



<b>3a</b> Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor  TENNESSEE BAR BENEFIT TRUST BOARD OF TRUSTEES 6505 LEE HWY CHATTANOOGA, TN 37421-2420	<b>3b</b> Administrator's EIN 84-6620557  <b>3c</b> Administrator's telephone number 800-347-1109
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<b>4</b> If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: <b>a</b> Sponsor's name <b>c</b> Plan Name	<b>4b</b> EIN  <b>4d</b> PN
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<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b>	291
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<b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ).		
<b>a(1)</b> Total number of active participants at the beginning of the plan year .....	<b>6a(1)</b>	291
<b>a(2)</b> Total number of active participants at the end of the plan year .....	<b>6a(2)</b>	272
<b>b</b> Retired or separated participants receiving benefits .....	<b>6b</b>	
<b>c</b> Other retired or separated participants entitled to future benefits .....	<b>6c</b>	
<b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> .....	<b>6d</b>	272
<b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits .....	<b>6e</b>	
<b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> .....	<b>6f</b>	272
<b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) .....	<b>6g(1)</b>	
<b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) .....	<b>6g(2)</b>	
<b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested .....	<b>6h</b>	

<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....	<b>7</b>	
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**8a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

**b** If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:  
 4A 4D 4E

<b>9a</b> Plan funding arrangement (check all that apply) (1) <input checked="" type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	<b>9b</b> Plan benefit arrangement (check all that apply) (1) <input checked="" type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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**10** Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

<b>a Pension Schedules</b> (1) <input type="checkbox"/> <b>R</b> (Retirement Plan Information) (2) <input type="checkbox"/> <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input type="checkbox"/> <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary (4) <input type="checkbox"/> <b>DCG</b> (Individual Plan Information) – Number Attached _____ (5) <input type="checkbox"/> <b>MEP</b> (Multiple-Employer Retirement Plan Information)	<b>b General Schedules</b> (1) <input type="checkbox"/> <b>H</b> (Financial Information) (2) <input type="checkbox"/> <b>I</b> (Financial Information – Small Plan) (3) <input checked="" type="checkbox"/> <b>A</b> (Insurance Information) – Number Attached <u>  1  </u> (4) <input type="checkbox"/> <b>C</b> (Service Provider Information) (5) <input type="checkbox"/> <b>D</b> (DFE/Participating Plan Information) (6) <input type="checkbox"/> <b>G</b> (Financial Transaction Schedules)
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**Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)**

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**11a** If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) .....  Yes  No

If "Yes" is checked, complete lines 11b and 11c.

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**11b** Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) .....  Yes  No

**11c** Enter the Receipt Confirmation Code for the 2023 Form M-1 annual report. If the plan was not required to file the 2023 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code 151037337

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**SCHEDULE A  
(Form 5500)**

Department of the Treasury  
Internal Revenue Service

Department of Labor  
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

**Insurance Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

**2023**

**This Form is Open to Public Inspection**

For calendar plan year 2023 or fiscal plan year beginning **01/01/2023** and ending **12/31/2023**

<b>A</b> Name of plan <b>TENNESSEE BAR BENEFIT TRUST</b>		<b>B</b> Three-digit plan number (PN) ▶ <b>501</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>TENNESSEE BAR ASSOCIATION</b>		<b>D</b> Employer Identification Number (EIN) <b>62-0514943</b>

**Part I Information Concerning Insurance Contract Coverage, Fees, and Commissions** Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.

**1 Coverage Information:**

**(a)** Name of insurance carrier

**BLUECROSS BLUESHIELD OF TENNESSEE, INC.**

<b>(b)</b> EIN	<b>(c)</b> NAIC code	<b>(d)</b> Contract or identification number	<b>(e)</b> Approximate number of persons covered at end of policy or contract year	<b>Policy or contract year</b>	
				<b>(f)</b> From	<b>(g)</b> To
<b>62-0427913</b>	<b>54518</b>	<b>145235</b>	<b>272</b>	<b>01/01/2023</b>	<b>12/31/2023</b>

**2 Insurance fee and commission information.** Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

<b>(a)</b> Total amount of commissions paid <b>156167</b>	<b>(b)</b> Total amount of fees paid
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**3 Persons receiving commissions and fees.** (Complete as many entries as needed to report all persons).

**(a)** Name and address of the agent, broker, or other person to whom commissions or fees were paid

**PETER MORRIS** **1631 15TH AVE W  
SEATTLE, WA 98119**

<b>(b)</b> Amount of sales and base commissions paid	<b>Fees and other commissions paid</b>		<b>(e)</b> Organization code
	<b>(c)</b> Amount	<b>(d)</b> Purpose	
	<b>52888</b>	<b>ACQ/RET</b>	<b>3</b>

**(a)** Name and address of the agent, broker, or other person to whom commissions or fees were paid

**SAMUEL ORRISON** **6505 LEE HWY  
CHATTANOOGA, TN 37421**

<b>(b)</b> Amount of sales and base commissions paid	<b>Fees and other commissions paid</b>		<b>(e)</b> Organization code
	<b>(c)</b> Amount	<b>(d)</b> Purpose	
	<b>103280</b>	<b>ACQ/RET</b>	<b>3</b>

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

**Part II Investment and Annuity Contract Information**  
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

<b>4</b> Current value of plan's interest under this contract in the general account at year end .....	<b>4</b>	
<b>5</b> Current value of plan's interest under this contract in separate accounts at year end.....	<b>5</b>	

**6** Contracts With Allocated Funds:

**a** State the basis of premium rates ▶

**b** Premiums paid to carrier ..... **6b**

**c** Premiums due but unpaid at the end of the year..... **6c**

**d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. .... **6d**  
 Specify nature of costs ▶

**e** Type of contract: (1)  individual policies (2)  group deferred annuity  
 (3)  other (specify) ▶

**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶

**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

**a** Type of contract: (1)  deposit administration (2)  immediate participation guarantee  
 (3)  guaranteed investment (4)  other ▶

**b** Balance at the end of the previous year ..... **7b**

**c** Additions: (1) Contributions deposited during the year ..... **7c(1)**  
 (2) Dividends and credits ..... **7c(2)**  
 (3) Interest credited during the year ..... **7c(3)**  
 (4) Transferred from separate account..... **7c(4)**  
 (5) Other (specify below) ..... **7c(5)**  
 ▶

(6) Total additions ..... **7c(6)**

**d** Total of balance and additions (add lines **7b** and **7c(6)**) ..... **7d**

**e** Deductions:  
 (1) Disbursed from fund to pay benefits or purchase annuities during year ..... **7e(1)**  
 (2) Administration charge made by carrier ..... **7e(2)**  
 (3) Transferred to separate account..... **7e(3)**  
 (4) Other (specify below) ..... **7e(4)**  
 ▶

(5) Total deductions ..... **7e(5)**

**f** Balance at the end of the current year (subtract line **7e(5)** from line **7d**) ..... **7f**

**Part III Welfare Benefit Contract Information**  
 If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

**8** Benefit and contract type (check all applicable boxes)

- a**  Health (other than dental or vision)      **b**  Dental      **c**  Vision      **d**  Life insurance  
**e**  Temporary disability (accident and sickness)      **f**  Long-term disability      **g**  Supplemental unemployment      **h**  Prescription drug  
**i**  Stop loss (large deductible)      **j**  HMO contract      **k**  PPO contract      **l**  Indemnity contract  
**m**  Other (specify) ▶

**9** Experience-rated contracts:

<b>a</b> Premiums: (1) Amount received .....	<b>9a(1)</b>	2682210	
(2) Increase (decrease) in amount due but unpaid.....	<b>9a(2)</b>		
(3) Increase (decrease) in unearned premium reserve .....	<b>9a(3)</b>		
(4) Earned ((1) + (2) - (3)).....	<b>9a(4)</b>		2682210
<b>b</b> Benefit charges (1) Claims paid.....	<b>9b(1)</b>	3592714	
(2) Increase (decrease) in claim reserves .....	<b>9b(2)</b>	411380	
(3) Incurred claims (add (1) and (2)).....	<b>9b(3)</b>		4004094
(4) Claims charged .....	<b>9b(4)</b>		
<b>c</b> Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions .....	<b>9c(1)(A)</b>	153968	
(B) Administrative service or other fees .....	<b>9c(1)(B)</b>		
(C) Other specific acquisition costs .....	<b>9c(1)(C)</b>		
(D) Other expenses .....	<b>9c(1)(D)</b>		
(E) Taxes .....	<b>9c(1)(E)</b>	47393	
(F) Charges for risks or other contingencies.....	<b>9c(1)(F)</b>	303307	
(G) Other retention charges .....	<b>9c(1)(G)</b>	504668	
(H) Total retention .....	<b>9c(1)(H)</b>		1009336
(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.) .....	<b>9c(2)</b>		
<b>d</b> Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement .....	<b>9d(1)</b>		411985
(2) Claim reserves .....	<b>9d(2)</b>		
(3) Other reserves.....	<b>9d(3)</b>		
<b>e</b> Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).) .....	<b>9e</b>		

**10** Nonexperience-rated contracts:

<b>a</b> Total premiums or subscription charges paid to carrier .....	<b>10a</b>	25985
<b>b</b> If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount .....	<b>10b</b>	

Specify nature of costs.

**Part IV Provision of Information**

**11** Did the insurance company fail to provide any information necessary to complete Schedule A?.....  Yes  No

**12** If the answer to line 11 is "Yes," specify the information not provided. ▶

tran_period	employer_id	employer	tran_period_reference
202312	8688	Andrew Hoover & Attorneys PC	12/1/2023
202312	7470	Arivett Law PLLC	12/1/2023
202312	7364	Attorney Daniel Seward	12/1/2023
202312	8938	Baker & Whitt	12/1/2023
202312	7486	Bratton & O'Neal, P.C.	12/1/2023
202312	8451	Burnette, Dobson & Pinchak	12/1/2023
202312	8481	Burrow Lee, PLLC	12/1/2023
202312	8050	Butler Sevier Hinsley & Reid, PLLC	12/1/2023
202312	8461	Butler, Vines and Babb, PLLC	12/1/2023
202312	8456	Byars Law Office, PLLC	12/1/2023
202312	7027	Callahan & Binkley, PLC	12/1/2023
202312	8499	Campbell & Campbell	12/1/2023
202312	8711	Cobb Law Group	12/1/2023
202312	7647	Colburn law office	12/1/2023
202312	6385	Cumberland Legacy Law	12/1/2023
202312	7282	Davis Law Firm, PLLC	12/1/2023
202312	8713	Dawn Pray, Esq. PLLC	12/1/2023
202312	6606	Dean Greer & Associates, PC	12/1/2023
202312	6808	Easter & DeVore	12/1/2023
202312	6586	Eckel and Associates, PLLC	12/1/2023
202312	7003	Eldridge & Blakney, PC	12/1/2023
202312	8875	Ensley Baker Shade, PLLC	12/1/2023
202312	7370	Fagan Law	12/1/2023
202312	6921	Freeman & Bracey, PLC	12/1/2023
202312	6697	Freeman and Fuson	12/1/2023
202312	8675	Gearin Law Firm, PLLC	12/1/2023
202312	8090	Gilbert Law, PLLC	12/1/2023
202312	8784	Gold Law Firm	12/1/2023
202312	8718	Gordon Law Group	12/1/2023
202312	6889	Griffin Law Group, PLLC	12/1/2023
202312	6870	Guaranty Title and Escrow Co.	12/1/2023
202312	8926	Gulley Law Firm	12/1/2023
202312	8843	Hagar & Phillips, Attorneys at Law	12/1/2023
202312	6740	Hagood Moody Hodge PLC	12/1/2023
202312	8463	Harrington Law	12/1/2023
202312	7467	Hawkins Hogan PLC	12/1/2023
202312	6410	Ivey Title, LLC	12/1/2023
202312	8830	J. Michael Gauldin	12/1/2023
202312	7263	Jeff Grimes & Associates, PLLC	12/1/2023
202312	8434	Jelks Law, PLLC	12/1/2023
202312	8678	Jim R. Vanderpool PC	12/1/2023
202312	7958	JOE WEYANT, ATTORNEY AT LAW	12/1/2023
202312	8503	Jonathan Turner, Attorney	12/1/2023
202312	6867	Jones, Green & Tackett Law, PLLC	12/1/2023
202312	7750	Kaufman Monroe Law	12/1/2023
202312	8750	Keeton Law Office	12/1/2023

202312	7042 Kizer & Black, Attorneys, PLLC	12/1/2023
202312	6638 Lacy, Price & Wagner, P.C.	12/1/2023
202312	8059 Law Office of Anna B. Cash	12/1/2023
202312	6634 Law Office of Joshua B. Shearon	12/1/2023
202312	7703 Law Office of Samuel F Hudson P	12/1/2023
202312	6709 Law Office of Sandy Phillips	12/1/2023
202312	6396 Law Office of Scott D. Hall	12/1/2023
202312	8703 Law Office of T. Verner Smith	12/1/2023
202312	8798 Law Offices of Jeffrey A. Garrety	12/1/2023
202312	8933 Lindsey Amonette + Glassford, Pl	12/1/2023
202312	8454 Manier & Herod	12/1/2023
202312	6404 Marcum & Petroff	12/1/2023
202312	7758 Massengill, Caldwell & Coughlin,	12/1/2023
202312	8764 Matt Hardin Law, PLLC	12/1/2023
202312	8491 McCarter & Beauchamp	12/1/2023
202312	8834 Morris Family Law, PLLC	12/1/2023
202312	6960 Nash Law PLLC	12/1/2023
202312	8749 Niner Garcia PLLC	12/1/2023
202312	8466 Parke Morris, PLLC	12/1/2023
202312	8837 Patti B. Garner DBA Garner Law I	12/1/2023
202312	7070 Philip R Crye, Jr., Attorney	12/1/2023
202312	6857 Ramsey Hill, LLC	12/1/2023
202312	8755 Robert B. Vandiver, Jr., Attorney	12/1/2023
202312	6391 Robert Tribble, Attorney @ Law	12/1/2023
202312	8427 Ryan C. Davis Law PLLC	12/1/2023
202312	6929 Sellers & Sellers, PLLC	12/1/2023
202312	6600 SHANKS AND BLACKSTOCK	12/1/2023
202312	7280 Shults & Shults Law Office	12/1/2023
202312	8862 Stapleton Law Office	12/1/2023
202312	7639 Steiner & Steiner, LLC	12/1/2023
202312	8721 Stengel Law Firm	12/1/2023
202312	8038 Surber, Asher, Surber & Mousho	12/1/2023
202312	8180 T L Wood Law Office PA	12/1/2023
202312	8173 Takacs McGinnis Elder Care Law	12/1/2023
202312	8074 Tarpy, Cox, Fleishman & Leveille,	12/1/2023
202312	8795 Tate, Wilson, Johnson, Meyer & I	12/1/2023
202312	7084 Taylor & Knight, GP	12/1/2023
202312	8041 Tennessee Bar Association	12/1/2023
202312	8469 Tennessee Center for Estate & El	12/1/2023
202312	7558 The Green Law Firm, PLLC	12/1/2023
202312	7689 The Isaacs Law Firm	12/1/2023
202312	8920 The Kelly Firm	12/1/2023
202312	8684 The Law Firm, PLLC	12/1/2023
202312	6531 The Law Office of Brian L. Hill	12/1/2023
202312	6922 The Law Offices of Ricky E. Wilkir	12/1/2023
202312	6999 The Pensoneau Firm, PC	12/1/2023
202312	6685 The Scholl Law Firm	12/1/2023

202312	8907 The Toll Firm	12/1/2023
202312	6947 Tiffany Johns Law	12/1/2023
202312	6747 Waldron Fann Parsley	12/1/2023
202312	6822 Wiseman Ashworth Trauger	12/1/2023
202312	8444 Worrick Robinson Law, PLLC	12/1/2023
202312	8474 Zettersten and Hammond, PLLC	12/1/2023
202312	7355 Zipper Law, PLLC	12/1/2023