



# Membership Application for Insurance Companies

**Contacts:**

James J. O'Toole  
First Vice President, Marketing  
513-852-7147

Kevin T. Hanrahan  
Assistant Vice President  
513-852-7697

**RETURN APPLICATION TO:**

Federal Home Loan Bank of Cincinnati  
Kevin T. Hanrahan, Assistant Vice President  
221 East Fourth Street, Suite 600 Cincinnati, OH 45202

**FEDERAL HOME LOAN BANK OF CINCINNATI  
INSTRUCTIONS**

1. Complete and send the following information to the Federal Home Loan Bank of Cincinnati (FHLB):
  - A) General Information sheets (pages 2-3)
  - B) Board of Directors resolution authorizing its application for FHLB membership, stock subscription, and General Counsel statement (pages 4-6)
2. Copy and send the following documents to the FHLB:
  - A) Six most recent quarters and the most recent three year-end insurance blanks;
  - B) Most recent exam report and copies of any relevant correspondence;
  - C) Most recent audited financial statements (of institution or holding company), as prepared by a Certified Public Accountant, or in absence thereof, the latest Directors' report by external auditors, or published financial statements by external auditors;
  - D) Company's home financing policy or mortgage loan underwriting guidelines, if applicable;
  - E) Provide a signed letter on your institution's letterhead with written justification of how and why your home finance policy and lending practices are consistent with the FHLBank System's housing finance mission.
  - F) Company's articles of incorporation AND bylaws;
  - G) Company's most recent rating report from private rating agency and any correspondence thereof;
  - H) List BCAR ratio;
  - I) IRIS ratios and guidelines, if outside normal range, please provide explanation.
  - J) Most recent Management Discussion and Analysis (MD&A) as filed.

## FEDERAL HOME LOAN BANK OF CINCINNATI GENERAL INFORMATION

**Name of Company:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone Number / Fax Number:** \_\_\_\_\_

**Primary contact person and email address:** \_\_\_\_\_

**1. For Managing Officer (CEO/President):**

Name \_\_\_\_\_

Title \_\_\_\_\_

Number of years of service \_\_\_\_\_

Email Address \_\_\_\_\_

Phone \_\_\_\_\_

**2. Date of incorporation:** \_\_\_\_\_

**3. Indicate mergers, consolidations or reorganizations within the last five years. (Attach separate sheet.)**

**4. Name, address and total consolidated asset size of immediate and top tier parent holding company as of last quarter end if applicable.**

**5. Name and address of other institutions of parent holding company.**

**6. Are you operating under a supervisory agreement?**

If yes, indicate type of agreement and send copy of any correspondence with primary regulator.

**7. Indicate type of residential mortgage loans originated or purchased by checking the appropriate box if applicable:**

<u>Original Maturity</u>	<u>Fixed Rate</u>	<u>Variable Rate</u>	<u>Amortization Period</u>
5-year balloon:	_____	_____	_____ years
7-year balloon:	_____	_____	_____ years
10-year balloon:	_____	_____	_____ years
15-year:	_____	_____	_____ years
30-year:	_____	_____	_____ years
Other: _____	_____	_____	_____ years

**8. Do you purchase and hold residential mortgage backed securities?**

**9. Have you discussed FHLB membership with your state regulator?**

**FEDERAL HOME LOAN BANK OF CINCINNATI  
GENERAL INFORMATION**

10. List names of all directors and senior management with titles.
11. Do you have an Asset/Liability Committee? If so, how often do they meet?
12. Do you utilize any computerized simulation models in determination of interest rate risk?
13. Have there been any material law suits filed against your institution since the last examination?
14. Indicate primary business line and confirm the underwriting of insurance is for persons or entities that are not affiliates.
15. Please provide the following:

Total Adjusted Capital :	Authorized Control Level Risk Based Capital:
_____	_____

16. List below net income for quarter end:

<u>Net Income</u>					
<u>2017</u>		<u>2018</u>		<u>2019</u>	
1st Quarter	_____	1st Quarter	_____	1st Quarter	_____
2nd Quarter	_____	2nd Quarter	_____	2nd Quarter	_____
3rd Quarter	_____	3rd Quarter	_____	3rd Quarter	_____
4th Quarter	_____	4th Quarter	_____	4th Quarter	_____
<b>Total</b>	_____	<b>Total</b>	_____	<b>Total</b>	_____

**FEDERAL HOME LOAN BANK OF CINCINNATI  
BOARD OF DIRECTORS RESOLUTION**

**APPLICANT'S NAME** \_\_\_\_\_

I certify that I am the duly elected, qualified, individual of the above mentioned applicant and that at a regular meeting of its board of directors/trustees or at a special meeting thereof called for that purpose, a quorum being present, a resolution was adopted, and recorded in the minutes as follows:

“BE IT RESOLVED that this institution applies for membership in the Federal Home Loan Bank of Cincinnati (FHLB), and that if approved for membership, it will subscribe and pay for stock therein as provided in the Federal Home Loan Bank Act, as amended (ACT), and if so approved for membership, that the institution be fully authorized to do business with the FHLB including but not limited to maintaining deposits, borrowing funds from and undertaking other financial accommodations with the FHLB, pledging of collateral and utilizing other correspondent banking services, and to exercise all the other privileges of membership in the FHLB, as provided in the Act;”

“BE IT FURTHER RESOLVED that the president and secretary of this institution, or any other officers designated herein or hereafter designated by supplemental resolutions, be authorized and directed to execute an application as prescribed by the Federal Housing Finance Agency (FHFA) and any other papers and documents required in connection therewith, to pay all expenses and to do all other things deemed by them as necessary or proper in connection with applying for, obtaining and retaining such membership privileges, or in order to do business with the FHLB as noted herein, as required by the FHFA or its regulations or as may be required by the FHLB.”

I certify that, pursuant to said resolution, the foregoing application for membership was duly executed and that any information and documents required by the Federal Housing Finance Agency are attached or accompany the same, that said information is correct and said documents are true and correct copies of what the same purport to be.

I further certify that our institution, directors and senior management have not been the subject of any criminal, civil or administrative proceedings against the designated officials or the institution reflecting on credit worthiness, business judgment or moral turpitude since our last examination by the institution's primary regulator; and that there are no known potential monetary liabilities, material pending lawsuits, or unsatisfied judgments against the institution, nor any enforcement actions by regulator.

I further certify that I have delegated authority to sign on behalf of the board of directors and that the applicant is authorized under the laws of the United States and of this State, and under its corporate charter, articles, constitution, regulations and/or bylaws, as applicable, and by the above-noted resolution, to apply for membership in and buy stock in the FHLB and to do business with the FHLB as noted in such resolution, as well as to retain such membership and pay all expenses incidental to such application; and that the foregoing has been properly authorized, legally done and validly executed to accomplish such purpose.

\_\_\_\_\_  
Signature/Title

**FEDERAL HOME LOAN BANK OF CINCINNATI**  
**Application for Membership and Subscription**  
**of Stock in Federal Home Loan Bank of Cincinnati**

**Applicant Name** \_\_\_\_\_

As of: \_\_\_\_\_  
(date of most recent financial report)

The Applicant hereby applies for membership in the Federal Home Loan Bank of Cincinnati and if approved for membership will purchase \_\_\_\_\_ shares of stock in the par value of \$100 each for a total amount of \$ \_\_\_\_\_. Furthermore it agrees to make said stock purchase within 60 calendar days of approval for FHLB membership.

Applicant is of the opinion that it is eligible to become a member of said FHLB and that it is authorized to subscribe to and hold capital stock in said FHLB and to maintain deposits there. Applicant understands that this application must be considered, acted upon, and approved by the Federal Housing Finance Agency before becoming a member of said FHLB.

In submitting this application the applicant understands and agrees that:

- (1) It will be advised whether or not its application for membership is approved.
- (2) If admitted to membership, it will conform to all requirements of the Federal Home Loan Bank Act, as now or hereafter amended, and to rules and regulations thereunder.
- (3) In applying, and if this institution is admitted to membership, the said FHFA and said FHLB are authorized to receive any information, exam reports and other supervisory materials provided by the appropriate State or Federal regulatory authority or officer exercising supervisory authority over this institution regarding this institution and its affairs.
- (4) It will not represent itself to be a member of said FHLB until it receives notice of admission to membership.

The undersigned is a duly authorized representative of the Applicant's board of directors and has read this application and that opinion of the undersigned, has made such examination and investigation as is necessary to enable him or her to express an informed opinion that this application complies, to the best of his or her knowledge and belief, and with the applicable requirements of the Federal Home Loan Bank Act and the rules and regulations thereunder.

\_\_\_\_\_  
(authorized agent)

\*Note: Please contact the FHLB for an estimate of the stock requirements. The exact amount will be determined by FHLB upon receipt of application.

**FEDERAL HOME LOAN BANK OF CINCINNATI**  
**Application for Insurance Company Membership**  
**General Counsel Statement**

**APPLICANT'S NAME** \_\_\_\_\_ (the "Insurance Company")

The undersigned is representing the Insurance Company in the matter of its becoming a member of the FHLB. The undersigned is giving the opinions expressed in this document at the FHLB's request in order to confirm eligibility of said Insurance Company to become a member of the FHLB. In rendering the opinions expressed herein, the undersigned has reviewed applicable law, made such inquiries as the undersigned has deemed relevant and necessary and examined the originals or copies of all documents that the undersigned has deemed necessary in rendering the following opinions:

- 1) Insurance Company is a duly organized, chartered and validly existing insurance company in good standing in the state in which it is domiciled and is duly authorized to do business in any other state in which it operates.
- 2) Insurance Company is subject to inspection and regulation by the Department of Insurance in the State of \_\_\_\_\_ (the "Insurance Department") and is subject to all rules or regulations promulgated thereby.
- 3) According to Insurance Company's most recent financial report filed with the Insurance Department, Insurance Company meets or exceeds the minimum capital requirements of the Insurance Department and the minimum capital requirements established by the National Association of Insurance Commissioners.
- 4) Insurance Company has the corporate power and authority to become a member of the FHLB, including but not limited to purchasing stock from, maintaining deposits with, borrowing funds from and undertaking other financial accommodations with, pledging of collateral to and utilizing other correspondent banking services offered by the FHLB.
- 5) By becoming a member of the FHLB, Insurance Company does not violate or cause any default under any of the terms, conditions or obligations of: (i) its Charter or Articles of Incorporation, its Code of Regulations or By-Laws, if any, or any other similar governance document, (ii) any indenture, mortgage, deed of trust, franchise, permit, contract, agreement or other instrument to which, to the knowledge of the undersigned, Insurance Company is a party or is otherwise bound, (iii) any law, regulation or ruling of the state of domicile applicable to or imposed upon Insurance Company, including but not limited to any restriction that the Insurance Department might impose on the amount of FHLB stock that Insurance Company may hold, and (iv) any order, injunction, decree, condition or other requirement known to the undersigned and applicable to or imposed upon Insurance Company by any governmental authority, court or agency, state, federal or local.
- 6) No approval, authorization or other action by, or filing with, any government body or regulatory authority or agency is required under the laws of the state of domicile in connection with Insurance Company becoming a member-stockholder of the FHLB.

These opinions expressed herein are limited to the laws of the state of domicile currently in effect. These opinions are issued solely for the benefit of FHLB in connection with Insurance Company applying to become a member thereof.

\_\_\_\_\_  
General Counsel