. Receivables for securities			0	0
10. Securities lending reinvested collateral assets			0	0
11. Aggregate write-ins for invested assets	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	612,301,276	0	612,301,276	547,705,793
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	4,656,123		4,656,123	3,810,175
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	27,587,868		27,587,868	65,634,539
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 (\$ 1,814,108) and contracts subject to redetermination (\$ 112,658,672)	114,472,780		114,472,780	144,654,817
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	870,185		870,185	0
16.2 Funds held by or deposited with reinsured companies			0	0
16.3 Other amounts receivable under reinsurance contracts			0	0
17. Amounts receivable relating to uninsured plans	12,459,247		12,459,247	5,915,040
18.1 Current federal and foreign income tax recoverable and interest thereon			0	1,510,963
18.2 Net deferred tax asset	17,809,725	596,080	17,213,645	17,271,292
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 (\$)	532,227	532,227	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 (\$ 61,464,022) and other amounts receivable	129,731,105	68,267,083	61,464,022	67,863,901
25. Aggregate write-ins for other-than-invested assets	1,060,795	1,031,721	29,074	45,594
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	921,481,331	70,427,111	851,054,220	854,412,114
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	921,481,331	70,427,111	851,054,220	854,412,114
DETAILS OF WRITE-INS				
1101.				
1102.				
1103.				
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198)(Line 11 above)	0	0	0	0
2501. Prepays, deposits, and other assets	1,031,721	1,031,721	0	0
2502. Prepaid state income tax	29,074		29,074	45,594
2503.				
2598. Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598)(Line 25 above)	1,060,795	1,031,721	29,074	45,594

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ reinsurance ceded)	282,980,656	5,803,950	288,784,606	280,283,291
2. Accrued medical incentive pool and bonus amounts	35,138,847		35,138,847	33,640,462
3. Unpaid claims adjustment expenses	1,639,706	39,288	1,678,994	1,565,168
4. Aggregate health policy reserves, including the liability of \$ 14,871,358 for medical loss ratio rebate per the Public Health Service Act	69,604,536		69,604,536	69,953,107
5. Aggregate life policy reserves			0	0
6. Property/casualty unearned premium reserve			0	0
7. Aggregate health claim reserves			0	0
8. Premiums received in advance	5,427,803		5,427,803	4,764,364
9. General expenses due or accrued	59,491,417		59,491,417	68,144,739
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses))	22,574,663		22,574,663	0
10.2 Net deferred tax liability			0	0
11. Ceded reinsurance premiums payable			0	0
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	10,734,735		10,734,735	10,054,011
16. Derivatives			0	0
17. Payable for securities	2,283,766		2,283,766	0
18. Payable for securities lending			0	0
19. Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ 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	9,579,483		9,579,483	2,161,919
23. Aggregate write-ins for other liabilities (including \$ 6,734,344 current)	6,734,344	0	6,734,344	19,867,762
24. Total liabilities (Lines 1 to 23)	506,189,956	5,843,238	512,033,194	490,434,823
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. Common capital stock	XXX	XXX	1,500	1,500
27. Preferred capital stock	XXX	XXX		
28. Gross paid in and contributed surplus	XXX	XXX	82,888,500	82,888,500
29. Surplus notes	XXX	XXX		
30. Aggregate write-ins for other-than-special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	256,131,026	281,087,291
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	339,021,026	363,977,291
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	851,054,220	854,412,114
DETAILS OF WRITE-INS				
2301. Amounts due to government agencies	4,365,177		4,365,177	16,224,424
2302. Member premium due	576,920		576,920	19,381
2303. Due to Reinsurer			0	214,501
2398. Summary of remaining write-ins for Line 23 from overflow page	1,792,247	0	1,792,247	3,409,456
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	6,734,344	0	6,734,344	19,867,762
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 through 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 through 3003 plus 3098)(Line 30 above)	XXX	XXX	0	0

STATEMENT OF REVENUE AND EXPENSES

	Current Year To Date		Prior Year To Date	Prior Year Ended December 31
	1 Uncovered	2 Total	3 Total	4 Total
1. Member Months	XXX	2,093,477	2,115,401	4,189,612
2. Net premium income (including \$ non-health premium income).....	XXX	1,652,278,869	1,613,579,222	3,158,215,305
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	(2,834,079)	(13,778,033)	14,703,742
4. Fee-for-service (net of \$ medical expenses)	XXX			
5. Risk revenue	XXX			
6. Aggregate write-ins for other health care related revenues	XXX	0	0	0
7. Aggregate write-ins for other non-health revenues	XXX	0	0	0
8. Total revenues (Lines 2 to 7)	XXX	1,649,444,790	1,599,801,189	3,172,919,047
Hospital and Medical:				
9. Hospital/medical benefits		990,548,459	984,491,337	1,875,898,647
10. Other professional services		139,469,916	123,113,141	255,099,740
11. Outside referrals	32,274,381	66,888,457	39,079,581	90,154,417
12. Emergency room and out-of-area		75,995,145	58,196,222	115,618,265
13. Prescription drugs		62,929,766	34,850,828	78,198,207
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts		124,560	2,632,403	26,861,785
16. Subtotal (Lines 9 to 15)	32,274,381	1,335,956,303	1,242,363,512	2,441,831,061
Less:				
17. Net reinsurance recoveries		2,035,280	1,358,896	995,749
18. Total hospital and medical (Lines 16 minus 17)	32,274,381	1,333,921,023	1,241,004,616	2,440,835,312
19. Non-health claims (net)				
20. Claims adjustment expenses, including \$ 51,210,485 cost containment expenses		59,763,319	58,761,206	117,721,397
21. General administrative expenses		157,639,382	158,709,728	324,816,850
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only) .				0
23. Total underwriting deductions (Lines 18 through 22).....	32,274,381	1,551,323,724	1,458,475,550	2,883,373,559
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	98,121,066	141,325,639	289,545,488
25. Net investment income earned		12,888,160	12,538,539	26,297,255
26. Net realized capital gains (losses) less capital gains tax of \$ 268		1,009	(79,383)	(73,453)
27. Net investment gains (losses) (Lines 25 plus 26)	0	12,889,169	12,459,156	26,223,802
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	1,588,415	(26,935)	(1,336,389)
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	112,598,650	153,757,860	314,432,901
31. Federal and foreign income taxes incurred	XXX	24,005,202	34,480,276	64,792,937
32. Net income (loss) (Lines 30 minus 31)	XXX	88,593,448	119,277,584	249,639,964
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	0
0699. Totals (Lines 0601 through 0603 plus 0698)(Line 6 above)	XXX	0	0	0
0701.	XXX			
0702.	XXX			
0703.	XXX			
0798. Summary of remaining write-ins for Line 7 from overflow page	XXX	0	0	0
0799. Totals (Lines 0701 through 0703 plus 0798)(Line 7 above)	XXX	0	0	0
1401.				
1402.				
1403.				
1498. Summary of remaining write-ins for Line 14 from overflow page	0	0	0	0
1499. Totals (Lines 1401 through 1403 plus 1498)(Line 14 above)	0	0	0	0
2901. Fines and penalties		1,588,415	(26,935)	(1,336,389)
2902.				
2903.				
2998. Summary of remaining write-ins for Line 29 from overflow page	0	0	0	0
2999. Totals (Lines 2901 through 2903 plus 2998)(Line 29 above)	0	1,588,415	(26,935)	(1,336,389)

STATEMENT OF REVENUE AND EXPENSES (Continued)

	1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
CAPITAL AND SURPLUS ACCOUNT			
33. Capital and surplus prior reporting year.....	363,977,291	396,097,831	396,097,831
34. Net income or (loss) from Line 32	88,593,448	119,277,584	249,639,964
35. Change in valuation basis of aggregate policy and claim reserves			
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ 17,060	64,177	46,076	23,983
37. Change in net unrealized foreign exchange capital gain or (loss)			
38. Change in net deferred income tax	55,754	1,925,389	4,335,381
39. Change in nonadmitted assets	1,330,356	1,699,908	(26,119,868)
40. Change in unauthorized and certified reinsurance	0	0	0
41. Change in treasury stock	0	0	0
42. Change in surplus notes	0	0	0
43. Cumulative effect of changes in accounting principles.....			
44. Capital Changes:			
44.1 Paid in			0
44.2 Transferred from surplus (Stock Dividend).....	0	0	0
44.3 Transferred to surplus.....			
45. Surplus adjustments:			
45.1 Paid in	0	0	0
45.2 Transferred to capital (Stock Dividend)			
45.3 Transferred from capital			
46. Dividends to stockholders	(115,000,000)	(50,000,000)	(260,000,000)
47. Aggregate write-ins for gains or (losses) in surplus	0	0	0
48. Net change in capital & surplus (Lines 34 to 47)	(24,956,265)	72,948,957	(32,120,540)
49. Capital and surplus end of reporting period (Line 33 plus 48)	339,021,026	469,046,788	363,977,291
DETAILS OF WRITE-INS			
4701.			
4702.			
4703.			
4798. Summary of remaining write-ins for Line 47 from overflow page	0	0	0
4799. Totals (Lines 4701 through 4703 plus 4798)(Line 47 above)	0	0	0

CASH FLOW

	1 Current Year To Date	2 Prior Year To Date	3 Prior Year Ended December 31
Cash from Operations			
1. Premiums collected net of reinsurance	1,706,686,658	1,653,260,547	3,217,474,119
2. Net investment income	11,687,264	11,984,273	25,293,540
3. Miscellaneous income	0	0	0
4. Total (Lines 1 to 3)	1,718,373,922	1,665,244,820	3,242,767,659
5. Benefit and loss related payments	1,317,627,985	1,184,710,732	2,445,485,769
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	225,255,062	230,002,359	430,673,621
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$ 268 tax on capital gains (losses)	(80,156)	18,658,881	55,278,881
10. Total (Lines 5 through 9)	1,542,802,891	1,433,371,972	2,931,438,271
11. Net cash from operations (Line 4 minus Line 10)	175,571,031	231,872,848	311,329,388
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	54,837,653	36,552,980	80,080,269
12.2 Stocks	0	0	0
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	0
12.5 Other invested assets	0	0	0
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	2,283,766	136,872	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	57,121,419	36,689,852	80,080,269
13. Cost of investments acquired (long-term only):			
13.1 Bonds	73,881,027	3,570,811	84,423,828
13.2 Stocks	0	0	0
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	0	0	0
13.6 Miscellaneous applications	0	29,696	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	73,881,027	3,600,507	84,423,828
14. Net increase/(decrease) in contract loans and premium notes	0	0	0
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)	(16,759,608)	33,089,345	(4,343,559)
Cash from Financing and Miscellaneous Sources			
16. Cash provided (applied):			
16.1 Surplus notes, capital notes	0	0	0
16.2 Capital and paid in surplus, less treasury stock	0	0	0
16.3 Borrowed funds	0	0	0
16.4 Net deposits on deposit-type contracts and other insurance liabilities	0	0	0
16.5 Dividends to stockholders	115,000,000	50,000,000	260,000,000
16.6 Other cash provided (applied)	1,303,224	1,697,172	(1,547,966)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	(113,696,776)	(48,302,828)	(261,547,966)
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) .	45,114,647	216,659,365	45,437,863
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	107,152,942	61,715,079	61,715,079
19.2 End of period (Line 18 plus Line 19.1)	152,267,589	278,374,444	107,152,942

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

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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	340,796	77,720	0	0	0	0	0	13,965	249,111	0	0	0	0	0
2. First Quarter	352,086	90,491	0	0	0	0	0	12,776	248,819	0	0	0	0	0
3. Second Quarter	354,860	91,416						12,818	250,626					
4. Third Quarter	0													
5. Current Year	0													
6. Current Year Member Months	2,093,477	525,462						75,739	1,492,276					
Total Member Ambulatory Encounters for Period:														
7 Physician	2,148,355	259,660						160,899	1,727,796					
8. Non-Physician	1,292,119	203,360						108,407	980,352					
9. Total	3,440,474	463,020	0	0	0	0	0	269,306	2,708,148	0	0	0	0	0
10. Hospital Patient Days Incurred	878,526	20,086						95,229	763,211					
11. Number of Inpatient Admissions	43,703	2,756						6,472	34,475					
12. Health Premiums Written (a)	1,655,732,688	292,425,906						183,269,093	1,180,037,689					
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written	0													
15. Health Premiums Earned.....	1,652,898,609	289,450,876						182,434,567	1,181,013,166					
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	1,320,166,905	213,730,878						145,094,895	961,341,132					
18. Amount Incurred for Provision of Health Care Services	1,335,956,303	228,209,901						140,461,799	967,284,603					

(a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$ 183,269,093

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

oo

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 Claims Incurred in Prior Years (Columns 1 + 3)	6 Estimated Claim Reserve and Claim Liability December 31 of Prior Year
	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid Dec. 31 of Prior Year	4 On Claims Incurred During the Year		
1. Comprehensive (hospital and medical) individual	35,883,369	177,847,509	7,402,577	51,547,739	43,285,946	40,513,437
2. Comprehensive (hospital and medical) group					0	0
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	4,964,845	139,051,828	1,401,892	37,110,923	6,366,737	45,710,890
8. Title XIX - Medicaid	137,548,389	822,835,685	11,267,422	180,054,053	148,815,811	194,058,964
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)	178,396,603	1,139,735,022	20,071,891	268,712,715	198,468,494	280,283,291
14. Health care receivables (a)	31,067,883	95,778,090		2,885,132	31,067,883	136,894,628
15. Other non-health					0	0
16. Medical incentive pools and bonus amounts	(391,185)	(982,640)	32,550,996	2,587,851	32,159,811	33,640,462
17. Totals (Lines 13 - 14 + 15 + 16)	146,937,535	1,042,974,292	52,622,887	268,415,434	199,560,422	177,029,125

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

NOTES TO FINANCIAL STATEMENTS

The interim financial information presented below has been prepared under the assumption that users of such interim financial information have either read or have access to the annual statement of Molina Healthcare of Ohio, Inc. (the Plan) for the fiscal year ended December 31, 2024. Accordingly, footnote disclosures that would substantially duplicate the disclosures contained in the December 31, 2024 annual statement or audited financial statements have been omitted.

NOTE 1 Summary of Significant Accounting Policies and Going Concern

Organization and Operations

The Plan is a wholly owned subsidiary of Molina Healthcare, Inc. (Molina, or the Parent). The financial statements of the Plan are presented on the basis of accounting practices prescribed or permitted by the Ohio Department of Insurance (the Department).

A. Accounting Practices

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

Such prescribed accounting practices have no significant effect on the Plan's statutory basis financial statements for the periods presented.

	SSAP #	F/S Page	F/S Line #		2025	2024
NET INCOME						
(1) State basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$	88,593,448	\$ 249,639,964
(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	\$	88,593,448	\$ 249,639,964
SURPLUS						
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$	339,021,026	\$ 363,977,291
(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	\$	339,021,026	\$ 363,977,291

B. Use of Estimates in the Preparation of the Financial Statements: No significant change.

C. Accounting Policy

- (1) - (5) No significant changes.
- (6) Basis for Loan-Backed Securities and Adjustment Methodology:

Loan-backed securities are stated at amortized cost or the lower of amortized cost or fair value. The Plan's investments in loan-backed securities consist of asset-backed securities and mortgage-backed securities. Prepayment assumptions using a prospective approach were obtained from broker-dealer survey values or internal estimates.
- (7) - (13) No significant changes.

D. Going Concern: The Plan is not aware of any relevant conditions or events that raise substantial doubt about its abilities to continue as a going concern.

NOTE 2 Accounting Changes and Corrections of Errors

None.

NOTE 3 Business Combinations and Goodwill

None.

NOTE 4 Discontinued Operations

None.

NOTE 5 Investments

A. - C. None.

D. Asset-Backed Securities

As of June 30, 2025, the Plan's long-term investments include asset-backed securities and mortgage-backed securities.

(1) Prepayment assumptions for mortgage-backed securities, collateralized mortgage obligations and other structured securities were generated using a purchased prepayment model. The prepayment model uses a number of factors to estimate prepayment activity including the time of year (seasonality), current levels of interest rates (refinancing incentive), economic activity (including housing turnover) and term and age of the underlying collateral (burnout, seasoning). On an ongoing basis, the rate of prepayment is monitored and model is calibrated to reflect actual experience, market factors and view point.

(2), (3) Recognized other-than-temporary impairment (OTTI) securities: None.

(4) All impaired securities (fair value is less than cost or amortized cost) for which an OTTI has not been recognized in earnings as a realized loss (including securities with a recognized OTTI for non-interest related declines when a non-recognized interest related impairment remains):

a) The aggregate amount of unrealized losses:		
1. Less than 12 Months	\$	448,463
2. 12 Months or Longer	\$	3,334,631
b)The aggregate related fair value of securities with unrealized losses:		

NOTES TO FINANCIAL STATEMENTS

1. Less than 12 Months	\$ 35,442,011
2. 12 Months or Longer	\$ 46,495,426

(5) Because the decline in the market values of the securities was not due to the credit quality of the issuers, and because the Plan does not intend to sell nor does it expect to be required to sell these securities before a recovery in their cost basis, the Plan does not consider the securities to be other-than-temporarily impaired at June 30, 2025.

- 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. - K. None.
- L. Restricted Assets: No significant change.
- M. Working Capital Finance Investments: None.
- N. Offsetting and Netting of Assets and Liabilities: None.
- O. - P. None.
- Q. Prepayment Penalty and Acceleration Fees: No significant change.
- R. Reporting Entity’s Share of Cash Pool by Asset Type: None.
- S. Aggregate Collateral Loans by Qualifying Investment Collateral: None.

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

None.

NOTE 7 Investment Income

No significant change.

NOTE 8 Derivative Instruments

None.

NOTE 9 Income Taxes

The Plan is included in the consolidated federal income tax return with its parent, Molina. The Plan does not expect to be liable for the Corporate Alternative Minimum Tax in 2025.

- A. - I. No significant changes.

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

- A. No significant change.
- B. The Plan paid Molina an extraordinary dividend in cash amounting to \$115,000,000 on June 26, 2025.
- C. Transactions with related party who are not reported on Schedule Y: None.
- D. - O. No significant changes.

NOTE 11 Debt

- A. None.
- B. Federal Home Loan Bank Agreements: None.

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

- A. - D. Defined Benefit Plan: None.
- E. Defined Contribution Plan: See Note 12G.
- F. Multiemployer Plans: None.
- G. Consolidated/Holding Company Plans: No significant change.
- H. - I. None.

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

- A. - C. No significant changes.
- D. Refer to Note 10B.
- E. - M. No significant changes.

NOTE 14 Liabilities, Contingencies and Assessments

No significant changes.

NOTES TO FINANCIAL STATEMENTS

NOTE 15 Leases

No significant changes.

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

None.

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

- A. Transfers of Receivables Reported as Sales: None.
- B. Transfer and Servicing of Financial Assets: None.
- C. Wash Sales: None.

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

- A. - B. None.
- C. Medicare or Similarly Structured Cost Based Reimbursement Contract: No significant change.

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

None.

NOTE 20 Fair Value Measurements

- A. Fair Value Measurements

(1) Fair Value Measurements at Reporting Date: The Plan's assets measured and reported at fair value on a recurring basis are listed in the table below. The Plan receives monthly statements from investment brokers that provide market pricing. There were no transfers between Level 1 and Level 2 of the fair value hierarchy.

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
Industrial and miscellaneous	\$ -	\$ 2,235,680	\$ -	\$ -	\$ 2,235,680
Hybrid securities	\$ -	\$ 33,806	\$ -	\$ -	\$ 33,806
Exempt money market mutual funds	\$ 10,560,201	\$ -	\$ -	\$ -	\$ 10,560,201
Other money market mutual funds	\$ 80,650,897	\$ -	\$ -	\$ -	\$ 80,650,897
Total assets at fair value/NAV	\$ 91,211,098	\$ 2,269,486	\$ -	\$ -	\$ 93,480,584

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
b. Liabilities at fair value					
Total liabilities at fair value	\$ -	\$ -	\$ -	\$ -	\$ -

(2) Fair Value Measurements in Level 3 of the Fair Value hierarchy: None.

(3) Policy for determining when transfers between levels are recognized: The actual date of the event or change in circumstances that caused the transfer.

(4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement: Level 2 financial instruments include investments that are traded frequently though not necessarily daily. Fair value for these securities is determined using a market approach based on quoted prices for similar securities in active markets or quoted prices for identical securities in inactive markets.

(5) Derivative Assets and Liabilities: None.

- B. Fair Value Reporting under Statement of Statutory Accounting Principles No. 100, Fair Value Measurements, and Other Accounting Pronouncements: In addition to the financial instruments listed below, the Plan's statutory basis balance sheets typically include the following financial instruments: investment income due and accrued, federal income tax recoverable (payable), receivables, and current liabilities. The Plan believes the carrying amounts of these financial instruments approximate the fair value of these financial instruments because of the relatively short period of time between the origination of the instruments and their expected realization or payment.

- C. Aggregate Fair Value Hierarchy

The aggregate fair value hierarchy of all financial instruments as of June 30, 2025 is presented in the table below:

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
US Governments	\$ 455,178	\$ 454,073	\$ -	\$ 455,178	\$ -	\$ -	\$ -
States, territories, and possessions	\$ 2,380,383	\$ 2,501,899	\$ -	\$ 2,380,383	\$ -	\$ -	\$ -
Political subdivisions	\$ 3,881,081	\$ 3,950,364	\$ -	\$ 3,881,081	\$ -	\$ -	\$ -
Special revenue & assessment obligations	\$ 73,907,179	\$ 77,163,695	\$ -	\$ 73,907,179	\$ -	\$ -	\$ -
Industrial and miscellaneous	\$ 375,820,522	\$ 375,929,851	\$ -	\$ 375,820,522	\$ -	\$ -	\$ -
Hybrid securities	\$ 33,806	\$ 33,804	\$ -	\$ 33,806	\$ -	\$ -	\$ -
Exempt money market mutual fund	\$ 10,560,201	\$ 10,560,201	\$ 10,560,201	\$ -	\$ -	\$ -	\$ -
Other money market mutual fund	\$ 80,650,897	\$ 80,650,897	\$ 80,650,897	\$ -	\$ -	\$ -	\$ -
Open depositories	\$ (44,620,402)	\$ (44,620,402)	\$ (44,620,402)	\$ -	\$ -	\$ -	\$ -
Short term certificates of deposit	\$ 105,676,894	\$ 105,676,894	\$ 105,676,894	\$ -	\$ -	\$ -	\$ -

NOTES TO FINANCIAL STATEMENTS

Total financial instruments	\$ 608,745,739	\$ 612,301,276	\$ 152,267,590	\$ 456,478,149	\$ -	\$ -	\$ -
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D. - E. None.

NOTE 21 Other Items

A. - B. No significant changes.

C. Other Disclosures: None.

D. - I. No significant changes.

NOTE 22 Events Subsequent

Subsequent events were considered through August 14, 2025, the date the statutory financial statements were available to be issued.

NOTE 23 Reinsurance

A. - D. No significant changes.

E. Reinsurance Credit: No significant change.

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. - D. No significant changes.

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 [X] No []

(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	\$ 271,842
3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premium)	\$ 11,976,665
Operations (Revenue & Expense)	
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment	\$ 3,807,805
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	\$ (94,644)

(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	
	1	2	3	4	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)
					5	6	7	8	Ref	9	10
	Receivable	Payable	Receivable	Payable	Receivable	Payable	Receivable	Payable		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)		\$ (15,784,470)			\$ -	\$ (15,784,470)		\$ 4,022,714	B	\$ -	\$ (11,761,756)
3. Total ACA Permanent Risk Adjustment Program	\$ -	\$ (15,784,470)	\$ -	\$ -	\$ -	\$ (15,784,470)	\$ -	\$ 4,022,714		\$ -	\$ (11,761,756)

B. Adjustments are changes in estimates based on additional information since December 31, 2024.

NOTE 25 Change in Incurred Claims and Claim Adjustment Expenses

A. The liabilities for claims unpaid and accrued medical incentive pool and bonus amounts, net of health care receivables and reinsurance recoverables, as of December 31, 2024 were \$177,029,125. As of June 30, 2025, \$178,005,417 has been paid for incurred claims attributable to insured events of prior years. Reserves remaining for prior years, net of health care receivables and reinsurance recoverables, are now \$21,555,004, as a result of re-estimation of unpaid claims principally on Medicaid, Medicare, and Marketplace lines of business. Therefore, there has been a \$22,531,296 unfavorable prior-year development from December 31, 2024 to June 30, 2025. The unfavorable development is generally the result of ongoing analysis of recent loss development trends primarily due to higher than expected utilization of medical services. Consequently, the ultimate costs recognized in 2025, as claims payments were processed, were higher than the Plan's original estimates in 2024.

The unpaid claims adjustment expenses as of December 31, 2024 were \$1,565,168. During the six months ended June 30, 2025, the Plan incurred and paid claims adjustment expenses of \$59,763,319 and \$59,649,493, respectively. The unpaid claims adjustment expenses were \$1,678,994 as of June 30, 2025.

B. Information about Significant Changes in Methodologies and Assumptions: The Plan did not make any significant changes in methodologies and assumptions used in the calculation of the liability for claims unpaid and unpaid claims adjustment expenses as of June 30, 2025.

NOTE 26 Intercompany Pooling Arrangements

None.

NOTE 27 Structured Settlements

None.

NOTE 28 Health Care Receivables

NOTES TO FINANCIAL STATEMENTS

No significant change.

NOTE 29 Participating Policies

None.

NOTE 30 Premium Deficiency Reserves

None.

NOTE 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?

Yes [] No [X]

1.2

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

Yes [] No []

2.1

Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity?

Yes [] No [X]

2.2

If yes, date of change:

3.1

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

Yes [X] No []

3.2

Have there been any substantial changes in the organizational chart since the prior quarter end?

Yes [X] No []

3.3

If the response to 3.2 is yes, provide a brief description of those changes.
Universal Care, Inc. has been removed from the organizational chart.

3.4

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

Yes [X] 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.

1179929

4.1

Has the reporting entity been a party to a merger or consolidation during the period covered by this statement?

Yes [] No [X]

4.2

If yes, provide the name of 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	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?
If yes, attach an explanation.

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

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).

05/26/2023

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 [] No [] N/A [X]

6.6

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

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

7.1

Has this reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period?

Yes [] No [X]

7.2

If yes, give full information:

8.1

Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board?

Yes [] No [X]

8.2

If response to 8.1 is yes, please identify the name of the bank holding company.

8.3

Is the company affiliated with one or more banks, thrifts or securities firms?

Yes [] No [X]

8.4

If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

GENERAL 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?
(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.

Yes [X] No []
- 9.11

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

Has the code of ethics for senior managers been amended?

Yes [] No [X]
- 9.21

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

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

Yes [] No [X]
- 9.31

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

FINANCIAL

- 10.1

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

Yes [] No [X]
- 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.)

Yes [] No [X]
- 11.2

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

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

\$
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?

Yes [] No [X]
- 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 | \$0 | \$ |
| 14.22 Preferred Stock | \$0 | \$ |
| 14.23 Common Stock | \$0 | \$ |
| 14.24 Short-Term Investments | \$0 | \$ |
| 14.25 Mortgage Loans on Real Estate | \$0 | \$ |
| 14.26 All Other | \$0 | \$ |
| 14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26) | \$0 | \$0 |
| 14.28 Total Investment in Parent included in Lines 14.21 to 14.26 above | \$ | \$ |
- 15.1

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

Yes [] No [X]
- 15.2

If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A [X]
If no, attach a description with this statement.
.....
16.

For the reporting entity's security lending program, state the amount of the following as of the current statement date:
- 16.1

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

\$0
- 16.2

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

\$0
- 16.3

Total payable for securities lending reported on the liability page.

\$0

GENERAL INTERROGATORIES

17. Excluding items in Schedule E - Part 3 - Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []
- 17.1 For all agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian Address
U.S. Bank Institutional Trust & Custody	555 SW Oak Street 6th Flr, PD-OR-P6TD Portland, OR 97204

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

- 17.3 Have there been any changes, including name changes, in the custodian(s) identified in 17.1 during the current quarter? Yes [] No [X]
- 17.4 If yes, give full information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 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. ["...that have access to the investment accounts"; "...handle securities"]

1 Name of Firm or Individual	2 Affiliation
New England Asset Management, Inc.	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 [X] No []

- 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 [X] No []

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

1	2	3	4	5
Central Registration Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	Investment Management Agreement (IMA) Filed
105900	New England Asset Management, Inc.	KUR85E5PS4GQFZTFC130	SEC	NO.....

- 18.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed? Yes [X] No []
- 18.2 If no, list exceptions:

.....

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

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

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

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

Has the reporting entity self-designated 5GI securities? Yes [] No [X]

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

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

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

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

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

Has the reporting entity self-designated PLGI securities? Yes [] No [X]

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

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

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

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

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

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

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

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

GENERAL INTERROGATORIES

PART 2 - HEALTH

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

84.000 %
- 1.2 A&H cost containment percent

3.100 %
- 1.3 A&H expense percent excluding cost containment expenses

10.100 %
- 2.1 Do you act as a custodian for health savings accounts?

Yes [] No [X]
- 2.2 If yes, please provide the amount of custodial funds held as of the reporting date

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

Yes [] No [X]
- 2.4 If yes, please provide the balance of the funds administered as of the reporting date

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

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

Yes [] No [X]

STATEMENT AS OF JUNE 30, 2025 OF THE Molina Healthcare of Ohio, Inc.

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
			NONE						

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories											
		1	Direct Business Only								
		Active Status (a)	2	3	4	5	6	7	8	9	10
States, etc.			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..	292,425,906	183,269,093	1,180,037,689				1,655,732,688	
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	.....0
59.	Subtotal	XXX.....	292,425,906	183,269,093	1,180,037,689	.....0	.....0	.....0	.....0	1,655,732,688	.....0
60.	Reporting Entity Contributions for Employee Benefit Plans	XXX.....								.....0	
61.	Totals (Direct Business)	XXX.....	292,425,906	183,269,093	1,180,037,689	0	0	0	0	1,655,732,688	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

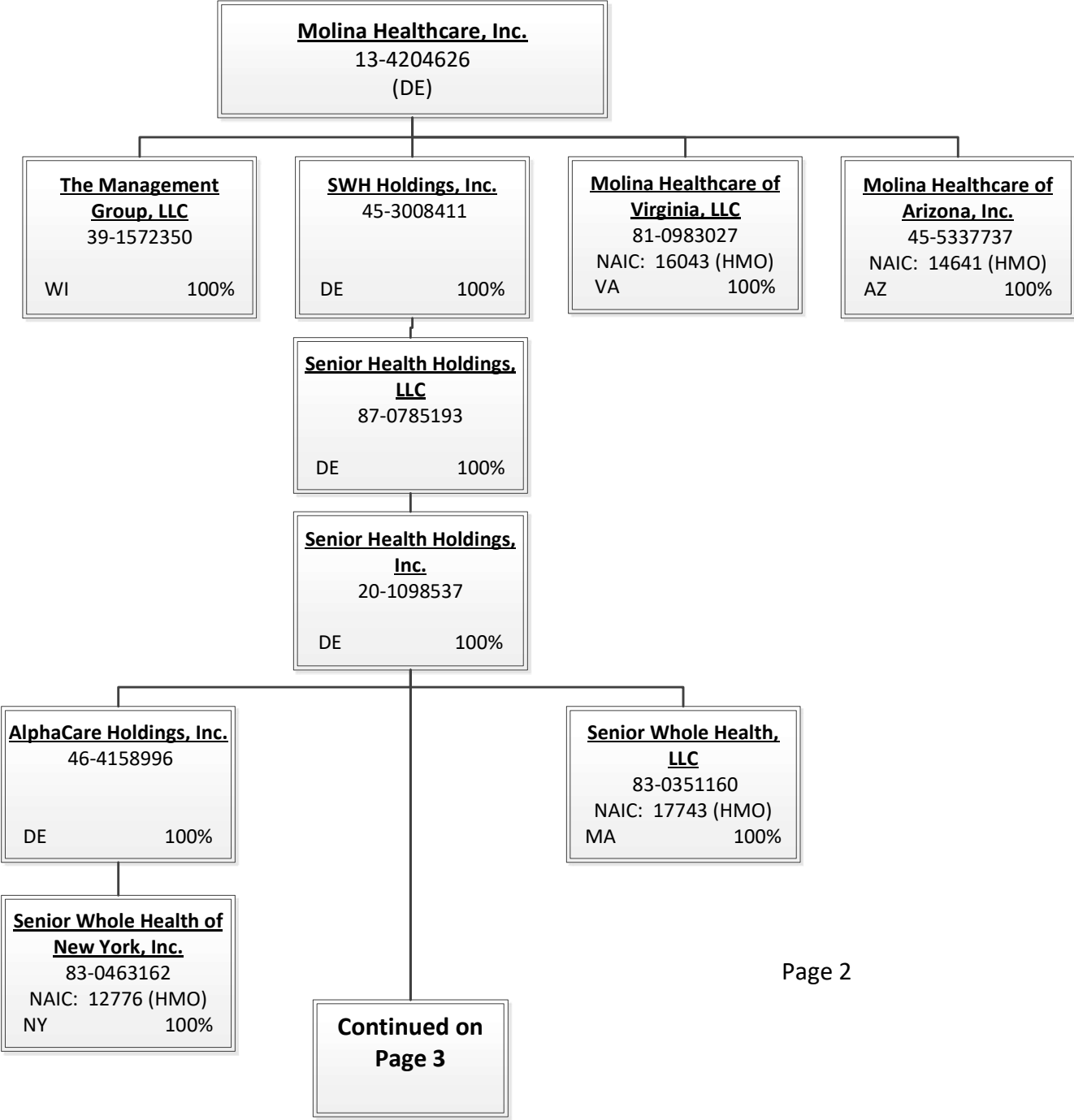
(a) Active Status Counts:
1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 1 4. Q - Qualified - Qualified or accredited reinsurer..... 0
2. R - Registered - Non-domiciled RRGs..... 0 5. N - None of the above - Not allowed to write business in the state..... 56
3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state. 0

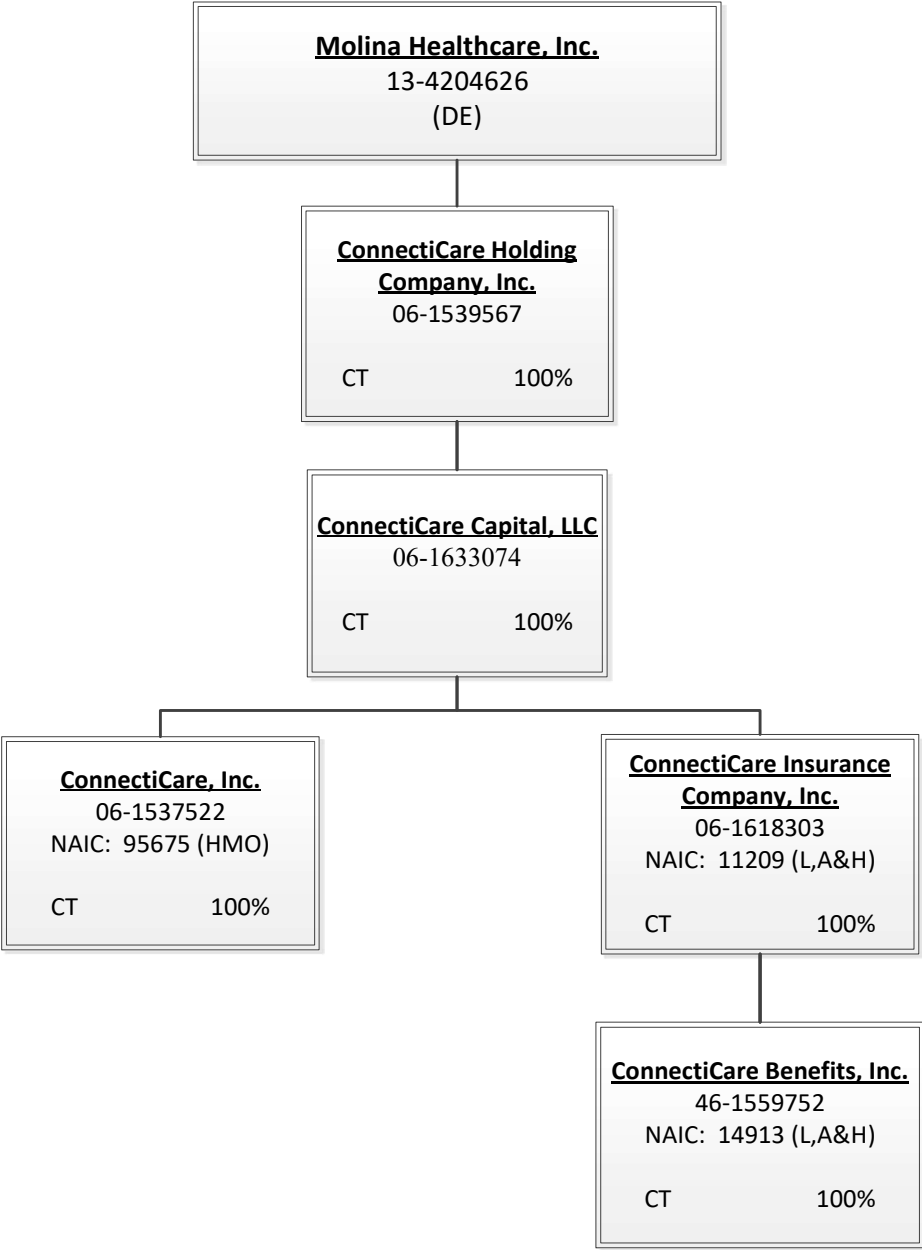
```

graph TD
    MH_Inc["Molina Healthcare, Inc.  
13-4204626  
(DE)"]
    MH_Cal["Molina Healthcare of California  
33-0342719  
(HMO)  
CA 100%"]
    MH_Wis["Molina Healthcare of Wisconsin, Inc.  
20-0813104  
NAIC: 12007 (HMO)  
WI 100%"]
    MH_Fla["Molina Healthcare of Florida, Inc.  
26-0155137  
NAIC: 13128 (HMO)  
FL 100%"]
    MH_Ill["Molina Healthcare of Illinois, Inc.  
27-1823188  
NAIC: 14104 (HMO)  
IL 100%"]
    MH_Mich["Molina Healthcare of Michigan, Inc.  
38-3341599  
NAIC: 52630 (HMO)  
MI 100%"]
    MH_NM["Molina Healthcare of New Mexico, Inc.  
85-0408506  
NAIC: 95739 (HMO)  
NM 100%"]
    MH_Ohio["Molina Healthcare of Ohio, Inc.  
20-0750134  
NAIC: 12334 (HMO)  
OH 100%"]
    MH_PuertoRico["Molina Healthcare of Puerto Rico, Inc.  
66-0817946  
NAIC: 15600 (HMO PR)  
PR & NV 100%"]
    MH_Texas["Molina Healthcare of Texas, Inc.  
20-1494502  
NAIC: 10757 (HMO)  
TX 100%"]
    MH_SouthCarolina["Molina Healthcare of South Carolina, Inc.  
46-2992125  
NAIC: 15329 (HMO)  
SC 100%"]
    MH_Utah["Molina Healthcare of Utah, Inc.  
33-0617992  
NAIC: 95502 (HMO)  
UT 100%"]
    MH_Wash["Molina Healthcare of Washington, Inc.  
91-1284790  
NAIC: 96270 (HMO)  
WA 100%"]
    MH_NY["Molina Healthcare of New York, Inc.  
27-1603200  
(MCO)  
NY 100%"]
    MH_TexasIns["Molina Healthcare of Texas Insurance Company  
27-0522725  
NAIC: 13778 (A&H)  
TX 100%"]
    MH_Mississippi["Molina Healthcare of Mississippi, Inc.  
26-4390042  
NAIC: 16301 (HMO)  
MS 100%"]
    MH_Kentucky["Molina Healthcare of Kentucky, Inc.  
83-3866292  
NAIC: 16596 (HMO)  
KY 100%"]
    MH_Clinical["Molina Clinical Services, LLC  
81-2824030  
DE 100%"]
    MH_CareConn["Molina Care Connections, LLC  
47-2296708  
TX 100%"]
    MH_DataCenter["Molina Healthcare Data Center, LLC  
45-2634351  
NM 100%"]
    MH_2028["2028 West Broadway, LLC  
85-3111408  
DE 100%"]
    MH_Indiana["Molina Healthcare of Indiana, Inc.  
38-4187664  
NAIC: 17424 (HMO)  
IN 100%"]
    MH_Nevada["Molina Healthcare of Nevada, Inc.  
20-3567602  
NAIC: 17064 (HMO)  
NV 100%"]
    MH_Nebraska["Molina Healthcare of Nebraska, Inc.  
88-2279643  
NAIC: 17357 (HMO)  
NE 100%"]
    MH_Oklahoma["Molina Healthcare of Oklahoma, Inc.  
81-0864563  
NAIC: 17066 (HMO)  
OK 100%"]
    MH_Tennessee["Molina Healthcare of Tennessee, Inc.  
84-3288805  
TN 100%"]
    MH_Georgia["Molina Healthcare of Georgia, Inc.  
80-0800257  
NAIC: 15714 (HMO)  
GA 100%"]
    MH_Louisiana["Molina Healthcare of Louisiana, Inc.  
81-4229476  
LA 100%"]
    MH_Pennsylvania["Molina Healthcare of Pennsylvania, Inc.  
81-0855820  
PA 100%"]
    MH_Iowa["Molina Healthcare of Iowa, Inc.  
38-4187674  
NAIC: 17197 (HMO)  
IA 100%"]
    MH_MHAZ["MHAZ, Inc.  
30-0876771  
AZ 100%"]
    MH_RhodeIsland["Molina Healthcare of Rhode Island Holding Company, Inc.  
87-2979541  
DE 100%"]
    MH_Kansas["Molina Healthcare of Kansas, Inc.  
92-3336788  
NAIC: 17545 (HMO)  
KS 100%"]
    MH_CaliforniaPlan["Central Health Plan of California, Inc.  
91-2155938  
(HMO)  
CA 100%"]
    MH_NorthCarolina["Molina Healthcare of North Carolina, Inc.  
46-4148278  
NC 100%"]
    MH_RhodeIslandInc["Molina Healthcare of Rhode Island, Inc.  
87-2738451  
NAIC: 17290 (HMO)  
RI 100%"]

    MH_Inc --- MH_Cal
    MH_Inc --- MH_Wis
    MH_Inc --- MH_Fla
    MH_Inc --- MH_Ill
    MH_Inc --- MH_Mich
    MH_Inc --- MH_NM
    MH_Inc --- MH_Ohio
    MH_Inc --- MH_PuertoRico
    MH_Inc --- MH_Texas
    MH_Inc --- MH_SouthCarolina
    MH_Inc --- MH_Utah
    MH_Inc --- MH_Wash
    MH_Inc --- MH_NY
    MH_Inc --- MH_TexasIns
    MH_Inc --- MH_Mississippi
    MH_Inc --- MH_Kentucky
    MH_Inc --- MH_Clinical
    MH_Inc --- MH_CareConn
    MH_Inc --- MH_DataCenter
    MH_Inc --- MH_2028
    MH_Inc --- MH_Indiana
    MH_Inc --- MH_Nevada
    MH_Inc --- MH_Nebraska
    MH_Inc --- MH_Oklahoma
    MH_Inc --- MH_Tennessee
    MH_Inc --- MH_Georgia
    MH_Inc --- MH_Louisiana
    MH_Inc --- MH_Pennsylvania
    MH_Inc --- MH_Iowa
    MH_Inc --- MH_MHAZ
    MH_Inc --- MH_RhodeIsland
    MH_Inc --- MH_Kansas
    MH_Inc --- MH_CaliforniaPlan
    MH_Inc --- MH_NorthCarolina
    MH_Inc --- MH_RhodeIslandInc
  
```

The organizational chart for Molina Healthcare, Inc. (13-4204626, DE) shows a hierarchical structure. The parent company is at the top, with lines connecting to 28 subsidiary entities. These subsidiaries are organized into four rows of eight boxes each. The first three rows contain subsidiaries for various states (California, Wisconsin, Florida, Illinois, Michigan, New Mexico, Ohio, Puerto Rico, Texas, South Carolina, Utah, Washington, New York, Texas Insurance Company, Mississippi, Kentucky, Indiana, Nevada, Nebraska, Oklahoma, Tennessee, Georgia, Louisiana, Pennsylvania, Iowa, MHAZ, Rhode Island, Kansas, North Carolina, Rhode Island, Inc.) and one LLC (Molina Clinical Services, LLC). The fourth row contains the Central Health Plan of California, Inc. and a box labeled "Continued on Page 2". Each box provides the subsidiary's name, phone number, NAIC number, and ownership percentage (all 100%).





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	Domi-ciliary Location	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
		00000	13-4204626		1179929	New York Stock Exchange	Molina Healthcare, Inc.	DE	UDP	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	14641	45-5337737				Molina Healthcare of Arizona, Inc.	AZ	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	13128	26-0155137				Molina Healthcare of Florida, Inc.	FL	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	15714	80-0800257				Molina Healthcare of Georgia, Inc.	GA	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	14104	27-1823188				Molina Healthcare of Illinois, Inc.	IL	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	17424	38-4187664				Molina Healthcare of Indiana, Inc.	IN	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	17197	38-4187674				Molina Healthcare of Iowa, Inc.	IA	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	17545	92-3336788				Molina Healthcare of Kansas, Inc.	KS	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	16596	83-3866292				Molina Healthcare of Kentucky, Inc.	KY	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	52630	38-3341599				Molina Healthcare of Michigan, Inc.	MI	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	16301	26-4390042				Molina Healthcare of Mississippi, Inc.	MS	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	17357	88-2279643				Molina Healthcare of Nebraska, Inc.	NE	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	17064	20-3567602				Molina Healthcare of Nevada, Inc.	NV	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	95739	85-0408506				Molina Healthcare of New Mexico, Inc.	NM	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	12334	20-0750134				Molina Healthcare of Ohio, Inc.	OH	RE	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	17066	81-0864563				Molina Healthcare of Oklahoma, Inc.	OK	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	15600	66-0817946				Molina Healthcare of Puerto Rico, Inc.	PR	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
							Molina Healthcare of Rhode Island Holding Company, Inc.								
1531	Molina Healthcare, Inc.	17290	87-2738451				Molina Healthcare of Rhode Island, Inc.	RI	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	15329	46-2992125				Molina Healthcare of South Carolina, Inc.	SC	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
							Molina Healthcare of Texas Insurance Company								
1531	Molina Healthcare, Inc.	13778	27-0522725					TX	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	10757	20-1494502				Molina Healthcare of Texas, Inc.	TX	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	95502	33-0617992				Molina Healthcare of Utah, Inc.	UT	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	16043	81-0983027				Molina Healthcare of Virginia, LLC	VA	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	96270	91-1284790				Molina Healthcare of Washington, Inc.	WA	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	12007	20-0813104				Molina Healthcare of Wisconsin, Inc.	WI	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	12776	83-0463162				Senior Whole Health of New York, Inc.	NY	IA	AlphaCare Holdings, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	95675	06-1537522				ConnectiCare, Inc.	CT	IA	ConnectiCare Capital LLC	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	14913	46-1559752				ConnectiCare Benefits, Inc.	CT	IA	ConnectiCare Insurance Company, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	11209	06-1618303				ConnectiCare Insurance Company, Inc.	CT	IA	ConnectiCare Capital LLC	Ownership	100.000	Molina Healthcare, Inc.	NO	
1531	Molina Healthcare, Inc.	17743	83-0351160				Senior Whole Health, LLC	MA	IA	Senior Health Holdings, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
		00000	85-3111408				2028 West Broadway, LLC	DE	NIA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
		00000	46-4158996				AlphaCare Holdings, Inc.	DE	NIA	Senior Health Holdings, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
		00000	91-2155938				Central Health Plan of California, Inc.	CA	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
		00000	06-1633074				ConnectiCare Capital, LLC	CT	NIA	ConnectiCare Holding Company, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
		00000	06-1539567				ConnectiCare Holding Company, Inc.	CT	NIA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
		00000	30-0876771				MHAZ, Inc.	AZ	NIA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
		00000	47-2296708				Molina Care Connections, LLC	TX	NIA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
		00000	81-2824030				Molina Clinical Services, LLC	DE	NIA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
		00000	45-2634351				Molina Healthcare Data Center, LLC	NM	NIA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
		00000	33-0342719				Molina Healthcare of California	CA	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
		00000	81-4229476				Molina Healthcare of Louisiana, Inc.	LA	NIA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
		00000	27-1603200				Molina Healthcare of New York, Inc.	NY	IA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
		00000	46-4148278				Molina Healthcare of North Carolina, Inc.	NC	NIA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
		00000	81-0855820				Molina Healthcare of Pennsylvania, Inc.	PA	NIA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
							Molina Healthcare of Rhode Island Holding Company, Inc.								
		00000	87-2979541					DE	NIA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	
		00000	84-3288805				Molina Healthcare of Tennessee, Inc.	TN	NIA	Molina Healthcare, Inc.	Ownership	100.000	Molina Healthcare, Inc.	NO	

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	Domi-ciliary Loca-tion	Relation-ship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Owner-ship Provide Percen-tage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Re-quired? (Yes/No)	*
.... 00000	20-1098537 ..	.....	.....	.....	Senior Health Holdings, Inc. ....	.. DE.....	..... NIA.....	Senior Health Holdings, LLC	Ownership.....	100.000 ...	Molina Healthcare, Inc. ....	.... NO.....	.....
.... 00000	87-0785193 ..	.....	.....	.....	Senior Health Holdings, LLC .....	.. DE.....	..... NIA.....	SWH Holdings, Inc.	Ownership.....	100.000 ...	Molina Healthcare, Inc. ....	.... NO.....	.....
.... 00000	45-3008411 ..	.....	.....	.....	SWH Holdings, Inc. ....	.. DE.....	..... NIA.....	Molina Healthcare, Inc.	Ownership.....	100.000 ...	Molina Healthcare, Inc. ....	.... NO.....	.....
.... 00000	39-1572350 ..	.....	.....	.....	The Management Group, LLC .....	.. WI.....	..... NIA.....	Molina Healthcare, Inc.	Ownership.....	100.000 ...	Molina Healthcare, Inc. ....	.... NO.....	.....

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.	YES

Explanation:

1.

Bar Code:

1. Medicare Part D Coverage Supplement [Document Identifier 365]



OVERFLOW PAGE FOR WRITE-INS

Additional Write-ins for Liabilities Line 23

		Current Period			Prior Year
		1 Covered	2 Uncovered	3 Total	4 Total
2304.	Fines and Penalties	1,792,247		1,792,247	3,409,456
2397.	Summary of remaining write-ins for Line 23 from overflow page	1,792,247	0	1,792,247	3,409,456

SCHEDULE A - VERIFICATION

Real Estate

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

SCHEDULE B - VERIFICATION

Mortgage Loans

	1 Year to Date	2 Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase/(decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium and mortgage interest paid 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 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase/(decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium, 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 Year to Date	2 Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	440,552,852	435,550,198
2. Cost of bonds and stocks acquired	73,881,024	84,423,828
3. Accrual of discount	774,992	1,663,731
4. Unrealized valuation increase/(decrease)	81,238	30,358
5. Total gain (loss) on disposals	1,279	(92,978)
6. Deduct consideration for bonds and stocks disposed of	54,839,844	80,099,516
7. Deduct amortization of premium	420,045	942,013
8. Total foreign exchange change in book/adjusted carrying value	0	
9. Deduct current year's other than temporary impairment recognized	0	
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees	2,191	19,244
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	460,033,687	440,552,852
12. Deduct total nonadmitted amounts	0	
13. Statement value at end of current period (Line 11 minus Line 12)	460,033,687	440,552,852

STATEMENT AS OF JUNE 30, 2025 OF THE Molina Healthcare of Ohio, Inc.

SCHEDULE D - PART 1B

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

NAIC Designation	1 Book/Adjusted Carrying Value Beginning of Current Quarter	2 Acquisitions During Current Quarter	3 Dispositions During Current Quarter	4 Non-Trading Activity During Current Quarter	5 Book/Adjusted Carrying Value End of First Quarter	6 Book/Adjusted Carrying Value End of Second Quarter	7 Book/Adjusted Carrying Value End of Third Quarter	8 Book/Adjusted Carrying Value December 31 Prior Year
ISSUER CREDIT OBLIGATIONS (ICO)								
1. NAIC 1 (a)	198,963,356	15,954,550	10,188,176	(30,858)	198,963,356	204,698,872	0	194,787,359
2. NAIC 2 (a)	69,537,499	2,189,505	5,063,689	768,080	69,537,499	67,431,395	0	59,287,994
3. NAIC 3 (a)	15,396,980	1,397,650	674,156	(975,915)	15,396,980	15,144,559	0	14,824,943
4. NAIC 4 (a)	191,051	52,404	242,380	430,556	191,051	431,631	0	157,064
5. NAIC 5 (a)	0	0	0	0	0	0	0	0
6. NAIC 6 (a)	0	0	0	0	0	0	0	0
7. Total ICO	284,088,886	19,594,109	16,168,401	191,863	284,088,886	287,706,457	0	269,057,360
ASSET-BACKED SECURITIES (ABS)								
8. NAIC 1	171,996,220	13,443,275	13,178,398	66,131	171,996,220	172,327,228	0	171,495,491
9. NAIC 2	0	0	0	0	0	0	0	0
10. NAIC 3	0	0	0	0	0	0	0	0
11. NAIC 4	0	0	0	0	0	0	0	0
12. NAIC 5	0	0	0	0	0	0	0	0
13. NAIC 6	0	0	0	0	0	0	0	0
14. Total ABS	171,996,220	13,443,275	13,178,398	66,131	171,996,220	172,327,228	0	171,495,491
PREFERRED STOCK								
15. NAIC 1	0	0	0	0	0	0	0	0
16. NAIC 2	0	0	0	0	0	0	0	0
17. NAIC 3	0	0	0	0	0	0	0	0
18. NAIC 4	0	0	0	0	0	0	0	0
19. NAIC 5	0	0	0	0	0	0	0	0
20. NAIC 6	0	0	0	0	0	0	0	0
21. Total Preferred Stock	0	0	0	0	0	0	0	0
22. Total ICO, ABS & Preferred Stock	456,085,106	33,037,384	29,346,799	257,994	456,085,106	460,033,685	0	440,552,851

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

NAIC 1 \$0 ; NAIC 2 \$0 ; NAIC 3 \$0 NAIC 4 \$0 ; NAIC 5 \$0 ; NAIC 6 \$0

Schedule DA - Part 1 - Short-Term Investments

N O N E

Schedule DA - Verification - Short-Term Investments

N O N E

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

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

	1	2
	Year To Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	55,384,421	30,369,370
2. Cost of cash equivalents acquired	862,727,263	1,854,885,246
3. Accrual of discount	0	0
4. Unrealized valuation increase/(decrease)	0	0
5. Total gain (loss) on disposals	0	0
6. Deduct consideration received on disposals	826,900,587	1,829,870,195
7. Deduct amortization of premium	0	0
8. Total foreign exchange change in book/adjusted carrying value	0	0
9. Deduct current year's other than temporary impairment recognized	0	0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	91,211,097	55,384,421
11. Deduct total nonadmitted amounts	0	0
12. Statement value at end of current period (Line 10 minus Line 11)	91,211,097	55,384,421

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 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 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

STATEMENT AS OF JUNE 30, 2025 OF THE Molina Healthcare of Ohio, Inc.

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
025816-DH-9	AMERICAN EXPRESS CO	04/03/2025	BARCLAYS CAPITAL INC.		768,975	750,000	7,263	1.F FE
04433L-AA-0	ASHLAND INC	04/30/2025	DIRECT	21,745	25,000		141	3.A FE
05368V-AB-2	AVIENT CORP	05/06/2025	DIRECT	48,775	49,000		44	3.C FE
059165-ET-3	BALTIMORE GAS & ELECTRIC	05/13/2025	WELLS FARGO SECURITIES LLC		747,968	750,000	0	1.G FE
06405L-AH-4	BANK OF NY MELLON CORP	04/14/2025	BOFA SECURITIES INC.		1,000,000	1,000,000	0	1.C FE
118230-AU-5	BUCKEYE PARTNERS LP	04/15/2025	DIRECT		71,573	75,000	418	3.C FE
118230-AW-1	BUCKEYE PARTNERS LP	05/29/2025	DIRECT		66,964	65,000	1,417	3.C FE
12769G-AB-6	CAESARS ENTERTAIN INC	04/15/2025	DIRECT		35,394	35,000	415	3.C FE
143658-BZ-4	CARNIVAL CORP	05/12/2025	DIRECT		98,000	98,000	0	3.A FE
20826F-BL-9	CONOCOPHILLIPS COMPANY	06/05/2025	MORGAN STANLEY & CO. LLC		983,010	1,000,000	25,139	1.F FE
228180-AC-9	CROWN AMERICAS LLC	05/12/2025	DIRECT		90,000	90,000	0	3.B FE
26442E-AM-2	DUKE ENERGY OHIO INC	06/02/2025	MIZUHO SECURITIES USA LLC		747,218	750,000	0	1.F FE
278642-AW-3	EBAY INC	04/09/2025	MORGAN STANLEY & CO. LLC		669,450	750,000	1,631	2.A FE
316770-BU-2	FIFTH THIRD BANK NA	04/07/2025	KEYBANC CAPITAL MARKETS INC.		753,878	750,000	7,244	1.G FE
38869A-AD-9	GRAPHIC PACKAGING INTERN	05/14/2025	DIRECT		88,231	95,000	1,029	3.B FE
42704L-AE-4	HERC HOLDINGS INC	06/13/2025	DIRECT		25,387	25,000	5	3.C FE
42704L-AF-1	HERC HOLDINGS INC	05/15/2025	DIRECT		66,350	66,000	0	3.C FE
432833-AN-1	HILTON DOMESTIC OPERATIN	04/14/2025	DIRECT		17,400	20,000	121	3.B FE
440452-AH-3	HORMEL FOODS CORP	04/30/2025	MARKETAXESS		697,935	750,000	5,242	1.G FE
459200-KX-8	IBM CORP	04/29/2025	MARKETAXESS		1,008,570	1,000,000	10,500	1.G FE
46266T-AG-3	IQVIA INC	06/02/2025	DIRECT		90,000	90,000	0	3.B FE
46284V-AJ-0	IRON MOUNTAIN INC	05/20/2025	DIRECT		53,691	55,000	1,011	3.C FE
53229K-AA-7	LIGHTNING POWER LLC	05/06/2025	DIRECT		103,704	100,000	1,466	3.C FE
57667J-AA-0	MATCH GROUP HLD II LLC	05/07/2025	DIRECT		43,038	50,000	142	3.B FE
61747Y-FY-6	MORGAN STANLEY	04/14/2025	MORGAN STANLEY & CO. LLC		1,000,000	1,000,000	0	1.E FE
629377-CR-1	NRG ENERGY INC	04/07/2025	DIRECT		44,390	50,000	267	3.B FE
670001-AE-6	NOVELIS CORP	05/30/2025	DIRECT		52,404	55,000	877	4.A FE
67059T-AH-8	MUSTAR LOGISTICS LP	04/30/2025	DIRECT		35,613	35,000	186	3.A FE
680665-AK-2	OLIN CORP	04/30/2025	DIRECT		37,671	40,000	500	3.A FE
68389X-CY-9	ORACLE CORP	04/03/2025	UBS FINANCIAL SERVICES INC.		1,520,055	1,500,055	12,200	2.B FE
74166N-AA-2	PRIME SECURITY ONE MS IN	04/14/2025	DIRECT		27,865	30,000	366	3.B FE
74464A-AD-3	PUBLIC STORAGE OP CO	06/26/2025	WELLS FARGO SECURITIES LLC		5,226,740	5,250,000	0	1.F FE
74825N-AA-5	QUEEN MERGERCO INC	06/13/2025	DIRECT		26,556	26,000	176	3.C FE
749571-AL-9	RHP HOTEL PPTY/RHP FINAN	05/30/2025	DIRECT		53,601	53,000	0	3.C FE
77311W-AA-9	ROCKET COS INC	06/05/2025	DIRECT		90,000	90,000	0	3.A FE
852234-AP-8	BLOCK INC	04/30/2025	DIRECT		40,287	45,000	656	3.A FE
86765L-AT-4	SUNOCO LP/FINANCE CORP	05/16/2025	DIRECT		19,200	20,000	10	3.A FE
87612E-BV-7	TARGET CORP	06/05/2025	GOLDMAN SACHS & CO. LLC		996,040	1,000,000	0	1.F FE
911312-CJ-3	UNITED PARCEL SERVICE	05/29/2025	RBC CAPITAL MARKETS LLC		1,250,350	1,250,000	2,917	1.F FE
92332Y-AE-1	VENTURE GLOBAL LNG INC	05/14/2025	DIRECT		49,140	50,000	1,167	3.B FE
95000U-3V-3	WELLS FARGO & COMPANY	06/30/2025	WELLS FARGO SECURITIES LLC		773,865	750,000	7,940	1.E FE
963320-BD-7	WHIRLPOOL CORP	06/10/2025	DIRECT		53,075	53,000	0	3.A FE
0089999999. Subtotal - Issuer Credit Obligations - Corporate Bonds (Unaffiliated)					19,594,108	19,735,000	90,490	XXX
0489999999. Total - Issuer Credit Obligations (Unaffiliated)					19,594,108	19,735,000	90,490	XXX
0499999999. Total - Issuer Credit Obligations (Affiliated)					0	0	0	XXX
0509999997. Total - Issuer Credit Obligations - Part 3					19,594,108	19,735,000	90,490	XXX
0509999998. Total - Issuer Credit Obligations - Part 5					XXX	XXX	XXX	XXX
0509999999. Total - Issuer Credit Obligations					19,594,108	19,735,000	90,490	XXX
31320U-YW-1	UMBS - POOL SD7025	05/13/2025	CITIGROUP GLOBAL MARKETS INC.		4,715,044	4,856,959	8,770	1.A FE
314010-XH-3	UMBS - POOL FA0679	03/31/2025	WELLS FARGO SECURITIES LLC		(10,215)	(10,408)	0	1.A FE
1039999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Residential Mortgage-Backed Securities - Not/Partially Guaranteed (Not Exempt from RBC)					4,704,829	4,846,551	8,770	XXX
034935-AA-4	ANGEL OAK MORTGAGE TRUST 25-4 A1	04/09/2025	J.P. MORGAN SECURITIES LLC		999,986	1,000,000	6,506	1.A FE
034935-AC-0	ANGEL OAK MORTGAGE TRUST 25-4 A3	04/09/2025	J.P. MORGAN SECURITIES LLC		749,999	750,000	5,345	1.F FE
64832C-AC-7	NEW RESIDENTIAL MORTGAGE LOAN 25-NQM3 A1	06/02/2025	BARCLAYS CAPITAL INC.		749,984	750,000	4,493	1.A FE

STATEMENT AS OF JUNE 30, 2025 OF THE Molina Healthcare of Ohio, Inc.

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
75023X-AF-9	25-J2 A4 .....	.....06/06/2025	WELLS FARGO SECURITIES LLC		748,477	750,000	3,000	1.A FE
1059999999	Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Non-Agency Residential Mortgage-Backed Securities (Unaffiliated)				3,248,446	3,250,000	19,344	XXX
91825C-AA-3	VOCM COMMERCIAL MORTGAGE TRUST 25-AZ A .....	.....06/24/2025	WELLS FARGO SECURITIES LLC		1,500,000	1,500,000	1,961	1.A FE
1079999999	Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Non-Agency Commercial Mortgage-Backed Securities (Unaffiliated)				1,500,000	1,500,000	1,961	XXX
55287K-AA-1	MF1 2025-FL19 A .....	.....05/12/2025	GOLDMAN SACHS & CO. LLC		3,990,000	4,000,000	0	1.A FE
1099999999	Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Non-Agency - CLOs/CBOs/CDOs (Unaffiliated)				3,990,000	4,000,000	0	XXX
1889999999	Total - Asset-Backed Securities (Unaffiliated)				13,443,275	13,596,551	30,075	XXX
1899999999	Total - Asset-Backed Securities (Affiliated)				0	0	0	XXX
1909999997	Total - Asset-Backed Securities - Part 3				13,443,275	13,596,551	30,075	XXX
1909999998	Total - Asset-Backed Securities - Part 5				XXX	XXX	XXX	XXX
1909999999	Total - Asset-Backed Securities				13,443,275	13,596,551	30,075	XXX
2009999999	Total - Issuer Credit Obligations and Asset-Backed Securities				33,037,383	33,331,551	120,565	XXX
4509999997	Total - Preferred Stocks - Part 3				0	XXX	0	XXX
4509999998	Total - Preferred Stocks - Part 5				XXX	XXX	XXX	XXX
4509999999	Total - Preferred Stocks				0	XXX	0	XXX
5989999997	Total - Common Stocks - Part 3				0	XXX	0	XXX
5989999998	Total - Common Stocks - Part 5				XXX	XXX	XXX	XXX
5989999999	Total - Common Stocks				0	XXX	0	XXX
5999999999	Total - Preferred and Common Stocks				0	XXX	0	XXX
6009999999	Totals				33,037,383	XXX	120,565	XXX

SCHEDULE D - PART 4

CUSIP Ident-ification	Description	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid-eration	Par Value	Actual Cost	Prior Year Book/ Adjusted Carrying Value	Change In Book/Adjusted Carrying Value					15	16	17	18	19	20	21
									10	11	12	13	14							
									Unrealized Valuation Increase/ (Decrease)	Current Year's (Amor-tization)/ Accretion	Current Year's Other Than Temporary Impairment Recog-nized	Total Change in Book/ Adjusted Carrying Value (10 + 11 - 12)	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-tract Maturity Date	NAIC Design-ation, NAIC Design-ation Modifier and SVO Admini-strative Symbol
736679-LB-5	PORTLAND OR	06/01/2025	MATURITY at 100.0000		750,000	750,000	715,725	746,510	0	3,490	0	3,490	0	750,000	0	0	0	0	06/01/2025	1.A FE
97705M-ZH-1	WISCONSIN ST	05/01/2025	MATURITY at 100.0000		80,000	80,000	79,909	79,991	0	9	0	9	0	80,000	0	0	0	260	05/01/2025	1.A FE
97705M-ZR-9	WISCONSIN ST	05/01/2025	MATURITY at 100.0000		220,000	220,000	219,749	219,977	0	23	0	23	0	220,000	0	0	0	715	05/01/2025	1.B FE
0049999999. Subtotal - Issuer Credit Obligations - Municipal Bonds - General Obligations (Direct and Guaranteed)					1,050,000	1,050,000	1,015,383	1,046,478	0	3,522	0	3,522	0	1,050,000	0	0	0	975	XXX	XXX
13032U-VC-9	CALIFORNIA ST HLTH FACS FING A	06/01/2025	MATURITY at 100.0000		250,000	250,000	250,000	250,000	0	0	0	0	0	250,000	0	0	0	2,764	06/01/2025	1.D FE
303891-E3-5	FAIRFAX CNTY VA WTR AUTH WTR R	04/01/2025	MATURITY at 100.0000		250,000	250,000	250,000	250,000	0	0	0	0	0	250,000	0	0	0	2,633	04/01/2025	1.A FE
38122N-A7-7	GOLDEN ST TOBACCO SECURITIZATI	06/01/2025	MATURITY at 100.0000		550,000	550,000	550,000	550,000	0	0	0	0	0	550,000	0	0	0	3,850	06/01/2025	1.D FE
64972C-3K-7	NEW YORK CITY NY HSG DEV CORPM	05/01/2025	MATURITY at 100.0000		250,000	250,000	247,360	249,679	0	321	0	321	0	250,000	0	0	0	4,521	05/01/2025	1.C FE
88258M-AA-3	TEXAS NATURAL GAS SECURITIZATION	04/01/2025	SINKING FUND REDEMPTION		33,176	33,176	33,176	33,176	0	0	0	0	0	33,176	0	0	0	846	04/01/2035	1.A FE
977100-AC-0	WISCONSIN ST GEN FUND ANNUAL A	05/01/2025	SINKING FUND REDEMPTION		305,000	305,000	320,735	304,997	0	3	0	3	0	305,000	0	0	0	8,693	05/01/2026	1.C FE
0059999999. Subtotal - Issuer Credit Obligations - Municipal Bonds - Special Revenues					1,638,176	1,638,176	1,651,271	1,637,852	0	324	0	324	0	1,638,176	0	0	0	23,307	XXX	XXX
00253X-AA-9	AMERICAN AIRLINES/AADVANC	04/20/2025	SINKING FUND REDEMPTION SECURITY CALLED AT 100.00000000		25,833	25,833	24,591	25,582	0	251	0	251	0	25,833	0	0	0	710	04/20/2026	3.A FE
025816-DE-6	AMERICAN EXPRESS CO	05/01/2025	SECURITY CALLED AT 100.00000000		1,000,000	1,000,000	1,000,000	1,000,000	0	0	0	0	0	1,000,000	0	0	0	24,950	05/01/2026	1.F FE
06051G-KM-0	BANK OF AMERICA CORP	04/02/2025	SECURITY CALLED AT 100.00000000		250,000	250,000	250,000	250,000	0	0	0	0	0	250,000	0	0	0	4,230	04/02/2026	1.G FE
073685-AF-6	BEACON ROOFING SUPPLY IN	04/29/2025	SECURITY CALLED AT 100.00000000		145,000	145,000	139,273	141,409	426	528	0	954	0	142,363	0	2,636	2,636	2,973	11/15/2026	3.B FE
08576P-AA-9	BERRY GLOBAL INC	05/16/2025	SECURITY CALLED AT 100.00000000		110,000	110,000	104,519	107,917	135	638	0	773	0	108,689	0	1,311	1,311	3,726	02/15/2026	2.B FE
14913R-2V-8	CATERPILLAR FINL SERVICE	05/13/2025	MATURITY at 100.0000		1,000,000	1,000,000	998,730	999,838	0	162	0	162	0	1,000,000	0	0	0	17,000	05/13/2025	1.F FE
17888H-AA-1	CIVITAS RESOURCES INC	04/22/2025	DIRECT SEC																	

STATEMENT AS OF JUNE 30, 2025 OF THE Molina Healthcare of Ohio, Inc.

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 Ident-ification	Description	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid-eration	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 Recogn-ized	Total Change in Book/ Adjusted Carrying Value (10 + 11 - 12)	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	NAIC Desig-nation, NAIC Desig-nation Modifier and SVO Admini-strative Symbol
0509999997. Total - Issuer Credit Obligations - Part 4					16,173,752	16,184,009	16,144,237	16,141,554	4,201	8,829	0	13,030	0	16,168,400	0	3,952	3,952	280,650	XXX	XXX
0509999998. Total - Issuer Credit Obligations - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
0509999999. Total - Issuer Credit Obligations					16,173,752	16,184,009	16,144,237	16,141,554	4,201	8,829	0	13,030	0	16,168,400	0	3,952	3,952	280,650	XXX	XXX
..31320I-HM-9	UMBS - POOL SB0236	06/01/2025	MBS PAYDOWN		41,088	41,088	43,020	41,267	.....0	(179)	.....0	(179)	.....0	41,088	.....0	.....0	.....0	435	05/01/2033	1.A FE
..313205-4L-3	UMBS - POOL SB8027	06/01/2025	MBS PAYDOWN		5,423	5,423	5,561	5,431	.....0	(8)	.....0	(8)	.....0	5,423	.....0	.....0	.....0	67	01/01/2035	1.A FE
..31320Q-YU-4	UMBS - POOL SD3423	06/01/2025	MBS PAYDOWN		36,562	36,562	35,711	36,539	.....0	23	.....0	23	.....0	36,562	.....0	.....0	.....0	732	07/01/2053	1.A FE
..31320T-DS-6	UMBS - POOL SD5613	06/01/2025	MBS PAYDOWN		182,093	182,093	178,479	181,963	.....0	129	.....0	129	.....0	182,093	.....0	.....0	.....0	3,402	02/01/2053	1.A FE
..31320U-FZ-5	UMBS - POOL SD6484	06/01/2025	MBS PAYDOWN		46,610	46,610	47,211	.....0	(8)	.....0	.....0	(8)	.....0	46,610	.....0	.....0	.....0	626	09/01/2054	1.A FE
..31320U-VW-1	UMBS - POOL SD7025	06/01/2025	MBS PAYDOWN		46,397	46,397	45,041	.....0	.....0	.....0	.....0	.....0	.....0	46,397	.....0	.....0	.....0	193	06/01/2053	1.A FE
..31330Q-FT-8	UMBS - POOL RA8278	06/01/2025	MBS PAYDOWN		21,459	21,459	21,164	21,453	.....0	7	.....0	7	.....0	21,459	.....0	.....0	.....0	459	12/01/2052	1.A FE
..3133KY-R2-7	FHLMC POOL RB5005	06/01/2025	MBS PAYDOWN		13,923	13,923	14,095	13,928	.....0	(5)	.....0	(5)	.....0	13,923	.....0	.....0	.....0	172	07/01/2039	1.A FE
..3133KY-VY-2	UMBS - FR RB5131	06/01/2025	MBS PAYDOWN		55,556	55,556	57,057	55,615	.....0	(59)	.....0	(59)	.....0	55,556	.....0	.....0	.....0	471	10/01/2041	1.A FE
..3133KY-WA-3	UMBS - POOL RB5141	06/01/2025	MBS PAYDOWN		17,357	17,357	17,585	.....0	(9)	.....0	.....0	(9)	.....0	17,357	.....0	.....0	.....0	148	01/01/2042	1.A FE
..3136AG-FU-1	FANNIE MAE 13-92 DA	06/01/2025	MBS PAYDOWN		38,889	38,889	40,839	39,097	.....0	(208)	.....0	(208)	.....0	38,889	.....0	.....0	.....0	670	05/25/2042	1.A FE
..3136BA-YK-9	FANNIE MAE 19-32 PA	06/01/2025	MBS PAYDOWN		34,470	34,470	35,838	34,520	.....0	(50)	.....0	(50)	.....0	34,470	.....0	.....0	.....0	477	10/25/2048	1.A FE
..314007-SW-8	UMBS - POOL CA0532	06/01/2025	MBS PAYDOWN		9,356	9,356	9,627	9,370	.....0	(14)	.....0	(14)	.....0	9,356	.....0	.....0	.....0	142	10/01/2047	1.A FE
..31400K-ZZ-4	UMBS - POOL CB0759	06/01/2025	MBS PAYDOWN		25,244	25,244	26,168	25,299	.....0	(55)	.....0	(55)	.....0	25,244	.....0	.....0	.....0	229	06/01/2036	1.A FE
..31400R-XA-6	UMBS - POOL CB6072	06/01/2025	MBS PAYDOWN		74,609	74,609	74,177	74,589	.....0	19	.....0	19	.....0	74,609	.....0	.....0	.....0	1,717	04/01/2053	1.A FE
..31400U-6X-9	UMBS - POOL CB8985	06/01/2025	MBS PAYDOWN		13,985	13,985	14,266	13,992	.....0	(7)	.....0	(7)	.....0	13,985	.....0	.....0	.....0	319	08/01/2054	1.A FE
..3140WQ-XH-3	UMBS - POOL FA0679	06/01/2025	MBS PAYDOWN		15,443	15,443	15,158	.....0	1	.....0	.....0	1	.....0	15,443	.....0	.....0	.....0	83	02/01/2055	1.A FE
..3140X4-MA-5	UMBS - POOL FM1278	06/01/2025	MBS PAYDOWN		20,468	20,468	21,024	20,518	.....0	(50)	.....0	(50)	.....0	20,468	.....0	.....0	.....0	245	07/01/2034	1.A FE
..3140XB-TR-1	UMBS - POOL FM7759	06/01/2025	MBS PAYDOWN		62,210	62,210	64,388	62,338	.....0	(128)	.....0	(128)	.....0	62,210	.....0	.....0	.....0	538	07/01/2036	1.A FE
..3140XJ-HG-1	UMBS - POOL FS2930	06/01/2025	MBS PAYDOWN		62,554	62,554	60,511	62,411	.....0	143	.....0	143	.....0	62,554	.....0	.....0	.....0	1,030	09/01/2037	1.A FE
..3140XL-AA-0	UMBS - POOL FS4526	06/01/2025	MBS PAYDOWN		140,480	140,480	142,455	140,538	.....0	(58)	.....0	(58)	.....0	140,480	.....0	.....0	.....0	3,023	05/01/2053	1.A FE
..3140XM-TD-8	UMBS - POOL FS5947	06/01/2025	MBS PAYDOWN		161,335	161,335	162,167	161,361	.....0	(26)	.....0	(26)	.....0	161,335	.....0	.....0	.....0	3,699	07/01/2053	1.A FE
..3140XR-SU-0	UMBS - POOL FS9530	06/01/2025	MBS PAYDOWN		12,882	12,882	12,836	12,881	.....0	1	.....0	1	.....0	12,882	.....0	.....0	.....0	309	10/01/2054	1.A FE
..3141BD-FM-9	UMBS - POOL MA3771	06/01/2025	MBS PAYDOWN		13,988	13,988	14,322	14,001	.....0	(12)	.....0	(12)	.....0	13,988	.....0	.....0	.....0	174	09/01/2039	1.A FE
..3141BD-GG-1	UMBS - POOL MA3798	06/01/2025	MBS PAYDOWN		11,060	11,060	11,314	11,076	.....0	(17)	.....0	(17)	.....0	11,060	.....0	.....0	.....0	140	10/01/2034	1.A FE
..3141BD-LL-4	UMBS - POOL MA3930	06/01/2025	MBS PAYDOWN		26,892	26,892	27,387	26,918	.....0	(27)	.....0	(27)	.....0	26,892	.....0	.....0	.....0	275	02/01/2035	1.A FE
..3141BD-MD-1	UMBS - POOL MA3955	06/01/2025	MBS PAYDOWN		24,122	24,122	24,593	24,146	.....0	(25)	.....0	(25)	.....0	24,122	.....0	.....0	.....0	250	03/01/2035	1.A FE
..3141BD-YH-9	UMBS - POOL MA4311	06/01/2025	MBS PAYDOWN		185,706	185,706	189,653	185,849	.....0	(142)	.....0	(142)	.....0	185,706	.....0	.....0	.....0	1,561	04/01/2041	1.A FE
..3141BD-Z9-6	UMBS - POOL MA4367	06/01/2025	MBS PAYDOWN		59,879	59,879	61,233	59,962	.....0	(83)	.....0	(83)	.....0	59,879	.....0	.....0	.....0	374	06/01/2031	1.A FE
..3141BE-GC-8	UMBS - POOL MA4694	06/01/2025	MBS PAYDOWN		195,343	195,343	193,145	195,191	.....0	152	.....0	152	.....0	195,343	.....0	.....0	.....0	2,885	08/01/2037	1.A FE
1039999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Residential Mortgage-Backed Securities - Not/Partially Guaranteed (Not Exempt from RBC)					1,655,383	1,655,383	1,666,025	1,547,619	0	(695)	0	(695)	0	1,655,383	0	0	0	24,845	XXX	XXX
..03465G-AA-4	ANGEL OAK MORTGAGE TRUST 23-2 A1	06/01/2025	MBS PAYDOWN		72,748	72,748	68,804	72,608	.....0	140	.....0	140	.....0	72,748	.....0	.....0	.....0	1,323	10/25/2067	1.A FE
..03465R-AA-0	ANGEL OAK MORTGAGE TRUST 23-5 A1	06/01/2025	MBS PAYDOWN		40,663	40,663	38,742	40,481	.....0	182	.....0	182	.....0	40,663	.....0	.....0	.....0	884	09/25/2067	1.A FE
..03466J-AA-7	ANGEL OAK MORTGAGE TRUST 24-9 A1	06/01/2025	MBS PAYDOWN		132,577	132,577	132,576	132,577	.....0	.....0	.....0	.....0	.....0	132,577	.....0	.....0	.....0	2,958	09/25/2069	1.A FE
..034935-AA-4	ANGEL OAK MORTGAGE TRUST 25-4 A1	06/01/2025	MBS PAYDOWN		36,350	36,350	36,349	.....0	.....0	35	.....0	35	.....0	36,350	.....0	.....0	.....0	357	04/25/2070	1.A FE
..034935-AC-0	ANGEL OAK MORTGAGE TRUST 25-4 A3	06/01/2025	MBS PAYDOWN		27,262	27,262	27,262	.....0	.....0	29	.....0	29	.....0	27,262	.....0	.....0	.....0	293	04/25/2070	1.F FE
..10568M-AA-6	BRAVO RESIDENTIAL FUNDING TRUS 22-NQM2 A	06/01/2025	MBS PAYDOWN		29,649	29,649	29,649	29,649	.....0	.....0	.....0	.....0	.....0	29,649	.....0	.....0	.....0	534	11/25/2061	1.A FE
..10568M-AA-2	BRAVO RESIDENTIAL FUNDING TRUS 23-NQM1 A	06/01/2025	MBS PAYDOWN		88,127	88,127	88,127	88,127	.....0	.....0	.....0	.....0	.....0	88,127	.....0	.....0	.....0	2,043	01/25/2063	1.A
..12570D-AA-4	CIM TRUST 23-11 A1	06/01/2025	MBS PAYDOWN		25,935	25,935	25,935	25,935	.....0	.....0	.....0	.....0	.....0	25,935	.....0	.....0	.....0	674	04/25/2058	1.A
..12659Y-AA-2	COLT FUNDING LLC 22-3 A1	06/01/2025	MBS PAYDOWN		34,822	34,822	31,911	34,714	.....0	108	.....0	108	.....0	34,822	.....0	.....0	.....0	564	02/25/2067	1.A FE
..16159L-AC-2	CHASE MORTGAGE FINANCE CORPORA 23-RPL1 A	06/01/2025	MBS PAYDOWN		15,789	15,789	14,286	15,738	.....0	51	.....0	51	.....0	15,789	.....0	.....0	.....0	237	06/25/2062	1.A
..19685W-AA-9	COLT FUNDING LLC 21-2 A1	06/01/2025	MBS PAYDOWN		31,801	31,801	25,829	31,539	.....0	262	.....0	262	.....0	31,801	.....0	.....0	.....0	126	08/25/2066	1.A FE
..19688M-AA-8	COLT FUNDING LLC 22-8 A1	06/01/2025	MBS PAYDOWN		93,108	93,108	93,588	93,145	.....0	(37)	.....0	(37)	.....0	93,108	.....0	.....0	.....0	2,538	08/25/2067	1.A FE
..19688M-AB-4	COLT FUNDING LLC 23-1 A2	06/01/2025	MBS PAYDOWN		43,290	43,290	43,289	43,290	.....0	.....0	.....0	.....0	.....0	43,290	.....0	.....0	.....0	1,197	04/25/2068	1.C FE
..22758C-AB-7	CROSS 23-H1 A2	06/01/2025	MBS PAYDOWN		129,515	129,515	129,513	129,515	.....0	.....0	.....0	.....0	.....0	129,515	.....0	.....0	.....0	3,742	03/25/2068	1.A
..24381V-AA-8	DEEPHAVEN RESIDENTIAL MORTGAGE 21-3 A1	06/01/2025	MBS PAYDOWN		53,545	53,545	43,601	53,014	.....0	530	.....0	530	.....0	53,545	.....0	.....0	.....0	255	08/25/2066	1.A FE
..24381Y-AB-0	DEEPHAVEN RESIDENTIAL MORTGAGE 22-3 A2	06/01/2025	MBS PAYDOWN		18,855	18,855	18,430	18,838	.....0	17	.....0	17	.....0	18,855	.....0	.....0	.....0	391	07/25/2067	1.B
..31573E-AA-9	ELLINGTON FINANCIAL MORTGAGE T 22-3 A1	06/01/2025	MBS PAYDOWN		51,483	51,483	50,918	51,455	.....0	28	.....0	28	.....0	51,483	.....0	.....0	.....0	1,155	08/25/2067	1.A

STATEMENT AS OF JUNE 30, 2025 OF THE Molina Healthcare of Ohio, Inc.

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 Ident-ification	Description	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid-eration	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 Recogn-ized	Total Change in Book/ Adjusted Carrying Value (10 + 11 - 12)	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	NAIC Desig-nation, NAIC Desig-nation Modifier and SVO Admini-strative Symbol
..46649T-AA-4	JP MORGAN MORTGAGE TRUST 18-3 A1	06/01/2025	MBS PAYDOWN		12,435	12,435	11,409	12,392	0	43	0	43	0	12,435	0	0	0	207	09/25/2048	1.A
..46653P-BM-8	JP MORGAN MORTGAGE TRUST 21-6 A15	06/01/2025	MBS PAYDOWN		20,919	20,919	17,114	20,833	0	86	0	86	0	20,919	0	0	0	215	10/25/2051	1.A
..59980D-AB-7	MILL CITY MORTGAGE TRUST 23-NQM1 A2	06/01/2025	MBS PAYDOWN		32,872	32,872	32,193	32,847	0	25	0	25	0	32,872	0	0	0	810	10/25/2067	1.A
..64832C-AC-7	NEW RESIDENTIAL MORTGAGE LOAN 25-NQM3 A1	06/25/2025	MBS PAYDOWN		6,445	6,445	6,445	0	0	14	0	14	0	6,445	0	0	0	30	05/25/2065	1.A FE
..670855-AA-3	ONSLow BAY FINANCIAL LLC 23-NQM1 A1	06/01/2025	MBS PAYDOWN		32,239	32,239	32,280	32,242	0	(3)	0	(3)	0	32,239	0	0	0	813	11/25/2062	1.A
..67114V-AA-1	ONSLow BAY FINANCIAL LLC 22-NQM1 A1	06/01/2025	MBS PAYDOWN		44,502	44,502	37,944	44,253	0	249	0	249	0	44,502	0	0	0	444	11/25/2061	1.A
..67115D-AA-0	ONSLow BAY FINANCIAL LLC 21-NQM4 A1	06/01/2025	MBS PAYDOWN		23,892	23,892	19,375	23,780	0	111	0	111	0	23,892	0	0	0	192	10/25/2061	1.A
..69382C-AB-2	PMT LOAN TRUST 25-INV3 A2	06/01/2025	MBS PAYDOWN		53,199	53,199	53,490	0	0	(3)	0	(3)	0	53,199	0	0	0	438	03/25/2056	1.A FE
..69382C-BE-5	PMT LOAN TRUST 25-INV3 A29	06/01/2025	MBS PAYDOWN		26,600	26,600	26,612	0	0	0	0	0	0	26,600	0	0	0	219	03/25/2056	1.B FE
..74938Q-AA-2	WOODWARD CAPITAL MANAGEMENT 24-INV1 A1	06/01/2025	MBS PAYDOWN		34,535	34,535	35,209	34,578	0	(44)	0	(44)	0	34,535	0	0	0	944	06/25/2054	1.A
..753917-AB-9	RATE MORTGAGE TRUST 24-J2 A2	06/01/2025	MBS PAYDOWN		96,138	96,138	95,057	96,055	0	83	0	83	0	96,138	0	0	0	2,220	07/25/2054	1.A
..816943-BF-0	SEQUOIA MORTGAGE TRUST 23-3 A1	06/01/2025	MBS PAYDOWN		13,780	13,780	13,638	13,773	0	8	0	8	0	13,780	0	0	0	365	09/25/2053	1.A
..817370-AB-5	SEQUOIA MORTGAGE TRUST 25-3 A2	06/01/2025	MBS PAYDOWN		60,695	60,695	60,116	0	0	12	0	12	0	60,695	0	0	0	510	04/25/2055	1.A FE
..81749B-AA-9	SEQUOIA MORTGAGE TRUST 23-1 A1	06/01/2025	MBS PAYDOWN		29,346	29,346	29,034	29,336	0	10	0	10	0	29,346	0	0	0	584	01/25/2053	1.A
..81749P-AB-6	SEQUOIA MORTGAGE TRUST 24-9 A2	06/01/2025	MBS PAYDOWN		132,545	132,545	132,938	132,595	0	(51)	0	(51)	0	132,545	0	0	0	2,906	10/25/2054	1.A FE
..87267T-AB-7	TOORAK MORTGAGE CORP 21-INV2 A2	06/01/2025	MBS PAYDOWN		22,682	22,682	19,457	22,393	0	288	0	288	0	22,682	0	0	0	204	11/25/2056	1.C
..89173F-AB-6	TOWD POINT MORTGAGE TRUST 17-1 A2	06/01/2025	MBS PAYDOWN		174,558	174,558	167,085	173,311	0	1,247	0	1,247	0	174,558	0	0	0	2,568	10/25/2056	1.A
..924921-AA-7	VERUS SECURITIZATION TRUST 22-5 A1	06/01/2025	MBS PAYDOWN		14,981	14,981	14,973	14,973	0	8	0	8	0	14,981	0	0	0	231	04/25/2067	1.A FE
..924925-AA-8	VERUS SECURITIZATION TRUST 24-7 A1	06/01/2025	MBS PAYDOWN		46,280	46,280	46,279	46,279	0	0	0	0	0	46,280	0	0	0	1,024	09/25/2069	1.A
..92538H-AA-8	VERUS SECURITIZATION TRUST 21-4 A1	06/01/2025	MBS PAYDOWN		9,719	9,719	7,973	9,670	0	49	0	49	0	9,719	0	0	0	39	07/25/2066	1.A
..92539B-AA-0	VERUS SECURITIZATION TRUST 23-1 A1	06/01/2025	MBS PAYDOWN		16,557	16,557	16,557	16,557	0	0	0	0	0	16,557	0	0	0	411	12/25/2067	1.A
..92539F-AB-9	VERUS SECURITIZATION TRUST 23-INV1 A2	06/01/2025	MBS PAYDOWN		71,693	71,693	71,693	71,693	0	0	0	0	0	71,693	0	0	0	2,007	02/25/2068	1.B
..92539G-AB-7	VERUS SECURITIZATION TRUST 23-3 A2	06/01/2025	MBS PAYDOWN		47,095	47,095	47,094	47,094	0	0	0	0	0	47,095	0	0	0	1,241	03/25/2068	1.A
..92539L-AB-6	VERUS SECURITIZATION TRUST 21-3 A2	06/01/2025	MBS PAYDOWN		26,844	26,844	22,616	26,665	0	179	0	179	0	26,844	0	0	0	156	06/25/2066	1.A
..92539T-AB-9	VERUS SECURITIZATION TRUST 23-4 A2	06/01/2025	MBS PAYDOWN		52,637	52,637	52,637	52,637	0	0	0	0	0	52,637	0	0	0	1,379	05/25/2068	1.A
..95003A-AC-8	WELLS FARGO MORTGAGE BACKED SE 21-1 A3	06/01/2025	MBS PAYDOWN		19,120	19,120	16,600	19,029	0	91	0	91	0	19,120	0	0	0	187	12/25/2050	1.A
1059999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Non-Agency Residential Mortgage-Backed Securities (Unaffiliated)					2,047,827	2,047,827	1,984,314	1,833,610	0	3,747	0	3,747	0	2,047,827	0	0	0	39,615	XXX	XXX
..61690V-AY-4	MORGAN STANLEY BAML TRUST 15-C26 A4	06/01/2025	MBS PAYDOWN		567,355	567,355	594,105	568,280	0	(925)	0	(925)	0	567,355	0	0	0	7,702	10/15/2048	1.A FE
1079999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Non-Agency Commercial Mortgage-Backed Securities (Unaffiliated)					567,355	567,355	594,105	568,280	0	(925)	0	(925)	0	567,355	0	0	0	7,702	XXX	XXX
..055983-AA-8	BSPRT ISSUER LTD 22-FL8 A	06/15/2025	MBS PAYDOWN		105,817	105,817	105,817	105,817	0	0	0	0	0	105,817	0	0	0	3,087	02/15/2037	1.A FE
..26249B-AQ-4	DRYDEN SENIOR LOAN FUND 13-30A AR	05/15/2025	MBS PAYDOWN		242,086	242,086	241,150	241,799	0	287	0	287	0	242,086	0	0	0	6,706	11/15/2028	1.A FE
..26251L-AC-8	DRYDEN SENIOR LOAN FUND 18-64A A	04/18/2025	MBS PAYDOWN		459,722	459,722	455,699	458,561	0	1,161	0	1,161	0	459,722	0	0	0	7,114	04/18/2031	1.A FE
..36321J-AC-8	GALAXY CLO LTD 18-28A A1	06/10/2025	VARIOUS		324,661	324,661	322,606	326,028	0	279	0	279	0	326,307	0	(1,646)	(1,646)	11,187	07/15/2031	1.A FE
..40390J-AA-0	H61 CRE CLO LTD 21-FL2 A	06/19/2025	MBS PAYDOWN		2,226	2,226	2,226	2,226	0	0	0	0	0	2,226	0	0	0	54	09/17/2036	1.A FE
..40441L-AA-4	H61 CRE CLO LTD 21-FL1 A	06/16/2025	MBS PAYDOWN		996	996	996	996	0	0	0	0	0	996	0	0	0	23	06/16/2036	1.A FE
..55284A-AA-6	MF1 MULTIFAMILY HOUSING MORTGA 21-FL7 A	06/16/2025	MBS PAYDOWN		340,948	340,948	340,948	340,948	0	0	0	0	0	340,948	0	0	0	8,396	10/16/2036	1.A FE
..55284J-AA-7	MF1 MULTIFAMILY HOUSING MORTGA 22-FL8 A	06/17/2025	VARIOUS		105,451	105,451	105,451	105,451	0	0	0	0	0	105,451	0	0	0	2,427	02/19/2037	1.A FE
..60162P-AE-2	MILOS CLO LTD 17-1A AR	04/20/2025	MBS PAYDOWN		283,227	283,227	283,227	283,227	0	0	0	0	0	283,227	0	0	0	8,289	10/20/2030	1.A FE
..675947-AA-3	OCT61 2023-2A A	04/25/2025	SECURITY CALLED AT 100.00000000		3,800,000	3,800,000	3,800,000	3,800,000	0	0	0	0	0	3,800,000	0	0	0	123,750	04/20/2036	1.A FE
..92912V-AY-1	VOYA CLO LTD 14-2A A1RR	04/17/2025	MBS PAYDOWN		216,931	216,931	215,353	215,927	0	1,003	0	1,003	0	216,931	0	0	0	6,316	04/17/2030	1.A FE
1099999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Non-Agency - CLOs/CBOs/CDOs (Unaffiliated)					5,882,065	5,882,065	5,873,473	5,880,980	0	2,730	0	2,730	0	5,883,711	0	(1,646)	(1,646)	177,349	XXX	XXX
..02008D-AC-3	ALLY AUTO RECEIVABLES TRUST 22-3 A3	06/15/2025	MBS PAYDOWN		108,227	108,227	108,221	108,108	0	119	0	119	0	108,227	0	0	0	2,272	04/15/2027	1.A FE
..14317H-AC-5	CARMAX AUTO OWNER TRUST 22-2 A3	06/15/2025	MBS PAYDOWN		174,240	174,240	174,213	174,126	0	114	0	114	0	174,240	0	0	0	2,520	02/16/2027	1.A FE
..14686J-AC-4	CARVANA AUTO RECEIVABLES TRUST 22-P2 A3	06/10/2025	MBS PAYDOWN		141,031	141,031	141,014	140,998	0	32	0	32	0	141,031	0	0	0	2,409	04/12/2027	1.A FE
..14687J-AF-6	CARVANA AUTO RECEIVABLES TRUST 21-P3 A4	06/10/2025	MBS PAYDOWN		51,748	51,748	51,739	51,734	0	14	0	14	0	51,748	0	0	0	267	06/10/2027	1.A FE
..33767P-AA-6	FIRSTKEY HOMES TRUST 22-SFR2 A	06/01/2025	MBS PAYDOWN		24,439	24,439	23,574	24,388	0	51	0	51	0	24,439	0	0	0	391	07/17/2039	1.A FE
..33768E-AA-0	FIRSTKEY HOMES TRUST 22-SFR3 A	06/01/2025	MBS PAYDOWN		6,249	6,249	5,860	6,211	0	38	0	38	0	6,249	0	0	0	114	07/17/2038	1.A FE
..33768J-AA-9	FIRSTKEY HOMES 2021-SFR3 TRUS 21-SFR3 A	06/01/2025	MBS PAYDOWN		19,227	19,227	19,226	19,227	0	0	0	0	0	19,227	0	0	0	168	12/17/2038	1.A FE
..33768N-AA-0	FIRSTKEY HOMES TRUST 22-SFR1 A	06/01/2025	MBS PAYDOWN		1,842	1,842	1,842	1,842	0	0	0	0	0	1,842	0	0	0	33	05/19/2039	1.A FE

STATEMENT AS OF JUNE 30, 2025 OF THE Molina Healthcare of Ohio, Inc.

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 Ident- ification	Description	Disposal Date	Name of Purchaser	Number of Shares of Stock	Consid- eration	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 Recogn- ized	Total Change in Book/ Adjusted Carrying Value (10 + 11 - 12)	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	NAIC Desig- nation, NAIC Desig- nation Modifier and SVO Admini- strative Symbol
..344928-AD-8	FORD CREDIT AUTO OWNER TRUST 23-A A3	06/15/2025	MBS PAYDOWN		256,986	256,986	256,959	256,633	0	353	0	353	0	256,986	0	0	0	4,965	02/15/2028	1.A FE
..34534L-AD-9	FORD CREDIT AUTO OWNER TRUST 22-B A3	06/15/2025	MBS PAYDOWN		201,481	201,481	201,471	201,432	0	50	0	50	0	201,481	0	0	0	3,132	09/15/2026	1.A FE
..362583-AD-8	GM FINANCIAL SECURITIZED TERM 23-2 A3	06/16/2025	MBS PAYDOWN		280,007	280,007	280,000	279,590	0	417	0	417	0	280,007	0	0	0	5,192	02/16/2028	1.A FE
..38013J-AD-0	GM FINANCIAL SECURITIZED TERM 23-1 A3	06/16/2025	MBS PAYDOWN		129,754	129,754	129,734	129,570	0	184	0	184	0	129,754	0	0	0	2,509	02/16/2028	1.A FE
..432917-AA-0	HILTON GRAND VACATIONS TRUST 23-1A A	06/25/2025	MBS PAYDOWN		44,307	44,307	44,296	44,168	0	139	0	139	0	44,307	0	0	0	1,046	01/25/2038	1.A FE
..55389Q-AB-3	MVW OWNER TRUST 24-2A B	06/20/2025	MBS PAYDOWN		51,533	51,533	51,531	51,423	0	111	0	111	0	51,533	0	0	0	982	03/20/2042	1.F FE
..55400U-AA-1	MVW OWNER TRUST 22-1A A	06/20/2025	MBS PAYDOWN		47,422	47,422	47,410	47,331	0	91	0	91	0	47,422	0	0	0	824	11/21/2039	1.A FE
..74331U-AA-6	PROGRESS RESIDENTIAL TRUST 22-SFR3 A	06/01/2025	MBS PAYDOWN		641	641	614	638	0	2	0	2	0	641	0	0	0	10	04/17/2039	1.A FE
..74333E-AA-0	PROGRESS RESIDENTIAL TRUST 21-SFR4 A	06/01/2025	MBS PAYDOWN		22,245	22,245	20,259	22,061	0	184	0	184	0	22,245	0	0	0	136	05/17/2038	1.A FE
..74334D-AA-1	PROGRESS RESIDENTIAL TRUST 22-SFR6 A	05/01/2025	MBS PAYDOWN		1,253	1,253	1,253	1,253	0	0	0	0	0	1,253	0	0	0	23	07/20/2039	1.A FE
..82653B-AB-9	SIERRA RECEIVABLES FUNDING CO 24-3A B	06/20/2025	MBS PAYDOWN		88,233	88,233	88,230	88,052	0	181	0	181	0	88,233	0	0	0	1,823	08/20/2041	1.F FE
..89238F-AD-5	TOYOTA AUTO RECEIVABLES OWNER 22-B A3	06/15/2025	MBS PAYDOWN		125,042	125,042	125,039	124,988	0	54	0	54	0	125,042	0	0	0	1,515	09/15/2026	1.A FE
..895975-AA-8	TRICON RESIDENTIAL 24-SFR4 A	05/01/2025	MBS PAYDOWN		5,284	5,284	5,072	5,272	0	11	0	11	0	5,284	0	0	0	90	11/17/2041	1.A FE
..89614Y-AA-4	TRICON RESIDENTIAL 21-SFR1 A	05/01/2025	MBS PAYDOWN		625	625	625	625	0	0	0	0	0	625	0	0	0	5	07/17/2038	1.A FE
..92868K-AD-5	VOLKSWAGEN AUTO LOAN ENHANCED 21-1 A4	06/20/2025	MBS PAYDOWN		238,712	238,712	238,684	238,571	0	141	0	141	0	238,712	0	0	0	1,281	10/20/2028	1.A FE
..98163K-AD-4	WORLD OMNI AUTO RECEIVABLES TR 21-D A4	06/15/2025	MBS PAYDOWN		18,773	18,773	18,767	18,764	0	9	0	9	0	18,773	0	0	0	103	11/15/2027	1.A FE
..98164J-AD-6	WORLD OMNI AUTO RECEIVABLES TR 23-A A3	06/15/2025	MBS PAYDOWN		309,137	309,137	309,084	308,725	0	412	0	412	0	309,137	0	0	0	6,189	05/15/2028	1.A FE
..98164Q-AD-0	WORLD OMNI AUTO RECEIVABLES TR 23-B A3	06/15/2025	MBS PAYDOWN		597,432	597,432	597,299	596,506	0	926	0	926	0	597,432	0	0	0	11,569	05/15/2028	1.A FE
1119999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Other																				
Financial Asset-Backed Securities - Self-Liquidating (Unaffiliated)					2,945,870	2,945,870	2,942,016	2,942,236	0	3,633	0	3,633	0	2,945,870	0	0	0	49,568	XXX	XXX
..12510H-AZ-3	CAPITAL AUTOMOTIVE REIT 24-3A A1	06/15/2025	MBS PAYDOWN		12,500	12,500	12,290	12,467	0	33	0	33	0	12,500	0	0	0	228	10/15/2054	1.A FE
..12510H-BA-7	CAPITAL AUTOMOTIVE REIT 24-3A A2	06/15/2025	MBS PAYDOWN		4,688	4,688	4,524	4,670	0	17	0	17	0	4,688	0	0	0	88	10/15/2054	1.E FE
..30332Y-AB-7	FIP MASTER FUNDING LLC 23-2A A2	06/15/2025	MBS PAYDOWN		1,562	1,562	1,449	1,551	0	12	0	12	0	1,562	0	0	0	43	10/15/2053	1.F FE
..43990E-AA-9	HORIZON AIRCRAFT FINANCE 24-1 A	06/15/2025	MBS PAYDOWN		28,125	28,125	28,124	28,068	0	57	0	57	0	28,125	0	0	0	630	09/15/2049	1.F FE
..83100A-AA-0	SLAM LLC 24-1A A	06/15/2025	MBS PAYDOWN		31,380	31,380	31,379	31,318	0	63	0	63	0	31,380	0	0	0	697	09/15/2049	1.F FE
1719999999. Subtotal - Asset-Backed Securities - Non-Financial Asset-Backed Securities - Full																				
Analysis - Lease-Backed Securities - Full Analysis (Unaffiliated)					78,255	78,255	77,766	78,074	0	182	0	182	0	78,255	0	0	0	1,686	XXX	XXX
1889999999. Total - Asset-Backed Securities (Unaffiliated)					13,176,755	13,176,755	13,137,699	12,850,799	0	8,672	0	8,672	0	13,178,401	0	(1,646)	(1,646)	300,765	XXX	XXX
1899999999. Total - Asset-Backed Securities (Affiliated)					0	0	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
1909999997. Total - Asset-Backed Securities - Part 4					13,176,755	13,176,755	13,137,699	12,850,799	0	8,672	0	8,672	0	13,178,401	0	(1,646)	(1,646)	300,765	XXX	XXX
1909999998. Total - Asset-Backed Securities - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
1909999999. Total - Asset-Backed Securities					13,176,755	13,176,755	13,137,699	12,850,799	0	8,672	0	8,672	0	13,178,401	0	(1,646)	(1,646)	300,765	XXX	XXX
2009999999. Total - Issuer Credit Obligations and Asset-Backed Securities					29,350,507	29,360,764	29,281,936	28,992,353	4,201	17,501	0	21,702	0	29,346,801	0	2,306	2,306	581,415	XXX	XXX
4509999997. Total - Preferred Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
4509999998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
4509999999. Total - Preferred Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999997. Total - Common Stocks - Part 4					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5989999998. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5989999999. Total - Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
5999999999. Total - Preferred and Common Stocks					0	XXX	0	0	0	0	0	0	0	0	0	0	0	0	XXX	XXX
6009999999 - Totals					29,350,507	XXX	29,281,936	28,992,353	4,201	17,501	0	21,702	0	29,346,801	0	2,306	2,306	581,415	XXX	XXX

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

Month End Depository Balances

1	2	3	4	5	Book Balance at End of Each Month During Current Quarter			9
					6	7	8	
					First Month	Second Month	Third Month	
Depository	Restricted Asset Code	Rate of Interest	Amount of Interest Received During Current Quarter	Amount of Interest Accrued at Current Statement Date				*
HUNTINGTON PREMIER MONEY MKT								
..... Columbus, OH		0.000	614,643	0	68,103,253	68,334,759	68,559,609	XXX.
HUNTINGTON NATIONAL BANK								
(HCDA) Columbus, OH					(15,686,693)	(15,724,663)	(15,761,498)	XXX.
US BANK MONEY MKT SAVINGS St. Paul, MN					857,029	860,106	37,117,285	XXX.
US BANK St. Paul, MN					121,807	55,934	71,870	XXX.
JP MORGAN CHASE Columbus, OH					88,718	192,152	1,051,722	XXX.
JP MORGAN CHASE Columbus, OH					50,586	47,994	48,103	XXX.
JP MORGAN CHASE Columbus, OH					622,103	(570,197)	76,601	XXX.
US BANK St. Paul, MN					(24,759,593)	(27,003,116)	(28,454,988)	XXX.
US BANK St. Paul, MN					(338,002)	(281,061)	(292,249)	XXX.
US BANK St. Paul, MN					(1,515,127)	(1,120,573)	(1,359,963)	XXX.
0199998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	XXX	XXX	0	0	0	0	0	XXX
0199999. Totals - Open Depositories	XXX	XXX	614,643	0	27,544,081	24,791,335	61,056,492	XXX
0299998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	614,643	0	27,544,081	24,791,335	61,056,492	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX	0	0	0	XXX
.....								
.....								
.....								
0599999. Total - Cash	XXX	XXX	614,643	0	27,544,081	24,791,335	61,056,492	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

[illegible]