



HEALTH QUARTERLY STATEMENT

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

Medical Mutual of Ohio

NAIC Group Code 0730 (Current) 0730 (Prior) NAIC Company Code 29076 Employer's ID Number 34-0648820

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: Property/Casualty

Is HMO Federally Qualified? Yes [] No []

Incorporated/Organized 03/30/1934 Commenced Business 01/01/1934

Statutory Home Office 100 American Road (Street and Number) Cleveland, OH, US 44144 (City or Town, State, Country and Zip Code)

Main Administrative Office 100 American Road (Street and Number) Cleveland, OH, US 44144 (City or Town, State, Country and Zip Code) 216-687-7000 (Area Code) (Telephone Number)

Mail Address 100 American Road (Street and Number or P.O. Box) Cleveland, OH, US 44144 (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 100 American Road (Street and Number) Cleveland, OH, US 44144 (City or Town, State, Country and Zip Code) 216-687-7000 (Area Code) (Telephone Number)

Internet Website Address www.MedMutual.com

Statutory Statement Contact Debra Gibson (Name) 216-687-2860 (Area Code) (Telephone Number) Debra.Gibson@medmutual.com (E-mail Address) 216-360-4073 (FAX Number)

OFFICERS

President & CEO Anthony Michael Helton Treasurer & CFO James Edward McNutt

Secretary Patricia Bunn Decensi

OTHER

Thomas Parke Dewey, EVP Christopher James Albert Donovan, EVP Andrea Marie Hogben, EVP

Lori Ann Johnston, EVP Dr. Dee Bialecki-Haase, CMO Richard Thomas Wallack, EVP

DIRECTORS OR TRUSTEES

Gertrude Aline Bartley Frederick David DiSanto Terrance Callahan Egger

Kathleen Sheline Hanley Michael Kipp Keating Robert John King Jr.

Darrell LeRoy McNair Jr. Anthony Michael Helton

State of Ohio SS:

County of Cuyahoga

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.

Anthony Michael Helton Patricia Bunn Decensi James Edward McNutt

President & CEO Secretary Treasurer & CFO

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 11/15/2025

3. Number of pages attached.....

ASSETS

	Current Statement Date			4 December 31 Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
1. Bonds	837,619,896		837,619,896	884,727,597
2. Stocks:				
2.1 Preferred stocks	25,579,172		25,579,172	22,469,331
2.2 Common stocks	635,849,736		635,849,736	763,587,441
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 (\$ 67,718,497), cash equivalents (\$484,174,594) and short-term investments (\$)	551,893,090		551,893,090	354,969,893
6. Contract loans (including \$ premium notes)			0	0
7. Derivatives			0	0
8. Other invested assets	372,488,134	29,569,213	342,918,922	355,851,723
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)	2,423,430,028	29,569,213	2,393,860,815	2,381,605,986
13. Title plants less \$ charged off (for Title insurers only)			0	0
14. Investment income due and accrued	5,719,831		5,719,831	6,054,494
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	82,005,269		82,005,269	112,436,482
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)			0	0
15.3 Accrued retrospective premiums (\$) and contracts subject to redetermination (\$)	8,887,796	2,573,676	6,314,120	16,503,110
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers	195,131,556	0	195,131,556	57,241,763
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	8,691,953	461,135	8,230,818	5,919,760
18.1 Current federal and foreign income tax recoverable and interest thereon	41,478,859		41,478,859	46,970,334
18.2 Net deferred tax asset	0		0	0
19. Guaranty funds receivable or on deposit	0		0	0
20. Electronic data processing equipment and software	3,169,483	121,893	3,047,590	4,267,138
21. Furniture and equipment, including health care delivery assets (\$)	36,663,474	36,663,474	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	0
24. Health care (\$ 99,467,510) and other amounts receivable	121,484,946	22,017,436	99,467,510	66,193,538
25. Aggregate write-ins for other-than-invested assets	58,683,591	35,850,720	22,832,871	5,034,377
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	2,985,346,787	127,257,547	2,858,089,241	2,702,226,983
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	0
28. Total (Lines 26 and 27)	2,985,346,787	127,257,547	2,858,089,241	2,702,226,983
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. Other Assets	29,302,105	7,451,777	21,850,329	3,642,953
2502. Prepaid Assets	25,598,155	25,598,155	0	0
2503. Other Receivables	3,783,330	2,800,788	982,542	1,391,424
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)	58,683,591	35,850,720	22,832,871	5,034,377

LIABILITIES, CAPITAL AND SURPLUS

	Current Period			Prior Year
	1 Covered	2 Uncovered	3 Total	4 Total
1. Claims unpaid (less \$ reinsurance ceded)	477,498,045		477,498,045	425,626,968
2. Accrued medical incentive pool and bonus amounts	14,298,000		14,298,000	8,912,105
3. Unpaid claims adjustment expenses	8,669,494		8,669,494	8,562,844
4. Aggregate health policy reserves, including the liability of \$ 4,992,000 for medical loss ratio rebate per the Public Health Service Act	266,044,492		266,044,492	250,858,337
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	57,398,723		57,398,723	48,377,521
9. General expenses due or accrued	152,967,867		152,967,867	188,777,903
10.1 Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses))	0		0	0
10.2 Net deferred tax liability	1,473,000		1,473,000	0
11. Ceded reinsurance premiums payable	224,556,588		224,556,588	55,265,275
12. Amounts withheld or retained for the account of others	57,328		57,328	0
13. Remittances and items not allocated	578,749		578,749	537,189
14. Borrowed money (including \$ current) and interest thereon \$ (including \$ current)			0	0
15. Amounts due to parent, subsidiaries and affiliates	43,467,413		43,467,413	39,828,902
16. Derivatives			0	0
17. Payable for securities	0		0	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)	1,466,304		1,466,304	6,147,044
21. Net adjustments in assets and liabilities due to foreign exchange rates			0	0
22. Liability for amounts held under uninsured plans	4,375,640		4,375,640	5,139,753
23. Aggregate write-ins for other liabilities (including \$ 135,001,965 current)	232,274,711	0	232,274,711	235,125,209
24. Total liabilities (Lines 1 to 23)	1,485,126,355	0	1,485,126,355	1,273,159,049
25. Aggregate write-ins for special surplus funds	XXX	XXX	0	0
26. Common capital stock	XXX	XXX		
27. Preferred capital stock	XXX	XXX		
28. Gross paid in and contributed surplus	XXX	XXX		
29. Surplus notes	XXX	XXX		0
30. Aggregate write-ins for other-than-special surplus funds	XXX	XXX	0	0
31. Unassigned funds (surplus)	XXX	XXX	1,372,962,886	1,429,067,933
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	1,372,962,886	1,429,067,933
34. Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	2,858,089,241	2,702,226,983
DETAILS OF WRITE-INS				
2301. Accrued Postemployment Benefits Other Than Pension	32,623,069		32,623,069	37,057,950
2302. Other Liabilities	87,574,166		87,574,166	74,448,673
2303. Assumed Reinsurance Claims Payable	104,285,293		104,285,293	117,504,509
2398. Summary of remaining write-ins for Line 23 from overflow page	7,792,184	0	7,792,184	6,114,078
2399. Totals (Lines 2301 through 2303 plus 2398)(Line 23 above)	232,274,711	0	232,274,711	235,125,209
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	7,815,916	7,826,585	10,349,481
2. Net premium income (including \$ non-health premium income).....	XXX	2,946,411,527	2,595,349,488	3,475,974,202
3. Change in unearned premium reserves and reserve for rate credits.....	XXX	(5,466,302)	(1,809,000)	(1,285,000)
4. Fee-for-service (net of \$ medical expenses)	XXX		0	0
5. Risk revenue	XXX		0	0
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	2,940,945,225	2,593,540,488	3,474,689,202
Hospital and Medical:				
9. Hospital/medical benefits		1,471,574,801	1,187,535,231	1,666,875,848
10. Other professional services		122,772,511	91,540,086	126,606,817
11. Outside referrals		27,414,832	17,538,448	23,641,188
12. Emergency room and out-of-area		235,300,434	209,070,296	298,933,542
13. Prescription drugs		332,632,971	206,860,161	306,591,999
14. Aggregate write-ins for other hospital and medical	0	0	0	0
15. Incentive pool, withhold adjustments and bonus amounts		9,014,952	5,343,323	5,728,177
16. Subtotal (Lines 9 to 15)	0	2,198,710,501	1,717,887,544	2,428,377,571
Less:				
17. Net reinsurance recoveries		(487,496,685)	(567,276,350)	(815,201,965)
18. Total hospital and medical (Lines 16 minus 17)	0	2,686,207,186	2,285,163,895	3,243,579,536
19. Non-health claims (net)				
20. Claims adjustment expenses, including \$ 69,278,286 cost containment expenses		120,565,299	112,340,509	136,571,627
21. General administrative expenses		163,310,514	153,848,372	226,778,646
22. Increase in reserves for life and accident and health contracts (including \$ increase in reserves for life only) .			0	134,677,000
23. Total underwriting deductions (Lines 18 through 22).....	0	2,970,082,999	2,551,352,776	3,741,606,808
24. Net underwriting gain or (loss) (Lines 8 minus 23)	XXX	(29,137,774)	42,187,712	(266,917,606)
25. Net investment income earned		33,525,663	40,461,317	54,877,718
26. Net realized capital gains (losses) less capital gains tax of \$ 9,578,735		159,308,456	8,944,788	23,480,509
27. Net investment gains (losses) (Lines 25 plus 26)	0	192,834,120	49,406,105	78,358,227
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	(7,548,408)	(5,348,307)	(4,100,208)
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	156,147,938	86,245,510	(192,659,587)
31. Federal and foreign income taxes incurred	XXX	(12,002,735)	1,329,404	(18,065,357)
32. Net income (loss) (Lines 30 minus 31)	XXX	168,150,673	84,916,107	(174,594,230)
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. (Other Expense), net of Other Income		(7,548,408)	(5,348,307)	(4,100,208)
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	(7,548,408)	(5,348,307)	(4,100,208)

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.....	1,429,067,934	1,798,376,607	1,798,376,607
34. Net income or (loss) from Line 32	168,150,673	84,916,107	(174,594,230)
35. Change in valuation basis of aggregate policy and claim reserves			
36. Change in net unrealized capital gains (losses) less capital gains tax of \$ 1,474,000	(252,705,180)	(126,384,987)	(201,640,305)
37. Change in net unrealized foreign exchange capital gain or (loss)			
38. Change in net deferred income tax	1,000	923,217	(2,763,305)
39. Change in nonadmitted assets	23,764,404	28,393,971	16,724,954
40. Change in unauthorized and certified reinsurance	4,680,740	(2,106,064)	(4,197,859)
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			
47. Aggregate write-ins for gains or (losses) in surplus	3,315	0	(2,837,927)
48. Net change in capital & surplus (Lines 34 to 47)	(56,105,048)	(14,257,756)	(369,308,673)
49. Capital and surplus end of reporting period (Line 33 plus 48)	1,372,962,886	1,784,118,851	1,429,067,934
DETAILS OF WRITE-INS			
4701. (Increase)/Decrease in Unrecognized Postretirement Benefit Costs, net of tax		0	(2,837,927)
4702. Increase in Pension Costs, net of tax		0	0
4703. Other	3,315	0	0
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)	3,315	0	(2,837,927)

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	3,172,490,422	2,537,988,392	3,528,323,168
2. Net investment income	35,652,564	43,265,534	59,227,533
3. Miscellaneous income	0	0	0
4. Total (Lines 1 to 3)	3,208,142,985	2,581,253,927	3,587,550,701
5. Benefit and loss related payments	2,809,451,752	2,109,250,599	3,237,542,071
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions	326,396,177	285,503,590	340,622,546
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)	(13,187,577)	517,607	512,129
10. Total (Lines 5 through 9)	3,122,660,352	2,395,271,796	3,578,676,745
11. Net cash from operations (Line 4 minus Line 10)	85,482,633	185,982,131	8,873,956
Cash from Investments			
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds	146,629,079	125,195,435	185,609,969
12.2 Stocks	131,640,407	117,898,071	98,391,699
12.3 Mortgage loans	0	0	0
12.4 Real estate	0	0	10,579,050
12.5 Other invested assets	13,710,600	49,769,739	13,503,914
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments	0	0	0
12.7 Miscellaneous proceeds	0	0	0
12.8 Total investment proceeds (Lines 12.1 to 12.7)	291,980,086	292,863,246	308,084,632
13. Cost of investments acquired (long-term only):			
13.1 Bonds	101,327,178	30,924,252	49,784,658
13.2 Stocks	96,089,608	220,229,342	190,643,875
13.3 Mortgage loans	0	0	0
13.4 Real estate	0	0	0
13.5 Other invested assets	5,474,371	51,912,250	43,515,419
13.6 Miscellaneous applications	0	0	0
13.7 Total investments acquired (Lines 13.1 to 13.6)	202,891,158	303,065,844	283,943,953
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)	89,088,929	(10,202,599)	24,140,679
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	0	0	0
16.6 Other cash provided (applied)	22,351,635	(127,913,025)	(199,895,202)
17. Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6)	22,351,635	(127,913,025)	(199,895,202)
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) .	196,923,197	47,866,508	(166,880,567)
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	354,969,892	521,850,459	521,850,459
19.2 End of period (Line 18 plus Line 19.1)	551,893,089	569,716,967	354,969,892

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	857,919	8,862	211,593	6,052	68,548	45,235	2,014	46,714	0	0	0	0	468,901	0
2. First Quarter	879,661	8,116	205,039	5,889	73,846	43,096	1,968	86,323	0	0	0	0	455,384	0
3. Second Quarter	873,154	7,880	202,263	5,787	73,329	41,947	1,951	85,976	0	0	0	0	454,021	0
4. Third Quarter	853,483	7,604	198,500	5,675	73,335	41,370	1,943	85,823					439,233	
5. Current Year	0													
6. Current Year Member Months	7,815,916	71,758	1,822,025	52,418	660,140	380,709	17,620	774,738					4,036,508	
Total Member Ambulatory Encounters for Period:														
7 Physician	2,405,788	32,426	1,040,612	80,318	9	1,197	9,498	1,232,455					9,273	
8. Non-Physician	2,001,765	22,954	851,381	60,036	406	51,563	7,348	1,002,789					5,288	
9. Total	4,407,553	55,380	1,891,993	140,354	415	52,760	16,846	2,235,244	0	0	0	0	14,561	0
10. Hospital Patient Days Incurred	151,349	644	37,570	9,585			634	102,737					179	
11. Number of Inpatient Admissions	21,470	129	8,710	1,220			96	11,269					46	
12. Health Premiums Written (a)	2,491,027,439	44,286,657	1,270,610,559	15,029,525	3,718,186	10,513,841	11,465,404	893,005,064					242,398,204	
13. Life Premiums Direct	0													
14. Property/Casualty Premiums Written	0													
15. Health Premiums Earned.....	2,491,027,439	44,286,657	1,270,610,559	15,029,525	3,718,186	10,513,841	11,465,404	893,005,064					242,398,204	
16. Property/Casualty Premiums Earned	0													
17. Amount Paid for Provision of Health Care Services.....	2,172,965,867	28,551,886	1,025,453,655	12,473,572	2,701,795	8,200,733	8,371,487	886,488,311					200,724,429	
18. Amount Incurred for Provision of Health Care Services	2,198,710,501	26,750,067	1,021,545,992	11,683,425	2,701,798	8,151,243	7,991,565	921,500,000					198,386,410	

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

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

[illegible]

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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	30,452,333	229,578,029	786,727	56,299,522	31,239,060	57,715,642
2. Comprehensive (hospital and medical) group	167,438,992	1,000,714,426	5,604,060	241,472,511	173,043,052	253,527,471
3. Medicare Supplement	28,251,752	167,759,530	1,221,041	42,494,411	29,472,793	36,486,238
4. Vision only	0	1,953,352	0	0	0	0
5. Dental only	827,156	11,619,340	39,972	1,080,021	867,128	1,110,000
6. Federal Employees Health Benefits Plan	729,205	7,616,785	12,000	1,401,863	741,205	2,011,000
7. Title XVIII - Medicare	32,740,770	802,652,137	257,100	114,715,916	32,997,870	60,277,645
8. Title XIX - Medicaid					0	0
9. Credit A&H					0	0
10. Disability Income					0	0
11. Long-term care					0	0
12. Other health	14,570,879	139,799,193	4,100	12,108,802	14,574,979	14,498,970
13. Health subtotal (Lines 1 to 12)	275,011,087	2,361,692,791	7,925,000	469,573,045	282,936,087	425,626,967
14. Health care receivables (a)	2,172,561	109,000,229			2,172,561	93,763,716
15. Other non-health					0	0
16. Medical incentive pools and bonus amounts	(3,093,121)	12,748,529	4,052,000	10,246,000	958,879	8,912,105
17. Totals (Lines 13 - 14 + 15 + 16)	269,745,405	2,265,441,092	11,977,000	479,819,045	281,722,405	340,775,356

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

NOTES TO FINANCIAL STATEMENTS

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices						
The accompanying statutory financial statements of Medical Mutual of Ohio (the Company) have been prepared in conformity with the National Association of Insurance Commissioners' (NAIC) Accounting Practices and Procedures Manual (NAIC SAP), as prescribed by the Ohio Department of Insurance (ODI). No accounting practices were employed by the Company in 2025 or 2024 that departed from NAIC SAP.						
	SSAP #	F/S Page	F/S Line #		2025	2024
NET INCOME						
(1) State basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$	168,150,673	\$(174,594,230)
(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	\$	168,150,673	\$(174,594,230)
SURPLUS						
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$	1,372,962,886	\$1,429,067,933
(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	\$	1,372,962,886	\$1,429,067,933

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

C. Accounting Policy
No significant change.

D. Going Concern
No significant change.

NOTE 2 Accounting Changes and Corrections of Errors
No significant change.

NOTE 3 Business Combinations and Goodwill
No significant change.

NOTE 4 Discontinued Operations
No significant change.

NOTE 5 Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans			
Not Applicable			
B. Debt Restructuring			
Not Applicable			
C. Reverse Mortgages			
Not Applicable			
D. Asset-Backed Securities			
a) The aggregate amount of unrealized losses:			
1. Less than 12 Months		\$	5,342
2. 12 Months or Longer		\$	3,578,085
b)The aggregate related fair value of securities with unrealized losses:			
1. Less than 12 Months		\$	4,841,574
2. 12 Months or Longer		\$	49,897,012
E. Dollar Repurchase Agreements and/or Securities Lending Transactions			
Not Applicable			
F. Repurchase Agreements Transactions Accounted for as Secured Borrowing			
Not Applicable			
G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing			
Not Applicable			
H. Repurchase Agreements Transactions Accounted for as a Sale			
Not Applicable			
I. Reverse Repurchase Agreements Transactions Accounted for as a Sale			
Not Applicable			
J. Real Estate			
Not Applicable			
K. Investments in Tax Credit Structures (tax credit investments)			
Not Applicable			

NOTES TO FINANCIAL STATEMENTS

L. Restricted Assets

1. Restricted Assets (Including Pledged)

Restricted Asset Category	1 Total Gross (Admitted & Non- admitted) Restricted from Current Year	2 Total Gross (Admitted & Non- admitted) Restricted from Prior Year	3 Increase/ (Decrease) (1 minus 2)	4 Total Current Year Non- admitted Restricted	5 Total Current Year Admitted Restricted (1 minus 4)	6 Gross (Admitted & Non- admitted) Restricted to Total Assets (a)	7 Admitted Restricted to Total Admitted Assets (b)
a. Subject to contractual obligation for which liability is not shown			\$ -		\$ -	0.000%	0.000%
b. Collateral held under security lending agreements			\$ -		\$ -	0.000%	0.000%
c. Subject to repurchase agreements			\$ -		\$ -	0.000%	0.000%
d. Subject to reverse repurchase agreements			\$ -		\$ -	0.000%	0.000%
e. Subject to dollar repurchase agreements			\$ -		\$ -	0.000%	0.000%
f. Subject to dollar reverse repurchase agreements			\$ -		\$ -	0.000%	0.000%
g. Placed under option contracts			\$ -		\$ -	0.000%	0.000%
h. Letter stock or securities restricted as to sale - excluding FHLB capital stock			\$ -		\$ -	0.000%	0.000%
i. FHLB capital stock			\$ -		\$ -	0.000%	0.000%
j. On deposit with states	\$ 946,188	\$ 958,173	\$ (11,985)		\$ 946,188	0.032%	0.033%
k. On deposit with other regulatory bodies			\$ -		\$ -	0.000%	0.000%
l. Pledged collateral to FHLB (including assets backing funding agreements)			\$ -		\$ -	0.000%	0.000%
m. Pledged as collateral not captured in other categories			\$ -		\$ -	0.000%	0.000%
n. Other restricted assets			\$ -		\$ -	0.000%	0.000%
o. Total Restricted Assets (Sum of a through n)	\$ 946,188	\$ 958,173	\$ (11,985)	\$ -	\$ 946,188	0.032%	0.033%

(a) Column 1 divided by Asset Page, Column 1, Line 28

(b) Column 5 divided by Asset Page, Column 3, Line 28

2. Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)
Not Applicable

3. Detail of Other Restricted Assets (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)
Not Applicable

4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements
Not Applicable

M. Working Capital Finance Investments
Not Applicable

N. Offsetting and Netting of Assets and Liabilities
Not Applicable

O. 5GI Securities
Not Applicable

P. Short Sales
Not Applicable

Q. Prepayment Penalty and Acceleration Fees

	<u>General Account</u>	
1. Number of CUSIPs		4
2. Aggregate Amount of Investment Income	\$	13,060

R. Reporting Entity's Share of Cash Pool by Asset Type
Not Applicable

S. Aggregate Collateral Loans by Qualifying Investment Collateral
Not Applicable

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies
No significant change

NOTE 7 Investment Income
A. Not Applicable

B. Not Applicable

C. The gross, nonadmitted and admitted amounts for interest income due and accrued.

Interest Income Due and Accrued	<u>Amount</u>
1. Gross	\$ 5,719,831
2. Nonadmitted	
3. Admitted	\$ 5,719,831

D. The aggregate deferred interest.
Not Applicable

NOTES TO FINANCIAL STATEMENTS

E. The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance.
Not Applicable

NOTE 8 Derivative Instruments
Not applicable

NOTE 9 Income Taxes
No significant change.

NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties
No significant change

NOTE 11 Debt
Not Applicable

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

- A. Defined Benefit Plan
No significant change.
- B. Not applicable.
- C. The fair value of each class of plan assets
Not applicable
- D. Not applicable
- E. Defined Contribution Plan
Not applicable
- F. Multiemployer Plans
Not applicable
- G. Consolidated/Holding Company Plans
Not applicable
- H. Postemployment Benefits and Compensated Absences
Not applicable
- I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)
Not applicable

NOTE 13 Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations
No significant change.

NOTE 14 Liabilities, Contingencies and Assessments
No significant change.

NOTE 15 Leases
No significant change.

NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk
No significant change.

NOTE 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities
Not applicable

NOTE 18 Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans
No significant change.

NOTE 19 Direct Premium Written/Produced by Managing General Agents/Third Party Administrators
No significant change.

NOTE 20 Fair Value Measurements
A.

(1) Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Total
a. Assets at fair value					
PERPETUAL PREFERRED STOCKS INDUSTRIAL & MISC	\$ 15,967,809				\$ 15,967,809
REDEEMABLE PREFERRED STOCKS INDUSTRIAL & MISC	\$ 481,400				\$ 481,400
COMMON STOCKS INDUSTRIAL & MISC	\$ 354,331,468				\$ 354,331,468
OTHER INVESTED ASSETS	\$ 31,077,242				\$ 31,077,242
Total assets at fair value/NAV	\$ 401,857,919	\$ -	\$ -	\$ -	\$ 401,857,919

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
Not applicable

(3) Not Applicable

(4) Not Applicable

NOTES TO FINANCIAL STATEMENTS

(5) Not Applicable

B. Not Applicable

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

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
BONDS	\$ 819,983,571	\$ 837,619,896		\$ 819,983,571			
REDEEMABLE PREFER	\$ 8,591,927	\$ 9,611,363	\$ 8,591,927				
PERPETUAL PREFERR	\$ 15,967,809	\$ 15,967,809	\$ 15,967,809				
COMMON STOCKS	\$ 354,331,468	\$ 354,331,468	\$ 354,331,468				
OTHER INVESTED ASSETS	\$ 31,077,242	\$ 31,077,242	\$ 31,077,242				

D. Not Practicable to Estimate Fair Value
Not Applicable

E. Not Applicable

NOTE 21 Other Items
No significant change

NOTE 22 Events Subsequent
No significant change.

NOTE 23 Reinsurance
Effective July 1, 2025, the Company entered into an agreement with The Canada Life Assurance Company (Canada Life). The agreement is on a funds withheld coinsurance basis, and reinsurance effected under this agreement will be on an idemnity reinsurance basis. As the effective date of this agreement, the Company will cede portions of the commercial and stop loss premium and claims incurred.

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. No significant change.

B. No significant change.

C. No significant change.

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

	Individual	Employer	Employer	Rebates	Total
Prior Reporting Year					
(1) Medical loss ratio rebates incurred	\$ 1,285,000	\$ -	\$ -	\$ -	\$ 1,285,000
(2) Medical loss ratio rebates paid	\$ -	\$ -	\$ -	\$ -	\$ -
(3) Medical loss ratio rebates unpaid	\$ 1,285,000	\$ -	\$ -	\$ -	\$ 1,285,000
(4) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	
(5) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	
(6) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ 1,285,000
Current Reporting Year-to-Date					
(7) Medical loss ratio rebates incurred	\$ 2,766,302	\$ 2,700,000	\$ -	\$ -	\$ 5,466,302
(8) Medical loss ratio rebates paid	\$ 1,759,302				\$ 1,759,302
(9) Medical loss ratio rebates unpaid	\$ 2,292,000	\$ 2,700,000			\$ 4,992,000
(10) Plus reinsurance assumed amounts	XXX	XXX	XXX	XXX	
(11) Less reinsurance ceded amounts	XXX	XXX	XXX	XXX	
(12) Rebates unpaid net of reinsurance	XXX	XXX	XXX	XXX	\$ 4,992,000

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)	\$ 6,314,120
Liabilities	
2. Risk adjustment user fees payable for ACA Risk Adjustment	\$ 11,002
3. Premium adjustments payable due to ACA Risk Adjustment (including high risk pool premium)	\$ 37,577
Operations (Revenue & Expense)	
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk Adjustment	\$ 3,004,777
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	\$ 11,073

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

	Accrued During the Prior Year on Business Written Before December 31 of the Prior Year		Received or Paid as of the Current Year on Business Written Before December 31 of the Prior Year		Differences		Adjustments			Unsettled Balances as of the Reporting Date	
					Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	Payable	Receivable	Payable	Receivable	Payable	Receivable	Payable	Ref	Receivable	Payable
a. Permanent ACA Risk Adjustment Program											

NOTES TO FINANCIAL STATEMENTS

1. Premium adjustments receivable (including high risk pool payments)	\$ 2,431,200		\$ 447,871		\$ 1,983,329	\$ -	\$ 2,423,591		A	\$ 4,406,920	\$ -
2. Premium adjustments (payable) (including high risk pool premium)				\$(1,288,437)	\$ -	\$ 1,288,437		\$(1,326,014)	B	\$ -	\$ (37,577)
3. Total ACA Permanent Risk Adjustment Program	\$ 2,431,200	\$ -	\$ 447,871	\$(1,288,437)	\$ 1,983,329	\$ 1,288,437	\$ 2,423,591	\$(1,326,014)		\$ 4,406,920	\$ (37,577)

Explanations of Adjustments

- A. ACA Risk Adjustment based on new estimates received through September 30, 2025.
B. ACA Risk Adjustment based on new estimates received through September 30, 2025.

NOTE 25 Change in Incurred Claims and Claim Adjustment Expenses

Reserves for unpaid claims and claims adjustment expenses net of health care receivables as of December 31, 2024 were \$349.3 million. As of September 30, 2025, \$366.5 million has been paid for incurred claims and claims adjustment expenses attributable to insured events of prior years, and \$ -86.1 million in health care receivables have been recovered. Reserves remaining for prior years are \$12 million based on the estimation of unpaid claims, claim adjustment expenses, and amounts expected to be received through subrogation at September 30, 2025 Healthcare receivables remaining to be recovered related to prior years are \$ 2.17 million. Therefore, there has been a \$59.1 million prior year development since December 31, 2024.

NOTE 26 Intercompany Pooling Arrangements

No significant change.

NOTE 27 Structured Settlements

No significant change.

NOTE 28 Health Care Receivables

A. Pharmaceutical Rebate Receivables

Date	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
09/30/2025	\$ 82,703,000				
06/30/2025	\$ 80,878,000	\$ 87,928,279	\$ 82,683,412		
03/31/2025	\$ 81,915,000	\$ 78,004,920	\$ 74,170,570	\$ (276,693)	
12/31/2024	\$ 64,383,000	\$ 64,383,000	\$ 62,032,075	\$ 839,597	\$ (798,365)
09/30/2024	\$ 61,425,000	\$ 62,127,000	\$ 62,230,699	\$ 357,055	\$ 25,857
06/30/2024	\$ 62,559,000	\$ 62,934,000	\$ 62,765,623	\$ (1,804,975)	\$ 823,240
03/31/2024	\$ 57,426,000	\$ 58,143,190	\$ 59,877,319	\$ (550,046)	\$ (451,972)
12/31/2023	\$ 60,597,800	\$ 60,597,800	\$ 55,912,961	\$ 5,212,889	\$ 834,945
09/30/2023	\$ 53,984,500	\$ 56,894,700	\$ 54,898,472	\$ 3,185,398	\$ (225,765)
06/30/2023	\$ 48,220,000	\$ 53,984,500	\$ 53,417,372	\$ (248,572)	\$ 3,153,884
03/31/2023	\$ 43,242,000	\$ 48,220,000	\$ 49,758,107	\$ 19,012	\$ 1,038,744

- B. Risk-Sharing Receivables
Not applicable

NOTE 29 Participating Policies

No significant change.

NOTE 30 Premium Deficiency Reserves

No significant change.

NOTE 31 Anticipated Salvage and Subrogation

No significant change.

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Medical Mutual of Ohio

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 [☒]
- 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 [☐]
- 2.2

If yes, date of change:

02/19/2025
- 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 [☒] No [☐]
- 3.2

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

Yes [☐] No [☐]
- 3.3

If the response to 3.2 is yes, provide a brief description of those changes.
- 3.4

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

Yes [☐] No [☒]
- 3.5

If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.
- 4.1

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

Yes [☐] No [☒]
- 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?

Yes [☐] No [☐] N/A [☒]

If yes, attach an explanation.
- 6.1

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

12/31/2023
- 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.

12/31/2023
- 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).

04/14/2025
- 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 [☒]
- 6.6

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

Yes [☐] No [☐] N/A [☒]
- 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 [☒]
- 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 [☒]
- 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 [☒]
- 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

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Medical Mutual of Ohio

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 [X] No []
- 14.2

If yes, please complete the following:

	1 Prior Year-End Book/Adjusted Carrying Value	2 Current Quarter Book/Adjusted Carrying Value
14.21 Bonds	\$0	\$
14.22 Preferred Stock	\$0	\$
14.23 Common Stock	\$388,454,007	\$301,972,889
14.24 Short-Term Investments	\$0	\$
14.25 Mortgage Loans on Real Estate	\$0	\$
14.26 All Other	\$267,875,449	\$194,900,505
14.27 Total Investment in Parent, Subsidiaries and Affiliates (Subtotal Lines 14.21 to 14.26)	\$656,329,457	\$496,873,394
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
- 11.1

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Medical Mutual of Ohio

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
FIFTH THIRD BANK	5050 KINGSLEY DRIVE, CINCINNATI, OHIO 45263

- 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
ANCORA ADVISORS, LLC	U.....
HUNTINGTON BANK	U.....
JAMES CELLURA	I.....

- 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 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed
124676	ANCORA ADVISORS, LLC	N/A	SEC	NO.....
16986	THE HUNTINGTON INVESTMENT COMPANY	N/A	OCC	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

93.700 %

1.2 A&H cost containment percent

2.400 %

1.3 A&H expense percent excluding cost containment expenses

7.300 %
- 2.1

Do you act as a custodian for health savings accounts?

Yes [☐] No [☒]
- 2.2

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

\$
- 2.3

Do you act as an administrator for health savings accounts?

Yes [☐] No [☒]
- 2.4

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

\$
3.

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

Yes [☒] No [☐]
- 3.1

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

Yes [☐] No [☐]

SCHEDULE S - CEDED REINSURANCE

[illegible]

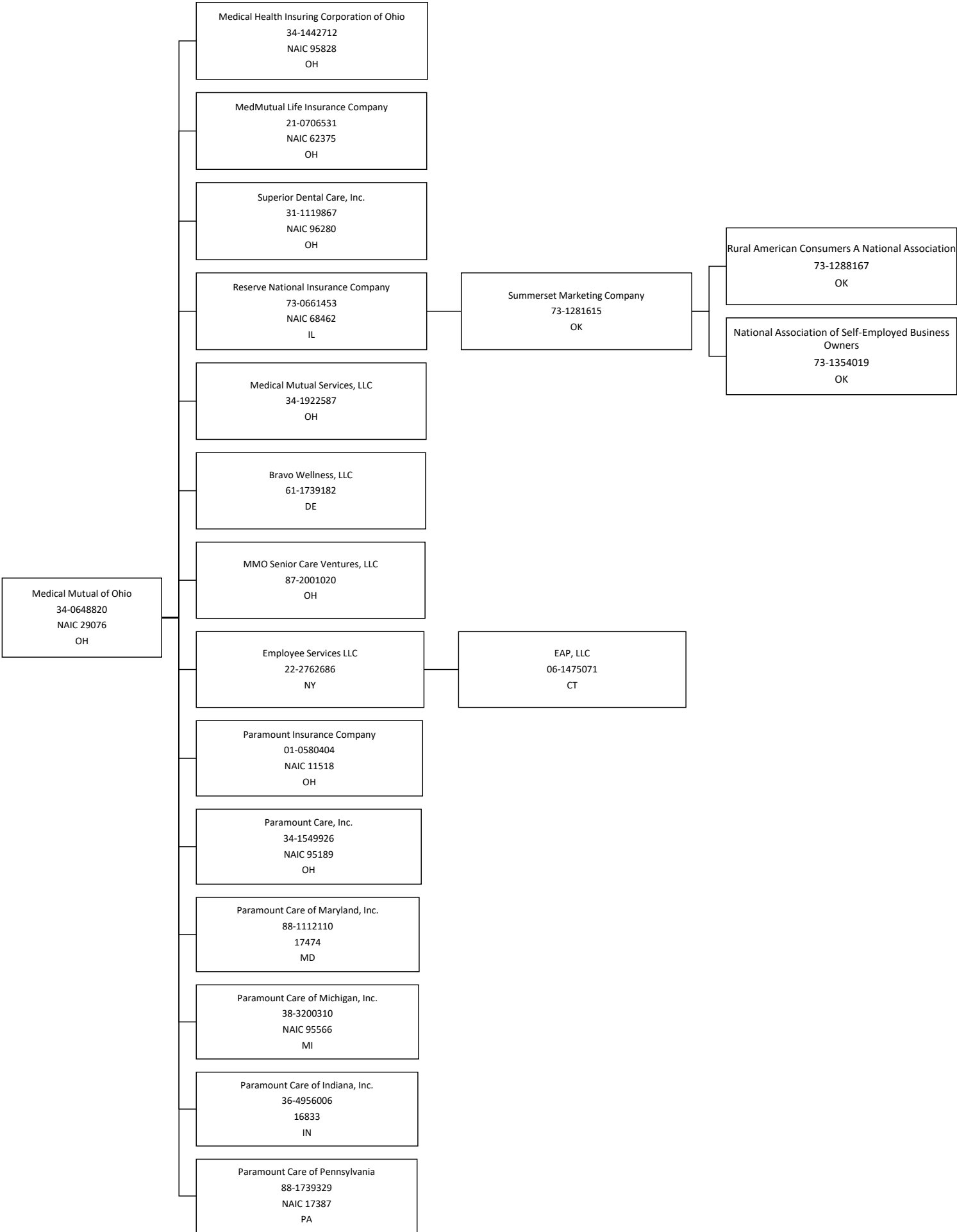
SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

Current Year to Date - Allocated by States and Territories

		1	Direct Business Only								
			2	3	4	5	6	7	8	9	10
States, etc.		Active Status (a)	Accident 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 ..L.								0	
12.	Hawaii	HI ..N.								0	
13.	Idaho	ID ..N.								0	
14.	Illinois	IL ..N.								0	
15.	Indiana	IN ..L.								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 ..L.	513,829							513,829	
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 ..L.								0	
35.	North Dakota	ND ..N.								0	
36.	Ohio	OH ..L.	1,586,043,141	893,005,064			11,465,404			2,490,513,609	
37.	Oklahoma	OK ..N.								0	
38.	Oregon	OR ..N.								0	
39.	Pennsylvania	PA ..L.								0	
40.	Rhode Island	RI ..N.								0	
41.	South Carolina	SC ..L.								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 ..L.								0	
50.	Wisconsin	WI ..L.								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.	1,586,556,971	893,005,064	0	0	11,465,404	0	0	2,491,027,439	0
60.	Reporting Entity Contributions for Employee Benefit Plans	XXX.								0	
61.	Totals (Direct Business)	XXX.	1,586,556,971	893,005,064	0	0	11,465,404	0	0	2,491,027,439	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..... 9 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..... 48
3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state. 0

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



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)	*
. 0730 ...	Medical Mutual of Ohio	 29076	34-0648820 ..	.....	.....	.....	Medical Mutual of Ohio	.. OH.....	RE.....	.....	Board of Directors.....	.. 0.000	Medical Mutual of Ohio	 NO.....	.....
. 0730 ...	Medical Mutual of Ohio	 95828	34-1442712 ..	.....	.....	.....	Medical Health Insuring Corporation of Ohio	.. OH.....	DS.....	Medical Mutual of Ohio	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
. 0730 ...	Medical Mutual of Ohio	 62375	21-0706531 ..	.....	.....	.....	MedMutual Life Insurance Company	.. OH.....	DS.....	Medical Mutual of Ohio	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
. 0730 ...	Medical Mutual of Ohio	 96280	31-1119867 ..	.....	.....	.....	Superior Dental Care, Inc	.. OH.....	DS.....	Medical Mutual of Ohio	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
. 0730 ...	Medical Mutual of Ohio	 68462	73-0661453 ..	.....	.....	.....	Reserve National Insurance Company	.. IL.....	DS.....	Medical Mutual of Ohio	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
. 0730 ...	Medical Mutual of Ohio	 95189	34-1549926 ..	.....	.....	.....	Paramount Care, Inc.	.. OH.....	DS.....	Medical Mutual of Ohio	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
. 0730 ...	Medical Mutual of Ohio	 95566	38-3200310 ..	.....	.....	.....	Paramount Care of Michigan, Inc.	.. MI.....	DS.....	Medical Mutual of Ohio	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
. 0730 ...	Medical Mutual of Ohio	 11518	01-0580404 ..	.....	.....	.....	Paramount Insurance Company	.. OH.....	DS.....	Medical Mutual of Ohio	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
. 0730 ...	Medical Mutual of Ohio	 16833	36-4956006 ..	.....	.....	.....	Paramount Care of Indiana, Inc	.. IN.....	DS.....	Medical Mutual of Ohio	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
. 0730 ...	Medical Mutual of Ohio	 17474	88-1112110 ..	.....	.....	.....	Paramount Care of Maryland, Inc.	.. MD.....	DS.....	Medical Mutual of Ohio	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
. 0730 ...	Medical Mutual of Ohio	 17387	88-1739329 ..	.....	.....	.....	Paramount Care of Pennsylvania	.. PA.....	DS.....	Medical Mutual of Ohio	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
.....	Medical Mutual of Ohio .....	.....	34-1922587 ..	.....	.....	.....	Medical Mutual Services, LLC	.. OH.....	DS.....	Medical Mutual of Ohio	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
.....	Medical Mutual of Ohio .....	.....	61-1739182 ..	.....	.....	.....	Bravo Wellness, LLC	.. DE.....	DS.....	Medical Mutual of Ohio	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
.....	Medical Mutual of Ohio .....	.....	22-2762686 ..	.....	.....	.....	Employee Services LLC	.. NY.....	DS.....	Medical Mutual of Ohio	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
.....	Medical Mutual of Ohio .....	.....	06-1475071 ..	.....	.....	.....	EAP, LLC	.. CT.....	DS.....	Medical Mutual of Ohio	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
.....	Medical Mutual of Ohio .....	.....	87-2001020 ..	.....	.....	.....	MMO Senior Care Ventures, LLC	.. OH.....	DS.....	Medical Mutual of Ohio	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
.....	Medical Mutual of Ohio .....	.....	73-1281615 ..	.....	.....	.....	Summerset Marketing Company	.. OK.....	DS.....	Reserve National Insurance Company	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
.....	Medical Mutual of Ohio .....	.....	73-1288167 ..	.....	.....	.....	Rural American Consumers A National Association	.. OK.....	DS.....	Summerset Marketing Company	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
.....	Medical Mutual of Ohio .....	.....	73-1354019 ..	.....	.....	.....	National Association of Self-Employed Business Owners	.. OK.....	DS.....	Summerset Marketing Company	Ownership.....	.. 100.000 ...	Medical Mutual of Ohio	 NO.....	.....
.....															
.....															

Asterisk	Explanation

NONE

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.	N/A

Explanation:

1. Not required to be filed

Bar Code:

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



STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Medical Mutual of Ohio

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.	Unclaimed Funds	6,601,184		6,601,184	4,923,078
2305.	Guaranty Fund Liability	1,191,000		1,191,000	1,191,000
2397.	Summary of remaining write-ins for Line 23 from overflow page	7,792,184	0	7,792,184	6,114,078

Additional Write-ins for Capital and Surplus Account Line 47

		1 Current Year to Date	2 Prior Year to Date	3 Prior Year Ended December 31
4704.	.....			0
4797.	Summary of remaining write-ins for Line 47 from overflow page	0	0	0

SCHEDULE A - VERIFICATION

Real Estate

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	0	12,092,203
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		0
4. Total gain (loss) on disposals		(90,950)
5. Deduct amounts received on disposals		10,579,050
6. Total foreign exchange change in book/adjusted carrying value		0
7. Deduct current year's other than temporary impairment recognized		1,556,734
8. Deduct current year's depreciation		(134,531)
9. Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8)	0	0
10. Deduct total nonadmitted amounts		0
11. Statement value at end of current period (Line 9 minus Line 10)	0	0

SCHEDULE B - VERIFICATION

Mortgage Loans

	1	2
	Year to Date	Prior Year Ended December 31
1. Book value/recorded investment excluding accrued interest, December 31 of prior year		
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		
2.2 Additional investment made after acquisition		
3. Capitalized deferred interest and other		
4. Accrual of discount		
5. Unrealized valuation increase/(decrease)		
6. Total gain (loss) on disposals		
7. Deduct amounts received on disposals		
8. Deduct amortization of premium and mortgage interest 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)		

NONE

SCHEDULE BA - VERIFICATION

Other Long-Term Invested Assets

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value, December 31 of prior year	389,228,826	278,664,373
2. Cost of acquired:		
2.1 Actual cost at time of acquisition		83,890,179
2.2 Additional investment made after acquisition	115,149,371	254,888,271
3. Capitalized deferred interest and other		0
4. Accrual of discount		0
5. Unrealized valuation increase/(decrease)	(111,145,152)	(212,282,677)
6. Total gain (loss) on disposals	(7,034,311)	6,790,594
7. Deduct amounts received on disposals	13,710,600	20,621,914
8. Deduct amortization of premium, depreciation and proportional amortization		0
9. Total foreign exchange change in book/adjusted carrying value	0	0
10. Deduct current year's other than temporary impairment recognized		2,100,000
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)	372,488,134	389,228,826
12. Deduct total nonadmitted amounts	29,569,213	33,377,103
13. Statement value at end of current period (Line 11 minus Line 12)	342,918,922	355,851,723

SCHEDULE D - VERIFICATION

Bonds and Stocks

	1	2
	Year to Date	Prior Year Ended December 31
1. Book/adjusted carrying value of bonds and stocks, December 31 of prior year	1,670,784,370	1,675,310,145
2. Cost of bonds and stocks acquired	197,416,786	240,428,534
3. Accrual of discount	954,077	1,172,569
4. Unrealized valuation increase/(decrease)	(134,567,363)	17,000,388
5. Total gain (loss) on disposals	45,421,503	26,120,452
6. Deduct consideration for bonds and stocks disposed of	278,282,546	284,001,668
7. Deduct amortization of premium	2,691,083	4,460,125
8. Total foreign exchange change in book/adjusted carrying value	0	
9. Deduct current year's other than temporary impairment recognized	0	785,925
10. Total investment income recognized as a result of prepayment penalties and/or acceleration fees	13,060	
11. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)	1,499,048,803	1,670,784,370
12. Deduct total nonadmitted amounts	0	
13. Statement value at end of current period (Line 11 minus Line 12)	1,499,048,803	1,670,784,370

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Medical Mutual of Ohio

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)	658,370,662	8,132,346	46,313,060	(400,396)	678,421,065	658,370,662	619,789,552	793,753,782
2. NAIC 2 (a)	78,664,419	5,158,200	9,497,060	(142,134)	84,820,016	78,664,419	74,183,425	90,973,815
3. NAIC 3 (a)	0	0	0	0	0	0	0	0
4. NAIC 4 (a)	0	0	0	0	0	0	0	0
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	737,035,081	13,290,546	55,810,120	(542,530)	763,241,080	737,035,081	693,972,977	884,727,597
ASSET-BACKED SECURITIES (ABS)								
8. NAIC 1	144,609,849	8,146,954	9,124,621	14,738	123,701,280	144,609,849	143,646,919	0
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	144,609,849	8,146,954	9,124,621	14,738	123,701,280	144,609,849	143,646,919	0
PREFERRED STOCK								
15. NAIC 1	1,871,618	0	0	28,398	1,906,702	1,871,618	1,900,016	1,916,032
16. NAIC 2	16,172,793	532,387	0	419,348	13,612,742	16,172,793	17,124,527	14,321,403
17. NAIC 3	6,008,248	250,000	0	296,381	6,142,239	6,008,248	6,554,629	6,231,897
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	24,052,658	782,387	0	744,127	21,661,684	24,052,658	25,579,172	22,469,331
22. Total ICO, ABS & Preferred Stock	905,697,587	22,219,886	64,934,741	216,335	908,604,043	905,697,587	863,199,067	907,196,928

(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	320,862,148	461,874,009
2. Cost of cash equivalents acquired	234,045,014	141,386,713
3. Accrual of discount		0
4. Unrealized valuation increase/(decrease)		0
5. Total gain (loss) on disposals		0
6. Deduct consideration received on disposals	70,732,569	282,398,573
7. Deduct amortization of premium		0
8. Total foreign exchange change in book/adjusted carrying value		0
9. Deduct current year's other than temporary impairment recognized		0
10. Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	484,174,594	320,862,148
11. Deduct total nonadmitted amounts		0
12. Statement value at end of current period (Line 10 minus Line 11)	484,174,594	320,862,148

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

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Medical Mutual of Ohio

SCHEDULE BA - PART 2

Showing Other Long-Term Invested Assets ACQUIRED AND ADDITIONS MADE During the Current Quarter

1	2	Location		5	6	7	8	9	10	11	12	13
		3	4									
CUSIP Identification	Name or Description	City	State	Name of Vendor or General Partner	NAIC Designation, NAIC Designation Modifier and SVO Administrative Symbol	Date Originally Acquired	Type and Strategy	Actual Cost at Time of Acquisition	Additional Investment Made After Acquisition	Amount of Encumbrances	Commitment for Additional Investment	Percentage of Ownership
000000-00-0	Flare Capital Select Strategies I, LP	Boston	MA.....	Flare Capital Select Strategies Managers .....	.....	07/24/2024 ...	1.....	.....	600,000	.....	.....	50.085
000000-00-0	Citymark Capital GP III, LLC	Cleveland	OH.....	Citymark Capital US Apartment Fund III, LP .....	.....	05/06/2022 ...	1.....	.....	(203,646)	.....	.....	1.180
000000-00-0	Audax Direct Lending Solutions Fund II-A, LP	New York	NY.....	Audax Direct Lending Solutions .....	.....	06/01/2022 ...	1.....	.....	395,339	.....	.....	4.760
1999999. Interests in Joint Ventures, Partnerships or Limited Liability Companies (Including Non-Registered Private Funds) - Common Stocks - Unaffiliated									0	791,693	0	XXX
000000-00-0	Medical Mutual Services, LLC	Cleveland	OH.....	Medical Mutual Services, LLC .....	.....	01/01/2000 ...	.....	.....	43,000,000	.....	.....	100.000
000000-00-0	Bravo Wellness, LLC	Cleveland	OH.....	Bravo Wellness, LLC .....	.....	01/01/2020 ...	.....	.....	670,000	.....	.....	100.000
2099999. Interests in Joint Ventures, Partnerships or Limited Liability Companies (Including Non-Registered Private Funds) - Common Stocks - Affiliated									0	43,670,000	0	XXX
000000-00-0	Employee Benefit Trust	Boston	MA.....	Fidelity Investments .....	.....	07/01/2004 ...	.....	.....	254,471	.....	.....	100.000
5699999. Any Other Class of Assets - Unaffiliated									0	254,471	0	XXX
6899999. Total - Unaffiliated									0	1,046,165	0	XXX
6999999. Total - Affiliated									0	43,670,000	0	XXX
.....												
.....												
7099999 - Totals									0	44,716,165	0	XXX

SCHEDULE BA - PART 3

Showing Other Long-Term Invested Assets DISPOSED, Transferred or Repaid During the Current Quarter

1	2	Location		5	6	7	8	Change in Book/Adjusted Carrying Value						15	16	17	18	19	20
		3	4					9	10	11	12	13	14						
CUSIP Identification	Name or Description	City	State	Name of Purchaser or Nature of Disposal	Date Originally Acquired	Disposal Date	Book/ Adjusted Carrying Value Less Encumbrances, Prior Year	Unrealized Valuation Increase/ (Decrease)	Current Year's (Depreciation) or (Amortization)/ Accretion	Current Year's Other Than Temporary Impairment Recognized	Capitalized Deferred Interest and Other	Total Change in Book/ Adjusted Carrying Value (9+10-11+12)	Total Foreign Exchange Change in Book/ Adjusted Carrying Value	Book/ Adjusted Carrying Value Less Encumbrances on Disposal	Consideration	Foreign Exchange Gain (Loss) on Disposal	Realized Gain (Loss) on Disposal	Total Gain (Loss) on Disposal	Investment Income
000000-00-0	Flare Capital Select Strategies, LP	Cleveland	OH.....	Flare Capital Select Strategies, LP	07/24/2024 ...	07/15/2025 ...	.....	.....	.....	.....	.....	0	.....	878,278	878,278	.....	.....	0	.....
000000-00-0	Strategic Value FNBA Investors, LP	Cleveland	OH.....	Strategic Value FNBA Investors, LP	10/01/2019 ...	07/29/2025 ...	.....	.....	.....	.....	.....	0	.....	69,500	69,500	.....	.....	0	.....
000000-00-0	Citymark Capital GP II, LLC	Cleveland	OH.....	Citymark Capital US Apartment Fund III, LP	05/06/2022 ...	08/11/2025 ...	.....	.....	.....	.....	.....	0	.....	47,611	47,611	.....	.....	0	.....
000000-00-0	Audax Direct Lending Solutions Fund II-A, LP	New York	NY.....	Audax Direct Lending Solutions	06/01/2022 ...	03/31/2025 ...	.....	.....	.....	.....	.....	0	.....	86,228	86,228	.....	.....	0	.....
000000-00-0	Ancora Catalyst SVP Series Q	Cleveland	OH.....	Ancora Catalyst SVP Series Q	07/31/2021 ...	09/30/2025 ...	.....	.....	.....	.....	.....	0	.....	4,000,000	1,042,152	.....	(2,957,848)	(2,957,848)	.....
1999999. Interests in Joint Ventures, Partnerships or Limited Liability Companies (Including Non-Registered Private Funds) - Common Stocks - Unaffiliated								0	0	0	0	0	0	5,081,618	2,123,769	0	(2,957,848)	(2,957,848)	0
000000-00-0	Employee Benefit Trust	Boston	MA.....	Fidelity Investments	07/01/2004 ...	09/30/2025 ...	.....	.....	.....	.....	.....	0	.....	648,585	648,585	.....	494,496	494,496	.....
5699999. Any Other Class of Assets - Unaffiliated								0	0	0	0	0	0	648,585	648,585	0	494,496	494,496	0
6899999. Total - Unaffiliated								0	0	0	0	0	0	5,730,203	2,772,354	0	(2,463,352)	(2,463,352)	0
6999999. Total - Affiliated								0	0	0	0	0	0	0	0	0	0	0	0
.....																			
.....																			
7099999 - Totals								0	0	0	0	0	0	5,730,203	2,772,354	0	(2,463,352)	(2,463,352)	0

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Medical Mutual of Ohio

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
91282C-JN-2	US TREASURY NOTES	09/23/2025	DAVIDSON D A & COMPANY INC .....	.....	.....1,023,125	1,000,000	13,866	1.A
91282C-LR-0	US TREASURY NOTES	09/23/2025	DAVIDSON D A & COMPANY INC .....	.....	.....2,035,703	2,000,000	32,955	1.A
0019999999. Subtotal - Issuer Credit Obligations - U.S. Government Obligations (Exempt from RBC)					3,058,828	3,000,000	46,821	XXX
11135F-CW-9	BROADCOM INC	09/23/2025	DAVIDSON D A & COMPANY INC .....	.....	.....1,001,600	1,000,000	0	1.E FE
29379V-CK-7	ENTERPRISE PRODS OPER LLC	08/20/2025	ANCORA ADVISORS .....	.....	.....3,057,598	3,033,000	23,641	1.G FE
446150-BE-3	HUNTINGTON BANCSHARES INC	09/26/2025	ANCORA ADVISORS .....	.....	.....5,158,200	5,000,000	54,184	2.A FE
24422E-XX-2	JOHN DEERE CAPITAL CORPORATION	09/23/2025	DAVIDSON D A & COMPANY INC .....	.....	.....1,014,320	1,000,000	1,956	1.E FE
0089999999. Subtotal - Issuer Credit Obligations - Corporate Bonds (Unaffiliated)					10,231,718	10,033,000	79,781	XXX
0489999999. Total - Issuer Credit Obligations (Unaffiliated)					13,290,546	13,033,000	126,602	XXX
0499999999. Total - Issuer Credit Obligations (Affiliated)					0	0	0	XXX
0509999997. Total - Issuer Credit Obligations - Part 3					13,290,546	13,033,000	126,602	XXX
0509999998. Total - Issuer Credit Obligations - Part 5					XXX	XXX	XXX	XXX
0509999999. Total - Issuer Credit Obligations					13,290,546	13,033,000	126,602	XXX
3140WZ-SZ-5	FN FA2335 MTGE	08/20/2025	ANCORA ADVISORS .....	.....	.....3,299,718	3,455,541	7,679	1.A
3136BX-KT-0	FNMA REMIC TRUST 2025-70	09/26/2025	ANCORA ADVISORS .....	.....	.....4,847,236	4,967,245	16,006	1.A
1039999999. Subtotal - Asset-Backed Securities - Financial Asset-Backed - Self-Liquidating - Agency Residential Mortgage-Backed Securities - Not/Partially Guaranteed (Not Exempt from RBC)					8,146,954	8,422,786	23,685	XXX
1889999999. Total - Asset-Backed Securities (Unaffiliated)					8,146,954	8,422,786	23,685	XXX
1899999999. Total - Asset-Backed Securities (Affiliated)					0	0	0	XXX
1909999997. Total - Asset-Backed Securities - Part 3					8,146,954	8,422,786	23,685	XXX
1909999998. Total - Asset-Backed Securities - Part 5					XXX	XXX	XXX	XXX
1909999999. Total - Asset-Backed Securities					8,146,954	8,422,786	23,685	XXX
2009999999. Total - Issuer Credit Obligations and Asset-Backed Securities					21,437,506	21,455,786	150,286	XXX
04686J-40-8	ATHENE HOLDING LTD	07/16/2025	JEFFRIES & CO	10,000.000	168,856	0	0	2.C FE
200340-70-1	COMERICA INC	08/04/2025	MORGAN STANLEY & CO INC	10,000.000	250,000	0	0	3.B FE
4019999999. Subtotal - Preferred Stocks - Industrial and Miscellaneous (Unaffiliated) Perpetual Preferred					418,856	XXX	0	XXX
008252-84-3	AFFILIATED MANAGERS GROUP INC	07/17/2025	JEFFRIES & CO	10,000.000	172,947	25	0	2.D FE
025832-88-0	AMERICAN FINL GROUP INC OHIO	07/16/2025	JEFFRIES & CO	10,000.000	190,584	25	0	2.C FE
4029999999. Subtotal - Preferred Stocks - Industrial and Miscellaneous (Unaffiliated) Redeemable Preferred					363,531	XXX	0	XXX
4509999997. Total - Preferred Stocks - Part 3					782,387	XXX	0	XXX
4509999998. Total - Preferred Stocks - Part 5					XXX	XXX	XXX	XXX
4509999999. Total - Preferred Stocks					782,387	XXX	0	XXX
H00501-10-8	AEBI SCHMIDT HLDG AG	07/08/2025	VARIOUS	63,404.610	677,992	0	0 .....	.....
030371-10-8	AMERICAN VANGUARD CORP	09/25/2025	JONESTRADING INSTITUTIONAL SERVICES	4,486.000	25,245	0	0 .....	.....
03062T-10-5	AMERICAS CAR-MART INC	07/31/2025	JEFFRIES & CO	1,021.000	46,589	0	0 .....	.....
H2927K-10-3	AMRIZE LTD	09/22/2025	VARIOUS	11,010.000	555,337	0	0 .....	.....
00183L-20-1	ANGI INC	08/21/2025	JEFFRIES & CO	4,873.000	84,901	0	0 .....	.....
00191K-35-1	AQR FDS	09/29/2025	MUTUAL FUND TRADING BROKER	258,435.032	3,600.000	0	0 .....	.....
03852U-10-6	ARAMARK	09/17/2025	STIFEL NICOLAUS & CO.	3,190.000	120,423	0	0 .....	.....
108621-10-3	BRIDGEWATER BANCSHARES INC	09/19/2025	VARIOUS	13,430.000	224,532	0	0 .....	.....
18482P-10-3	CLEARFIELD INC	09/23/2025	VARIOUS	8,710.000	289,873	0	0 .....	.....
191912-40-1	COHEN & STEERS REAL ESTATE SEC	09/29/2025	MUTUAL FUND TRADING BROKER	271,101.174	4,850.000	0	0 .....	.....
206787-10-3	CONDUENT INC	08/06/2025	JEFFRIES & CO	21,070.000	53,370	0	0 .....	.....
12634H-20-0	CPI CARD GROUP INC	08/08/2025	JEFFRIES & CO	3,461.000	46,288	0	0 .....	.....
224441-10-5	CRANE NXT CO	09/23/2025	JONESTRADING INSTITUTIONAL SERVICES	642.000	40,890	0	0 .....	.....
252784-30-1	DIAMONDROCK HOSPITALITY CO	08/08/2025	KEYBANC CAPITAL MARKETS INC	4,390.000	33,811	0	0 .....	.....
254687-10-6	DISNEY WALT COMPANY	08/13/2025	BARCLAYS CAPITAL INC	5,615.000	649,853	0	0 .....	.....
520776-10-5	DISTRIBUTION SOLUTIONS GROUP INC	08/18/2025	JEFFRIES & CO	3,330.000	104,575	0	0 .....	.....
26614N-10-2	DOUIDUPONT DE NEMOURS INC	08/06/2025	VARIOUS	5,780.000	426,081	0	0 .....	.....

STATEMENT AS OF SEPTEMBER 30, 2025 OF THE Medical Mutual of Ohio

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
29082K-10-5	EMBECTA CORP	...07/01/2025	STRATEGAS SECURITIES LLC	5,010.000	51,088	0	0 .....	.....
29272W-10-9	ENERGIZER HOLDINGS INC	...09/12/2025	VARIOUS	7,690.000	221,009	0	0 .....	.....
194014-50-2	ENDOVIS CORPORATION	...09/16/2025	ROTH CAPITAL PARTNERS LLC	4,560.000	149,591	0	0 .....	.....
30190A-10-4	F&G ANNUITIES & LIFE INC	...09/10/2025	KEEFE BRUYETTE & WOODS	3,196.000	107,816	0	0 .....	.....
357023-10-0	FREIGHTCAR AMER INC	...08/07/2025	VARIOUS	2,500.000	23,118	0	0 .....	.....
651405-10-1	FREIGHTOS LTD	...08/08/2025	JONESTRADING INSTITUTIONAL SERVICES	11,012.000	34,626	0	0 .....	.....
36164V-60-2	GCI LIBERTY INC	...07/15/2025	JONESTRADING INSTITUTIONAL SERVICES	2,835.000	86,928	0	0 .....	.....
36164V-80-0	GCI LIBERTY INC	...09/08/2025	VARIOUS	21,910.000	746,466	0	0 .....	.....
374689-10-7	GIBALTAR INDS INC	...08/18/2025	VARIOUS	2,040.000	124,267	0	0 .....	.....
38046C-10-9	GOGO INC	...09/17/2025	JEFFRIES & CO	9,674.000	106,757	0	0 .....	.....
404251-10-0	HNI CORP	...09/19/2025	VARIOUS	9,740.000	441,796	0	0 .....	.....
44267T-10-2	HOWARD HUGHES HOLDINGS INC	...08/19/2025	VARIOUS	2,770.000	200,548	0	0 .....	.....
45769N-10-5	INNOVATIVE SOLUTIONS & SUPPORT	...09/19/2025	VARIOUS	10,090.000	113,326	0	0 .....	.....
46436F-10-3	ISHARES GOLD TR	...09/29/2025	JONESTRADING INSTITUTIONAL SERVICES	452,000.000	17,256,546	0	0 .....	.....
M6158M-10-4	ITURAN LOCATION AND CONTROL	...08/28/2025	JEFFRIES & CO	3,144.000	120,792	0	0 .....	.....
478160-10-4	JOHNSON & JOHNSON	...07/17/2025	BARCLAYS CAPITAL INC	2,949.000	485,047	0	0 .....	.....
49177J-10-2	KENVUE INC	...07/16/2025	BARCLAYS CAPITAL INC	21,044.000	459,805	0	0 .....	.....
50155Q-10-0	KYNDRYL HLDGS INC	...08/07/2025	VARIOUS	3,750.000	110,983	0	0 .....	.....
53626N-10-2	LIONSGATE STUDIOS CORP	...09/12/2025	MORGAN, J.P. SECURITIES	20,410.000	150,736	0	0 .....	.....
54738L-10-9	LOVESAC COMPANY	...07/25/2025	JEFFRIES & CO	2,159.000	43,135	0	0 .....	.....
57638P-10-4	MASTERBRAND INC	...08/12/2025	VARIOUS	9,718.000	119,004	0	0 .....	.....
601137-10-2	MILLROSE PPTYS INC	...09/05/2025	VARIOUS	5,870.000	189,500	0	0 .....	.....
610236-10-1	MONRO INC	...09/15/2025	VARIOUS	25,640.000	397,900	0	0 .....	.....
62188E-10-3	MOUNT LOGAN CAP INC	...09/15/2025	VARIOUS	13,346.000	112,608	0	0 .....	.....
66564A-10-5	NOMAD HLDGS LTD	...08/05/2025	BTIG, LLC	5,050.000	85,662	0	0 .....	.....
693718-10-8	PACCAR INC	...07/23/2025	BARCLAYS CAPITAL INC	6,992.000	711,117	0	0 .....	.....
66964L-20-6	PAYSAFE LIMITED	...09/12/2025	VARIOUS	9,890.000	140,742	0	0 .....	.....
714157-20-3	PERMA-FIX ENVIRONMENTAL SVCS	...09/12/2025	JEFFRIES & CO	4,010.000	36,566	0	0 .....	.....
742718-10-9	PROCTER & GAMBLE CO	...09/26/2025	STRATEGAS SECURITIES LLC	8,097.000	1,231,295	0	0 .....	.....
74319R-10-1	PROG HOLDINGS INC	...09/11/2025	SG COWAN & CO	1,640.000	59,286	0	0 .....	.....
750940-10-8	RALLIANT CORP	...09/29/2025	VARIOUS	16,983.333	759,853	0	0 .....	.....
754907-10-3	RAYONIER INC	...07/01/2025	SEAPORT SECURITIES CORP	4,320.000	98,804	0	0 .....	.....
855919-10-6	STARZ ENTERTAINMENT CORP.	...09/19/2025	VARIOUS	5,734.000	83,425	0	0 .....	.....
879369-10-6	TELEFLEX INCORPORATED	...09/08/2025	JEFFRIES & CO	710.000	92,730	0	0 .....	.....
88822Q-10-3	TIPTREE INC	...09/25/2025	JEFFRIES & CO	3,039.000	61,090	0	0 .....	.....
92242T-10-1	V2X INC	...09/22/2025	JEFFRIES & CO	1,090.000	61,650	0	0 .....	.....
922042-85-8	VANGUARD FTSE EMERGING MARKETS ETF	...08/26/2025	VARIOUS	49,000.000	2,553,819	0	0 .....	.....
922038-88-0	VANGUARD HORIZON FDS	...08/25/2025	MUTUAL FUND TRADING BROKER	320,281.140	10,223,374	0	0 .....	.....
92552R-40-6	VIAO CORP	...09/19/2025	STIFEL NICOLAUS & CO.	2,470.000	90,301	0	0 .....	.....
64361Q-10-1	VIPER ENERGY INC	...09/24/2025	VARIOUS	6,664.000	261,666	0	0 .....	.....
98978V-10-3	ZOETIS INC	...08/20/2025	STRATEGAS SECURITIES LLC	16,386.000	2,607,339	0	0 .....	.....
5019999999. Subtotal - Common Stocks - Industrial and Miscellaneous (Unaffiliated) Publicly Traded					52,841,873	XXX	0	XXX
58458*-10-5	MEDICAL HEALTH INSURING CORPORATION OF OHIO	...09/25/2025	Capital Contribution		18,700,000			
5929999999. Subtotal - Common Stocks - Parent, Subsidiaries and Affiliates Other					18,700,000	XXX	0	XXX
5989999997. Total - Common Stocks - Part 3					71,541,873	XXX	0	XXX
5989999998. Total - Common Stocks - Part 5					XXX	XXX	XXX	XXX

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 Admini- strative Symbol
5989999999. Total - Common Stocks					71,541,873	XXX	0	XXX
5999999999. Total - Preferred and Common Stocks					72,324,259	XXX	0	XXX
6009999999 - Totals					93,761,759	XXX	150,286	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				*
CIVISTA BANK SANDUSKY, OHIO		4.070	23,322	5,676	2,245,642	2,253,333	2,268,964	XXX.
FIFTH THIRD BANK CINCINNATI, OHIO					69,503	3	4	XXX.
HUNTINGTON BANK CLEVELAND, OHIO		2.750	23,328		25,256,949	30,180,757	25,391,397	XXX.
PNC BANK PITTSBURGH, PENNSYLVANIA ..		3.942	306,999		(5,699,763)	(13,120,638)	27,497,661	XXX.
THIRD FEDERAL SAVINGS & LOAN CLEVELAND, OHIO		4.380	130,323		11,688,922	11,688,922	11,819,246	XXX.
WATERFORD BANK TOLEDO, OHIO		4.000		10,719	738,725	738,725	738,725	XXX.
0199998. Deposits in ... 1 depositories that do not exceed the allowable limit in any one depository (See instructions) - Open Depositories	XXX	XXX			2,500	2,500	2,500	XXX
0199999. Totals - Open Depositories	XXX	XXX	483,973	16,395	34,302,478	31,743,603	67,718,497	XXX
0299998. Deposits in ... depositories that do not exceed the allowable limit in any one depository (See instructions) - Suspended Depositories	XXX	XXX						XXX
0299999. Totals - Suspended Depositories	XXX	XXX	0	0	0	0	0	XXX
0399999. Total Cash on Deposit	XXX	XXX	483,973	16,395	34,302,478	31,743,603	67,718,497	XXX
0499999. Cash in Company's Office	XXX	XXX	XXX	XXX				XXX
.....								
.....								
.....								
.....								
.....								
.....								
0599999. Total - Cash	XXX	XXX	483,973	16,395	34,302,478	31,743,603	67,718,497	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS

Show Investments Owned End of Current Quarter

[illegible]