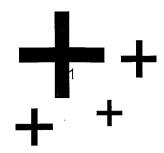
AUDITED FINANCIAL STATEMENTS FOR THE YEARS ENDED JUNE 30, 2011 AND 2010

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RICE SULLIVAN + company



INDEPENDENT AUDITOR'S REPORT

To the Board of Managers of Egyptian Area Schools Employee Benefit Trust Belleville, Illinois

We have audited the accompanying statements of net assets available for benefits of Egyptian Area Schools Employee Benefit Trust as of June 30, 2011 and 2010 and the related statements of changes in net assets available for benefits for the years then ended. These financial statements are the responsibility of the Plan's management. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Egyptian Area Schools Employee Benefit Trust as of June 30, 2011 and 2010, and the changes in its net assets available for benefits for the years then ended in conformity with accounting principles generally accepted in the United States of America.

Our audits were conducted for the purpose of forming an opinion on the basic financial statements taken as a whole. The supplemental schedules of funding progress, employer contributions and claims development information together referred as "supplemental information" are presented for the purpose of additional analysis and are not a required part of the basic financial statements. This supplemental information is the responsibility of the Plan's Management. The supplemental information has not been subjected to the auditing procedures applied in the audit of the basic financial statements, and, accordingly, we express no opinion on them.

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FINANCIAL STATEMENTS

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS JUNE 30, 2011 AND 2010

Total Investments 4,042,264 9,221,184 Receivables Membership contributions 209,738 207,240 Accrued interest income 23,070 74,478 Other receivables 1,409,827 1,231,860 Total Receivables 1,642,635 1,513,578 Cash Checking account -0- 1,271,342 Money Market account 121,765 406,752 Certificate of Deposits 250,000 352,768 Total Cash 371,765 2,030,862 Other Assets 77,499 -0- Prepaid insurance 5,550 5,641	<u>ASSETS</u>	2011	2010
U.S. Government securities and agencies \$ 4,042,264 \$ 9,045,442 Corporate bonds and debentures -0- 175,742 Total Investments 4,042,264 9,221,184 Receivables 3,042,264 9,221,184 Membership contributions 209,738 207,240 Accrued interest income 23,070 74,478 Other receivables 1,409,827 1,231,860 Total Receivables 1,642,635 1,513,578 Cash -0- 1,271,342 Money Market account 121,765 406,752 Certificate of Deposits 250,000 352,768 Total Cash 371,765 2,030,862 Other Assets 77,499 -0- Net OPEB Asset 77,499 -0- Prepaid insurance 5,550 5,641 Total Assets 6,139,713 12,771,265 Checking account deficit 2,299,776 -0- Deferred contribution revenue 2,943,112 2,920,154 Due to brokers -0- 175,752 Accrue	Investments - At Fair Value		
Corporate bonds and debentures -0- 175,742 Total Investments 4,042,264 9,221,184 Receivables 8 209,738 207,240 Membership contributions 209,738 23,070 74,478 23,070 74,478 Other receivables 1,409,827 1,231,860 1,231,860 Total Receivables 1,642,635 1,513,578 1,513,578 Cash Cash Checking account -0- 1,271,342 406,752 Money Market account 21,765 406,752 406,752 406,752 Certificate of Deposits 250,000 352,768 371,765 2,030,862 Other Assets 77,499 -0- -0- Net OPEB Asset 77,499 -0- -0- Prepaid insurance 5,550 5,641 Total Assets 6,139,713 12,771,265 LIABILITIES Checking account deficit 2,299,776 -0- Deferred contribution revenue 2,943,112 2,920,154 Due to brokers -0- 175,752 Accrued expenses 6,360 35,640		\$ 4,042,264	\$ 9,045,442
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Receivables Membership contributions 209,738 207,240 Accrued interest income 23,070 74,478 Other receivables 1,409,827 1,231,860 Total Receivables 1,642,635 1,513,578 Cash Checking account -0- 1,271,342 Money Market account 121,765 406,752 Certificate of Deposits 250,000 352,768 Total Cash 371,765 2,030,862 Other Assets 77,499 -0- Prepaid insurance 5,550 5,641 Total Assets 6,139,713 12,771,265 Checking account deficit 2,299,776 -0- Deferred contribution revenue 2,943,112 2,920,154 Due to brokers -0- 175,752 Accrued expenses 6,360 35,640			
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Membership contributions 209,738 207,240 Accrued interest income 23,070 74,478 Other receivables 1,409,827 1,231,860 Total Receivables 1,642,635 1,513,578 Cash Checking account -0- 1,271,342 Money Market account 121,765 406,752 Certificate of Deposits 250,000 352,768 Total Cash 371,765 2,030,862 Other Assets 77,499 -0- Prepaid insurance 5,550 5,641 Total Assets 6,139,713 12,771,265 LIABILITIES 2,299,776 -0- Checking account deficit 2,299,776 -0- Deferred contribution revenue 2,943,112 2,920,154 Due to brokers -0- 175,752 Accrued expenses 6,360 35,640	Receivables	•	
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Other receivables 1,409,827 1,231,860 Total Receivables 1,642,635 1,513,578 Cash Checking account -0- 1,271,342 Money Market account 121,765 406,752 Certificate of Deposits 250,000 352,768 Total Cash 371,765 2,030,862 Other Assets Net OPEB Asset 77,499 -0- Prepaid insurance 5,550 5,641 Total Assets 6,139,713 12,771,265 LIABILITIES Checking account deficit 2,299,776 -0- Deferred contribution revenue 2,943,112 2,920,154 Due to brokers -0- 175,752 Accrued expenses 6,360 35,640	·	23,070	74,478
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Checking account -0- 1,271,342 Money Market account 121,765 406,752 Certificate of Deposits 250,000 352,768 Total Cash 371,765 2,030,862 Other Assets Net OPEB Asset 77,499 -0- Prepaid insurance 5,550 5,641 Total Assets 6,139,713 12,771,265 LIABILITIES Checking account deficit 2,299,776 -0- Deferred contribution revenue 2,943,112 2,920,154 Due to brokers -0- 175,752 Accrued expenses 6,360 35,640	Total Receivables	1,642,635	1,513,578
Checking account -0- 1,271,342 Money Market account 121,765 406,752 Certificate of Deposits 250,000 352,768 Total Cash 371,765 2,030,862 Other Assets Net OPEB Asset 77,499 -0- Prepaid insurance 5,550 5,641 Total Assets 6,139,713 12,771,265 LIABILITIES Checking account deficit 2,299,776 -0- Deferred contribution revenue 2,943,112 2,920,154 Due to brokers -0- 175,752 Accrued expenses 6,360 35,640	Cash		
Money Market account 121,765 406,752 Certificate of Deposits 250,000 352,768 Total Cash 371,765 2,030,862 Other Assets Net OPEB Asset 77,499 -0- Prepaid insurance 5,550 5,641 Total Assets 6,139,713 12,771,265 LIABILITIES Checking account deficit 2,299,776 -0- Deferred contribution revenue 2,943,112 2,920,154 Due to brokers -0- 175,752 Accrued expenses 6,360 35,640		_n_	1 271 3/12
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Other Assets Net OPEB Asset 77,499 -0- Prepaid insurance 5,550 5,641 Total Assets 6,139,713 12,771,265 LIABILITIES Checking account deficit 2,299,776 -0- Deferred contribution revenue 2,943,112 2,920,154 Due to brokers -0- 175,752 Accrued expenses 6,360 35,640	Continuate of Bopoolie		002,.00
Net OPEB Asset 77,499 -0- Prepaid insurance 5,550 5,641 Total Assets 6,139,713 12,771,265 LIABILITIES Checking account deficit 2,299,776 -0- Deferred contribution revenue 2,943,112 2,920,154 Due to brokers -0- 175,752 Accrued expenses 6,360 35,640	Total Cash	371,765	2,030,862
Net OPEB Asset 77,499 -0- Prepaid insurance 5,550 5,641 Total Assets 6,139,713 12,771,265 LIABILITIES Checking account deficit 2,299,776 -0- Deferred contribution revenue 2,943,112 2,920,154 Due to brokers -0- 175,752 Accrued expenses 6,360 35,640	Other Assets		
Prepaid insurance 5,550 5,641 Total Assets 6,139,713 12,771,265 LIABILITIES Checking account deficit 2,299,776 -0- Deferred contribution revenue 2,943,112 2,920,154 Due to brokers -0- 175,752 Accrued expenses 6,360 35,640		77,499	-0-
Total Assets 6,139,713 12,771,265 LIABILITIES 2,299,776 -0- Checking account deficit 2,943,112 2,920,154 Due to brokers -0- 175,752 Accrued expenses 6,360 35,640	·	· ·	5,641
LIABILITIES Checking account deficit 2,299,776 -0- Deferred contribution revenue 2,943,112 2,920,154 Due to brokers -0- 175,752 Accrued expenses 6,360 35,640			
Checking account deficit 2,299,776 -0- Deferred contribution revenue 2,943,112 2,920,154 Due to brokers -0- 175,752 Accrued expenses 6,360 35,640	Total Assets	6,139,713	12,771,265
Checking account deficit 2,299,776 -0- Deferred contribution revenue 2,943,112 2,920,154 Due to brokers -0- 175,752 Accrued expenses 6,360 35,640	I IARII ITIES		
Deferred contribution revenue 2,943,112 2,920,154 Due to brokers -0- 175,752 Accrued expenses 6,360 35,640		2 200 776	0
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12,000,000 10,000,000 10,000,000	•		·
	Claime 1888178	12,000,000	,,
Total Liabilities 17,749,248 13,631,546	Total Liabilities	17,749,248	13,631,546
Net Assets Available for Benefits \$ (11,609,535) \$ (860,281	Net Assets Available for Benefits	\$ (11,609,535)	\$ (860,281)

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS YEARS ENDED JUNE 30, 2011 AND 2010

•		
	2011	2010
Additions to Net Assets Attributed to		
Contributions		
Membership contributions	\$ 94,636,870	\$ 85,220,613
	94,636,870	85,220,613
Investment Income		
Net appreciation in fair value of investments	(90,110)	20,234
Interest	183,833	528,174
	93,723	548,408
Miscellaneous		
Insurance proceeds	1,700,178	702,846
Total Additions	96,430,771	86,471,867
Deductions From Net Assets Attributed to	00 004 000	00 444 444
Claims paid by Trust (net of refunds)	96,601,829	88,441,441
Group insurance premiums	5,136,498	4,510,716
Change in claims reserve	2,000,000	1,000,000
Administrative fees	2,208,336 838,750	2,148,441 795,169
Healthlink expense	030,750	795,109
A lit food	25,279	33,093
Audit fees Actuarial fees	97,421	128,333
	106,052	70,535
Legal fees Other consulting fees	70,107	57,917
Bank trust fees	36,054	67,418
Dalik tidet ieee	00,004	07,110
Insurance	8,416	7,521
Chairman reimbursement - administration	4,770	3,855
Miscellaneous	20,355	40,056
Printing and postage	176	176
Bank charges	25,982	30,140
Bad debt expense	0-	561,235
Total Daduations	107,180,025	97,896,046
Total Deductions	107,100,025	91,090,040
Net Increase (Decrease) During Year	(10,749,254)	(11,424,179)
Net Assets Available for Benefits, Beginning of Year	(860,281)	10,563,898
Net Assets Available for Benefits, End of Year	\$ (11,609,535)	\$ (860,281)

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2011 AND 2010

Note 1. Description of Plan

The following description of the Egyptian Area Schools Employee Benefit Trust (the Plan) provides only general information. Participants should refer to the Plan and Trust documents for a complete description of the Plan's provisions.

General. The Plan was formed on January 1, 1984 as a result of an agreement to provide health and dental care, and death benefits for eligible employees and their dependents. The Plan is a cost-sharing multiple-employer defined benefit health care plan that offers medical benefits to participating school districts in the State of Illinois administered by the Board of Managers of the Plan. The Plan agreement establishing the Plan provides that contribution requirements are established and may be amended by the Board of Managers of the Plan. The Board of Managers of the Plan sets the contribution rates each year based on an actuarial valuation.

Benefits. Health costs incurred by participants and their dependents are partially covered by a stop-loss insurance policy detailed in Note 4 maintained by the Plan. Health costs and prescription benefits are self-funded. Life, accidental death and dismemberment, vision and dental coverages are provided through group insurance contracts for active participants. The vision and dental insurance are voluntary products, elected separately by each participating employee.

To become initially eligible for benefits, a participant must have been employed by a contributing employer and be a full-time employee working at least 20 hours a week or the minimum hours set by the participating employer, if less.

Health, claims of active and retired participants, dependents, and beneficiaries are processed by Meritain Health, but the responsibility for payments to participants and providers is retained by the Plan.

Continuation of health care benefits to persons who would otherwise lose those benefits due to certain events, as mandated by COBRA (Consolidated Omnibus Budget Reconciliation Act), was adopted by the Plan on July 1, 1986.

Termination Priorities. It is the intent of the Board of Managers to continue the Plan in full force and effect. However, in the unlikely event of termination and in order to safeguard against any unforeseen contingencies, the right to discontinue the plan is reserved to the Board of Managers. In the event of termination, the Board of Managers shall first satisfy or make provisions to satisfy the obligations of the Plan. Any remaining assets will be distributed in such a manner as will, in the opinion of the Board of Managers, bring about the purpose of the Plan. Termination shall not permit any part of the Plan to be used for or diverted to purposes other than the exclusive benefit of the participants.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2011 AND 2010

Note 1. Description of Plan (Continued)

Membership Contributions. Each of the 180 participating school districts contributes premiums based on the coverages requested by their employees. The contribution rates are adjusted annually on the 1st day of September of each plan year. As of June 30, 2011, participating Districts were contractually required to contribute at the following monthly rates for active and retired employees and dependents.

Districts may require their employees and/or retirees to pay some or all of the required contributions.

	Platinum Plan	Gold Plan	Silver Plan	Bronze Plan
Employee	\$536	\$484	\$418	\$356
Employee + spouse	\$1,106	\$998	\$866	\$732
Employee + child(ren)	\$1,068	\$963	\$835	\$719
Family	\$1,191	\$1,073	\$932	\$791

The only additional possible assessment to each district is a withdrawal liability that is charged to any member district leaving the Plan at a time when the Plan experiences a deficit fund balance. The number of active employees and retirees enrolled in the Plan at June 30, 2011 and 2010 was 11,212 and 11,245 with a total enrollment including dependents of 18,632 and 18,731, respectively. The enrolled participants at June 30, 2011 and 2010 include retirees receiving benefits totaling 224 and 190, respectively.

Note 2. Summary of Significant Accounting Policies

- a. The financial statements have been prepared using the accrual basis of accounting.
- b. The preparation of financial statements in conformity with U.S. generally accepted accounting principles requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.
- c. Membership contributions are due on the first day of each month. Membership contribution receivable represents unpaid contributions due to the trust. Deferred contribution revenue represents contributions paid before the due date.
- d. Stop-loss insurance receivable represents reimbursements due the trust for benefits paid on behalf of individual participants in excess of the annual limit.
- e. Investments are carried at fair value or contract value, which generally represents quoted market price as of the last business day of the year.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2011 AND 2010

Note 2. Summary of Significant Accounting Policies (Continued)

f. The liability for claims incurred but not reported and claims payable was estimated by the Plan's consulting actuaries based on claims and payment data in the files of the Plan.

Note 3. Tax Status

The Internal Revenue Service has advised that the Plan qualifies under Section 501(c)(9) of the Internal Revenue Code and accordingly net investment income is exempt from income tax. The trust has obtained a favorable tax determination letter from the Internal Revenue Service, and the Plan sponsor believes that the trust, as amended, continues to qualify and to operate in accordance with applicable provisions of the Internal Revenue Code.

Note 4. Stop-Loss Insurance

An agreement is in effect with QBE Insurance Corporation for excess loss reinsurance. Under that agreement the reimbursement was for benefits paid on behalf of an individual participant in excess of \$275,000 annually with a \$1,000,000 annual aggregate deductible, up to a maximum lifetime limit of \$4,725,000 per covered person.

Note 5. Fair Value Measurements

The Plan's Investments are reported at fair value in the accompanying statement of net assets available for benefits.

Fair Value Measurements Using:

	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)
June 30, 2011		
U.S Government securities and agencies Corporate bonds and	\$ 4,042,264	\$ 4,042,264
debentures	<u>-0-</u>	
Total	<u>\$ 4,042,264</u>	<u>\$ 4,042,264</u>

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2011 AND 2010

Note 5. Fair Value Measurements (Continued)

June 30, 2010

Total

U.S. Government \$9,045,442 \$9,045,442 Corporate bonds and debentures 175,742 175,742

\$ 9,221,184

The standards establish a Fair Value Measurement hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, and Level 3 inputs have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. The Plan has no Level 2 or Level 3 investments at June 30, 2011 and 2010.

9,221,184

Level 1 Fair Value Measurements

The fair value of the pooled separate accounts is based on quoted net asset values of shares held by the Plan at year-end. The fair values of common stock, corporate bonds, and U.S. Government securities are based on quoted market prices.

Level 2 Fair Value Measurements

The fair value of certain corporate bonds and debentures for which quoted market price are not available are valued based on yields currently available on comparable securities of issuers with similar credit ratings.

Level 3 Fair Value Measurements

Investment contracts with insurance companies and participant loans are not actively traded and significant other observable inputs are not available. Thus, the fair value of an investment contract is determined by discounting the related cash flows based on current yields of similar instruments with comparable durations, and the fair value of participant loans is equal to the amortized cost of the loans because the loans are secured by each respective participant's account balance.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2011 AND 2010

Note 6. Investments

The Plan's investments are held by a bank-administered trust fund. During fiscal year 2011 and 2010, the Plan's investments (including investments bought, sold and held during the year) appreciated (depreciated) in value by (\$90,110) and \$20,234, respectively, as follows:

		June 30), 2	2011		June 30	0, 2	010
	In	Net crease			In	Net crease		
	•	ecrease)		Fair	(De	ecrease)		Fair
12		air Value		Value at		air Value		Value at
	<u>Dur</u>	<u>ing Year</u>	<u>E</u>	<u>nd of Year</u>	Dui	<u>ing Year</u>	E	<u>nd of Year</u>
Fair Value as Determined b	У							
Quoted Market Price:								
U.S. Government securities and								
agencies Corporate bonds	\$	(90,110)	\$	4,042,264	\$	20,244	\$	9,045,442
and debentures		-0-		-0-		(10)		175,742
	<u>\$</u>	(90,110)	\$	4,042,264	\$	20,234	<u>\$</u>	9,221,184

The Trust has no investments that represent 5 percent or more of total Plan assets.

Note 7. Administrative Fees

Meritain Health earns a fee as Administrator of the Plan through an agreement with the Board of Managers of the Plan. The agreement provides that Meritain Health is responsible for billing member employers, processing claims and performing other administrative duties. Administrative fees for the years ended June 30, 2011 and 2010 were \$2,208,336 and \$2,148,441, respectively.

Note 8. Claims Reserve

Claims reserve is actuarially calculated and based on the historical paid claim development of the Plan. Claims payable and currently due for participants are not tracked separately. Claims that have been received but not processed are included in the claims reserve.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2011 AND 2010

Note 8. Claims Reserve (Continued)

The incurral date for a claim is defined to be the date of service of the claim. Paid claims are sorted by incurred date. Factors based on the Plan's claim development are applied to projected total incurred claims for each month. The liability is then the sum over all months of the excess of total estimated incurred claims for a month over the payments made. Since claim payments for the most recent month are not large enough to produce credible claim estimates using claim development factors, the incurred claim estimate for the most recent few months is based on alternative methods, such as trends or average claims per member per month.

Note 9. Risks and Uncertainties

The Plan's financial instruments that are exposed to concentrations of credit risk consist primarily of cash. The Plan places its cash with a high credit quality institution. At times such deposits may be in excess of the FDIC insurance limit.

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the statement of net assets available for benefits.

The actuarial present value of the claims reserve is reported based on certain assumptions pertaining to interest rates, health care inflation rates, and employee demographics, all of which are subject to change. Due to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in these estimates and assumptions in the near term would be material to the financial statements.

Note 10. Other Post Employment Benefits (OPEB)

The Egyptian Area Schools Employee Benefit Trust is a cost-sharing multiple-employer defined benefit health care plan which provides medical benefits for both active employees and retired employees. Retirees who elect to participate must pay 100% of the premium in effect for the current plan year or any subsequent year at the premium rates in effect at that time. Since the retirees pay the premium for each year, the employer share of any premium cost is determined on the basis of a blended rate or implicit rate subsidy calculation.

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2011 AND 2010

Note 10. Other Post Employment Benefits (OPEB) (Continued)

Funding Policy

The Plan currently pays for the implicit rate subsidy associated with these postemployment health care benefits on a pay-as-you-go basis. As of June 30, 2011, no separate trust fund has been established for the funding of the plan's post-employment benefit obligation, resulting in the classification of all of the liability as unfunded. Additional information is presented as required supplementary information, schedule of funding progress.

Annual OPEB Cost and Net OPEB Asset

The Plan's OPEB cost (expense) is calculated based on the annual required contribution of employer (ARC), an amount actuarially determined in accordance with the parameters of GASB Statement 45. The ARC represents a level of funding that, if paid on an ongoing basis, is projected to cover normal cost each year and amortize any unfunded actuarial liabilities (or funding excess) over a period not to exceed thirty years. The following table shows the components of the Plan's annual OPEB cost for the year, the amount actually contributed to the plan, and changes in the Plan's net OPEB obligation, as of June 30, 2011:

	FYE 2011
A. Net OPEB Asset (NOO)	
1. Annual Required Contribution	\$ 1,054,719
2. Interest on NOO	0
3. Adjustment to ARC	 . 0
4. Annual OPEB Cost	1,054,719
Estimated Employer Contributions	•
a. OPEB trust	N/A
b. Implicit subsidy benefits	1,132,218
c. Direct subsidy benefits	 0
d. Total	1,132,218
6. Increase (decrease) in NOO (45.d.)	(77,499)
7. Net OPEB Asset at fiscal year start	 0
8. Net OPEB Asset at fiscal year end	\$ (77,499)

B. Schedule of Employer Contributions

F	iscal Year Ending	Annual OPEB Cost	Estimated Employer Contribution	% of Annual OPEB Cost Contributed	. N	let OPEB Asset
	2011	\$` 1,054,719	\$ 1,132,218	107.3%	\$	(77,499)

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2011 AND 2010

Note 10. Other Post Employment Benefits (OPEB) (Continued)

Funded Status and Funding Progress

As of June 30, 2011, the most recent actuarial valuation date, the plan was not prefunded. For the year ended June 30, 2011, the actuarial accrued liability for benefits was \$11,037,699, and the actuarial value of assets was zero, resulting in an unfunded actuarial accrued liability (UAAL) of \$11,037,699.

Actuarial valuations of an ongoing plan involve estimates of the value of reported amounts and assumptions about the probability of occurrence of events far into the future. Examples include assumptions about future employment, mortality, and the healthcare cost trend. Amounts determined under the funded status of the plan and the annual required contributions of the employer are subject to continual revision as actual results are compared with past expectations and new estimates are made about the future. The schedule of funding progress is presented as required supplementary information following the notes to the financial statements. Multi-year trend information about whether the actuarial value of plan assets is increasing over time relative to the actuarial accrued liabilities for benefits will be presented in subsequent years.

Annual Methods and Assumptions

Projections of benefits for financial statement reporting purposes are based on the substantive plan (the plan understood by the employer and the plan members) and include the types of benefits provided at the time of each valuation and the historical pattern of sharing of benefits costs between the employer and the plan members to that point. The actuarial methods and assumptions used include techniques that are designed to reduce the effects of short-term volatility in actuarial accrued liabilities and the actuarial value of assets, consistent with the long-term perspective of the calculations.

In the June 30, 2011, actuarial valuation, the projected unit credit cost method was used. The actuarial assumptions included a 4.5% discount rate and a 4.5% investment rate of return and 3.0% inflation rate assuming the benefits are not prefunded. The healthcare trends used in the valuation are based on long term healthcare trends at an initial rate of 10.0 percent graded down 0.5 percent each year to an ultimate rate of 5.0 percent. The health mortality is based on the 1955 George B. Buck Mortality Table. The Plan's Unfunded Actuarial Accrued Liability (UAAL) at June 30, 2011 is being amortized as a level dollar amount over a 30 year period.

SUPPLEMENTARY INFORMATION SCHEDULE OF OPEB FUNDING PROGRESS (UNAUDITED) ACTUARIAL VALUATION DATE – JUNE 30, 2011

Actuarial Valuation Date (a)	Actuarial Value of Assets (b)	Actuarial Accrued Liability (b)	Unfunded Actuarial Accrued Liability (d)=(c)-(b)	Funded Ratio (e)=(b)/(c)	Estimated Covered Payroll (f)	UAAL as a % of Payroll (g)=(d)/(f)
6/30/2011	\$ 0	\$ 11,037,699	\$ 11,037,699	0.0%	N/A	N/A

SUPPLEMENTARY INFORMATION SCHEDULE OF EMPLOYER CONTRIBUTIONS (UNAUDITED) JUNE 30, 2011

Year Ended June 30 2011 Annual
Required Contribution
\$1,054,719

Percentage Contributed 100%

CLAIMS DEVELOPMENT INFORMATION FISCAL AND POLICY YEARS ENDED JUNE 30 (UNAUDITED) (IN THOUSANDS OF DOLLARS)

	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011
Required contribution and investment revenue: Earned Calculation	\$ 31,100	\$ 32,740	\$ 36,868	\$ 44,031	\$ 48,545 2,014	\$ 51,056 2,856	\$ 53,724 3,465	\$ 55,758 3,422	\$ 59,060 3,278	\$ 65,686 3,458	\$ 69,207 3,855	\$ 75,433 4,156	\$ 86,472 \$ 4,511	96,431 5,136
Oeded Net earned	29,881		34,801	42,002	46,531	48,200	50,259	52,336	55,782	62,228	65,352	71,277	81,961	91,295
2) Unallocated expenses	244	247	230	338	265	267	336	429	382	630	351	488	439	395
3) Estimated claims and expenses, end of policy year Incurred	32,104 288	33,914 447	40,342	46,801 243	47,782 835_	45,880 825	45,062 21	46,108	52,610 41	60,189	61,669	74,582	93,039	101,726
Net incurred	31,816	33,467	40,123	46,558	46,947	45,055	45,041	46,108	52,569	60,189	61,669	74,582	93,039	101,726
4) Paid (cumulative) as of: End of policy year One year later	25,866 32,413	24,563	31,905 38,576	34,048 47,016	35,114 42,283	39,041	38,073 43,405	39,157 45,427	44,124 50,607 50,567	50,378 56,545 56,501	52,863 60,954 60,998	64,088 75,721 75,810	77,429 86,110	87,483
Two years later Three years later	32,444 32,444		38,637	46,811	42,299	44,434	43,453	45,402	50,567	56,501	866'09	5		
5) Reestimated ceded claims and expenses	288	447	219	243	835	825	23	φ	4	ċ			¢	Ċ
6) Reestimated incurred claims: End of policy year One year later Two years later	31,816 32,413 32,444	33,467 33,324 33,373	40,123 38,576 38,637	46,558 47,016 46,813	46,947 42,283 42,300	45,055 44,336 44,434	45,041 43,405 43,454	46,108 45,427 45,402	52,569 50,607 50,567	60,189 56,545 56,501	61,669 60,954 60,998	74,582 75,721 75,810	93,039 86,110	101,726
Three years later	32,444		38,637	46,811	42,299	44,434	43,453	45,402	50,567	56,501	866'09			
7) Increase in estimated incurred claims	628	(94)	(1,486)	253	(4,648)	(621)	(1,588)	(706)	(2,002)	(3,688)	(671)	1,228	(6,929)	φ