

QUARTERLY STATEMENT

AS OF JUNE 30, 2024 OF THE CONDITION AND AFFAIRS OF THE

UPPER PENINSULA HEALTH PLAN, LLC

NAIC Group Code	(Current) (Prior)	52615 Employer's ID Number 46-0927995
Organized under the Laws of Country of Domicile	MI US	State of Domicile or Port of Entry MI
		Is HMO Federally Qualified?
Incorporated/Organized	10/23/1997	Commenced Business 08/01/1998
Statutory Home Office		Marquette, MI, US 49855
Main Administrative Office	Marquette, MI, US 49855	
	Marquette, Mi, 03 49033	(Telephone Number)
Mail Address Primary Location of Books and	853 W. Washington St.	Marquette, MI, US 49855
Records	853 W. Washington St.	
	Marquette, MI, US 49855	906-225-7500
		(Telephone Number)
Internet Website Address	uphp.com	upromanan.
Statutory Statement Contact	Jaime Susan Houghton	906-225-7491
		(Telephone Number)
	jhoughton@uphp.com	
	(E-Mail Address)	(Fax Number)
	OFFICERS	
	nquist, President	Melanie Lyn Bicigo, Chief Operating Officer
Jaime Susan Houghton	, Chief Financial Officer	
	DIRECTORS OR T	
	nn Darner	Christina Marie Taylor#
	sell Kalchik nrad Deese	Charles Edward Nelson
	yn Haupt	Andrew Joseph Bertapelle
	rie Tavernier	Hunter Kyle Nostrant
Whether Wid	ne raverner	
Ctata of Michigan		
State of Michigan County of Marquette		
County of Marquette	SS	
on the reporting period stated ab	ove, all of the herein described assets were t	nat they are the described officers of said reporting entity, and that the absolute property of the said reporting entity, free and clear from together with related exhibits, schedules and explanations therein
contained, annexed or referred to entity as of the reporting period s	o, is a full and true statement of all the asset stated above, and of its income and deduction	s and liabilities and of the condition and affairs of the said reporting ons therefrom for the period ended, and have been completed in
		actices and Procedures manual except to the extent that: (1) state orting not related to accounting practices and procedures, according
to the best of their information, k	nowledge and belief, respectively. Furthermo	ore, the scope of this attestation by the described officers also
includes the related correspondir	ng electronic filing with the NAIC, when requi	red, that is an exact copy (except for formatting differences due to
electronic filing) of the enclosed statement.	statement. The electronic filing may be requ	ested by various regulators in lieu of or in addition to the enclosed
x Wellshige	ust x Claim Sta	wilton x M. Danie Bur
Melissa Ann Holmquist	Jaime Susan Houghton	Melanie Lyn Bicigo
CEO	CFO	COO
Subscribed and sworn to before	me	a. Is this an original filing? Yes
this 12th	day of	b. If no:
	· (7)	State the amendment number:
, August, 20	24	Date filed: Mumber of pages attached:
O .	A . 1 .	o. Number of pages attached.

ASSETS

ASSETS					
	<u> </u>		rrent Statement D		4
		1	2	3 Net Admitted	December 31
		Assets	Nonadmitted Assets	Assets (Cols. 1 - 2)	Prior Year Net Admitted Assets
1.	Bonds			, ,	42,018,440
2.	Stocks:	,		,,,,	, .,
	2.1 Preferred stocks				
	2.2 Common stocks				
3.	Mortgage loans on real estate:				
	3.1 First liens				
	3.2 Other than first liens				
4.	Real estate:				
	 4.1 Properties occupied by the company (less \$ encumbrances)				
	4.3 Properties held for sale (less \$ encumbrances)				
5.	Cash (\$43,439,540), cash equivalents (\$253,886) and short-term investments (\$1,957,868)				
6.	Contract loans (including \$ premium notes)				
7.	Derivatives				
8.	Other invested assets				
9.	Receivables for securities	507		507	730
10.	Securities lending reinvested collateral assets				
11.	Aggregate write-ins for invested assets				
12.	Subtotals, cash and invested assets (Lines 1 to 11)	98,525,915		98,525,915	109,991,492
13.	Title plants less \$ charged off (for Title insurers only)				
14.	Investment income due and accrued	397,899		397,899	353,687
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection	3,637,211		3,637,211	3,980,976
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$ earned but unbilled premiums)				
1.0	15.3 Accrued retrospective premiums (\$2,838,127) and contracts subject to redetermination (\$)	2,838,127		2,838,127	1,698,845
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers.				
	16.2 Funds held by or deposited with reinsured companies				
17	16.3 Other amounts receivable under reinsurance contracts	04 510 000		04 510 000	22 000 700
	Amounts receivable relating to uninsured plans				
	Current federal and foreign income tax recoverable and interest thereon				
18.2	Guaranty funds receivable or on deposit				
19.	Electronic data processing equipment and software				
20.	Furniture and equipment, including health care delivery assets (\$)				
21.	Net adjustment in assets and liabilities due to foreign exchange rates				
22. 23.	Receivables from parent, subsidiaries and affiliates	10.754		10.754	12.015
23. 24.	Health care (\$) and other amounts receivable				13,213
2 4 . 25.	Aggregate write-ins for other-than-invested assets				
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)				
27	From Separate Accounts, Segregated Accounts and Protected Cell Accounts				
27. 28.	Total (Lines 26 and 27)	145,698,017	7,233,760		
Detai	ils of Write-Ins		, , , , , , , , , , , , , , , , , , , ,		
1101					
1102					
	. Summary of remaining write-ins for Line 11 from overflow page				
	. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)				
	Prepaids				
	. Vehicles				
	. IPA Tax receivable				
	. Summary of remaining write-ins for Line 25 from overflow page				
	. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)				

LIABILITIES, CAPITAL AND SURPLUS

	LIABILITIES, CAPITAL AND S	JI. 200	Current Period		Prior Year
		1	2	3	4
		0 1		.	.
1	Olaima ummaid (lasa Ó E4220 mainaumana aadad)	Covered	Uncovered	Total	Total
	Claims unpaid (less \$54,320 reinsurance ceded) Accrued medical incentive pool and bonus amounts.			32,947,643 3,306,775	
	Unpaid claims adjustment expenses			3,300,773	
4.	Aggregate health policy reserves, including the liability of \$ for medical loss ratio rebate per the Public Health Service Act.				
	Aggregate life policy reserves				
	Property/casualty unearned premium reserve.				
	Aggregate health claim reserves.				
	Premiums received in advance				
	General expenses due or accrued				
10.1	Current federal and foreign income tax payable and interest thereon (including \$ on realized gains (losses))				
10.2	Net deferred tax liability				
	Ceded reinsurance premiums payable				
	Amounts withheld or retained for the account of others				
	Remittances and items not allocated				
	Borrowed money (including \$ current) and interest thereon \$ (including \$ current)				
	Amounts due to parent, subsidiaries and affiliates				
	Derivatives				
	Payable for securities				
	Payable for securities lending.				
	Funds held under reinsurance treaties (with \$ authorized reinsurers, \$ unauthorized reinsurers and \$ certified reinsurers)				
	Reinsurance in unauthorized and certified (\$) companies				
	Net adjustments in assets and liabilities due to foreign exchange rates				
	Liability for amounts held under uninsured plans				
23. 24.	Total liabilities (Lines 1 to 23)	00 401 027		00 401 027	00 552 020
	Aggregate write-ins for special surplus funds				
26.	Common capital stock		VVV		• • • • • • • • • • • • • • • • • • • •
	Preferred capital stock				
	Gross paid in and contributed surplus.				
	Surplus notes				
	Aggregate write-ins for other-than-special surplus funds				
	Unassigned funds (surplus).				
	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		
33.	Total capital and surplus (Lines 25 to 31 minus Line 32)	XXX	XXX	57,972,330	69,840,583
34.	Total liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	138,464,257	159,393,622
Detail	s of Write-Ins				
2301.	Unearned revenue	11,627		11,627	17,627
2302.					
2303.					
2398.	Summary of remaining write-ins for Line 23 from overflow page				
2399.	Totals (Lines 2301 through 2303 plus 2398) (Line 23 above)	11,627		11,627	17,627
		XXX	XXX		
2502.		XXX	XXX		
		XXX	XXX		
	,	XXX	XXX		
	Totals (Lines 2501 through 2503 plus 2598) (Line 25 above)	XXX	XXX		
3001.		XXX	XXX		
3002.		XXX	XXX		
3003.		XXX	XXX		
	Summary of remaining write-ins for Line 30 from overflow page	XXX	XXX		
3099.	Totals (Lines 3001 through 3003 plus 3098) (Line 30 above)	XXX	XXX		

STATEMENT OF REVENUE AND EXPENSES

	STATEMENT OF REVENUE AND	EAPENSES	•		D: 1/
				Prior Year To	Prior Year Ended
		Current Ve	ear to Date	Date	December 31
		1	2	3	4
		•	_		-
_		Uncovered	Total	Total	Total
1.	Member Months.		298,966		696,228
2.	Net premium income (including \$ non-health premium income)				
3.	Change in unearned premium reserves and reserve for rate credits	XXX			
4. -	Fee-for-service (net of \$ medical expenses)				
5. 6.	Aggregate write-ins for other health care related revenues				
0. 7.	Aggregate write-ins for other non-health revenues.				
7. 8.	Total revenues (Lines 2 to 7)				
	ital and Medical:		100,021,973	192,040,123	390,101,113
позр 9.	Hospital/medical benefits		90 027 504	75 202 700	152 205 410
9. 10.	Other professional services			15,182,948	
11.	Outside referrals			9,621,837	
12.	Emergency room and out-of-area				
13.	Prescription drugs				
14.	Aggregate write-ins for other hospital and medical				
	Incentive pool, withhold adjustments and bonus amounts				
16.	Subtotal (Lines 9 to 15)			152,649,613	
Less:	· · · · · · · · · · · · · · · · · · ·	•	137,709,990	102,049,010	314,034,010
17.	Net reinsurance recoveries		55 573	489 278	1 709 920
18.	Total hospital and medical (Lines 16 minus 17)				
19.	Non-health claims (net)				
20.	Claims adjustment expenses, including \$2,907,659 cost containment expenses				
21.	General administrative expenses				
22.	Increase in reserves for life and accident and health contracts (including \$		20,0 :0,000	2 1,0 10,070	0.,0.2,
	increase in reserves for life only)				
23.	Total underwriting deductions (Lines 18 through 22)				
24.	Net underwriting gain or (loss) (Lines 8 minus 23).	XXX	850,343	11,963,922	17,591,042
25.	Net investment income earned				
26.	Net realized capital gains (losses) less capital gains tax of \$				
27.	Net investment gains (losses) (Lines 25 plus 26)				
28.	Net gain or (loss) from agents' or premium balances charged off [(amount recovered				
	\$) (amount charged off \$)].				
29.	Aggregate write-ins for other income or expenses				
30.	Net income or (loss) after capital gains tax and before all other federal income taxes				
	(Lines 24 plus 27 plus 28 plus 29)				
	Federal and foreign income taxes incurred				
32.	Net income (loss) (Lines 30 minus 31)	XXX	3,558,770	14,181,726	22,367,960
	ls of Write-Ins				
0601.	Miscellaneous Revenue				
	IPA Tax Revenue			17,041,975	
	Summary of remaining write-ins for Line 6 from overflow page				
	Totals (Lines 0601 through 0603 plus 0698) (Line 6 above)			17,050,885	
	Gain/Loss on Asset Disposal				
-	Tiff Revenue				
	Summary of remaining write-ins for Line 7 from overflow page				
	Totals (Lines 0701 through 0703 plus 0798) (Line 7 above)				
	UPHIE Expenses		Ī	142,685	· ·
	Summary of remaining write-ins for Line 14 from overflow page				
	Totals (Lines 1401 through 1403 plus 1498) (Line 14 above)			142,685	278,491
	0				
	Summary of remaining write-ins for Line 29 from overflow page				
Z999.	Totals (Lines 2901 through 2903 plus 2998) (Line 29 above)				

STATEMENT OF REVENUE AND EXPENSES (CONTINUED)

	STATEMENT OF REVENUE AND EXPENSES (CON	i i iitoloj		
		1	2	3
				Prior Year
		Current Year To	Prior Year To	Ended
	CAPITAL & SURPLUS ACCOUNT	Date	Date	December 31
33.	Capital and surplus prior reporting year	69,840,583	72.517.378	72.517.378
34.	Net income or (loss) from Line 32.			
35.	Change in valuation basis of aggregate policy and claim reserves			
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$			
37.	Change in net unrealized foreign exchange capital gain or (loss)			
38.	Change in net deferred income tax			
39.	Change in nonadmitted assets			
40.	Change in unauthorized and certified reinsurance.			•
41.	Change in treasury stock			
42.	Change in surplus notes			
43.	Cumulative effect of changes in accounting principles			
44.	Capital Changes:			
	44.1 Paid in			
	44.2 Transferred from surplus (Stock Dividend)			
	44.3 Transferred to surplus			
45.	Surplus adjustments:			
	45.1 Paid in	–	-	
	45.2 Transferred to capital (Stock Dividend)			
	45.3 Transferred from capital			
46.	Dividends to stockholders			
47.	Aggregate write-ins for gains or (losses) in surplus	(15,900,000)	(24,800,000)	(24,800,000
48.	Net change in capital and surplus (Lines 34 to 47)	(11,868,253)	(10,461,714)	(2,676,795
49.	Capital and surplus end of reporting period (Line 33 plus 48)	57,972,330	62,055,664	69,840,583
Deta	nils of Write-Ins			
470°	1. Distribution of Equity	(15,900,000)	(24,800,000)	(24,800,000
4702	2			
4703	3			
4798	8. Summary of remaining write-ins for Line 47 from overflow page			
4799	9. Totals (Lines 4701 through 4703 plus 4798) (Line 47 above)	(15,900,000)	(24,800,000)	(24,800,000

CASH FLOW

CASH FLOW			
	1	2	3
			Prior Year Ended
	Current Year To Date	Prior Year To Date	December 31
Cash from Operations 1. Premiums collected net of reinsurance	170 007 506	100 407 902	252 204 006
Premiums collected net of reinsurance		. ,	
3. Miscellaneous income			
4. Total (Lines 1 to 3)			
5. Benefit and loss related payments			
Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts			
7. Commissions, expenses paid and aggregate write-ins for deductions			
8. Dividends paid to policyholders			
9. Federal and foreign income taxes paid (recovered) net of \$ tax on capital gains (losses)			
10. Total (Lines 5 through 9).			
11. Net cash from operations (Line 4 minus Line 10)		34,963,959	27,461,761
Cash from Investments	3,040,093	34,303,333	27,401,701
12. Proceeds from investments sold, matured or repaid:			
12.1 Bonds.	9 250 000	5 807 000	11 746 000
12.2 Stocks		3,097,000	
12.3 Mortgage loans			
12.4 Real estate			
12.5 Other invested assets			
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments			
12.7 Miscellaneous proceeds		•	
12.8 Total investment proceeds (Lines 12.1 to 12.7)			
13. Cost of investments acquired (long-term only):			11,700,929
13.1 Bonds	0.072.100	2 422 250	11 070 507
13.2 Stocks	, ,	2,432,330	, ,
13.3 Mortgage loans			
13.4 Real estate			
13.5 Other invested assets			
13.6 Miscellaneous applications			
13.7 Total investments acquired (Lines 13.1 to 13.6)			
14. Net increase (or decrease) in contract loans and premium notes. 14. Net increase (or decrease) in contract loans and premium notes.			12,011,339
15. Net cash from investments (Line 12.8 minus Line 13.7 and Line 14)			
Cash from Financing and Miscellaneous Sources	(621,877)	3,465,431	(224,430
16. Cash provided (applied):			
16.1 Surplus notes, capital notes			
16.2 Capital and paid in surplus, less treasury stock			
16.3 Borrowed funds			
16.4 Net deposits on deposit-type contracts and other insurance liabilities			
16.5 Dividends to stockholders			
16.6 Other cash provided (applied)			
 Net cash from financing and miscellaneous sources (Line 16.1 through Line 16.4 minus Line 16.5 plus Line 16.6) 			
Reconciliation of Cash, Cash Equivalents and Short-Term Investments	(10,202,100)	(27,007,001)	(27,100,002
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17).	(12,207,149)	10,541,829	70.639
19. Cash, cash equivalents and short-term investments:			
19.1 Beginning of year	57.858.443	57.787.804	57.787.804
19.2 End of period (Line 18 plus Line 19.1)			
Note: Supplemental disclosures of cash flow information for non-cash transactions:	1		
20.0001.			

EXHIBIT OF PREMIUMS, ENROLLMENT AND UTILIZATION

	1	Compreh (Hospital &		4	5	6	7 Federal	8	9	10	11	12	13	14
	Total	2 Individual	3 Group	Medicare Supplement	Vision Only	Dontal Only	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:	TOTAL	iliuiviuuai	Group	Supplement	VISION ONly	Dental Only	benefits Plan	Medicale	ivieuicaiu	Cledit A&n	income	Care	Other Health	пеанн
1. Prior Year	53,423							4,650	48,773					
2. First Quarter	50,423							4,426	46,007					
Second Quarter	46,657							4,354	42,303					
4. Third Quarter									42,000					
5. Current Year														
Current Year Member Months	298,966							26,852	272,114					
Total Member Ambulatory Encounters for Period:								·						
7. Physician	149,582							19.495	130,087					
8. Non-Physician	151,686							28,195	123,491					
9. Total	301,268							47,690	253,578					
10. Hospital Patient Days Incurred	7,077							2,713	4,364					
11. Number of Inpatient Admissions	1,665							508	1,157					
12. Health Premiums Written (a)	171,155,802							69,187,248	101,968,554					
13. Life Premiums Direct														
14. Property/Casualty Premiums Written				.,										
15. Health Premiums Earned	171,155,802							69,187,248	101,968,554					
16. Property/Casualty Premiums Earned														
17. Amount Paid for Provision of Health Care Services	156,275,338							63,063,699	93,211,639					
Amount Incurred for Provision of Health Care Services	157,789,990							62,940,640	94,849,350					

⁽a) For health premiums written: amount of Medicare Title XVIII exempt from state taxes or fees \$38,414,371

Quarterly Statement as of June 30, 2024 of the Upper Peninsula Health Plan, LLC

CLAIMS UNPAID AND INCENTIVE POOL, WITHHOLD AND BONUS (REPORTED AND UNREPORTED) Aging Analysis of Unpaid Claims

1	2	3	4	5	6	7
Account	1 - 30 Days	31 - 60 Days	61 - 90 Days	91 - 120 Days	Over 120 Days	Total
Claims Unpaid (Reported)						
0399999 - Aggregate accounts not individually listed-covered	7,883,027		–	—		8,026,073
0499999 - Subtotals	7,883,027		–	—		8,026,073
0599999 - Unreported claims and other claim reserves						24,924,749
0699999 - Total amounts withheld						51,141
0799999 - Total claims unpaid						33,001,963
0899999 - Accrued medical incentive pool and bonus amounts						3,306,775

UNDERWRITING AND INVESTMENT EXHIBIT

ANALYSIS OF CLAIMS UNPAID-PRIOR YEAR-NET OF REINSURANCE

	Claims Paid '	Year to Date	Liability End of	Current Quarter	5	6
	1	2	3	4		
	On Claims Incurred Prior to January 1 of Current Year	On Claims Incurred During the Year	On Claims Unpaid Dec. 31 of Prior Year	On Claims Incurred During the Year	Claims Incurred in Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability Dec. 31 of Prior Year
Comprehensive (hospital and medical) individual.						
2. Comprehensive (hospital and medical) group			• • • • • • • • • • • • • • • • • • • •			
3. Medicare Supplement			•••••			
4. Vision only			• • • • • • • • • • • • • • • • • • • •			
5. Dental only			• • • • • • • • • • • • • • • • • • • •			
6. Federal Employees Health Benefits Plan						
7. Title XVIII - Medicare	14,492,546	48,467,371	492,920	14,248,046	14,985,466	15,532,515
8. Title XIX - Medicaid	17,254,218	75,453,357	1,807,304	16,399,373	19,061,522	18,495,158
9. Credit A&H						
10. Disability income						
11. Long-term care						
12. Other health						
13. Health subtotal (Lines 1 to 12)	31,746,764	123,920,728	2,300,224	30,647,419	34,046,988	
14. Health care receivables (a)			1,937,179	4,056,911	1,937,179	6,754,723
15. Other non-health						
16. Medical incentive pools and bonus amounts	543,251	64,597	999,999	2,306,776	1,543,250	1,528,301
17. Totals (Lines 13-14+15+16)	32,290,015	123,985,325	1,363,044	28,897,284		28,801,251

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

1. Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The accompanying statutory financial statements of Upper Peninsula Health Plan, LLC (the "Company") have been prepared in conformity with accounting practices prescribed or permitted by the Michigan Department of Insurance and Financial Services ("DIFS"). DIFS recognizes only statutory accounting practices prescribed or permitted by the State of Michigan for determining and reporting the financial condition and results of operations of an insurance company, which include accounting practices and procedures adopted by the National Association of Insurance Commissioners' ("NAIC") Accounting Practices and Procedures Manual ("NAIC SAP").

A reconciliation of the Company's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the State of Michigan is shown below:

_	SSAP#	F/S Page	F/S Line #	06/30/2024	12/31/2023
Net Income					
(1) State basis (Page 4, Line 32, Columns 2 & 4)	XXX	XXX	XXX	\$ 3,558,770	. \$ 22,367,960 .
(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	\$ 3,558,770	\$ 22,367,960
Surplus					
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 57,972,330	. \$ 69,840,583 .
(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	\$ 57,972,330	\$ 69,840,583

- B. Use of Estimates in the Preparation of the Financial Statements No Significant Changes
- C. Accounting Policy
 - (1) Short-term investments No Significant Changes
 - (2) Bonds, Mandatory Convertible Securities & SVO-Identified investments

The Company does not have any mandatory convertible securities or SVO identified investments.

- (3) Common stocks None
- (4) Preferred stocks None
- (5) Mortgage loans None
- (6) Loan-backed securities None
- (7) Investments in subsidiaries, controlled and affiliated entities None
- (8) Investments in joint ventures, partnerships and limited liability companies None
- (9) Derivatives None
- (10) Investment income as a factor in the premium deficiency calculation No Significant Changes
- (11) Liabilities for losses and loss/claim adjustment expenses No Significant Changes
- (12) Changes in capitalization policy No Significant Changes
- (13) Pharmaceutical rebate receivables No Significant Changes
- D. Going Concern

There are no conditions or events that would prevent the Company to continue as a going concern.

- 2. Accounting Changes and Corrections of Errors None
- 3. Business Combinations and Goodwill None
- 4. Discontinued Operations None
- 5. Investments
 - A. Mortgage Loans, including Mezzanine Real Estate Loans None
 - B. Debt Restructuring None
 - C. Reverse Mortgages None
 - D. Loan-Backed Securities None
 - E. Dollar Repurchase Agreements and/or Securities Lending Transactions None
 - F. Repurchase Agreements Transactions Accounted for as Secured Borrowing None
 - G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing None
 - H. Repurchase Agreements Transactions Accounted for as a Sale None

5. Investments (Continued)

- I. Reverse Repurchase Agreements Transactions Accounted for as a Sale None
- J. Real Estate None
- K. Low-Income Housing Tax Credits (LIHTC) None
- L. Restricted Assets No Significant Changes
- M. Working Capital Finance Investments None
- N. Offsetting and Netting of Assets and Liabilities None
- O. 5GI Securities None
- P. Short Sales None
- Q. Prepayment Penalty and Acceleration Fees None
- R. Reporting Entity's Share of Cash Pool by Asset type None
- 5. Joint Ventures, Partnerships and Limited Liability Companies None

7. Investment Income

A. Due and Accrued Income Excluded from Surplus

All investment income due and accrued with amounts that are over 90 days past due with the exception of mortgage loans in default are excluded from surplus.

- B. Total Amount Excluded None
- C. The gross, nonadmitted and admitted amounts for interest income due and accrued

	Interest Income Due and Accrued	 Amount
1.	Gross	\$ 397,899
2.	Nonadmitted	\$
3.	Admitted	\$ 397,899

- D. The aggregate deferred interest None
- E. The cumulative amounts of paid-in-kind (PIK) interest included in the current principal balance None
- 8. Derivative Instruments None
- 9. Income Taxes None
- 10. Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties No Significant Changes
- **11. Debt** None
- 12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans None
- 13. Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations None
- 14. Liabilities, Contingencies and Assessments No Significant Changes
- 15. Leases None
- 16. Information About Financial Instruments With Off-Balance-Sheet Risk And Financial Instruments With Concentrations of Credit Risk None
- 17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities None
- 18. Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans
 - A. ASO Plans

The gain (loss) from operations from Administrative Services Only (ASO) uninsured plans and the uninsured portion of partially insured plans were as follows during 2024:

		ASO Uninsured Plans	Uninsured Portion of Partially Insured Plans	To	otal ASO
a.	Net reimbursement for administrative expenses (including administrative fees) in excess of actual expenses	\$13,569	\$	\$	13,569
b.	Total net other income or expenses (including interest paid to or received from plans)				
C.	Net gain or (loss) from operations (a+b)	\$ 13,569	\$	\$	13,569
d.	Total claim payment volume	\$ 47,621,064	\$	\$	47,621,064

- B. ASC Plans None
- C. Medicare or Other Similarly Structured Cost Based Reimbursement Contract No Significant Changes
- 19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators None
- 20. Fair Value Measurements
 - A. Fair Value Measurement

In general, the Level 1 fair values are established from quoted (unadjusted) market prices in active markets for identical assets and liabilities that the Company has the ability to access.

20. Fair Value Measurements (Continued)

(1) Fair value at reporting date

	Description for each class of asset or liability	L	evel 1	Level 2	Level 3	Net Asset Value (NAV)	Total
a.	Assets at fair value						
	Cash Equivalents	\$	253,886	\$	\$	\$	\$ 253,886
	Total assets at fair value/NAV	\$	253,886	\$	\$	\$	\$ 253,886
b.	Liabilities at fair value					_	
	Total liabilities at fair value	\$		\$	\$	\$	\$

- (2) Fair value measurements in Level 3 of the fair value hierarchy None
- (3) The Company's policy for determining transfers between levels are recognized and determined at the end of the reporting period.
- (4) As of June 30, 2024, the reported fair value of the reporting entity's investments in Level 3, NAIC designated 6, residential mortgage-backed securities was \$0.
- (5) Derivatives None
- B. Other Fair Value Disclosures None
- C. Fair Values for All Financial Instruments by Level 1, 2 and 3

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Bonds	\$ 42,682,695	\$ 42,881,148	\$ 42,682,695	\$	\$	\$	\$
Short Term Investments	1,954,040	1,957,868	1,954,040				
Cash Equivalents	253.886	253.886	253,886				

- D. Not Practicable to Estimate Fair Value None
- E. Nature and Risk of Investments Reported at NAV None
- 21. Other Items None
- 22. Events Subsequent No Significant Changes
- 23. Reinsurance No Significant Changes

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination

- A. Method Used to Estimate No Significant Changes
- B. Method Used to Record No Significant Changes
- C. Amount and Percent of Net Retrospective Premiums No Significant Changes
- D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act None
- E. Risk-Sharing Provisions of the Affordable Care Act (ACA) None

25. Change in Incurred Claims and Claim Adjustment Expenses

A. Reasons for Changes in the Provision for Incurred Claim and Claim Adjustment Expenses Attributable to Insured Events of Prior Years

Reserves as of December 31, 2023 were \$34,027,672 for unpaid claims. As of June 30, 2024, \$31,746,765 has been paid for incurred claims and claim adjustment expenses attributable to insured events of prior years. Claims expense reserves remaining for prior years are now \$2,300,224 as a result of re-estimation of unpaid claims and claim adjustment expenses. Therefore, there has been an unfavorable prior year development of \$(19,314) during 2024 for the year ended December 31, 2023. Original estimates are increased or decreased as additional information becomes know regarding individual claims.

- B. Significant Changes in Methodologies and Assumptions Used in Calculating the Liability for Unpaid Claims and Claim Adjustment Expenses None
- 26. Intercompany Pooling Arrangements None
- 27. Structured Settlements None

28. Health Care Receivables

A. Pharmaceutical Rebate Receivables

Quarter	Estimated Pharmacy Rebates as Reported on Financial Statements	Pharmacy Rebates as Billed or Otherwise Confirmed	Actual Rebates Received Within 90 Days of Billing	Actual Rebates Received Within 91 to 180 Days of Billing	Actual Rebates Received More Than 180 Days After Billing
06/30/2024	\$ 5,994,090	\$	\$	\$	\$
03/31/2024	4,276,291 .	–			4,470,442
12/31/2023	6,754,724	–			2,271,123
09/30/2023	6,325,606	–			2,317,047
06/30/2023	6,276,077 .	–			2,253,521
03/31/2023	6,521,752 .	–			2,195,794
12/31/2022	6,666,188 .	–			2,131,948
09/30/2022	5,408,770 .	–			2,048,353
06/30/2022	5,266,560	–			1,945,898
03/31/2022	5,392,550 .	–			1,666,880
12/31/2021	5,267,618	–			5,336,642
09/30/2021					1,889,172

B. Risk-Sharing Receivables - None

29. Participating Policies - None

30. Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves:

\$-

2. Date of the most recent evaluation of this liability:

06/30/2024

3. Was anticipated investment income utilized in the calculation?

YES

31. Anticipated Salvage and Subrogation - None

GENERAL INTERROGATORIESPART 1 - COMMON INTERROGATORIES

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? 1. If yes, has the report been filed with the domiciliary state? 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? 1. If yes, date of change. 1. If yes, complete Schedule V. Parts 1 and 1.A. 1. Yes, complete Schedule V. Parts 1 and 1.A. 1. Yes, complete Schedule V. Parts 1 and 1.A. 1. Yes, complete Schedule V. Parts 1 and 1.A. 1. We response to 3.2 is yes, provide a brief description of those changes. 1. No 1. If the response to 3.2 is yes, provide a brief description of those changes. 1. Yes 1. If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 1. Yes 1. If the response to 3.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group. 1. Yes 1. If the response to 3.4 is yes, provide the name of entity, NAIC Company Code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation. 1. Yes 1. No 1. Yes 1. No 1. Yes 1. No 1. Yes 1. Yes 1. 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? 1. No 1. 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? 1. No 1. If the reporting entity is abject to a management agreement including third-party administrator(s), managing general agent(s), attorney-in-fact	1.1	GENERAL		
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? 2.2 If yes, date of change. 3.3 If 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? 3.4 If yes, complete Schedule Y, Parts 1 and 1.A. 3.5 Have there been any substantial changes in the organizational chart since the prior quarter end? 3.4 Is the reporting entity publicity traded or a member of a publicity traded group? 3.4 Is the reporting entity publicity traded or a member of a publicity traded group? 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. 3.6 If the response or or 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. 3. 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? 3. No If yes, attach an explanation. 4. State the as of date that the latest financial examination of the reporting entity was made or is being made. 3. 12/31/2 3. 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 examination report became available from either the state of the organization of the reporting entity was made or is being made. 3. 12/31/2 3. State as of what date the latest financial examination report became available from either the state of domicile or the reporting entity. This is the release date of the examination report aceame available from either the state of domicile or the reporting entity. This is the release date or completion		Domicile, as required by the Model Act?		NO
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 .2 If response to 8.1 is yes, please identify the name of the bank holding company. .3 Is the company affiliated with one or more banks, thrifts or securities firms? .4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliates primary federal 	.4 .5	State the as of date that the latest financial examination report became availal This date should be the date of the examined balance sheet and not the date the State as of what date the latest financial examination report became available domicile or the reporting entity. This is the release date or completion date of the (balance sheet date)	ole from either the state of domicile or the report was completed or releasedto other states or the public from either the special examination report and not the date of the special examination report and not the date of the special examination report and not the date of the special examination report and not the date of the special examination report date and special examination report been accounted for in a subsequent special examination with?	
 .3 Is the company affiliated with one or more banks, thrifts or securities firms? .4 If response to 8.3 is yes, please provide below the names and location (city and state of the main office) of any affiliates regulated by a federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliates primary federal 	.4 .5 .6	State the as of date that the latest financial examination report became availal This date should be the date of the examined balance sheet and not the date the State as of what date the latest financial examination report became available domicile or the reporting entity. This is the release date or completion date of the (balance sheet date) By what department or departments? MICHIGAN DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES	ole from either the state of domicile or the report was completed or releasedto other states or the public from either the special examination report and not the date of the special examination report and not the date of the special examination report and not the date of the special examination report and not the date of the special examination report date and special examination report been accounted for in a subsequent special examination with?	
Is the company affiliated with one or more banks, thrifts or securities firms?	5.4 5.5 5.6 7.1 7.2	State the as of date that the latest financial examination report became availal This date should be the date of the examined balance sheet and not the date the State as of what date the latest financial examination report became available domicile or the reporting entity. This is the release date or completion date of the (balance sheet date) By what department or departments? MICHIGAN DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES	ole from either the state of domicile or the report was completed or released. to other states or the public from either the sine examination report and not the date of the sine examination report and not the date of the sine examination report and not the date of the sine examination report and not the date of the sine examination report and not the date of the sine examination report been accounted for in a subsequent sine been complied with? The sine examination report and not the date of the sine examination report been accounted for in a subsequent sine examination report sin	
federal regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliates primary federal	55.4 55.5 56.6 77.1 77.2	State the as of date that the latest financial examination report became availal This date should be the date of the examined balance sheet and not the date the State as of what date the latest financial examination report became available domicile or the reporting entity. This is the release date or completion date of the (balance sheet date)	ole from either the state of domicile or the report was completed or released. to other states or the public from either the see examination report and not the date of the see examination report and not the date of the see examination report and not the date of the see examination report and not the date of the see examination report and not the date of the see examination report and not the date of the see examination report been accounted for in a subsequent see examination with the see examination report been accounted for in a subsequent see examination report see	
TECONATOR	.4 .5 .6 .1 .2 .1	State the as of date that the latest financial examination report became availal This date should be the date of the examined balance sheet and not the date the State as of what date the latest financial examination report became available domicile or the reporting entity. This is the release date or completion date of the (balance sheet date) By what department or departments? MICHIGAN DEPARTMENT OF INSURANCE AND FINANCIAL SERVICES	ole from either the state of domicile or the report was completed or released. to other states or the public from either the see examination report and not the date of the on report been accounted for in a subsequent been complied with? ons (including corporate registration, if application) and reserve Board?	

1	2	3	4	5	6
Affiliate Name	Location (City, State)	FRB	occ	FDIC	SEC
Apollo Capital Management, L.P	New York, NY	NO	NO	NO	YES
Apollo Credit Management, LLC	New York, NY	NO	NO	NO	YES
Apollo Investment Management, L.P	New York, NY	NO	NO	NO	YES
Apollo Global Securities, LLC	New York, NY	NO	NO	NO	YES
Apollo Senior Floating Rate Fund, Inc	New York, NY	NO	NO	NO	YES
Apollo Tactical Income Fund, Inc	New York, NY	NO	NO	NO	YES
MidCap Financial Investment Corporation	New York, NY	NO	NO	NO	YES
Apollo Capital Credit Advisor, LLC	Wilmington, DE	NO	NO	NO	YES
Aris Management, LLC		NO	NO	NO	YES
Apollo Commercial Real Estate Finance, Inc	New York, NY	NO	NO	NO	YES
Apollo Real Estate Fund Advisor, LLC	Wilmington, DE	NO	NO	NO	YES
Griffin Capital Securities, LLC	Wilmington, DE	NO	NO	NO	YES
Apollo Diversified Real Estate Fund	Wilmington, DE	NO	NO	NO	YES
Apollo Diversified Credit Fund	Wilmington, DE	NO	NO	NO	YES
Athene Securities, LLC	West De Moines, IA	NO	NO	NO	YES
Apollo Manager, LLC	New York, NY	NO	NO	NO	YES
Apollo S3 RIC Management, LP	New York, NY	NO	NO	NO	YES

GENERAL INTERROGATORIESPART 1 - COMMON INTERROGATORIES

Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons

0.11	(a) Honest and ethical concurrence professional relationshis (b) Full, fair, accurate, timel (c) Compliance with applic (d) The prompt internal rep (e) Accountability for adhermal control of the prompt of the pro	duct, including the ps; y and understane able governmen orting of violation to the code	ne ethical hand idable disclosu tal laws, rules ons to an appro	lling of actual c ire in the period and regulations	or apparent conf ic reports requir s;	licts of interest b	etween personal and the reporting entity;	ΥΕ5	
	If the response to 9.1 is No, pl	· · · · · · · · · · · · · · · · · · ·							
	1 If the response to 9.2 is Yes, provide information related to amendment(s).								
	Have any provisions of the co If the response to 9.3 is Yes, p		n waived for a	ny of the specif	ied officers?			NO	
				FINANC					
	Does the reporting entity reporting entity reporting entity reporting amounts reporting the second entities and the second entities are second entitled in the second entities and the second entities are second entities and the second entities are second entities and the second entities are second entitled entities and the second entities are second entities are second entities and the second entities are second entities are second entities and the second entities are second entities are second entities and the second entities are second entities are second entities and the second entities are second entities are second entities and entities are second entiti								
	,, ,	,		INVESTM				,	
	Were any of the stocks, bonds available for use by another p If yes, give full and complete i	erson? (Exclude	securities und ting thereto:	er securities len	ding agreemen	ts.)			
12.	Amount of real estate and mo	rtgages held in o	other invested	assets in Sched	lule BA:			\$	
	Amount of real estate and mo Does the reporting entity have								
	If yes, please complete the fol		o in parcin, sui		illinates:				
							1	2	
							Prior Year-End Book / Adjusted Carrying Value	/ Adjusted Carryir Value	ng
	14.21 Bonds 14.22 Preferred Stock								
	14.23 Common Stock								
	14.24 Short-Term Investments 14.25 Mortgage Loans on Rea								
	14.26 All Other								
	14.27 Total Investment in Pare 14.28 Total Investment in Pare								
	Has the reporting entity entere								
	If yes, has a comprehensive d If no, attach a description with	escription of the	hedging progr						
16.	For the reporting entity's secur	rity lending prog	ram, state the	amount of the f	ollowing as of t	the current staten	nent date:	٨	
	16.1 Total fair value of reinventage16.2 Total book adjusted/cal	ested collateral a rrying value of re	assets reported einvested colla	teral assets rep	orted on Schedi	ule DL, Parts 1 ar	nd 2	\$\$	
17	16.3 Total payable for securi Excluding items in Schedule E	ties lending repo	orted on the lia	bility page				\$	
17.	entity's offices, vaults or safet pursuant to a custodial agree Considerations, F. Outsourcing Handbook?	ty deposit boxes ment with a qua g of Critical Fund	, were all stock lified bank or to ctions, Custodi	s, bonds and o rust company ir al or Safekeepii	ther securities, on accordance wing Agreements	owned throughou ith Section 1, III -	t the current year held General Examination ncial Condition Examir		
17.1	For all agreements that comp					<i>Handbook</i> , com			
		1					2		
		me of Custodian	• •		555 147 1		stodian Address		
	Wells Fargo Institutional Trust Principal Trust Company								
	For all agreements that do no location and a complete expla	t comply with th		of the NAIC Fi	•		ndbook, provide the na		
	1			2			3		
	Name(s)			Location(s)			Complete Explanatio	n(s)	
	Have there been any changes, If yes, give full and complete i			ne custodian(s)	identified in 17.	1 during the curr	ent quarter?	NO	
	1	2			3		4		
	Old Custodian	New Cu	stodian	Date of	Change		Reason		
17.5	Investment mensus assessed. Ide						individuals that have t		

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

GENERAL INTERROGATORIESPART 1 - COMMON INTERROGATORIES

			1		2				
		Name of Firm	n or Individual		Affiliation				
	Jaime Houghton, CFO								
	Melissa Holn	nquist, CEO			l				
		or those firms/individuals listed in the table for Question.e., designated with a "U") manage more than 10% of the							
	17.5098 F	or firms/individuals unaffiliated with the reporting entity oes the total assets under management aggregate to m	(i.e., designated with a "U") listed	in the table for Question 17.5,					
17.6		ns or individuals listed in the table for 17.5 with an affili for the table below.	ation code of "A" (affiliated) or "U"	(unaffiliated), provide the					
	1	2	3	4	5				
	Central Registration Depository				Investment Managemer Agreement				
	Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	(IMA) Filed				
19.	a. Docum securitb. Issuer	nating 5GI securities, the reporting entity is certifying the nentation necessary to permit a full credit analysis of the y is not available. or obligor is current on all contracted interest and princi	e security does not exist or an NAI pal payments.	C CRP credit rating for an FE or Pl					
		surer has an actual expectation of ultimate payment of rting entity self-designated 5GI securities?			NO				
20.		nating PLGI securities, the reporting entity is certifying t			INU				
20.		curity was purchased prior to January 1, 2018.	The following elements of each sen	ruesignated i Loi security.					
		porting 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?								
21.		FE to a Schedule BA non-registered private fund, the re			NO				
۷1.	designated F		Joining entity is certifying the folio	wing elements of each sen-					
		ares were purchased prior to January 1, 2019.							
		porting entity is holding capital commensurate with the							
	 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. 								
		nd only or predominantly holds bonds in its portfolio.							
		rrent reported NAIC Designation was derived from the p its legal capacity as an NRSRO.	ublic credit rating(s) with annual s	surveillance assigned by an NAIC					

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

Quarterly Statement as of June 30, 2024 of the Upper Peninsula Health Plan, LLC

GENERAL INTERROGATORIES

PART 2 - HEALTH

1.	Operating Percentages:		
	1.1 A&H loss percent	94	4.100 %
	1.2 A&H cost containment percent	1	1.700 %
	1.3 A&H expense percent excluding cost containment expenses	16	5.000 %
2.1	Do you act as a custodian for health savings accounts?	N	OC
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?	N	D
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?	N	D
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?	N	D

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

1	2	3	4	5	6	7	8	9	10
									Effective Date of Certified
NAIC Company				Domiciliary	Type of	Type of Business		Certified Reinsurer	Reinsurer
Code	ID Number	Effective Date	Name of Reinsurer	Jurisdiction	Reinsurance Ceded			Rating (1 through 6)	Rating

NONE

SCHEDULE T - PREMIUMS AND OTHER CONSIDERATIONS

			С	urrent Year	to Date - Allo	ocated by Sta						
			1	2	3	4	Dir 5	rect Business O 6	Inly 7	8	9	10
			1	2	3	4	5	Federal	/	8	9	10
			Active Status	Accident & Health	Medicare Title	Medicaid Title		Employees Health Benefits Program	Life & Annuity Premiums & Other	Property/ Casualty	Total Columns 2	Deposit-Type
	States, Etc.		(a)	Premiums	XVIII	XIX	CHIP Title XXI	Premiums	Considerations	Premiums	Through 8	Contracts
1.	Alabama	.AL	N									
		.AK	N									
		AZ AR	N N									
		CA	N N									
		CO	N									
7.		CT	N									
		DE	N									
	District of Columbia	DC	N									
		.FL	N									
	<u> </u>	.GA	N									
		.HI .ID	N N									
		.IL	N									
		IN	N									
		.IA	N									
		KS	N									
	•	KY	N									
		LA	N									
		ME MD	N N									
	• •	MA	N									
		MI	L		69,187,248	101,968,554					171,155,802	
	•	.MN	N									
	Mississippi	MS	N									
		.MO	N									
		.MT	N									
		NE NV	N N									
		NH	N									
		NJ	N									
	•	NM	N									
33.	New York	NY	N									
		.NC	N									
		.ND	N									
		OH	N N									
		OR	N									
	•	PA	N									
40.	Rhode Island	.RI	N									
		.SC	N									
		.SD	N									
		.TN	N									
		TX .UT	N N									
		VT	N						1			
		VA	N									
	-	.WA	N									
	•	.WV	N									
		.WI	N									
		.WY	N									
		AS .GU	N N									
		PR	N									
		VI	N									
		MP	N									
		.CAN	N									
	33 3	.OT	XXX		60 107 0 10	101 000 554					171 155 000	
60.	Subtotal		XXX		69,187,248	101,968,554					171,155,802	
	Total (Direct Business)		XXX		69,187,248	101,968,554					171,155,802	
	Write-Ins											
			XXX									
58002.			XXX									
58003.	0		XXX									
	Summary of remaining write-ins for Line 58 from overflow page		XXX									
58999.	Totals (Lines 58001 through 58003 plus 58998) (Line 58 above)		XXX									

(a) Active Status Counts

1. L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG	14. Q – Qualified - Qualified or accredited reinsurer
2. R - Registered - Non-domiciled RRGs.	56 5. N - None of the above - Not allowed to write business in the state56
3. E - Eligible - Reporting entities eligible or approved to write surplus lines in the state	-

PART 1 - ORGANIZATIONAL CHART

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

Marc Rowan, Joshua Harris, Leon Black Apollo Global Management, Inc. Athene Holding Ltd.

Athene USA Corporation

A-A Funding Holdco Offshore I, LLC

A-A Funding Holdco Onshore, LLC

A-A Funding Holdco Offshore II, LLC

A-A Funding Holdco Onshore, LLC

A-A Onshore Fund, LLC

ARPH (Headquarters Building), LLC

Athene Employee Services LLC

Athene London Assignment Corporation

Athene Re Services, LLC

Athene Securities, LLC

Athene Assignment Corporation

Athene Noctua, LLC

Athene Risk Aggregator, LLC

ACM Trademarks, L.L.C.

Athene Annuity Re Ltd.

A-A Funding Holdco Offshore I, LLC

A-A Funding Holdco Onshore, LLC

AARE Structured Holdings LLC

Athene Annuity & Life Assurance Company

Athene Annuity and Life Company

Athene Annuity & Life Assurance Company of New York

Athene Life Insurance Company of New York

Structured Annuity Reinsurance Company

Athene Re USA IV, Inc.

Centralife Annuities Service, Inc.

AAIA RML, LLC

141 W. Jackson Owner LLC

660 NC LLC

W 28 Street Funding LLC

P.L. Assigned Services, Inc.

AADE RML, LLC

A-A Funding Holdco Offshore II, LLC

A-A Funding Holdco Onshore, LLC

Athene Life Re International Ltd.

Athene Life Re Ltd.

A-A Onshore Fund, LLC

ADIP (Athene) Carry Plan, L.P

Athene Annuity Re II Ltd.

PART 1 - ORGANIZATIONAL CHART

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

Athene Asset L.P.

Athene Co-Invest Reinsurance Affiliate Holding Ltd.

Athene Co-Invest Reinsurance Affiliate 1A Ltd.

Athene Co-Invest Reinsurance Affiliate International Ltd.

Athene Co-Invest Reinsurance Affiliate LP

Athene Co-Invest Reinsurance Affiliate 1B Ltd.

Athene Co-Invest Reinsurance Affiliate Holding 2 Ltd.

Athene Co-Invest Reinsurance Affiliate 2A Ltd.

Athene Co-Invest Reinsurance Affiliate 2B Ltd.

Rosencrantz Depositor, LLC

NNN AGP Opportunities GP, LLC

NNN AGP Opportunities Fund, L.P.

NNN AGP Mezz Borrower, LLC

NNN AGP Opp Owner I, LLC

NNN AGP Opportunities Fund II, L.P.

NNN AGP Mezz Borrower II, LLC

NNN AGP Opp Owner II, LLC

NNN AGP Opp II Owner I, LLC

NNN AGP Opp II Owner II, LLC

NNN AGP Opp II Owner III, LLC

NNN AGP Opp II Owner IV, LLC

NNN AGP Opp II Owner V, LLC

NNN AGP Opp II Owner VI, LLC

NNN AGP Mezz Borrower III, LLC

NNN AGP Opp III Owner I, LLC

NNN AGP Opp III Owner II, LLC

NNN AGP Opp III Owner III, LLC

NNN AGP Opportunities Fund III, L.P.

A-A Offshore 2021-1 (Java), L.P.

A-A Mortgage Investor, LLC

A-A Mortgage Holdco, LLC

A-A Mortgage Investor, LLC

Athene Re Japan Solutions Co., Ltd.

Athene Bermuda Employee Company Ltd.

Athene IP Holding Ltd.

Athene North Employment Service Corporation

Athora Holding Ltd.

Athora UK Services Ltd.

Athora Ireland Services Limited

Athora Bermuda Services Ltd.

Athora IP Holding Ltd.

Athora Class D Holdings Ltd.

Athora NL Class D Holdings Ltd.

Athora Co-Invest Management, Ltd.

Athora Co-Invest, L.P.

Athora Europe Holding Limited

PART 1 - ORGANIZATIONAL CHART

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

.Athora Belgium S.A./N.V.

Groupe GVA-BC Assurances S.A.

.Athora Services Belgium S.A./N.V.

Athora Life Re Ltd.

Athora Ireland plc

Athora Europe Investments DAC

Athora Note Programme Holdings GP Ltd.

Athora General Account Programme LP

Athora Series I Limited Partnership

Athora Oyster Series LP

Athora Oyster Series Modco LP

Athora Rain Series LP

Athora Rain OC Series LP

Athora Verdi Series LP

AP Credit Solutions IV Pte

Athora Deutschland Verwaltungs GmbH

Athora Deutschland Holding GmbH & Co. KG

Athora Deutschland GmbH

Athora Pensionkasse AG

Athora Deutschland Service GmbH

Athora Lebensversicherung AG

Athora Lux Invest SCSp

Athora Netherlands Holding Limited

Athora Netherlands Services B.V.

Athora Netherlands N.V.

SRLEV N.V.

N.V. Pensioen ESC

REAAL De Ruyterkade B.V.

REAAL Winkels I B.V.

REAAL Winkels II B.V.

REAAL Wognumsebuurt B.V.

REAAL Kantoren I B.V.

REAAL Woningen I B.V.

GVR500 Building B.V.

RE Young Urban Housing B.V.

RE Griftlaan Zeist B.V.

Bellecom N.V.

PDC Industrial Center 143 Sp. Z o.o

Dumenza Sp. Z o.o

RE NL Holding 1 S.a.r.1

RE NL Property AB

RE NL Borås 1 AB

RE NL Vansbro 1 AB

RE NL Örebro 1 AB

Ireland TAM Dublin Property S.A.R.L

Athora Lux Earth Holdings 1 S.A.

Athora France Earth Holdings 1 SASU

Terra Nova V Montreuil SCI

PART 1 - ORGANIZATIONAL CHART

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

Athora France Sky Holdings 1 SASU

Athora Sky 1 SCI

Athora Sky Douai SCI

Athora Sky Flassan SCI

Athora Sky Peynier SCI

Zwitserleven PPI N.V.

Athora Italy Holding DAC

Athora Italia S.p.A

Assi 90 S.r.l.

Amissima Diversified Income ICAV

Athora Agenzia Assicurazioni S.r.l.

Athora Lux Invest Management S.à r.l.

Athora Lux Invest S.C.Sp

Athora Lux Loan Administration S.à r.l

Treasury Fund Administration S.a r.l.

ATR Asia Credit VCC

AP Credit Solutions IV Pte

Athora Lux Invest NL SCSp

CRE Direct Lending Administration S.a.r.l.

Middle Market Direct Lending Administration S.a.r.l.

Large Cap Direct Lending Administration S.a.r.l.

AP Credit Solutions IV Pte

A-A Euro Investment Fund (Lux) GP, S.a r.l.

Athene Japan K.K.

Apollo Asset Management, Inc.

APO Asset Co., LLC

Apollo Principal Holdings I GP, LLC

Apollo Principal Holdings I, L.P.

Apollo Capital Management IV, Inc.

Apollo Advisors IV, L.P.

Apollo Investment Fund IV, L.P.

Apollo Overseas Partners IV, L.P.

Apollo Fund Administration IV, L.L.C.

Apollo Capital Management V, Inc

Apollo Advisors V, L.P.

Apollo Fund Administration V, L.L.C

Apollo Verwaltungs V GmbH

Apollo German Partners V GmbH & Co.KG

Apollo Capital Management VI, LLC

Apollo Advisors VI, L.P.

Apollo Investment Fund VI, L.P.

Apollo Overseas Partners VI, L.P.

Apollo Overseas Partners (Delaware) VI, L.P.

Apollo Overseas Partners (Delaware 892) VI, L.P.

Apollo Overseas Partners (Germany) VI, L.P.

Apollo Management (Germany) VI, L.P.

Apollo Fund Administration VI, LLC

Apollo Capital Management VII, LLC

PART 1 - ORGANIZATIONAL CHART

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART Apollo Advisors VII, L.P. Apollo Fund Administration VII, LLC Apollo Investment Fund VII, L.P. Apollo Investment Fund (I) VII, L.P. Apollo Investment Fund (PB) VII, L.P. Apollo Overseas Partners VII, L.P. Apollo Overseas Partners (I) VII, L.P. Apollo Overseas Partners (Delaware) VII, L.P. Apollo Overseas Partners (Delaware 892) VII, L.P. AGRE CMBS GP LLC AGRE CMBS GP II LLC 2012 CMBS-I GP LLC 2012 CMBS-II GP LLC 2012 CMBS-III GP LLC Apollo ANRP Capital Management, LLC Apollo ANRP Advisors, L.P. Apollo ANRP Fund Administration, LLC Apollo Natural Resources Partners, L.P. Apollo Converse Co-Investors, LLC Apollo Co-Investors Manager, LLC AGRE Europe Co-Investors (A), L.P. AGRE Europe Co-Investors (A), L.P., with respect to Series CAI thereof AGRE Europe Co-Investors (A), L.P., with respect to Series GSS thereof AGRE Europe Co-Investors (A), L.P., with respect to Series Prime thereof AOP Co-Investors (A), L.P. AOP Co-Investors (D), L.P. AP Auxo Holdings Co-Investors (A), L.P. Apollo A-N Credit Co-Investors (FC-D), L.P. Apollo Accord Co-Investors II (D), L.P. Apollo Accord Co-Investors III (D), L.P. Apollo Accord Co-Investors III B (D), L.P. Apollo Accord Co-Investors IV (A), L.P. Apollo Accord Co-Investors IV (D), L.P. Apollo Accord Co-Investors V (A), L.P. Apollo Accord Co-Investors V (D), L.P. Apollo Accord Co-Investors VI (A), L.P. Apollo Accord Co-Investors VI (D), L.P. Apollo Accord+ Co-Investors (A), L.P. Apollo Accord+ Co-Investors (B), L.P. Apollo Accord+ Co-Investors (D), L.P. Apollo Accord+ II Co-Investors (A), L.P. Apollo Accord+ II Co-Investors (D), L.P. Apollo ADIP Co-Investors (A), L.P. Apollo ADIP Co-Investors (D), L.P. Apollo ADIP Co-Investors II (A), L.P. Apollo ADIP Co-Investors II (D), L.P. Apollo AGRE APREF Co-Investors (D), L.P.

Apollo AIE II Co-Investors (B), L.P.

PART 1 - ORGANIZATIONAL CHART

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART Apollo Alamo Co-Investors (D), L.P. Apollo Aligned Alternatives Co-Investors (A), L.P. Apollo Aligned Alternatives IDF Co-Investors (A), L.P. Apollo ANRP Co-Investors (A), L.P. Apollo ANRP Co-Investors (B), L.P. Apollo ANRP Co-Investors (D), L.P. Apollo ANRP Co-Investors (DC-D), L.P. Apollo ANRP Co-Investors (FC-D), LP Apollo ANRP Co-Investors (IH-A), LP Apollo ANRP Co-Investors (IH-D), LP Apollo ANRP Co-Investors II (A), L.P. Apollo ANRP Co-Investors II (D), L.P. Apollo ANRP Co-Investors II (IH-A), L.P. Apollo ANRP Co-Investors II (IH-D), L.P. Apollo ANRP Co-Investors II (DC-D), L.P. Apollo ANRP Co-Investors III (A), L.P. Apollo ANRP Co-Investors III (D), L.P Apollo ANRP Co-Investors III (DC-D), L.P. Apollo APC Co-Investors (A), L.P. Apollo Asia Co-Investors, LLC Apollo Asia Real Estate Co-Investors (A), L.P. Apollo Asia Real Estate II Co-Investors (A), L.P. Apollo Asia Real Estate II Co-Investors (D), L.P. Apollo Asset-Backed Fund Co-Investors (A), L.P. Apollo Calliope Co-Investors (D), L.P. Apollo Capital Efficient Co-Investors (D), L.P. Apollo Centre Street Co-Investors (DC-D), L.P. Apollo Champ Co-Investors, L.P. Apollo Chiron Credit Co-Investors (D), L.P. Apollo Clean Transition Equity Partners II Co-Investors (A), L.P. Apollo Co-Investors VI (DC-D), L.P. Apollo Co-Investors VI (EH-GP), LLC Apollo Co-Investors VI (FC-D), LP Apollo Co-Investors VII (B), LLC Apollo Co-Investors VII (C), LLC Apollo Co-Investors VII (D), L.P. Apollo Co-Investors VII (DC-D), L.P. Apollo Co-Investors VII (EH-A), L.P. Apollo Co-Investors VII (EH-D), LP Apollo Co-Investors VII (FC-D), L.P. Apollo Co-Investors VII (NR D), L.P. Apollo Co-Investors VII (NR DC-D), L.P. Apollo Co-Investors VII (NR EH-D), L.P. Apollo Co-Investors VII (NR FC-D), LP Apollo Co-Investors VIII (A), L.P. Apollo Co-Investors VIII (D), L.P.

Apollo Co-Investors VI (EH-D), LP

Apollo Co-Investors VIII (DC-D), L.P.

PART 1 - ORGANIZATIONAL CHART

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

Apollo Co-Investors VIII (EH-A), L.P. Apollo Co-Investors VIII (EH-D), L.P. Apollo Co-Investors VIII (FC-D), L.P. Apollo Co-Investors X (A), L.P. Apollo Co-Investors X (D), L.P. Apollo Co-Investors IX (A), L.P.

Apollo Co-Investors IX (D), L.P. Apollo Co-Investors VI (A), LLC

Apollo Co-Investors VI (B), LLC Apollo Co-Investors VI (C), LLC

Apollo Co-Investors VI (D), L.P.

Apollo Co-Investors VII (A), L.P

Apollo Credit Fund Co-Investors, LP

Apollo Credit Opportunity Co-Investors III (A) LP

Apollo Credit Opportunity Co-Investors III (B) LP

Apollo Credit Strategies Co-Investors, LP

Apollo Credit Strategies Co-Investors (D), L.P.

Apollo Credit Strategies IDF Co-Investors (A), L.P.

Apollo Defined Return Co-Investors (A), L.P.

Apollo Delphi Co-Investors (D), L.P.

Apollo EPF Co-Investors II (A), L.P.

Apollo EPF Co-Investors II (D), L.P.

Apollo EPF Co-Investors II (Euro), L.P.

Apollo EPF Co-Investors III (A), L.P.

Apollo EPF Co-Investors III (D), L.P.

Apollo EPF Co-Investors IV (D), L.P. Apollo Excelsior Co-Investors (D), L.P.

Apollo Franklin Co-Investors (DC-D), L.P.

Apollo HSF I Co-Invest, L.P.

Apollo HVF Co-Investors (A), L.P.

Apollo HVF Co-Investors (D), L.P.

Apollo HVF Co-Investors (DC-D), L.P.

Apollo HVF Co-Investors II (A), L.P.

Apollo HVF Co-Investors II (D), L.P.

Apollo Impact Mission Co-Investors (A), L.P.

Apollo Impact Mission Co-Investors (D), L.P. Apollo Infra Equity Co-Investors (A), L.P.

Apollo Infra Equity Co-Investors (D), L.P.

Apollo Infra Equity Co-Investors (IH-D), L.P.

Apollo Infrastructure Opportunities II Co-Investors (A), L.P.

Apollo Infrastructure Opportunities II Co-Investors (D), L.P. Apollo Infrastructure Opportunities III Co-Investors (A), L.P.

Apollo Kings Alley Credit Co-Investors (D), L.P.

Apollo Lincoln Private Credit Co-Investors (DC-D), L.P.

Apollo Navigator Co-Investors I (A), L.P.

Apollo Navigator Co-Investors I (D), L.P. Apollo Navigator Co-Investors I (DC-D), L.P.

Apollo Origination Partnership II Co-Investors (A), L.P.

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

Apollo PPF Credit Strategies Co-Investors (FC-D), L.P.

Apollo Revolver Co-Investors (A), L.P.

Apollo Revolver Co-Investors (D), L.P.

Apollo Revolver Co-Investors II (A), L.P.

Apollo Royalties Co-Investors I (D), L.P.

Apollo RRH Co-Investors (A), L.P.

Apollo Senior Loan Fund Co-Investors (D), L.P.

Apollo S3 Equity & Hybrid Solutions Fund Co-Investors (A), L.P.

Apollo SOMA Co-Investors, LLC

Apollo SPAC Co-Investors I (A), L.P.

Apollo SPAC Co-Investors I (D), L.P.

Apollo Special Situations Co-Investors (A), L.P.

Apollo Special Situations Co-Investors (D), L.P.

Apollo Special Situations Co-Investors (IH-A), L.P.

Apollo Special Situations Co-Investors (IH-D), L.P

Apollo SPN Co-Investors (D), L.P.

Apollo SPN Co-Investors (DC-D), L.P.

Apollo SPN Co-Investors (FC-D), L.P.

Apollo Structured Credit Recovery Co-Investors IV (A) LP

Apollo Tactical Value SPN Co-Investors (DC-D), L.P.

Apollo Total Return Co-Investors (A) LP

Apollo Total Return Fund - Investment Grade Co-Investors (D), L.P.

Apollo Tower Credit Co-Investors (DE FC-D), L.P.

Apollo Union Street Co-Investors (D), L.P.

Apollo Union Street SPV Co-Investors (D), L.P.

Apollo USREF Co-Investors II (A), L.P.

Apollo USREF Co-Investors III (A), L.P.

Apollo USREF Co-Investors III (D), L.P.

Apollo USREF III Royce Co-Investors (A), L.P.

Apollo Venerable Co-Investors (A), L.P.

FCI Co-Investors II (A), L.P.

FCI Co-Investors III (A), L.P.

FCI Co-Investors IV (A), L.P.

FCI Co-Investors IV (D), L.P.

Apollo Clean Transition Equity Partners II Co-Investors (D), L.P.

VA Capital Management CIV GP, LLC

VA Capital Management Co-Investors, L.P.

AP Violet Advisors GP, LLC

VLS Holdings Advisors GP LLC

VLS Holdings Advisors, L.P.

Apollo Principal Holdings III GP, Ltd.

Apollo Principal Holdings III, L.P.

Apollo Administration GP Ltd.

Apollo Advisors V (EH), LLC

Apollo Advisors V (EH Cayman), L.P.

Apollo Advisors VI (EH-GP), Ltd.

Apollo Advisors VI (EH), L.P.

Apollo Advisors VII (EH-GP), Ltd.

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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 – ORGANIZATIONAL CHART
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Apollo Advisors VII (EH), L.P.

AAA Life Re Carry, L.P.

Apollo ANRP Advisors (IH-GP), LLC

Apollo ANRP Advisors (IH), L.P.

Financial Credit I Capital Management, LLC

Financial Credit Investment Advisors I, L.P.

Apollo SPN Capital Management, LLC

Apollo SPN Advisors, L.P.

Apollo SPN Investments I, L.P.

AAA MIP Limited

AAA Associates, L.P.

AP Caps II Holdings GP, LLC

Acropolis Infrastructure Acquisition Sponsor, L.P.

APSG Sponsor, L.P.

APSG Sponsor II, L.P.

APSG Sponsor III, L.P.

Delphi Growth Capital Sponsor, L.P.

APSG Advisors GP, LLC

Acropolis Infrastructure Acquisition Advisors, L.P.

APSG Advisors, L.P.

APSG Advisors II, L.P.

Delphi Growth Capital Advisors, L.P.

Delaware Rose GP L.L.C

Apollo Rose GP, L.P.

Apollo Rose II Co-Investors (H), L.P.

Apollo Rose II (A), L.P.

Apollo Rose II (B), L.P.

Apollo Rose II (C), L.P.

Apollo Rose II (D), L.P.

Apollo Rose II (E), L.P.

Apollo Rose II (F), L.P.

Apollo Rose II (G), L.P.

Catalina Holdings (Bermuda) Ltd.

Catalina Re Bermuda Ltd (formerly Catalina Alpha Ltd)

Catalina Services Asia Pacific PTE Ltd.

Catalina General Insurance Ltd.

Propco (Telford) Limited

Asia Capital Reinsurance Group PTE. Ltd.

Asia Capital Reinsurance Malaysia SDN BHD

ACCR Sendirian Berhad

Catalina Corporate Capital Limited

Catalina Echo Limited

Residential Loss Control Holdings LLC

Home Construction Management Inc

ProBuilders Specialty Insurance Company

Catalina Services Switzerland AG

Catalina Foxtrot Holdings Limited

Catalina Oxenwood Real Estate II Ltd

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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

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OXW Capital LP

Oxenwood Luxembourg S.à r.l.

Oxenwood Real Estate LLP

OXW Capital Management Limited

OXW Partners LP

Oxenwood JV Capital Limited

Oxenwood Luxembourg S.à r.l.

OXW Partners 2 LP

Oxenwood JV Capital 2 Limited

Oxenwood Luxembourg 2 S.à r.l.

OLF1 Partners LP

Catalina Permian Ltd

Catalina Oxenwood European Investments Ltd

Oxenwood Catalina III Limited

OXW Catalina European Holdco S.à r.l.

Oxenwood Catalina (Germany II) S.à.r.l.

Oxenwood Catalina Neuss S.à.r.l.

OXW Catalina PropCo 1 S.à r.l.

OXW Catalina PropCo 2 S.à r.l.

Catalina Permian Ltd

Catalina Acra Zurich Reinsurance Trust

Catalina Oxenwood Investments Ltd

Propco (Newport) Limited

Propco (Greenock) Limited

Propco (Yeovil) Limited

Catalina Oxenwood Investments Ltd

OXW Catalina UK Limited

OXW Catalina (Logistics XVII) Limited

OXW Catalina (Logistics XXV) Limited

OXW Catalina (Logistics XXVI) Limited

OXW Catalina (Logistics XXVII) Limited

AD Land Exeter Ltd

Catalina Holdings UK Limited

Catalina Worthing Insurance Limited

Catalina Oxenwood Investments Ltd

Propco (Swansea) Limited

Catalina Services UK Limited

Lightning Top-Up Trust

Catalina Oxenwood European Investments Ltd.

Catalina Oxenwood Investments Ltd.

Catalina Re Archdale US LLC

Catalina Re Archdale Life Insurance Company Ltd.

Catalina Beta Ltd.

Alea Group Holdings (Bermuda) Ltd.

FIN LLC

Alea Holdings US Company

Alea North America Insurance Company

SPARTA Insurance Company

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

National American Insurance Company of California

OLT Buffalo LLC

AHUSCO Statutory Trust I

AHUSCO Statutory Trust II

AHUSCO Statutory Trust III

Catalina Alpha US Holding Company

Catalina U.S. Insurance Services LLC

Catalina Finance LLP

Elbow Re Ltd.

Catalina Oxenwood European Investments Ltd

Catalina Oxenwood Investments Ltd

Catalina Services (Bermuda) Ltd.

Apollo Rose II (I), L.P.

Apollo Wessex Advisors GP, LLC

Apollo Wessex Advisors, L.P.

Wessex Holdings, L.P.

AP Extreme Advisors GP, LLC

APH Holdings, L.P.

Apollo ANRP Capital Management II, LLC

Apollo ANRP Advisors II, L.P.

Apollo Natural Resources Partners II, L.P.

AP Boardwalk GP, LLC

Apollo ANRP Co-Investors II (B), L.P.

Apollo ANRP Capital Management III, LLC

Apollo ANRP Advisors III, L.P

Apollo Natural Resources Partners (Lux) III GP, S.a r.l.

Apollo Natural Resources Partners (Lux) III, SCSp

Apollo Natural Resources Partners III, L.P.

Apollo ANRP Co-Investors III (B), L.P.

ANRP III (T-P1) Holdings, L.P.

Apollo ANRP Advisors III (P2), L.P.

Apollo Natural Resources Partners (P2) III, L.P.

Apollo Capital Management VIII, LLC

Apollo Advisors VIII, L.P.

Apollo Fund Administration VIII, LLC

Apollo Investment Fund VIII, L.P.

Apollo Investment Fund (I) VIII, L.P.

Apollo Overseas Partners VIII, L.P.

Apollo Overseas Partners (I) VIII, L.P.

Apollo Overseas Partners (Delaware) VIII, L.P.

Apollo Overseas Partners (Delaware 892) VIII, L.P.

Apollo Hybrid Value Capital Management, LLC

Apollo Hybrid Value Advisors, L.P.

Apollo HVF Co-Investors (B), L.P.

Apollo HVF Co-Investors (C), L.P.

Apollo Hybrid Value Fund, L.P.

Apollo Hybrid Value Overseas Partners (Delaware 892), L.P.

Apollo Hybrid Value Overseas Partners (Lux) GP, S.a r.l.

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

Apollo Hybrid Value Overseas Partners (Lux), SCSp

Apollo Hybrid Value Overseas Partners, L.P.

AA Direct GP, LLC

AA Direct, L.P.

AP Ulysses Advisors, LLC

AP Violet, L.P.VA Capital Company LLC

Venerable Holdings, Inc.

Venerable Insurance and Annuity Company

Corporate Solutions Life Reinsurance Company

Rocky Range, Inc.

Directed Services LLC

VIAC Services Company

Venerable Investment Advisers, LLC

Apollo Special Situations Advisors GP, LLC

Apollo Special Situations Advisors, L.P.

Apollo Special Situations Fund, L.P.

AA GP Solutions Advisors GP, LLC

AA GP Solutions Advisors, L.P.

AA GP Solutions Fund, L.P.

Apollo Credit Secondaries I GP, LLC

Apollo Credit Secondaries Fund I, L.P.

Apollo Credit Secondaries Fund I (A), L.P.

Apollo Credit Secondaries Fund I (B), L.P.

Apollo Credit Secondaries I Advisors GP, LLC

Apollo Credit Secondaries I Advisors, L.P.

Apollo Advisors IX (EH-GP), LLC

Apollo Advisors IX (EH), L.P.

AP Highlands Co-Invest, L.P.

Highlands Bermuda Holdco, Ltd.

AIF IX International Holdings, L.P.

AP Highlands Holdings (GP), LLC

AP Highlands Holdings, L.P.

Highlands Bermuda Holdco, Ltd.

Aspen Insurance Holdings Limited

Aspen Bermuda Limited

Aspen (UK) Holdings Limited

Aspen UK Syndicate Services Limited

APJ Asset Protection Jersey Limited

Aspen U.S. Holdings, Inc.

Aspen American Insurance Company

Aspen Specialty Insurance Company

Aspen Insurance U.S. Services Inc.

Aspen Specialty Insurance Management, Inc.

Aspen Specialty Insurance Solutions, LLC

Aspen Re America, Inc.

Digital Risk Resources, LLC

Aspen Insurance UK Services Limited

Aspen Australia Service Company Pty Limited

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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Aspen European Holdings Limited

Aspen Insurance UK Limited

Acorn Limited

Blue Waters Insurers, Corp.

Aspen Managing Agency Limited

Aspen Singapore Pte. Limited

Aspen Underwriting Limited

Silverton Re Ltd.

Aspen Capital Management Limited

Peregrine Reinsurance Ltd

Aspen Cat Fund Limited

Harvest Holdings II GP, LLC

Harvest Holdings II (C), L.P.

Harvest Holdings II (V), L.P.

Karpos Investments II (C), L.P.

Karpos Investments II (V), L.P.

Apollo Infra Equity Advisors (IH-GP), LLC

Apollo Infra Equity Advisors (IH UT), L.P.

Apollo Infra Equity Advisors (IH), L.P.

Apollo Infra Equity Feeder Fund (TE Debt), L.P.

Apollo Infra Equity International Fund, L.P.

Apollo FIG Carry Pool Aggregator GP, LLC

Apollo FIG Carry Pool Aggregator, L.P.

Apollo FIG Carry Pool Intermediate, L.P.

Apollo FIG Carry Pool Intermediate (FC), L.P.

Apollo Advisors VIII (EH-GP), Ltd.

Apollo Advisors VIII (EH), L.P.

Apollo Co-Investors VIII (EH-E), L.P.

Financial Credit II Capital Management, LLC

Financial Credit Investment Advisors II, L.P.

Financial Credit Investment II, L.P.

Financial Credit III Capital Management, LLC

Financial Credit Investment Advisors III, L.P. Financial Credit Investment III, L.P.

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Financial Credit IV Capital Management, LLC

Financial Credit Investment Advisors IV, L.P. Financial Credit Investment IV, L.P.

Financial Credit Investment IV (Feeder), L.P.

Financial Credit Investment (PF) IV, L.P.

Apollo ADIP Capital Management, LLC

Apollo ADIP Advisors, L.P.

Apollo/Athene Dedicated Investment Program (A), L.P.

Apollo/Athene Dedicated Investment Program (B), L.P.

Apollo/Athene Dedicated Investment Program (C), L.P.

Apollo/Athene Dedicated Investment Program (D), L.P.

Apollo/Athene Dedicated Investment Program (E), L.P.

Apollo ADIP (Lux) GP, S.a r.l.

Apollo/Athene Dedicated Investment Program (Lux), SCSp

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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
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Apollo Hybrid Value Capital Management II, LLC

Apollo Hybrid Value Advisors II, L.P.

Apollo Grizzly Bear Co-Invest Ultimate GP, LLC

Apollo HVF Co-Investors II (B), L.P.

Apollo Hybrid Value Fund II, L.P.

Apollo Hybrid Value Fund (MS I) II, L.P.

Apollo Hybrid Value Overseas Partners II, L.P.

Apollo Hybrid Value Overseas Partners (Delaware 892) II, L.P.

Apollo Hybrid Value Overseas Partners (Lux) GP II, S.a r.l.

Apollo Hybrid Value Overseas Partners (Lux) II, SCSp

Apollo Hybrid Value Overseas Partners (MS I) II, L.P.

Apollo TAMF Co-Invest Ultimate GP, LLC

Apollo TAMF Co-Invest GP, L.P.

Apollo TAMF Co-Invest, L.P.

AA IX Holdings, LLC

Apollo Impact Mission Capital Management, LLC

Apollo Impact Mission Advisors, L.P.

Apollo Impact Mission Co-Investors (B), L.P.

Apollo Impact Mission Fund, L.P.

Apollo Impact Mission Fund (Overseas), L.P.

Apollo Impact Mission Overseas Partners (Delaware 892), L.P.

Apollo Impact Mission Overseas Partners (Lux) GP, S.a r.l.

Apollo Impact Mission Overseas Partners (Lux), SCSp

Apollo Capital Management IX, LLC

Apollo Advisors IX, L.P.

Apollo Co-Investors IX (B), L.P.

Apollo Co-Investors IX (C), L.P.

Apollo Fund Administration IX, LLC

Apollo Investment Fund IX, L.P.

Apollo Investment Fund (I) IX, L.P.

Apollo Overseas Partners IX, L.P.

Apollo Overseas Partners (I) IX, L.P.

Apollo Overseas Partners (Delaware) IX, L.P.

Apollo Overseas Partners (Delaware 892) IX, L.P.

Apollo Overseas Partners (Lux) IX GP, S.a r.l.

Apollo Overseas Partners (Lux) IX, SCSp

AP Castle Holdings GP S.a r.l.

AP IX GenPar, LLC

AP IX DSB Holdings, L.P.

DSB Parent GP, LLC

Knight Parent Ventures LP

Forward Health Ventures L.P.

Forward Health Ventures Holdings, Inc. Forward Health Ventures (A) LLC

Forward Health Ventures (B) LLC

STeM Parent L.P.

STeM Holdings Inc.

STeM Management, LLC

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STeM Operating, LLC

Forward Health Ventures Investments GP, LLC

DSB Holdings II GP, LLC

DSB Holdings II, L.P.

DSB Parent L.P.

DSB Holdings, Inc.

DSB Acquisition LLC

LifePoint Health, Inc.

Legacy LifePoint Health, LLC

Province Healthcare Company, LLC

Brim Hospitals, Inc.

Colorado Plains Physician Practices, LLC

Las Cruces Cardiology Group, LLC

Las Cruces Endoscopy Partner, LLC

Las Cruces Endoscopy, LLC

Lohman Endoscopy Center, LLC

Las Cruces Physician Practices, LLC

Los Alamos Physician Practices, LLC

Martinsville Physician Practices, LLC

Memorial Prompt Care, LLC

Northeastern Nevada Physician Practices, LLC

PHC-Aviation, Inc.

PHC-Elko, Inc.

PHC-Fort Mohave, Inc.

PHC-Fort Morgan, Inc.

PHC-Lake Havasu, Inc.

Havasu Regional Medical Center, LLC

HRMC, LLC

PHC-Lakewood, Inc

PHC-Morgan City, L.P.

PHC-Las Cruces, Inc.

PHC-Los Alamos, Inc.

PHC-Minden G.P., Inc

PHC-Minden, LLC

PHC-Morgan Lake, Inc.

PHC-Morgan City, L.P.

PHC-Selma, LLC

PHC-Tennessee, Inc.

Principal-Needles, Inc.

Teche Regional Physician Practices, LLC

Valley View Physician Practices, LLC

Historic LifePoint Hospitals, LLC

LifePoint Hospitals Holdings, LLC

AdvantagePoint Health Alliance, LLC

AdvantagePoint Health Alliance – Blue Ridge, LLC

AdvantagePoint Health Alliance – Bluegrass, LLC

AdvantagePoint Health Alliance - Hot Springs, LLC

AdvantagePoint Health Alliance - Mesilla Valley, LLC

PART 1 - ORGANIZATIONAL CHART

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

AdvantagePoint Health Alliance - Paris, LLC

AdvantagePoint Health Alliance – Tennessee Valley, LLC

AdvantagePoint Health Alliance - Great Lakes, LLC

AdvantagePoint Health Alliance – Laurel Highlands, LLC

AdvantagePoint Health Alliance - Northwest, LLC

AdvantagePoint Health Alliance – Western North Carolina, LLC

Ashley Valley Medical Center, LLC

Ashley Valley Physician Practice, LLC

Castleview Medical, LLC

Castleview Hospital, LLC

Castleview Physician Practice, LLC

HealthyHub, LLC

Home Health Partner, LLC

HSC Credentialing Support Services, LLC

HSCGP, LLC

LifePoint Corporate Services, General Partnership

America Management Companies, LLC

LifePoint Billing Services, LLC

Forward Health Ventures (A) LLC

Forward Health Ventures (B) LLC

LifePoint CSLP, LLC

LifePoint Corporate Services, General Partnership

Forward Health Ventures (A) LLC

Forward Health Ventures (B) LLC

LifePoint Holdings 2, LLC

Acquisition Bell Hospital, LLC

Upper Peninsula Health Plan, LLC

Upper Peninsula Managed Care, LLC

AMG-Crockett, LLC

AMG-Southern Tennessee, LLC

AMG-Trinity, LLC

Athens Physicians Practice, LLC

Athens Regional Medical Center, LLC

Athens Surgery Center Partner, LLC

Athens Surgery Center, LLC

Bell JV, LLC

Bell Physician Practices, Inc.

Clark Regional Physician Practices, LLC

Community Medical, LLC

Community-Based Services, LLC

Crockett Hospital, LLC

Crockett PHO, LLC

Danville Diagnostic Imaging Center, LLC

Danville Physician Practices, LLC

Danville Regional Medical Center, LLC

Danville Regional Medical Center School of Health Professions, LLC

Gateway Health Alliance, Inc.

Memorial Hospital of Martinsville & Henry County Ambulatory Surgery Center, LLC

PART 1 - ORGANIZATIONAL CHART

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

Two Rivers Physician Practices, LLC DLP Partner, LLC

DLP Healthcare, LLC

DLP Marquette Holding Company, LLC

DLP Marquette Health Plan, LLC

Upper Peninsula Health Plan, LLC

Upper Peninsula Managed Care, LLC

DLP Marquette General Hospital, LLC

DLP Marquette JV, LLC

U.P. Imaging Management Services, LLC

DLP Marquette Physician Practices, Inc.

DLP Cardiac Partners, LLC

DLP Central NC Holding Company, LLC

DLP Central Carolina Medical Center, LLC

DLP Central Carolina Family Medicine, LLC

DLP Central Carolina Medical Group, LLC

DLP Central Carolina Physician Practices, LLC

DLP Central NC JV, LLC

Guardian Health Service, L.L.C.

DLP Frye Regional Medical Center, LLC

DLP Cardiology Associates, LLC

DLP Cardiology Physicians, LLC

DLP Frye Medical Group, LLC

DLP Frye Regional Physician Practices, LLC

DLP Graystone Family Practice Associates, LLC

DLP Hickory Family Practice Associates, LLC

DLP Good Shepherd Holding Company, LLC

DLP Good Shepherd JV, LLC

DLP Gregg County Hospital, LLC

DLP Marshall Medical Center, LLC

DLP Harris JV, LLC

DLP Harris Regional Hospital, LLC

DLP Western Carolina Physician Practices, LLC

DLP Haywood Regional Medical Center, LLC

DLP Maria Parham Medical Center, LLC

DLP Maria Parham Physician Practices, LLC

DLP Person Memorial Hospital, LLC

DLP Person Physician Practices, LLC

DLP Person Urgent Care, LLC

DLP Rutherford Regional Health System, LLC

DLP Rutherford Physician Practices, LLC

DLP Swain County Hospital, LLC

DLP Twin County Holding Company, LLC

DLP Twin County Physician Practices, LLC

DLP Twin County Regional Healthcare, LLC

DLP Wilson Holding Company, LLC

DLP WilMed Nursing Care and Rehabilitation Center, LLC

DLP Wilson Medical Center, LLC

PART 1 - ORGANIZATIONAL CHART

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

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MEMBERS OF A HOLDING COMPANY GROUP
HART

DLP Wilson Physician Practices, LLC
DLP Partner Central Carolina, LLC
DLP Partner Conemaugh, LLC
DLP Partner Frye, LLC
DLP Partner Marquette, LLC
DLP Partner MedWest, LLC
DLP Partner Twin County, LLC
DLP Partner Wilson Rutherford, LLC
Fauquier Partner, LLC
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Fauquier Holding Company, LLC

Fauquier Diagnostic Imaging Center, LLC

Fauquier Long-Term Care, LLC Fauquier Medical Center, LLC

Fauquier Physician Practices, LLC

Georgetown Rehabilitation, LLC

HDP Andalusia, LLC

HDP Georgetown, LLC

HighPoint Partner, LLC

HighPoint Healthcare, LLC

Riverview Medical Center, LLC

Riverview Physician Practices, LLC

Sumner Partner, LLC

Sumner Ambulatory Surgery Center, LLC

Sumner Physician Practices, LLC

Sumner Regional Medical Center, LLC

Trousdale Medical Center, LLC

Trousdale Physician Practices, LLC

Hillside Hospital, LLC

HSC Manager, LLC

Kansas Healthcare Management Company, Inc.

Kansas Healthcare Management Services, LLC

Kansas Healthcare Management Services, LLC

Kentucky Hospital, LLC

Kentucky Medserv, LLC

Kentucky Physician Services, Inc. LHSC, LLC

LifePoint Medical Group - Hillside, Inc.

AMG-Hillside, LLC

LifePoint of Kentucky, LLC

Bourbon Community Hospital, LLC

Bourbon Physician Practice, LLC

Buffalo Trace Radiation Oncology Associates, LLC

Fleming Medical Center, LLC

Georgetown Community Hospital, LLC

HCK Logan Memorial, LLC

Kentucky MSO, LLC

Meadowview Physician Practice, LLC

Meadowview Regional Medical Center, LLC

Meadowview Regional Medical Center Pain Management, LLC

PART 1 - ORGANIZATIONAL CHART

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

PineLake Physician Practice, LLC

PineLake Regional Hospital, LLC

R. Kendall Brown Practice, LLC

Siletchnik Practice, LLC

Woodford Hospital, LLC

LifePoint of Lake Cumberland, LLC

LCMC PET, LLC

Somerset Surgery Partner, LLC

Lake Cumberland Surgery Center, LP

Lake Cumberland Cardiology Associates, LLC

Lake Cumberland Physician Practices, LLC

LCMC MRI, LLC

Lake Cumberland Regional Hospital, LLC

Lake Cumberland Regional Physician Hospital Organization, LLC

LifePoint RC, Inc.

Logan Medical, LLC

Meadowview Rights, LLC

Northwest Medical Center-Winfield, LLC

Norton Partner, LLC

NWMC-Winfield Hospitalist Physicians, LLC

NWMC-Winfield Physician Practices, LLC

Piedmont Partner, LLC

Portage Holding Company, LLC

PH Copper Country Apothecaries, LLC

Portage Hospital, LLC

Portage Calumet MOB, LLC

Portage JV, LLC

Ontonagon Community Health Center, Inc.

Upper Peninsula Health Plan, LLC

Upper Peninsula Managed Care, LLC

Portage Physician Practices, Inc.

Portage Partner, LLC

Professional Billing Services, LLC

Providence Holding Company, LLC

Providence Group Practices, LLC

Providence Group Practices II, LLC

Providence Hospital, LLC

PERS Legacy, LLC

Providence Imaging Center, LLC

Providence Professional Services, LLC

Providence Physician Practices, LLC

River Parishes Hospital, LLC

River Parishes Partner, LLC

River Parishes Physician Practices, LLC

Rockdale Clinically Integrated Medical Care Organization, LLC

Rockdale Hospital, LLC

Rockdale Physician Practices, LLC

Smith County Memorial Hospital, LLC

PART 1 - ORGANIZATIONAL CHART

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

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PART 1 – ORGANIZATIONAL CHART
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Southern Tennessee EMS, LLC

Southern Tennessee Medical Center, LLC

Southern Tennessee PHO, LLC

Spring View Hospital, LLC

Spring View Physician Practices, LLC

Springhill Medical Center, LLC

Sumner Real Estate Holdings, LLC

SST Community Health, L.L.C.

THM Physician Practice, LLC

Ville Platte Medical Center, LLC

Wythe County Community Hospital, LLC

Wythe County Physician Practices, LLC

LifePoint NMTC, LLC

LifePoint PSO, LLC

My HealthPoint, LLC

Poitras Practice, LLC

Riverton Oncology Practice, LLC

Shared Business Services, LLC

LifePoint Acquisition Corp.

LifePoint VA Holdings, Inc.

Clinch Professional Physician Services, LLC

Clinch Valley Medical Center, Inc.

Clinch Valley Physicians Associates, LLC

Clinch Valley Pulmonology, LLC

Clinch Valley Urology, LLC

Orthopedics of Southwest Virginia, LLC

LifePoint WV Holdings, Inc.

Raleigh General Hospital, LLC

West Virginia Management Services Organization, Inc.

Lima HoldCo, LLC

Capella Health Holdings, LLC

Capella Holdings, LLC

Capella Healthcare, LLC

Capella DISCO, LLC

Kershaw Health Holdings, LLC

Kershaw Clinics, LLC

Kershaw Hospital, LLC

KershawHealth Ambulatory Surgery Center, LLC

KershawHealth Cancer Center, LLC

Muskogee Holdings, LLC

Capella Holdings of Oklahoma, LLC

Muskogee Medical and Surgical Associates, LLC

Muskogee Physician Group, LLC

Muskogee Regional Medical Center, LLC

Providence MRI Associates, L.L.C.

Providence Radiologic Services, L.C.

NPMC Holdings, LLC

Arkansas Healthcare Services, LLC

PART 1 - ORGANIZATIONAL CHART

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

Hot Springs Imaging Center, LLC Hot Springs National Park Hospital Holdings, LLC National Park Real Property, LLC National Park Cardiology Services, LLC National Park Endoscopy Center, LLC National Park Family Care, LLC National Park GI Services, LLC NPMC, LLC Oregon Healthcorp, LLC McMinnville Immediate Health Care, LLC Willamette Valley Clinics, LLC Willamette Valley Health Solutions, LLC Willamette Valley Medical Center, LLC Willamette Radiology Billing Services, LLC RCCH PMDS, LLC RCCH Trios Health Holdings, LLC RCCH Washington Holdings, LLC CMCH Holdings, LLC Lourdes Holdings, LLC Lourdes Hospital, LLC Lourdes Physician Services, LLC PNWCIN LLC RCCH-Northwest, LLC RCCH-UW Medicine Healthcare Holdings, LLC CCMC Holdco, LLC RCCH Trios Health, LLC High Desert Surgery Center, L.L.C. RCCH Trios Physicians, LLC Saline County Hospital, LLC St. Joseph Holdings, LLC St. Joseph Hospital, LLC St. Joseph Physician Services, LLC

SJRMC Interventional Radiology Services, LLC

St. Mary's Holdings, LLC

Russellville Holdings, LLC

Saint Mary's Primary Care Network, LLC

St. Mary's Physician Services, LLC

St. Mary's Specialty, LLC

Saline County Medical Center Joint Venture, LLC

Saline Clinics, LLC

Saline Hospital, LLC

Saline FirstCare, Inc.

DLP Lima Partner, LLC

DLP Conemaugh Holding Company, LLC

DLP Conemaugh Memorial Medical Center, LLC

DLP Conemaugh Miners Medical Center, LLC

DLP Conemaugh Meyersdale Medical Center, LLC

DLP Conemaugh Physician Practices, LLC

PART 1 - ORGANIZATIONAL CHART

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

DLP Conemaugh JV, LLC

Nason Medical Center, LLC

Nason Physician Practices, LLC

RCHP-Ottumwa Holdings, Inc.

Ottumwa Physicians, LLC

Ottumwa ER, LLC

Ottumwa Health Group, LLC

RCHP-Ottumwa, LLC

Collaborative Laboratory Services, L.L.C.

RRL Ottumwa, LLC

Western Plains Regional Hospital, LLC

Dodge City Healthcare Group, LLC

Western Plains Physician Practices, LLC

Lima HoldCo Parent, LLC

RCHP, LLC

Point of Life Indemnity, LTD.

RCHP Management Company, Inc.

RegionalCare Hospital Partners, LLC

Essent Healthcare, Inc.

EHCO, LLC

Essent Healthcare of Massachusetts, Inc.

Essent Haverhill Healthcare Group, Inc.

Essent DISCO, LLC

Essent Healthcare – Ayer, Inc.

Essent – Ayer Healthcare Group, Inc.

Essent Healthcare - Paris, Inc.

EHC PRMC G.P., LLC

Essent PRMC, L.P.

Texas & Oklahoma Preferred Provider System

EHC PRMC L.P., LLC

Essent PRMC, L.P.

Lamar County Clinical Services, Inc.

PRMC ER Group, Inc.

PRMC Healthcare Group, Inc.

Essent Healthcare – Pennsylvania, Inc.

Essent Healthcare – Waynesburg, LLC

SRMC Healthcare Group, LLC

Essent Realty, Inc.

Sharon Hospital Holding Company

Essent Healthcare of Connecticut, Inc.

Florence Physicians, LLC

ECM Health Group, LLC

ECM TVCC, LLC

North Alabama Neuroservices, LLC

North Alabama Ob-Gyn, LLC

Shoals Health Group, LLC

Shoals Obstetrics and Gynecology, LLC

North Alabama RCO Holding Company, LLC

SCHEDULE Y

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group		NAIC Company		Federal		Name of Securities Exchange if Publicly Traded (U.S. or	Names of Parent, Subsidiaries	Domiciliary		Directly Controlled by (Name of		If Control is Ownership Provide	Ultimate Controlling	Is an SCA Filing Required?	
Code	Group Name	Code	ID Number	RSSD	CIK	International)	Or Affiliates	Location	Entity	Entity/Person)	Influence, Other)	Percentage	Entity(ies) / Person(s)	(Yes/No)	*
			06 4740005				DOUBLE O	5.5			0 1:	400 000	AGM; M. Rowan; J. Harris; L.	l	
			36-4712385				RCHP, LLC	DE	NIA	LifePoint Health, Inc.	Ownership	100.000	Black	No	
			37-1789615				RCHP-Clinical Trials, LLC	DE	NIA	RegionalCare Hospital Partners, LLC	O	100.000	AGM; M. Rowan; J. Harris; L. Black	Na	
			3/-1/09015				RCHP-Cillical Illais, LLC	DE	INIA	RegionalCare Hospital	Ownership	100.000	AGM; M. Rowan; J. Harris; L.	No	
			27-2451336				RCHP-Florence, LLC	DE	NIA	Partners, LLC	Ownership	100.000	Black	No	
			27 2431330				RCHP-McCurtain Memorial	DE	1117	RegionalCare Hospital		100.000	AGM; M. Rowan; J. Harris; L.	.1	
			61-1900376				Holdings, LLC	DE	NIA	Partners, LLC	Ownership	100.000	Black	No	
			01 1300070				l loidings, LEO		1	RegionalCare Hospital	- Wileisinp	100.000	AGM; M. Rowan; J. Harris; L.		
			90-0937832				RCHP-Montana, LLC	DE	NIA	Partners. LLC	Ownership	100.000	Black	No	
							,			,			AGM; M. Rowan; J. Harris; L.		
			90-0920245				RCHP-Ottumwa Holdings, Inc	DE	NIA	Lima HoldCo, LLC	Ownership	100.000	Black	No	
							_						AGM; M. Rowan; J. Harris; L.		
			27-2200283				RCHP-Ottumwa, LLC	DE	NIA	RCHP-Ottumwa Holdings, Inc	Ownership	100.000	Black	No	
							RCHP-Sierra Vista						AGM; M. Rowan; J. Harris; L.		
			46-2534603				Development, LLC	DE	NIA	RCHP-Sierra Vista Holding, Inc.	Ownership	100.000	Black	No	
										RegionalCare Hospital			AGM; M. Rowan; J. Harris; L.		
			38-3903795				RCHP-Sierra Vista Holding, Inc	DE	NIA	Partners, LLC	Ownership	100.000	Black	No	
							RCHP-Sierra Vista Medical						AGM; M. Rowan; J. Harris; L.		
			46-2547212				Office Complex, LLC	DE	NIA	RCHP-Sierra Vista Holding, Inc.	Ownership	100.000	Black	No	
			46.0557006				RCHP-Sierra Vista Physicians	5.5		DOLID 0: 1/2 1 11 11: 1	0 1:	400 000	AGM; M. Rowan; J. Harris; L.	l	
			46-2557986				Holdings, LLC	DE	NIA	RCHP-Sierra Vista Holding, Inc.	Ownersnip	100.000	Black	No	
			46 056 4000				RCHP-Sierra Vista Properties, LLC	DE	NII A	DOLID Ciarra Viata Halding Inc.	O	100 000	AGM; M. Rowan; J. Harris; L. Black	N.	
			46-2564299				RCHP-Sierra Vista Residents,	DE	NIA	RCHP-Sierra Vista Holding, Inc.	Ownership	100.000	AGM; M. Rowan; J. Harris; L.	No	
			46-2534144				LLC	DE	NIA	RCHP-Sierra Vista, Inc	Ownership	100.000	Black	No	
			40-2334144					DL	INIA	NOTIF-Sierra Vista, IIIC	Ownership	100.000	AGM; M. Rowan; J. Harris; L.		
			90-0942222				RCHP-Sierra Vista, Inc.	DE	NIA	RCHP-Sierra Vista Holding, Inc	Ownership	100.000	Black	No	
							Realpoint Properties			, including the state of the st			AGM; M. Rowan; J. Harris; L.		
			93-2421611				Intermediate Holdings, LLC	DE	NIA	Realpoint Properties, LLC	Ownership	100.000	Black	No	
						1			1				AGM; M. Rowan; J. Harris; L.		
			93-2370075				Realpoint Properties, LLC	DE	NIA	DSB Holdings, Inc	Ownership	100.000	Black	No	
						1							AGM; M. Rowan; J. Harris; L.		
			32-0551895				RegionalCare AR, LLC	DE	NIA	LifePoint Health, Inc	Ownership	100.000	Black	No	
						1	RegionalCare Hospital	_					AGM; M. Rowan; J. Harris; L.		
			27-0470646				Partners, LLC	DE	NIA	RCHP, LLC	Ownership	100.000	Black	No	
						1	Rehabilitation Hospital of		l				AGM; M. Rowan; J. Harris; L.		
			85-3490777				Louisville East, LLC	KY	NIA	LPNT IRF Development 54, LLC	Ownership	49.000	Black	No	
			05.0400777			1	Rehabilitation Hospital of	107	l			54.000	AGM; M. Rowan; J. Harris; L.	,	
			85-3490777				Louisville East, LLC	KY	NIA	University of Louisville	Ownership	51.000	Black	No	
			26 2222250				Rehabilitation Hospital of	DE	l _{NII A}	CRH of Waukesha, LLC	Ownership	E1 000	AGM; M. Rowan; J. Harris; L. Black	No	
			26-2332250				Wisconsin, LLC Rehabilitation Hospital of	DE	NIA	Waukesha Memorial Hospital.	ownersnip	51.000	AGM; M. Rowan; J. Harris; L.	No	
			26-2332250			1	Wisconsin, LLC	DE	NIA	Maukesna Memoriai Hospitai, Inc.	Ownership	49.000	Black	No	
			20-2332230				Rhode Island Rehabilitation	DE	I VIA	IIIC.		49.000	AGM; M. Rowan; J. Harris; L.		
			84-4845184			1	Hospital, LLC	DE	NIA	LPNT IRF Development 44, LLC	Ownership	60.000	Black	No	
		1	04 4040104	1			i iospital, LLO	<i>D</i> L	NA	LI IVI INI Development 44, LLO	O WITCH SHIP	00.000	Didok		

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Group		NAIC Company	10.11	Federal	011	Name of Securities Exchange if Publicly Traded (U.S. or	Names of Parent, Subsidiaries	•		Directly Controlled by (Name of	Type of Control (Ownership, Board, Management, Attorney-in-Fact,	If Control is Ownership Provide	Ultimate Controlling	Is an SCA Filing Required?	
Code	Group Name	Code	ID Number	RSSD	CIK	International)	Or Affiliates	Location	Entity	Entity/Person)	Influence, Other)	Percentage	Entity(ies) / Person(s)	(Yes/No)	
			84-4845184				Rhode Island Rehabilitation Hospital, LLC	DE		Prime Healthcare Services- Landmark, LLC	Ownership	40.000	AGM; M. Rowan; J. Harris; L. Black AGM; M. Rowan; J. Harris; L.	No	
			20-0959379				River Parishes Hospital, LLC	DE	NIA	LifePoint Holdings 2, LLC	Ownership	100.000	Black AGM; M. Rowan; J. Harris; L.	No	
			20-2502853				River Parishes Partner, LLC River Parishes Physician	DE	NIA	LifePoint Holdings 2, LLC	Ownership	100.000	Black AGM; M. Rowan; J. Harris; L.	No	
			20-1227403				Practices, LLCRiverton Oncology Practice,	DE		LifePoint Holdings 2, LLC LifePoint Hospitals Holdings,	Ownership	100.000 .	Black AGM; M. Rowan; J. Harris; L.	No	
			26-3839861				LLC	DE	NIA		Ownership	100.000 .	Black AGM; M. Rowan; J. Harris; L. AGM; M. Rowan; J. Harris; L.	No	
			62-1762469				Riverview Medical Center, LLC Riverview Physician Practices,	DE	NIA	HighPoint Healthcare, LLC	Ownership	100.000	Black AGM; M. Rowan; J. Harris; L.	No	
			45-3853399				LLCRockdale Clinically Integrated	DE	NIA	HighPoint Healthcare, LLC	Ownership	100.000 .	BlackAGM; M. Rowan; J. Harris; L. AGM; M. Rowan; J. Harris; L.	No	
			45-4282120				Medical Care Organization, LLC	DE	NIA	LifePoint Holdings 2, LLC	Ownership	100.000	Black AGM; M. Rowan; J. Harris; L. AGM; M. Rowan; J. Harris; L.	No	
			26-3202930				Rockdale Hospital, LLCRockdale Physician Practices,	DE	NIA	LifePoint Holdings 2, LLC	Ownership	100.000	Black AGM; M. Rowan; J. Harris; L. AGM; M. Rowan; J. Harris; L.	No	
			27-1363956				LLC	DE	NIA	LifePoint Holdings 2, LLC	Ownership	100.000	BlackAGM; M. Rowan; J. Harris; L. AGM; M. Rowan; J. Harris; L.	No	
			61-1703148				Rock Springs, LLCRock Springs Physician Group,	DE	NIA	Springstone Health Opco, LLC	Ownership	100.000 .	Black AGM; M. Rowan; J. Harris; L. AGM; M. Rowan; J. Harris; L.	No	
			35-2527258				LLC	DE	NIA	Rock Springs, LLC	Ownership	100.000	BlackAGM; M. Rowan; J. Harris; L.	No	
			27-2258662				RRL Ottumwa, LLC	DE	NIA	RCHP-Ottumwa, LLC	Ownership	100.000	Black AGM; M. Rowan; J. Harris; L. AGM; M. Rowan; J. Harris; L.	No	
			62-1771866				Russellville Holdings, LLC Sacramento Sierra	DE	NIA	St. Mary's Holdings, LLC	Ownership	100.000	Black AGM; M. Rowan; J. Harris; L. AGM; M. Rowan; J. Harris; L.	No	
			83-1595018				Rehabilitation Hospital, LLC	CA		The Regents of the University of	Ownership	51.000	Black	No	
			83-1595018				Sacramento Sierra Rehabilitation Hospital, LLC	CA		California on behalf of UC Davis Medical Center	Ownership	49.000	AGM; M. Rowan; J. Harris; L. Black	No	
			35-2632651				Saint Mary's Primary Care Network, LLC	DE	NIA	St. Mary's Holdings, LLC	Ownership	100.000 .	AGM; M. Rowan; J. Harris; L. Black	No	
			81-4303298				Saint Thomas Rehabilitation Hospital, LLC	TN	NIA	LifePoint Rehab, LLC	Ownership	51.000	AGM; M. Rowan; J. Harris; L. Black	No	
			81-4303298				Saint Thomas Rehabilitation Hospital, LLC	TN			Ownership	49.000	AGM; M. Rowan; J. Harris; L. Black	No	
			81-2831831				Saline Clinics, LLC	DE		Saline County Medical Center Joint Venture, LLC	Ownership	100.000 .	AGM; M. Rowan; J. Harris; L. Black	No	
			37-1875655				Saline County Hospital, LLC Saline County Medical Center	DE	NIA	Capella Healthcare, LLC	Ownership	100.000	AGM; M. Rowan; J. Harris; L. Black	No	
			37-1828157				Joint Venture, LLC	DE	NIA	Capella Healthcare, LLC	Ownership	51.000	AGM; M. Rowan; J. Harris; L. Black	No	
			37-1828157				Saline County Medical Center Joint Venture, LLC	DE	NIA	Saline County Medical Center	Ownership	49.000	AGM; M. Rowan; J. Harris; L. Black	No	

SCHEDULE Y

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries Or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies) / Person(s)	Is an SCA Filing Required? (Yes/No)	
Code	Group Name	Code	ID Nullibei	NOOD	OIIX	international	Of Allillates	Location	Littley	Littity/1 erson)	initidence, Other)	reicentage	, , , , , , , , , , , , , , , , , , , ,	(163/140)	
			71-0799300				Saline FirstCare, Inc.	AK	NIA	Saline Hospital, LLC	Ownership	50.000 .	AGM; M. Rowan; J. Harris; L. Black AGM; M. Rowan; J. Harris; L.	No	
			71 0700000				Calina FiretCare Inc	AIZ	NII A	Dhyaisian Investore	O	E0 000	Black	Nia	
			71-0799300				Saline FirstCare, Inc	AK		Physician Investors	Ownership	50.000 .		No	
										Saline County Medical Center			AGM; M. Rowan; J. Harris; L.		
			81-2816675				Saline Hospital, LLC	DE		Joint Venture, LLC	Ownership	100.000 .	Black	No	
										LifePoint Hospitals Holdings,			AGM; M. Rowan; J. Harris; L.		
			47-4681738				Shared Business Services, LLC	DE	NIA	LLC	Ownership	100.000 .	Black	No	
							Sharon Hospital Holding						AGM; M. Rowan; J. Harris; L.		
			33-1032693				Company	DE	NIA	EHCO, LLC	Ownership	100.000 .	Black	No	
							. ,			·			AGM; M. Rowan; J. Harris; L.		
			32-0381422				Shoals Health Group, LLC	DE	NIA	Florence Physicians, LLC	Ownership	100.000 .	Black	No	
			02 0001-122				Shoals Obstetrics and		141/-	l lorence i my sicians, ELO	ownersinp	100.000	AGM: M. Rowan: J. Harris: L.		
			37-1741217				Gynecology, LLC	DE	NIA	Florence Physicians, LLC	Ownership	100.000 .	Black	No	
			3/-1/4121/					υΕ			Ownership	100.000 .			
							Sierra Vista Regional Health			RCHP-Sierra Vista Physicians		400.000	AGM; M. Rowan; J. Harris; L.		
			45-5495321				Center Medical Group, L.L.C	AZ	NIA	Holding, Inc.	Ownership	100.000 .	Black	No	
													AGM; M. Rowan; J. Harris; L.		
			62-1762275				Siletchnik Practice, LLC	DE	NIA	LifePoint of Kentucky, LLC	Ownership	100.000 .	Black	No	
							Smith County Memorial						AGM; M. Rowan; J. Harris; L.		
			62-1762490				Hospital, LLC	DE	NIA	LifePoint Holdings 2, LLC	Ownership	100.000 .	Black	No	
							,			LifePoint of Lake Cumberland,			AGM: M. Rowan: J. Harris: L.		
			62-1864098				Somerset Surgery Partner, LLC.	DE	NIA	LLC	Ownership	100.000 .	Black	No	
			02 100 1030				South Florida Health				o will cromp	100.000	AGM; M. Rowan; J. Harris; L.		
			07 0766050					FL	NII A	L DNT IDE Davidenment 62 LLC	Ownership	E1 000	Black	No	
			87-2766253				Rehabilitation Hospital, LLC	FL		LPNT IRF Development 63, LLC	Ownership	51.000 .		No	
							South Florida Health			SFH Rehabilitation Holdings,			AGM; M. Rowan; J. Harris; L.		
			87-2766253				Rehabilitation Hospital, LLC	FL	NIA	LLC	Ownership	49.000 .	Black	No	
													AGM; M. Rowan; J. Harris; L.		
			62-1763622				Southern Tennessee EMS, LLC	DE	NIA	LifePoint Holdings 2, LLC	Ownership	100.000 .	Black	No	
							Southern Tennessee Medical						AGM; M. Rowan; J. Harris; L.		
			62-1762535				Center, LLC	DE	NIA	LifePoint Holdings 2, LLC	Ownership	100.000 .	Black	No	
]			AGM; M. Rowan; J. Harris; L.		
			62-1824632				Southern Tennessee PHO, LLC	DE	NIA	LifePoint Holdings 2, LLC	Ownership	100.000 .	Black	No	
											o. op]	AGM; M. Rowan; J. Harris; L.	10	
			61-1787537				Spokane Springs, LLC	DE	NIA	Springstone Health Opco, LLC	Ownership	100.000 .	Black	No	
			01-1/0/33/				Oporatie Spilligs, LLC	υΕ	13174	opinigatorie rieditii Opco, LLC	wileisilih	100.000 .		INU	
			00.015544.4				0	D		Life Delica Heldin C. U.C.	0	100.000	AGM; M. Rowan; J. Harris; L.		
			20-0155414				Spring View Hospital, LLC	DE	NIA	LifePoint Holdings 2, LLC	Ownership	100.000 .	Black	No	
							Spring View Physician						AGM; M. Rowan; J. Harris; L.		
			20-4302480				Practices, LLC	DE	NIA	LifePoint Holdings 2, LLC	Ownership	100.000 .	Black	No	
													AGM; M. Rowan; J. Harris; L.		
			62-1754936				Springhill Medical Center, LLC	DE	NIA	LifePoint Holdings 2, LLC	Ownership	100.000 .	Black	No	
													AGM; M. Rowan; J. Harris; L.		
			27-2975073				Springstone Health Opco, LLC	DE	NIA	LPNT Autumn Holdco, LLC	Ownership	100.000 .	Black	No	
			,,,00,,0,				opgotono i logitii opoo, LEO				- micromp	150.000 .	AGM; M. Rowan; J. Harris; L.		
			00 1701000				Springstone Physicians, LLC	DE	NII A	Caringotono Hoolth Onco LLO	Ownership	100.000		No	
			82-1701388					DE	NIA	Springstone Health Opco, LLC	Ownership	100.000 .	Black	No	
							Springstone Physician		l				AGM; M. Rowan; J. Harris; L.		
			36-4840000		<u></u>		Management, LLC	DE	NIA	Springstone Health Opco, LLC	Ownership	100.000 .	Black	No	

SCHEDULE Y

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
		NAIC				Name of Securities Exchange if Publicly Traded			Relationship		Type of Control (Ownership, Board, Management,	If Control is Ownership		Is an SCA Filing	
Group		Company		Federal		(U.S. or		Domiciliary	. •	Directly Controlled by (Name of		Provide	Ultimate Controlling	Required?	
Code	Group Name	Code	ID Number	RSSD	CIK	International)	Or Affiliates	Location	Entity	Entity/Person)	Influence, Other)	Percentage	Entity(ies) / Person(s)	(Yes/No)	*
										Essent Healthcare -			AGM; M. Rowan; J. Harris; L.		
			20-4269117				SRMC Healthcare Group, LLC	DE	NIA	Pennsylvania, Inc	Ownership	100.000 .	Black	No	
										Sumner Regional Medical	·		AGM; M. Rowan; J. Harris; L.		
			62-1835614				SST Community Health, L.L.C	TN		Center, LLC	Ownership	100.000 .	Black	No	
							St. Mary Rehabilitation					1	AGM; M. Rowan; J. Harris; L.		
			27-3938747				Hospital, LLP	DE	NIA	CRH of Langhorne, LLC	Ownership	41.000 .	Black	No	
			27 0300747				St. Mary Rehabilitation		141/4	orar or Eurignomic, EEO	O WITCH SHIP	1.000	AGM; M. Rowan; J. Harris; L.		
			27-3938747				Hospital, LLP	DE	NIA	St. Mary Medical Center	Oanahin	59.000	Black	No	
			2/-3930/4/				nospital, LLP	РЕ	NIA	St. Mary Medical Center	Ownership	59.000 .			
			06 4000070									100 000	AGM; M. Rowan; J. Harris; L.		
			26-4088270				St. Mary's Holdings, LLC	DE	NIA	Capella Healthcare, LLC	Ownership	100.000 .	Black	No	
							St. Mary's Physician Services,						AGM; M. Rowan; J. Harris; L.		
			62-1769626				LLC	DE	NIA	St. Mary's Holdings, LLC	Ownership	100.000 .	Black	No	
													AGM; M. Rowan; J. Harris; L.		
			32-0609817				St. Mary's Specialty, LLC	DE	NIA	St. Mary's Holdings, LLC	Ownership	100.000 .	Black	No	
													AGM; M. Rowan; J. Harris; L.		
			88-1922569				STeM Holdings Inc	DE	NIA	STeM Parent L.P.	Ownership	100.000 .	Black	No	
							g.						AGM; M. Rowan; J. Harris; L.		
			88-1887635				STeM Management, LLC	DE	NIA	STeM Holdings, Inc	Ownership	100.000 .	Black	No	
			00 1007000				O Telvi Management, ELO		141/4	o returnolatings, me	O WITCH SHIP	100.000	AGM; M. Rowan; J. Harris; L.		
			00 1000004				CToM Operating 11.0	DE	NIIA	STeM Management, LLC	Ownership	100 000	Black	No	
			88-1900004				STeM Operating, LLC	DE			Ownership	100.000 .		No	
			00.4044054							Forward Health Ventures (B)		100.000	AGM; M. Rowan; J. Harris; L.		
			88-1944356				STeM Parent L.P	DE	NIA	LLC	Ownership	100.000 .	Black	No	
							Sumner Ambulatory Surgery						AGM; M. Rowan; J. Harris; L.		
			84-5159736				Center, LLC	DE	NIA	Sumner Partner, LLC	Ownership	100.000 .	Black	No	
													AGM; M. Rowan; J. Harris; L.		
			84-5127938				Sumner Partner, LLC	DE	NIA	HighPoint Healthcare, LLC	Ownership	100.000 .	Black	No	
							Sumner Physician Practices,						AGM; M. Rowan; J. Harris; L.		
			27-2618964				LLC	DE	NIA	HighPoint Healthcare, LLC	Ownership	100.000 .	Black	No	
							Sumner Real Estate Holdings,			, , , , , , , , , , , , , , , , , , , ,			AGM; M. Rowan; J. Harris; L.		
]	27-2618993				LLC.	DE	NIA	LifePoint Holdings 2, LLC	Ownership	100.000 .	Black	No	
							Sumner Regional Medical				o. op		AGM; M. Rowan; J. Harris; L.		
			27-2618766				Center, LLC	DE	NIA	HighPoint Healthcare, LLC	Ownership	100.000 .	Black	No	
		1	, 2010,00				00.1101, EE0		11/7	Ingili oliit ileaitileale, ELO	O WINCHOMP	100.000	AGM; M. Rowan; J. Harris; L.		
			27-5458146				Sycamore Springs, LLC	DE	NIA	Springstone Health Opco, LLC	Ownership	100.000 .	Black	No	
		1	27-3430140					υ⊏	INIA	Springstone Health Opco, LLC	Owner Strip	100.000 .		INU	
			05.0407674				Sycamore Springs Physician	D-	NIIA	Overage Continue 110	O	100 000	AGM; M. Rowan; J. Harris; L.	N1 -	
			35-2497671				Group, LLC	DE		Sycamore Springs, LLC	Ownership	100.000 .	Black	No	
							Tampa Behavioral Hospital,			Florida Health Sciences Center,		1	AGM; M. Rowan; J. Harris; L.		
			92-1331902				LLC	FL	NIA	Inc.	Ownership	60.000 .	Black	No	
							Tampa Behavioral Hospital,					1	AGM; M. Rowan; J. Harris; L.		
			92-1331902				LLC	FL	NIA	LPNT BH Development 3, LLC	Ownership	40.000 .	Black	No	
							Tampa Rehabilitation Hospital,			Florida Health Sciences Center,		1	AGM; M. Rowan; J. Harris; L.		
			84-4952844				LLC	FL	NIA	Inc.	Ownership	51.000 .	Black	No	
							Tampa Rehabilitation Hospital,						AGM; M. Rowan; J. Harris; L.		
			84-4952844				LLC.	FL	NIA	LPNT IRF Development 50, LLC.	Ownershin	49.000 .	Black	No	
			51 1752077				Teche Regional Physician			Province Healthcare Company,	C.moromp		AGM; M. Rowan; J. Harris; L.		
			47-4583254					DE			Ownership	100.000 .	BlackBlack	No	
			47-4363234				Practices, LLC	DE	NIA	LLC	ownership	100.000 .	DIaCK	INO	

				1	1										1
Group		NAIC Company		Federal		Name of Securities Exchange if Publicly Traded (U.S. or	Names of Parent, Subsidiaries	Domiciliary	Relationship to Reporting	Directly Controlled by (Name of	Type of Control (Ownership, Board, Management, Attorney-in-Fact,	If Control is Ownership Provide	Ultimate Controlling	Is an SCA Filing Required?	
Code	Group Name	Code	ID Number	RSSD	CIK	International)	Or Affiliates	Location	Entity	Entity/Person)	Influence, Other)	Percentage	Entity(ies) / Person(s)	(Yes/No)	*
	·					,	Texas & Oklahoma Preferred		,	,	,		AGM; M. Rowan; J. Harris; L.		
			75-2623970				Provider System	TX	NIA	Essent PRMC, L.P	Ownership	100.000	Black	No	
							Texas Rehabilitation Hospital of						AGM; M. Rowan; J. Harris; L.		
			37-1748838				Arlington, LLC	TX	NIA	CRH of Arlington, LLC	Ownership	51.000	Black	No	
							Texas Rehabilitation Hospital of			North Texas Health Facilities			AGM; M. Rowan; J. Harris; L.		
			37-1748838				Arlington, LLC	TX	NIA	Management, Inc	Ownership	19.000	Black	No	
							Texas Rehabilitation Hospital of						AGM; M. Rowan; J. Harris; L.		
			37-1748838				Arlington, LLC	TX	NIA	Texas Health Resources	Ownership	30.000	Black	No	
			27.0062222				Texas Rehabilitation Hospital of	TV	NIIA	CDU of Fort Worth 110	O	70.000	AGM; M. Rowan; J. Harris; L.	Na	
			27-0863232				Fort Worth, LLC Texas Rehabilitation Hospital of	TX		CRH of Fort Worth, LLC Texas Health Harris Methodist	Ownership	70.000	Black AGM; M. Rowan; J. Harris; L.	No	
			27-0863232				Fort Worth, LLC	TX		Fort Worth	Ownership	30.000	Black	No	
			27-0003232				The Rehabilitation Hospital of		NIA	T OIL WOITH	Ownership	30.000	AGM; M. Rowan; J. Harris; L.	INO	
			82-3939985				Montana, LLC	MT	NIA	LPNT Development 69, LLC	Ownership	33.300	Black	No	
							The Rehabilitation Hospital of				oo.		AGM: M. Rowan: J. Harris: L.		
			82-3939985				Montana, LLC	MT	NIA	Billings Clinic	Ownership	33.300	Black	No	
							The Rehabilitation Hospital of						AGM; M. Rowan; J. Harris; L.		
			82-3939985				Montana, LLC	MT	NIA	SCL Health Partners, LLC	Ownership	33.300	Black	No	
										LPNT Rehab Development 2,			AGM; M. Rowan; J. Harris; L.		
			62-1732653				TherEx, LLC	DE	NIA	LLC	Ownership	100.000 .	Black	No	
													AGM; M. Rowan; J. Harris; L.		
			62-1762591				THM Physician Practice, LLC	DE	NIA	LifePoint Holdings 2, LLC	Ownership	100.000	Black	No	
			00 0004 500					D.E.			0 1:	100.000	AGM; M. Rowan; J. Harris; L.		
			30-0921509				Triangle Springs, LLC	DE	NIA	Springstone Health Opco, LLC	Ownership	100.000	Black	No	
			82-5003908				Triangle Springs Physician Group, LLC	DE	NIA	Triangle Springs, LLC	Ownership	100.000	AGM; M. Rowan; J. Harris; L. Black	No	
			62-3003906				Triumph Rehabilitation Hospital	DE	NIA	Thangle Springs, LLC	Ownership	100.000	AGM; M. Rowan; J. Harris; L.	INO	
			45-2956602				of Northeast Houston, LLC	DE	NIA	LifePoint Rehab. LLC	Ownership	100.000	Black	No	
			40 2700002				Triumph Rehabilitation Hospital		14174	Lifer office Renad, LEO	O WITCH SITTE	100.000	AGM: M. Rowan: J. Harris: L.		
			27-4061273				of Northern Indiana, LLC	IN	NIA	LifePoint Rehab, LLC	Ownership	100.000	Black	No	
										,			AGM; M. Rowan; J. Harris; L.		
			27-2618876				Trousdale Medical Center, LLC	DE	NIA	HighPoint Healthcare, LLC	Ownership	100.000 .	Black	No	
							Trousdale Physician Practices,						AGM; M. Rowan; J. Harris; L.		
			45-3853454				LLC	DE		HighPoint Healthcare, LLC	Ownership	100.000	Black	No	
							Two Rivers Physician Practices,			Danville Regional Medical			AGM; M. Rowan; J. Harris; L.		
			36-4796940				LLC	DE	NIA	Center, LLC	Ownership	100.000	Black	No	
			07 0070445				U.P. Imaging Management					100.05-	AGM; M. Rowan; J. Harris; L.	l	
			27-2272410				Services, LLC	MI	NIA	DLP Marquette JV, LLC	Ownership	100.000	Black	No	
4724	Analla Clahal Marret Car	E261F	46 0007005				Upper Peninsula Health Plan,	N.A.I	1.4	Acquisition Ball Lagrital LLC	Ownersh:-	F 070	AGM; M. Rowan; J. Harris; L.	N/a	
4/34	Apollo Global Mgmt Grp	52615	46-0927995				LLCUpper Peninsula Health Plan,	MI	IA	Acquisition Bell Hospital, LLC	Ownership	5.370	Black	No	
4724	Apollo Global Mgmt Grp	52615	46-0927995				Upper Peninsula Health Plan, LLC	MI	IA	DLP Marguette Health Plan	Ownership	58.970	AGM; M. Rowan; J. Harris; L. Black	No	
4/34/	wholin glongi Militing th	32013	+∪-∪∋∠/∋∋∂				Upper Peninsula Health Plan,	IVII	ı	DEI Warquette Health Flath	Ownersulh	30.970	AGM; M. Rowan; J. Harris; L.		
4734	Apollo Global Mgmt Grp	52615	46-0927995				LLC	MI	IΑ	Portage JV, LLC	Ownership	10.500	Black	No	
	o						Upper Peninsula Managed				o. op		AGM; M. Rowan; J. Harris; L.	10	
			38-3323620				Care, LLC	MI	NIA	Acquisition Bell Hospital, LLC	Ownership	5.370	Black	No	

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
		NAIC				Name of Securities Exchange if Publicly Traded			Relationship		Type of Control (Ownership, Board, Management,	If Control is Ownership		Is an SCA Filing	
Group		Company		Federal		(U.S. or	Names of Parent, Subsidiaries	Domiciliary	to Reporting	Directly Controlled by (Name of			Ultimate Controlling	Required?	
Code	Group Name	Code	ID Number	RSSD	CIK	International)	Or Affiliates	Location	Entity	Entity/Person)	Influence, Other)	Percentage	Entity(ies) / Person(s)	(Yes/No)	*
			38-3323620				Upper Peninsula Managed Care, LLC	MI	NIA	DLP Marquette Health Plan	Ownership	58.970	AGM; M. Rowan; J. Harris; L. Black	No	
			38-3323620				Upper Peninsula Managed Care, LLC	IMI	NIA	Portage JV, LLC	Ownership		AGM; M. Rowan; J. Harris; L. Black	No	

				•		•				
Asteris	l l					Explanation				
Astens	N					Explanation				
	Upper Peninsula Managed Care, L	LC has a contractual r	relationship o	nly with the ins	urer.					

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
EXPL	ANATION:	
1.		
2.		

BARCODES:

2.

Quarterly Statement as of June 30, 2024 of the Upper Peninsula Health Plan, LLC

OVERFLOW PAGE FOR WRITE-INS

ASSETS

AGGETG				
	Curr	ent Statement	Date	4
	1	2	3	
				December 31
			Net Admitted	Prior Year Net
		Nonadmitted	Assets	Admitted
	Assets	Assets	(Cols. 1 - 2)	Assets
1197. Summary of remaining write-ins for Line 11 from overflow page				
2504. Other Receivables	65,829		65,829	36,786
2597. Summary of remaining write-ins for Line 25 from overflow page	65,829		65,829	36,786

SCHEDULE A - VERIFICATION

Real Estate

		1	2
		Year to Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Current year change in encumbrances		
4.	Total gain (loss) on disposals		
5.	Total gain (loss) on disposals Deduct amounts received on disposals Total foreign exchange change in book / adjusted carrying value		
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	120 913	243 842
9.	Book/adjusted carrying value at the end of current period (Lines 1+2+3+4-5+6-7-8).	9,992,966	
10.	Deduct total nonadmitted amounts		
11.	Statement value at end of current period (Line 9 minus Line 10)	9,992,966	

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). Total gain (loss) on disposals. Deduct amounts received on disposals.		
6.	Total gain (loss) on disposals.		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and mortgage interest points and communes leek		
9.	Total foreign exchange change in book value/recorded investment excluding accrued interest		
10.	Total foreign exchange change in book value/recorded investment excluding accrued interest 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

	other Long Term invested 7,650 to		
		1	2
		Year to Date	Prior Year Ended December 31
1.	Book/adjusted carrying value, December 31 of prior year		
2.	Cost of acquired:		
	2.1 Actual cost at time of acquisition		
	2.2 Additional investment made after acquisition		
3.	Capitalized deferred interest and other		
4.	Accrual of discount.		
5.	Unrealized valuation increase / (decrease)		
6.	Total gain (loss) on disposals		
7.	Deduct amounts received on disposals		
8.	Deduct amortization of premium and depreciation.		
9.	Total foreign exchange change in book / adjusted carrying value		
10.	Deduct current year's other-than-temporary impairment recognized		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5+6-7-8+9-10)		
12.	Deduct total nonadmitted amounts.		
13	Statement value at end of current period (Line 11 minus Line 12)		

SCHEDULE D - VERIFICATION

Bonds and Stocks

		1	2
		Year to Date	Prior Year Ended December 31
1.	Book/adjusted carrying value of bonds and stocks, December 31 of prior year		
2.	Cost of bonds and stocks acquired	9,872,100	11,970,587
3.	Accrual of discount		294,614
4.	Unrealized valuation increase / (decrease)		
5.	Total gain (loss) on disposals.		
6.	Deduct consideration for bonds and stocks disposed of	9,250,000	
7.	Deduct amortization of premium	5,475	62,895
8.	Total foreign exchange change in book / adjusted carrying value		
9.	Deduct current year's other-than-temporary impairment recognized		
10.	Total investment income recognized as a result of prepayment penalties and/or acceleration fees		
11.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9+10)		42,018,440
12.	Deduct total nonadmitted amounts		
13.	Statement value at end of current period (Line 11 minus Line 12)		

SI02

SCHEDULE D - PART 1B

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

	1	2	3	4	5	6	7	8
NAIC Designation	Book / Adjusted Carrying Value Beginning of Current Quarter	Acquisitions During Current Quarter	Dispositions During Current Quarter	Non-Trading Activity During Current Quarter	Book / Adjusted Carrying Value End of First Quarter	Book / Adjusted Carrying Value End of Second Quarter	Book / Adjusted Carrying Value End of Third Quarter	Book / Adjusted Carrying Value December 31 Prior Year
Bonds								
1. NAIC 1 (a)	41,345,695	5,888,280	5,000,000	120,146	41,345,695	42,354,121		37,770,726
2. NAIC 2 (a)	3,729,444		1,250,000	5,452	3,729,444	2,484,896		8,694,977
3. NAIC 3 (a)					–			
4. NAIC 4 (a)								
5. NAIC 5 (a)								
6. NAIC 6 (a)								
7. Total Bonds	45,075,139	5,888,280	6,250,000	125,598	45,075,139	44,839,017		46,465,703
Preferred Stock								
8. NAIC 1								
9. NAIC 2								
10. NAIC 3								
11. NAIC 4								
12. NAIC 5								
13. NAIC 6								
14. Total Preferred Stock								
15. Total Bonds & Preferred Stock	45,075,139	5,888,280	6,250,000	125,598	45,075,139	44,839,017		46.465.703

⁽a) Book/Adjusted Carrying Value column for the end of the current reporting period includes the following amount of short-term and cash equivalent bonds by NAIC designation: NAIC 1 \$ 1,957,869; NAIC 2 \$...; NAIC 3 \$...; NAIC 5 \$...; NAIC 6 \$...

SCHEDULE DA - PART 1

Short-Term Investments

	1	2	3	4	5
					Paid for Accrued
	Book / Adjusted			Interest Collected	Interest Year To
	Carrying Value	Par Value	Actual Cost	Year To Date	Date
770999999 Total	1,957,868	XXX	1.956.260		2.597

SCHEDULE DA - VERIFICATION

Short-Term Investments

		1	2
			Prior Year Ended December
		Year to Date	31
1.	Book/adjusted carrying value, December 31 of prior year	4,447,263	16,713,226
2.	Cost of short-term investments acquired		5,867,710
3.	Accrual of discount	54,345	321,327
4.	Unrealized valuation increase / (decrease)		
5.	Total gain (loss) on disposals		
6.	Deduct consideration received on disposals	4,500,000	18,455,000
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book / adjusted carrying value		
9.	Deduct current year's other-than-temporary impairment recognized.		
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)		
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)		4,447,263

(SI-04) Schedule DB - Part A - Verification - Options, Caps, Floors, Collars, Swaps and Forwards $\ensuremath{\textbf{NONE}}$

(SI-04) Schedule DB - Part B - Verification - Futures Contracts $\begin{tabular}{c} \textbf{NONE} \end{tabular}$

(SI-05) Schedule DB - Part C - Section 1 **NONE**

(SI-06) Schedule DB - Part C - Section 2 $\begin{tabular}{c} \textbf{NONE} \end{tabular}$

(SI-07) Schedule DB - Verification **NONE**

SCHEDULE E - PART 2 - VERIFICATION

(Cash Equivalents)

		1	2
			Prior Year Ended December
		Year to Date	31
1.	Book/adjusted carrying value, December 31 of prior year	1	2,938,869
2.	Cost of cash equivalents acquired	10,639,446	30,797,343
3.	Accrual of discount		42,120
4.	Unrealized valuation increase / (decrease)		
5.	Total gain (loss) on disposals. Deduct consideration received on disposals.		40,772
6.	Deduct consideration received on disposals.	10,385,561	33,819,103
7.	Deduct amortization of premium		
8.	Total foreign exchange change in book / adjusted carrying value		
9.	Deduct current year's other-than-temporary impairment recognized		
10.	Book/adjusted carrying value at end of current period (Lines 1+2+3+4+5-6-7+8-9)	253,886	1
11.	Deduct total nonadmitted amounts		
12.	Statement value at end of current period (Line 10 minus Line 11)		1

(E-01) Schedule A - Part 2

NONE

(E-01) Schedule A - Part 3

NONE

(E-02) Schedule B - Part 2

NONE

(E-02) Schedule B - Part 3

NONE

(E-03) Schedule BA - Part 2

NONE

(E-03) Schedule BA - Part 3

NONE

SCHEDULE D - PART 3
Show All Long-Term Bonds and Stock Acquired During the Current Quarter

1	2	3	4	5	6	7	8	9	10
									NAIC
									Designation,
									NAIC
									Designation
								Paid for Accrued	Modifier and SVO
CUSIP					Number of Shares			Interest and	Administrative
Identification	Description	Foreign	Date Acquired	Name of Vendor	of Stock	Actual Cost	Par Value	Dividends	Symbol
Bonds: Industrial a	and Miscellaneous (Unaffiliated)								
06051G-FX-2	BANK OF AMERICA CORP		04/16/2024	WELLS FARGO SECURITIES LLC	XXX	1,934,020	2,000,000	34,806	1.E FE
440452-AK-6	HORMEL FOODS CORP		06/17/2024	WELLS FARGO SECURITIES LLC	XXX	1,998,000	2,000,000	26,667	1.G FE
1109999999 - Bor	nds: Industrial and Miscellaneous (Unaffiliated)					3,932,020	4,000,000	61,473	XXX
2509999997 - Sub	ototals - Bonds - Part 3					3,932,020	4,000,000	61,473	XXX
2509999998 - Sur	mmary Item from Part 5 for Bonds (N/A to Quarterly)								
2509999999 - Sub	ototals - Bonds					3,932,020	4,000,000	61,473	XXX
6009999999 - Tot	als					3,932,020	XXX	61,473	XXX

Schedule D - PART 4
Show All Long-Term Bonds and Stock Sold, Redeemed or Otherwise Disposed of During the Current Quarter

1	3	2	4	E		7	0	0	10		Change in Boo	ak / Adjusted C	Pornsing Volus		16	17	10	19	20	21	22
'	2	3	4	5	0	/	8	9	10		Change in Boo				10	17	18	19	20	21	22
										11	12	13	14	15							NAIC
																					Designation,
																					NAIC
									Prior Year			Current Year's			Book /				Bond Interest /		Designation
									Book /	Unrealized		Other-Than-	T	Total Foreign	Adjusted	Foreign			Stock	Stated	Modifier and
CUSIP			Disposal		Number of Shares of				Adjusted Carrving	Valuation Increase /	Current Year's (Amortization)	Temporary Impairment	Total Change in B. / A.C.V.	Exchange Change in	Carrying Value at	Exchange Gain (Loss)	Realized Gain (Loss) on	Total Gain (Loss) on	Dividends Received	Contractual Maturity	SVO Administrative
Identification	Description F	oreign	Date	Name of Purchaser	Stock	Consideration	Par Value	Actual Cost	Value	(Decrease)	/ Accretion	Recognized	(11+12-13)		Disposal Date		Disposal	Disposal	During Year	Date	Symbol
Bonds: Industria	l and Miscellaneous (Unaffiliated)										l .		, , ,								
06051G-FF-1	BANK OF AMERICA CORP		04/01/2024	Maturity @ 100.00	XXX	2,000,000	2,000,000	2,022,000	2,003,183		(3,183)		(3,183)		2,000,000				40,000	04/01/2024	1.G FE
1109999999 - Bo	onds: Industrial and Miscellaneous (Un	affiliated	i)			2,000,000	2,000,000	2,022,000	2,003,183		(3,183)		(3,183)		2,000,000				40,000	XXX	XXX
Bonds: Unaffiliated Certificates of Deposit																					
02007G-QE-6	Ally Bank		04/29/2024	Maturity @ 100.00	XXX	250,000	250,000	250,000	250,000						250,000				3,214	04/29/2024	2.C FE
02589A-CB-6	American Express Bank, FSB		04/29/2024	Maturity @ 100.00	XXX	250,000	250,000	250,000	250,000						250,000				3,231	04/29/2024	1.D FE
14042R-QV-6	Capital One, National Association		04/29/2024	Maturity @ 100.00	XXX	250,000	250,000	250,000	250,000						250,000				3,231	04/29/2024	2.A FE
	Capital One Bank (USA), National																				1
14042T-FR-3	Associa			Maturity @ 100.00	XXX	250,000	250,000	250,000	250,000						250,000				3,231	04/29/2024	
27004P-CR-2	Eaglemark Savings Bank			Maturity @ 100.00	XXX	250,000	250,000	250,000	250,000						250,000				3,421	06/17/2024	
38150V-AH-2	Goldman Sachs Bank USA			Maturity @ 100.00	XXX	250,000	250,000	250,000	250,000						250,000				3,655	, 20, 202	
465076-TQ-0	Israel Discount Bank of New York			Maturity @ 100.00	XXX	250,000	250,000	250,000	250,000						250,000				3,572	05/28/2024	
61690U-H5-2	Morgan Stanley Bank, N.A			Maturity @ 100.00	XXX	250,000	250,000	250,000	250,000						250,000				3,572	,,	
90348J-3B-4	UBS Bank USA		.05/13/2024	Maturity @ 100.00	XXX	250,000	250,000	250,000	250,000						250,000				3,006	,,	
	naffiliated Certificates of Deposit					2,250,000	2,250,000	2,250,000	2,250,000	***************************************					2,250,000				30,133	XXX	XXX
	ubtotals - Bonds - Part 4					4,250,000	4,250,000	4,272,000	4,253,183		(3,183)		(3,183)		4,250,000				70,133	XXX	XXX
	ummary Item from Part 5 for Bonds (N	/A to Qu	arterly)																		
2509999999 - St						4,250,000	4,250,000	4,272,000	4,253,183		(3,183)		(3,183)		4,250,000				70,133	XXX	XXX
6009999999 - To	otals					4,250,000	XXX	4,272,000	4,253,183		(3,183)		(3,183)		4,250,000				70,133	XXX	XXX

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

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

NONE

(E-10) Schedule DB - Part E

NONE

(E-11) Schedule DL - Part 1

NONE

(E-12) Schedule DL - Part 2

NONE

SCHEDULE E - PART 1 - CASH Month End Depository Balances

1	2	3	4	5	Book Balance at	9		
			Amount of Interest	Amount of Interest Accrued	6	7	8	
Denesiten	0-4-	Rate of	Received During		Cinat Manth	Conner d Marath	Thind Manah	*
Depository	Code	Interest	Current Quarter	Statement Date	First Month	Second Month	Third Month	^
Wells Fargo Bank NA – 90 South 7th Street5th FL, Minneapolis, MN 55402					6,237,508	8,678,496	9,889,827	XXX
Nicolet Bank – 857 W. Washington Street, Marquette, MI 49855		3.000	39,676		5,377,118	5,390,636	5,402,896	XXX
WELLS FARGO BANK OF MICHIGAN – 1205 Ludington Street, Escanaba, MI 49829					(4,310,761)	(5,610,361)	(11,814,912)	XXX
Nicolet Bank – 857 W. Washington Street, Marquette, MI 49855						,		XXX
ALLSPRING:GOVT MM SEL – 711 High Street, Des Moines, Iowa 50392								XXX
Institutional Insured Liquid Deposit Demand Select – 90 South 7th Street 5th FL, Minneapolis, MN 55402								XXX
0199998 – Deposits in depositories that do not exceed			210,000		41,002,904	40,472,904	33,710,001	
any one depository (see Instructions) - Open Depositories.								XXX
0199999 – Total Open Depositories			314,554	11,384	55,071,278	60,136,184	43,439,540	XXX
0299998 – Deposits in depositories that do not exceed any one depository (see Instructions) - Suspended Deposi	the allowab	le limit in						xxx
0299999 – Total Suspended Depositories								XXX
0399999 – Total Cash on Deposit			55,071,278	60,136,184	43,439,540	XXX		
0499999 – Cash in Company's Office			XXX	XXX				XXX
0599999 – Total			314,554	11,384	55,071,278	60,136,184	43,439,540	XXX

SCHEDULE E - PART 2 - CASH EQUIVALENTS Show Investments Owned End of Current Quarter

1	2	3	4	5	6	7	8	9
CUSIP	Description	Code	Date Acquired	Rate of Interest	Maturity Date	Book / Adjusted Carrying Value	Amount of Interest Due and Accrued	Amount Received During Year
All Other Money Mark	et Mutual Funds							
825252-88-5	INVESCO GOV&AGENCY INST		06/18/2024	5.210	XXX	253,886	507	
8309999999 - All Othe	r Money Market Mutual Funds		253,886	507				
8609999999 - Total C	ash Equivalents					253,886	507	