



ANNUAL STATEMENT

For the Year Ended December 31, 2002
of the Condition and Affairs of the

PROTECTIVE LIFE INSURANCE COMPANY OF OHIO

NAIC Group Code..... 0458, 0458 (Current Period) (Prior Period) NAIC Company Code..... 60234 Employer's ID Number..... 63-1191165

Organized under the Laws of OHIO State of Domicile or Port of Entry OHIO
Country of Domicile US
Incorporated..... October 24, 1997 Commenced Business..... January 22, 1998

Statutory Home Office 7 WEST 7TH STREET, SUITE 1670 CINCINNATI OH 45202
(Street and Number) (City or Town, State and Zip Code)
Main Administrative Office 2801 HIGHWAY 280 SOUTH BIRMINGHAM AL 35223 205-879-9230
(Street and Number) (City or Town, State and Zip Code) (Area Code) (Telephone Number)
Mail Address P O BOX 2606 BIRMINGHAM AL 35202
(Street and Number or P. O. Box) (City or Town, State and Zip Code)
Primary Location of Books and Records 2801 HIGHWAY 280 SOUTH BIRMINGHAM AL 35223 205-879-9230
(Street and Number) (City or Town, State and Zip Code) (Area Code) (Telephone Number)
Internet Website Address www.protective.com
Statement Contact Laura Phillips Stiles 205-803-1347
(Name) (Area Code) (Telephone Number) (Extension)
Laura.Stiles@protective.com 205-868-3086
(E-Mail Address) (Fax Number)
Policyowner Relations Contact 2801 HIGHWAY 280 SOUTH BIRMINGHAM AL 35223 800-477-8858
(Street and Number) (City or Town, State and Zip Code) (Area Code) (Telephone Number) (Extension)

OFFICERS

President Vacant Treasurer William Lloyd McMullen, Jr.
Secretary William Lloyd McMullen, Jr. Actuary Thomas Michael Presley

VICE PRESIDENTS

Richard Joseph Bielen William Lloyd McMullen, Jr. Thomas Michael Presley Charles Michael Prior
Jerry Walton DeFoor Leon Michael Schmitt Carl Sitter Thigpen

DIRECTORS OR TRUSTEES

John Brian Deremo John Robert Sawyer Lawrence Gilbert Merrill William Lloyd McMullen, Jr.

State of..... Alabama
County of..... Jefferson

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively.

_____ (Signature) Vacant _____ (Printed Name) President	_____ (Signature) William Lloyd McMullen, Jr. _____ (Printed Name) Secretary	_____ (Signature) William Lloyd McMullen, Jr. _____ (Printed Name) Treasurer
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Subscribed and sworn to before me this
.....day of, 2003
.....

- a. Is this an original filing? Yes [X] No []
b. If no: 1. State the amendment number
2. Date filed.....
3. Number of pages attached.....

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds.....	123,039		123,039	2,615,112
2. Stocks:				
2.1 Preferred stocks (Schedule D, Part 2, Section 1).....			0	
2.2 Common stocks (Schedule D, Part 2, Section 2).....			0	
3. Mortgage loans on real estate (Schedule B, Part 1):				
3.1 First liens.....			0	
3.2 Other than first liens.....			0	
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....			0	
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Policy loans.....			0	
6. Premium notes, including \$.....0 for first year premiums.....			0	
7. Cash (\$.....2,925,271, Schedule E, Part 1) and short-term investments (\$.....0, Schedule DA, Part 2).....	2,925,271		2,925,271	2,103,750
8. Other invested assets (Schedule BA, Part 1).....			0	
9. Receivable for securities.....			0	
10. Aggregate write-ins for invested assets.....	0	0	0	0
11. Subtotals, cash and invested assets (Lines 1 to 10).....	3,048,310	0	3,048,310	4,718,862
12. Reinsurance ceded:				
12.1 Amounts recoverable from reinsurers (Schedule S, Part 2).....			0	
12.2 Commissions and expense allowances due.....	6,307		6,307	
12.3 Experience rating and other refunds due.....			0	
12.4 Other amounts receivable under reinsurance contracts.....			0	
13. Electronic data processing equipment and software.....			0	
14. Federal and foreign income tax recoverable and interest thereon (including \$.....1,204 net deferred tax asset).....	8,660	7,456	1,204	3,453
15. Guaranty funds receivable or on deposit.....			0	
16. Life insurance premiums and annuity considerations deferred and uncollected on in force business (less premiums on reinsurance ceded and less \$.....0 loading).....			0	
17. Accident and health premiums due and unpaid.....			0	
18. Investment income due and accrued.....	2,549		2,549	55,230
19. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
20. Receivable from parent, subsidiaries and affiliates.....	607,500		607,500	
21. Amounts receivable relating to uninsured accident and health plans.....			0	
22. Amounts due from agents.....	177,900	177,900	0	
23. Other assets nonadmitted (Exhibit 9).....			0	
24. Aggregate write-ins for other than invested assets.....	0	0	0	0
25. Total assets excluding Separate Accounts business (Lines 11 to 24).....	3,851,226	185,356	3,665,870	4,777,545
26. From Separate Accounts Statement.....			0	
27. Total (Lines 25 and 26).....	3,851,226	185,356	3,665,870	4,777,545

DETAILS OF WRITE-INS

1001.			0	
1002.			0	
1003.			0	
1098. Summary of remaining write-ins for Line 10 from overflow page.....	0	0	0	0
1099. Totals (Lines 1001 thru 1003 plus 1098) (Line 10 above).....	0	0	0	0
2401.			0	
2402.			0	
2403.			0	
2498. Summary of remaining write-ins for Line 24 from overflow page.....	0	0	0	0
2499. Totals (Lines 2401 thru 2403 plus 2498) (Line 24 above).....	0	0	0	0

PROTECTIVE LIFE INSURANCE COMPANY OF OHIO

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$.....114,086 (Exhibit 5, Line 9999999) less \$.....0 included in Line 6.3 (including \$.....0 Modco Reserve).....	114,086	150,451
2. Aggregate reserve for accident and health contracts (Exhibit 6, Line 17, Col. 1) (including \$.....0 Modco Reserve).....		
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$.....0 Modco Reserve).....		
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11).....	371	15,863
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11).....		
5. Policyholders' dividends \$.....0 and coupons \$.....0 due and unpaid (Exhibit 4, Line 10).....		
6. Provision for policyholders' dividends and coupons payable in following calendar year--estimated amounts:		
6.1 Dividends apportioned for payment to (including \$.....0 Modco Reserve).....		
6.2 Dividends not yet apportioned (including \$.....0 Modco Reserve).....		
6.3 Coupons and similar benefits (including \$.....0 Modco Reserve).....		
7. Amount provisionally held for deferred dividend policies not included in Line 6.....		
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$.....0 discount; including \$.....0 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of Lines 4 and 14).....		
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts.....		
9.2 Provision for experience rating refunds, including \$.....0 accident and health experience rating refunds.....		
9.3 Other amounts payable on reinsurance including \$.....0 assumed and \$.....0 ceded.....		
9.4 Interest Maintenance Reserve (Page 33, Line 6).....		
10. Commissions to agents due or accrued-life and annuity contracts \$.....0, accident and health \$.....0 and deposit-type contract funds \$.....0.....		
11. Commissions and expense allowances payable on reinsurance assumed.....		
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 5).....		
13. Transfers to Separate Accounts due or accrued (net) (including \$.....0 accrued for expense allowances recognized in reserves).....		
14. Taxes, licenses and fees due or accrued, excluding federal income taxes (Exhibit 3, Line 9, Col. 5).....	80,947	
15. Federal and foreign income taxes, including \$.....0 on realized capital gains (losses) (including \$.....0 net deferred tax liability).....	36,445	12,797
16. Unearned investment income.....		
17. Amounts withheld or retained by company as agent or trustee.....	9,602	9,602
18. Amounts held for agents' account, including \$.....27,052 agents' credit balances.....	27,052	12,370
19. Remittances and items not allocated.....	27,285	945,537
20. Net adjustment in assets and liabilities due to foreign exchange rates.....		
21. Liability for benefits for employees and agents if not included above.....		
22. Borrowed money \$.....0 and interest thereon \$.....0.....		
23. Dividends to stockholders declared and unpaid.....		
24. Miscellaneous liabilities:		
24.1 Asset valuation reserve (Page 34, Line 16, Col. 7).....		
24.2 Reinsurance in unauthorized companies.....		
24.3 Funds held under reinsurance treaties with unauthorized reinsurers.....		
24.4 Payable to parent, subsidiaries and affiliates.....		410,953
24.5 Drafts outstanding.....		
24.6 Liability for amounts held under uninsured accident and health plans.....		
24.7 Funds held under coinsurance.....		
24.8 Payable for securities.....		
24.9 Capital notes \$.....0 and interest thereon \$.....0.....		
25. Aggregate write-ins for liabilities.....	0	0
26. Total liabilities excluding Separate Accounts business (Lines 1 to 25).....	295,788	1,557,573
27. From Separate Accounts Statement.....		
28. Total liabilities (Lines 26 and 27).....	295,788	1,557,573
29. Common capital stock.....	850	850
30. Preferred capital stock.....		
31. Aggregate write-ins for other than special surplus funds.....	0	0
32. Surplus notes.....		
33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1).....	2,799,150	2,799,150
34. Aggregate write-ins for special surplus funds.....	0	0
35. Unassigned funds (surplus).....	570,082	419,971
36. Less treasury stock, at cost:		
36.1 .....0.000 shares common (value included in Line 29 \$.....0).....		
36.2 .....0.000 shares preferred (value included in Line 30 \$.....0).....		
37. Surplus (Total Lines 31 + 32 + 33 + 34 + 35 - 36) (including \$.....0 in Separate Accounts Statement).....	3,369,232	3,219,121
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55).....	3,370,082	3,219,971
39. Totals of Lines 28 and 38 (Page 2, Line 27, Col. 3).....	3,665,870	4,777,544

DETAILS OF WRITE-INS

2501.		
2502.		
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	0	0
3101.		
3102.		
3103.		
3198. Summary of remaining write-ins for Line 31 from overflow page.....	0	0
3199. Totals (Lines 3101 thru 3103 plus 3198) (Line 31 above).....	0	0
3401.		
3402.		
3403.		
3498. Summary of remaining write-ins for Line 34 from overflow page.....	0	0
3499. Totals (Lines 3401 thru 3403 plus 3498) (Line 34 above).....	0	0

PROTECTIVE LIFE INSURANCE COMPANY OF OHIO

SUMMARY OF OPERATIONS

(Excluding Unrealized Capital Gains and Losses)

	1 Current Year	2 Prior Year
1. Premiums and annuity considerations for life and accident and health contracts (Exhibit 1, Part 1, Line 20.4, Col. 1, less Col. 11).....	55,195	(159,345)
2. Considerations for supplementary contracts with life contingencies.....		
3. Net investment income (Exhibit of Net Investment Income, Line 17).....	116,617	320,001
4. Amortization of Interest Maintenance Reserve (IMR) (Page 33, Line 5).....		
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....		
6. Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1).....	5,624,290	5,212,035
7. Reserve adjustments on reinsurance ceded.....		
8. Miscellaneous Income:		
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.....		
8.2 Charges and fees for deposit-type contracts.....		
8.3 Aggregate write-ins for miscellaneous income.....	0	0
9. Totals (Lines 1 to 8.3).....	5,796,102	5,372,691
10. Death benefits.....	(7,285)	18,327
11. Matured endowments (excluding guaranteed annual pure endowments).....		
12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 8).....		
13. Disability benefits and benefits under accident and health contracts.....		
14. Coupons, guaranteed annual pure endowments and similar benefits.....		
15. Surrender benefits and withdrawals for life contracts.....		
16. Group conversions.....		
17. Interest and adjustments on contract or deposit-type contract funds.....		
18. Payments on supplementary contracts with life contingencies.....		
19. Increase in aggregate reserves for life and accident and health contracts.....	(36,365)	(227,467)
20. Totals (Lines 10 to 19).....	(43,650)	(209,140)
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1).....	5,547,771	5,113,048
22. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1).....		
23. General insurance expenses (Exhibit 2, Line 10, Cols. 1 + 2 + 3).....	82,127	12,092
24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3).....	106,833	47,020
25. Increase in loading on deferred and uncollected premiums.....		
26. Net transfers to or (from) Separate Accounts.....		
27. Aggregate write-ins for deductions.....	0	0
28. Totals (Lines 20 to 27).....	5,693,081	4,963,020
29. Net gain from operations before dividends to policyholders and federal income taxes (Line 9 minus Line 28).....	103,021	409,671
30. Dividends to policyholders.....		
31. Net gain from operations after dividends to policyholders and before federal income taxes (Line 29 minus Line 30).....	103,021	409,671
32. Federal and foreign income taxes incurred (excluding tax on capital gains).....	36,682	137,797
33. Net gain from operations after dividends to policyholders and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32).....	66,339	271,874
34. Net realized capital gains or (losses) less capital gains tax of \$.....0 (excluding taxes of \$.....0 transferred to the IMR).....		
35. Net income (Line 33 plus Line 34).....	66,339	271,874
CAPITAL AND SURPLUS ACCOUNT		
36. Capital and surplus, December 31, prior year (Page 3, Line 38, Col. 2).....	3,219,971	2,681,769
37. Net income (Line 35).....	66,339	271,874
38. Change in net unrealized capital gains or (losses).....		
39. Change in net unrealized foreign exchange capital gain (loss).....		
40. Change in net deferred income tax.....	(1,135)	8,288
41. Change in nonadmitted assets and related items (Exhibit 9, Line 6, Col.3).....	84,908	255,489
42. Change in liability for reinsurance in unauthorized companies.....		
43. Change in reserve on account of change in valuation basis, (increase) or decrease (Exhibit 5A, Line 9999999, Col. 4).....		
44. Change in asset valuation reserve (Page 34, Lines 2 through 5 minus Line 6 plus Lin 11 plus Line 11 plus Line 14 plus Line 15, Column 7).....		1,044
45. Change in treasury stock, (Page 3, Lines 36.1 and 36.2 Col. 2 minus Col. 1).....		
46. Surplus (contributed to) withdrawn from Separate Accounts during period.....		
47. Other changes in surplus in Separate Accounts Statement.....		
48. Change in surplus notes.....		
49. Cumulative effect of changes in accounting principles.....		1,507
50. Capital changes:		
50.1 Paid in.....		
50.2 Transferred from surplus (Stock Dividend).....		
50.3 Transferred to surplus.....		
51. Surplus adjustment:		
51.1 Paid in.....		
51.2 Transferred to capital (Stock Dividend).....		
51.3 Transferred from capital.....		
51.4 Change in surplus as a result of reinsurance.....		
52. Dividends to stockholders.....		
53. Aggregate write-ins for gains and losses in surplus.....	0	0
54. Net change in capital and surplus for the year (Lines 37 through 53).....	150,112	538,202
55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38).....	3,370,083	3,219,971
DETAILS OF WRITE-INS		
08.301.		
08.302.		
08.303.		
08.398. Summary of remaining write-ins for Line 8.3 from overflow page.....	0	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above).....	0	0
2701.		
2702.		
2703.		
2798. Summary of remaining write-ins for Line 27 from overflow page.....	0	0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above).....	0	0
5301.		
5302.		
5303.		
5398. Summary of remaining write-ins for Line 53 from overflow page.....	0	0
5399. Totals (Lines 5301 thru 5303 plus 5398) (Line 53 above).....	0	0

PROTECTIVE LIFE INSURANCE COMPANY OF OHIO

CASH FLOW

	1 Current Year	2 Prior Year
Cash from Operations		
1. Premiums and annuity considerations for life and accident and health contracts.....	55,195	(159,345)
2. Charges and fees for deposit-type contracts.....		
3. Considerations for supplementary contracts with life contingencies.....		
4. Net investment income.....	185,258	341,959
5. Commissions and expense allowances on reinsurance ceded.....	5,626,182	5,212,035
6. Fees associated with investment management, administration and contract guarantees from Separate Accounts.....		
7. Aggregate write-ins for miscellaneous income.....	0	0
8. Total (Lines 1 to 7).....	5,866,635	5,394,649
9. Death benefits.....	8,207	15,866
10. Matured endowments.....		
11. Annuity benefits.....		
12. Disability benefits and benefits under accident and health contracts.....		
13. Coupons, guaranteed annual pure endowments and similar benefits.....		
14. Surrender benefits and withdrawals for life contracts.....		
15. Group conversions.....		
16. Interest and adjustments on contract or deposit-type contract funds.....		
17. Payments on supplementary contracts with life contingencies.....		
18. Total (Lines 9 to 17).....	8,207	15,866
19. Commissions on premiums, annuity considerations and deposit-type contract funds.....	5,549,663	5,113,048
20. Commissions and expense allowances on reinsurance assumed.....		
21. General insurance expenses.....	82,127	12,092
22. Insurance taxes, licenses and fees, excluding federal income taxes.....	25,886	47,020
23. Net transfers to or (from) Separate Accounts.....		
24. Aggregate write-ins for deductions.....	0	0
25. Total (Lines 18 to 24).....	5,665,883	5,188,026
26. Dividends paid to policyholders.....		
27. Federal income taxes (excluding tax on capital gains).....	13,034	165,060
28. Total (Lines 25 to 27).....	5,678,917	5,353,086
29. Net cash from operations (Line 8 minus Line 28).....	187,718	41,563
Cash from Investments		
30. Proceeds from investments sold, matured or repaid:		
30.1 Bonds.....	2,600,000	
30.2 Stocks.....		
30.3 Mortgage loans.....		
30.4 Real estate.....		
30.5 Other invested assets.....		
30.6 Net gains (losses) on cash and short-term investments.....		
30.7 Miscellaneous proceeds.....		
30.8 Total investment proceeds (Lines 30.1 to 30.7).....	2,600,000	0
31. Net tax on capital gains (losses).....		
32. Total (Line 30.8 minus Line 31).....	2,600,000	0
33. Cost of investments acquired (long-term only):		
33.1 Bonds.....	123,888	
33.2 Stocks.....		
33.3 Mortgage loans.....		
33.4 Real estate.....		
33.5 Other invested assets.....		
33.6 Miscellaneous applications.....		
33.7 Total investments acquired (lines 33.1 to 33.6).....	123,888	0
34. Net increase (or decrease) in policy loans and premium notes.....		
35. Net cash from investments (Line 32 minus Line 33.7 minus Line 34).....	2,476,112	0
Cash from Financing and Miscellaneous Sources		
36. Cash provided:		
36.1 Surplus notes, capital and surplus paid in.....		
36.2 Borrowed money \$.....0 less amounts repaid \$.....0.....		
36.3 Capital notes \$.....0 less amounts repaid \$.....0.....		
36.4 Deposits on deposit-type contract funds and other liabilities without life or disability contingencies.....		
36.5 Other cash provided.....	100,703	1,225,610
36.6 Total (Lines 36.1 to 36.5).....	100,703	1,225,610
37. Cash applied:		
37.1 Dividends to stockholders paid.....		
37.2 Interest on indebtedness.....		
37.3 Withdrawals on deposit-type contract funds and other liabilities without life or disability contingencies.....		
37.4 Other applications (net).....	1,943,012	6,914,266
37.5 Total (Lines 37.1 to 37.4).....	1,943,012	6,914,266
38. Net cash from financing and miscellaneous sources (Line 36.6 minus Line 37.5).....	(1,842,309)	(5,688,656)
RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS		
39. Net change in cash and short-term investments (Line 29, plus Line 35, plus Line 38).....	821,521	(5,647,093)
40. Cash and short-term investments:		
40.1 Beginning of year.....	2,103,748	7,750,841
40.2 End of year (Line 39 plus Line 40.1).....	2,925,269	2,103,748
DETAILS OF WRITE-INS		
0701.		
0702.		
0703.		
0798. Summary of remaining write-ins for Line 7 from overflow page.....	0	0
0799. Total (Lines 0701 thru 0703 plus 0798) (Line 7 above).....	0	0
2401.		
2402.		
2403.		
2498. Summary of remaining write-ins for Line 24 from overflow page.....	0	0
2499. Total (Lines 2401 thru 2403 plus 2498) (Line 24 above).....	0	0

PROTECTIVE LIFE INSURANCE COMPANY OF OHIO

ANALYSIS OF OPERATION BY LINES OF BUSINESS (Gain and Loss Exhibit) (Excluding Capital Gains and Losses)

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		12 Aggregate of All Other Lines of Business
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance(a)	8 Annuities	9 Group	10 Credit (Group and Individual)	
1. Premiums and annuity considerations for life and accident and health contracts.....	55,195		55,195								
2. Considerations for supplementary contracts with life contingencies.....	0										
3. Net investment income.....	116,616		1,884			46,184			68,548		
4. Amortization of Interest Maintenance Reserve (IMR).....	0										
5. Separate Accounts net gains from operations excluding unrealized gains or losses.....	0										
6. Commissions and expense allowances on reinsurance ceded.....	5,624,290		20,029			2,410,617			3,193,644		
7. Reserve adjustments on reinsurance ceded.....	0										
8. Miscellaneous Income:											
8.1 Fees associated with income from investment management, administration and contract guarantees from S/A.....	0										
8.2 Charges and fees for deposit-type contracts.....	0										
8.3 Aggregate write-ins for miscellaneous income.....	0	0	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 to 8.3).....	5,796,101	0	77,108	0	0	2,456,801	0	0	3,262,192	0	0
10. Death benefits.....	(7,285)		(7,285)								
11. Matured endowments (excluding guaranteed annual pure endowments).....	0										
12. Annuity benefits.....	0										
13. Disability benefits and benefits under accident and health contracts.....	0										
14. Coupons, guaranteed annual pure endowments and similar benefits.....	0										
15. Surrender benefits and withdrawals for life contracts.....	0										
16. Group conversions.....	0										
17. Interest and adjustments on contract or deposit-type contract funds.....	0										
18. Payments on supplementary contracts with life contingencies.....	0										
19. Increase in aggregate reserves for life and accident and health contracts.....	(36,365)		(36,365)								
20. Totals (Lines 10 to 19).....	(43,650)	0	(43,650)	0	0	0	0	0	0	0	0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only).....	5,547,771		22,970			2,376,862			3,147,939		
22. Commissions and expense allowances on reinsurance assumed.....	0										
23. General insurance expenses.....	82,127		19,954			26,019			36,154		
24. Insurance taxes, licenses and fees, excluding federal income taxes.....	106,833		4,769			42,829			59,235		
25. Increase in loading on deferred and uncollected premiums.....	0										
26. Net transfers to or (from) Separate Accounts.....	0										
27. Aggregate write-ins for deductions.....	0	0	0	0	0	0	0	0	0	0	0
28. Totals (Lines 20 to 27).....	5,693,081	0	4,043	0	0	2,445,710	0	0	3,243,328	0	0
29. Net gain from operations before dividends to policyholders and federal income taxes (Line 9 minus Line 28).....	103,020	0	73,065	0	0	11,091	0	0	18,864	0	0
30. Dividends to policyholders.....	0										
31. Net gain from operations after dividends to policyholders and before federal income taxes (Line 29 minus Line 30).....	103,020	0	73,065	0	0	11,091	0	0	18,864	0	0
32. Federal income taxes incurred (excluding tax on capital gains).....	36,682		26,016			3,949			6,717		
33. Net gain from operations after dividends to policyholders and federal income taxes and before realized capital gains or (losses) (Line 31 minus Line 32).....	66,338	0	47,049	0	0	7,142	0	0	12,147	0	0

DETAILS OF WRITE-INS

08.301.	0										
08.302.	0										
08.303.	0										
08.398. Summary of remaining write-ins for Line 8.3 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0
08.399. Total (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above).....	0	0	0	0	0	0	0	0	0	0	0
2701.	0										
2702.	0										
2703.	0										
2798. Summary of remaining write-ins for Line 27 from overflow page.....	0	0	0	0	0	0	0	0	0	0	0
2799. Total (Lines 2701 thru 2703 plus 2798) (Line 27 above).....	0	0	0	0	0	0	0	0	0	0	0

(a) Includes the following amounts for FEGLI/SGLI: Line 1.....0 Line 10.....0 Line 16.....0 Line 23.....0 Line 24.....0.

ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group	
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance	8 Annuities
Involving Life or Disability Contingencies (Reserves)								
(Net of Reinsurance Ceded)								
1. Reserve December 31, prior year.....	150,452		150,452					
2. Tabular net premiums or considerations.....	46,364		46,364					
3. Present value of disability claims incurred.....	.0				XXX			
4. Tabular interest.....	6,077		6,077					
5. Tabular less actual reserve released.....	.0							
6. Increase in reserve on account of change in valuation basis.....	.0							
7. Other increases (net).....	.0							
8. Totals (Lines 1 to 7).....	202,893	.0	202,893	.0	.0	.0	.0	.0
9. Tabular cost.....	.0				XXX			
10. Reserves released by death.....	88,806		88,806	XXX	XXX			XXX
11. Reserves released by other terminations (net).....	.0							
12. Annuity, supplementary contract, and disability payments involving life contingencies.....	.0							
13. Net transfers to or (from) Separate Accounts.....	.0							
14. Total deductions (Lines 9 to 13).....	88,806	.0	88,806	.0	.0	.0	.0	.0
15. Reserve December 31, current year.....	114,087	.0	114,087	.0	.0	.0	.0	.0

PROTECTIVE LIFE INSURANCE COMPANY OF OHIO

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. government bonds.....	(a).....146,192	.....93,523
1.1 Bonds exempt from U.S. tax.....	(a).....	.....
1.2 Other bonds (unaffiliated).....	(a).....	.....
1.3 Bonds of affiliates.....	(a).....	.....
2.1 Preferred stocks (unaffiliated).....	(b).....	.....
2.11 Preferred stocks of affiliates.....	(b).....	.....
2.2 Common stocks (unaffiliated).....	.....	.....
2.21 Common stocks of affiliates.....	.....	.....
3. Mortgage loans.....	(c).....	.....
4. Real estate.....	(d).....	.....
5. Contract loans.....	.....	.....
6. Cash/short-term investments.....	(e).....23,106	.....23,094
7. Derivative instruments.....	(f).....	.....
8. Other invested assets.....	.....	.....
9. Aggregate write-ins for investment income.....	.....0	.....0
10. Total gross investment income.....	.....169,298	.....116,617
11. Investment expenses.....	.....	(g).....
12. Investment taxes, licenses and fees, excluding federal income taxes.....	.....	(g).....
13. Interest expense.....	.....	(h).....
14. Depreciation on real estate and other invested assets.....	.....	(i).....0
15. Aggregate write-ins for deductions from investment income.....	.....	.....0
16. Total deductions (Lines 11 through 15).....	.....	.....0
17. Net investment income (Line 10 minus Line 16).....	.....	.....116,617

DETAILS OF WRITE-INS

0901. ....	.....	.....
0902. ....	.....	.....
0903. ....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	.....0	.....0
1501. ....	.....	.....
1502. ....	.....	.....
1503. ....	.....	.....
1598. Summary of remaining write-ins for Line 15 from overflow page.....	.....	.....0
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15 above).....	.....	.....0

- (a) Includes \$.....0 accrual of discount less \$.....15,960 amortization of premium and less \$.....348 paid for accrued interest on purchases.
- (b) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.
- (c) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (d) Includes \$.....0 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.
- (e) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (f) Includes \$.....0 accrual of discount less \$.....0 amortization of premium.
- (g) Includes \$.....0 investment expenses and \$.....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.
- (i) Includes \$.....0 depreciation on real estate and \$.....0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) on Sales or Maturity	2 Other Realized Adjustments	3 Increases (Decreases) by Adjustment	4 Net Gain or (Loss) from Change in Difference Between Basis Book/ Adjusted Carrying and Admitted Values	5 Total
1. U.S. government bonds.....0
1.1 Bonds exempt from U.S. tax.....0
1.2 Other bonds (unaffiliated).....0
1.3 Bonds of affiliates.....0
2.1 Preferred stocks (unaffiliated).....0
2.11 Preferred stocks of affiliates.....0
2.2 Common stocks (unaffiliated).....0
2.21 Common stocks of affiliates.....0
3. Mortgage loans.....0
4. Real estate.....0
5. Contract loans.....0
6. Cash/short-term investments.....0
7. Derivative instruments.....0
8. Other invested assets.....0
9. Aggregate write-ins for capital gains (losses).....	.....0	.....0	.....0	.....0	.....0
10. Total capital gains (losses).....	.....0	.....0	.....0	.....0	.....0

DETAILS OF WRITE-INS

0901. ....	.....	.....	.....	.....	.....0
0902. ....	.....	.....	.....	.....	.....0
0903. ....	.....	.....	.....	.....	.....0
0998. Summary of remaining write-ins for Line 9 from overflow page..	.....0	.....0	.....0	.....0	.....0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	.....0	.....0	.....0	.....0	.....0

PROTECTIVE LIFE INSURANCE COMPANY OF OHIO

EXHIBIT 1 - PART 1 - PREMIUMS AND ANNUITY CONSIDERATIONS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

	1 Total	2 Industrial Life	3 Ordinary		5 Credit Life (Group and Individual)	6 Group		8 Accident and Health		11 Aggregate of All Other Lines of Business
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group & Individual)		10 Other
FIRST YEAR (other than single)										
1. Uncollected.....	0									
2. Deferred and accrued.....	0									
3. Deferred, accrued and uncollected:										
3.1 Direct.....	0									
3.2 Reinsurance assumed.....	0									
3.3 Reinsurance ceded.....	0									
3.4 Net (Line 1 + Line 2).....	0	0	0	0	0	0	0	0	0	0
4. Advance.....	0									
5. Line 3.4 - Line 4.....	0	0	0	0	0	0	0	0	0	0
6. Collected during year:										
6.1 Direct.....	0									
6.2 Reinsurance assumed.....	0									
6.3 Reinsurance ceded.....	0									
6.4 Net.....	0	0	0	0	0	0	0	0	0	0
7. Line 5 + Line 6.4.....	0	0	0	0	0	0	0	0	0	0
8. Prior year (uncollected + deferred and accrued - advance).....	0									
9. First year premiums and considerations:										
9.1 Direct.....	0									
9.2 Reinsurance assumed.....	0									
9.3 Reinsurance ceded.....	0									
9.4 Net (Line 7 - Line 8).....	0	0	0	0	0	0	0	0	0	0
SINGLE										
10. Single premiums and considerations:										
10.1 Direct.....	11,479,979		233,811		4,733,305			6,512,863		
10.2 Reinsurance assumed.....	0									
10.3 Reinsurance ceded.....	11,424,784		178,616		4,733,305			6,512,863		
10.4 Net.....	55,195	0	55,195	0	0	0	0	0	0	0
RENEWAL										
11. Uncollected.....	0									
12. Deferred and accrued.....	0									
13. Deferred, accrued and uncollected:										
13.1 Direct.....	0									
13.2 Reinsurance assumed.....	0									
13.3 Reinsurance ceded.....	0									
13.4 Net (Line 11 + Line 12).....	0	0	0	0	0	0	0	0	0	0
14. Advance.....	0									
15. Line 13.4 - Line 14.....	0	0	0	0	0	0	0	0	0	0
16. Collected during year:										
16.1 Direct.....	164				164					
16.2 Reinsurance assumed.....	0									
16.3 Reinsurance ceded.....	164				164					
16.4 Net.....	0	0	0	0	0	0	0	0	0	0
17. Line 15 + Line 16.4.....	0	0	0	0	0	0	0	0	0	0
18. Prior year (uncollected + deferred and accrued - advance).....	0									
19. Renewal premiums and considerations:										
19.1 Direct.....	164				164					
19.2 Reinsurance assumed.....	0									
19.3 Reinsurance ceded.....	164				164					
19.4 Net (Line 17 - Line 18).....	0	0	0	0	0	0	0	0	0	0
TOTAL										
20. Total premiums and annuity considerations:										
20.1 Direct.....	11,480,143	0	233,811	0	4,733,469	0	0	6,512,863	0	0
20.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0
20.3 Reinsurance ceded.....	11,424,948	0	178,616	0	4,733,469	0	0	6,512,863	0	0
20.4 Net (Lines 9.4 + 10.4 + 19.4).....	55,195	0	55,195	0	0	0	0	0	0	0

PROTECTIVE LIFE INSURANCE COMPANY OF OHIO

**EXHIBIT 1 - PART 2 - DIVIDENDS AND COUPONS APPLIED, REINSURANCE COMMISSIONS AND
EXPENSE ALLOWANCES AND COMMISSIONS INCURRED (direct business only)**

	1 Total	2 Industrial Life	Ordinary		5 Credit Life (Group and Individual)	Group		Accident and Health			11 Aggregate of All Other Lines of Business
			3 Life Insurance	4 Individual Annuities		6 Life Insurance	7 Annuities	8 Group	9 Credit (Group & Individual)	10 Other	
DIVIDENDS AND COUPONS APPLIED (included in Part 1)											
21. To pay renewal premiums (Exhibit 4, Line 1).....	.0										
22. All other (Exhibit 4, Lines 2, 3 & 4).....	.0										
REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED											
23. First year (other than single):											
23.1 Reinsurance ceded.....	.0										
23.2 Reinsurance assumed.....	.0										
23.3 Net ceded less assumed.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
24. Single:											
24.1 Reinsurance ceded.....	5,624,273		20,028		2,410,601				3,193,644		
24.2 Reinsurance assumed.....	.0										
24.3 Net ceded less assumed.....	5,624,273	.0	20,028	.0	2,410,601	.0	.0	.0	3,193,644	.0	.0
25. Renewal:											
25.1 Reinsurance ceded.....	.16				.16						
25.2 Reinsurance assumed.....	.0										
25.3 Net ceded less assumed.....	.16	.0	.0	.0	.16	.0	.0	.0	.0	.0	.0
26. Totals:											
26.1 Reinsurance ceded (Page 6, Line 6).....	5,624,289	.0	20,028	.0	2,410,617	.0	.0	.0	3,193,644	.0	.0
26.2 Reinsurance assumed (Page 6, Line 22).....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
26.3 Net ceded less assumed.....	5,624,289	.0	20,028	.0	2,410,617	.0	.0	.0	3,193,644	.0	.0
COMMISSIONS INCURRED (direct business only)											
27. First year (other than single).....	.0										
28. Single.....	5,547,755		22,970		2,376,846				3,147,939		
29. Renewal.....	.16				.16						
30. Deposit-type contract funds.....	.0										
31. Totals (to agree with Page 6, Line 21).....	5,547,771	.0	22,970	.0	2,376,862	.0	.0	.0	3,147,939	.0	.0

PROTECTIVE LIFE INSURANCE COMPANY OF OHIO EXHIBIT 2 - GENERAL EXPENSES

	Insurance			4 Investment	5 Total
	1 Life	2 Accident and Health	3 All Other Lines of Business		
1. Rent.....					0
2. Salaries and wages.....					0
3.11 Contributions for benefit plans for employees.....					0
3.12 Contributions for benefit plans for agents.....					0
3.21 Payments to employees under non-funded benefit plans.....					0
3.22 Payments to agents under non-funded benefit plans.....					0
3.31 Other employee welfare.....					0
3.32 Other agent welfare.....					0
4.1 Legal fees and expenses.....					0
4.2 Medical examination fees.....					0
4.3 Inspection report fees.....					0
4.4 Fees of public accountants and consulting actuaries.....	3,210	4,209			7,419
4.5 Expense of investigation and settlement of policy claims.....					0
5.1 Traveling expenses.....					0
5.2 Advertising.....					0
5.3 Postage, express, telegraph and telephone.....					0
5.4 Printing and stationery.....	.875	1,148			2,023
5.5 Cost or depreciation of furniture and equipment.....					0
5.6 Rental of equipment.....					0
5.7 Cost or depreciation of EDP equipment and software.....	.247	.323			.570
6.1 Books and periodicals.....					0
6.2 Bureau and association fees.....					0
6.3 Insurance, except on real estate.....					0
6.4 Miscellaneous losses.....					0
6.5 Collection and bank service charges.....	.46	.60			.106
6.6 Sundry general expenses.....	.126	.165			.291
6.7 Group service and administration fees.....					0
6.8 Reimbursements by uninsured accident and health plans.....					0
7.1 Agency expense allowance.....					0
7.2 Agents' balances charged off (less \$.....0 recovered).....	38,056	25,383			63,439
7.3 Agency conferences other than local meetings.....					0
9.1 Real estate expenses.....					0
9.2 Investment expenses not included elsewhere.....	3,412	4,866			8,278
9.3 Aggregate write-ins for expenses.....	0	0	0	0	0
10. General expenses incurred.....	45,972	36,154	0	0	(a) 82,126
11. General expenses unpaid December 31, prior year.....					0
12. General expenses unpaid December 31, current year.....					0
13. Amounts receivable relating to uninsured accident and health plans, prior year.....					0
14. Amounts receivable relating to uninsured accident and health plans, current year.....					0
15. General expenses paid during year (Lines 10 + 11 - 12 - 13 + 14).....	45,972	36,154	0	0	82,126

DETAILS OF WRITE-INS

09.301.					0
09.302.					0
09.303.					0
09.398. Summary of remaining write-ins for Line 9.3 from overflow page.....	0	0	0	0	0
09.399. Totals (Lines 09.301 thru 09.303 plus 09.398)(Line 9.3 above).....	0	0	0	0	0

(a) Includes management fees of \$.....0 to affiliates \$.....0 to non-affiliates.

EXHIBIT 3 - TAXES, LICENSES AND FEES (EXCLUDING FEDERAL INCOME TAXES)

	Insurance			4 Investment	5 Total
	1 Life	2 Accident and Health	3 All Other Lines of Business		
1. Real estate taxes.....					0
2. State insurance department licenses and fees.....	9,431	13,530			22,961
3. State taxes on premiums.....	38,167	45,705			83,872
4. Other state taxes, including \$.....0 for employee benefits.....					0
5. U.S. Social Security taxes.....					0
6. All other taxes.....					0
7. Taxes, licenses and fees incurred.....	47,598	59,235	0	0	106,833
8. Taxes, licenses and fees unpaid December 31, prior year.....					0
9. Taxes, licenses and fees unpaid December 31, current year.....	35,243	45,705			80,948
10. Taxes, licenses and fees paid during year (Lines 7 + 8 - 9).....	12,355	13,530	0	0	25,885

EXHIBIT 4 - DIVIDENDS OR REFUNDS

	Dividends	
	1 Life	2 Accident and Health
1. Applied to pay renewal premiums.....		
2. Applied to shorten the endowment or premium-paying period.....		
3. Applied to provide paid-up additions.....		
4. Applied to provide paid-up annuities.....		
5. Total Lines 1 through 4.....	0	0
6. Paid-in cash.....		
7. Left on deposit.....		
8. Aggregate write-ins for dividend or refund options.....	0	0
9. Total Lines 5 through 8.....	0	0
10. Amount due and unpaid.....		
11. Provision for dividends or refunds payable in the following calendar year.....		
12. Terminal dividends.....		
13. Provision for deferred dividend contracts.....		
14. Amount provisionally held for deferred dividend contracts not included in Line 13.....		
15. Total Lines 10 through 14.....	0	0
16. Total from prior year.....		
17. Total dividends or refunds (Lines 9 + 15 - 16).....	0	0

NONE

DETAILS OF WRITE-INS

0801.		
0802.		
0803.		
0898. Summary of remaining write-ins for Line 8 from overflow page.....	0	0
0899. Totals (Line 0801 thru 0803 plus 0898) (Line 8 above).....	0	0

EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS

1 Valuation Standard	2 Total	3 Industrial	4 Ordinary	5 Credit (Group and Individual)	6 Group
Life Insurance:					
0100001. 58CET 4.5% NL.....	10,588,446			10,588,446	
0100002. 80CET 3.5% NL.....	2,329,927		292,624	2,037,303	
0199997. Totals (Gross).....	12,918,373	0	292,624	12,625,749	0
0199998. Reinsurance ceded.....	12,865,944		240,195	12,625,749	
0199999. Totals (Net).....	52,429	0	52,429	0	0
Accidental Death Benefits:					
0400001. 59ADB w/ 80CSO 6.00%.....	31,311		31,311		
0499997. Totals (Gross).....	31,311	0	31,311	0	0
0499998. Reinsurance ceded.....	25,701		25,701		
0499999. Totals (Net).....	5,610	0	5,610	0	0
Miscellaneous Reserves:					
0700001. For surrender values in excess of reserves otherwise required.....	190,257		190,257		
0799997. Totals (Gross).....	190,257	0	190,257	0	0
0799998. Reinsurance ceded.....	134,210		134,210		
0799999. Totals (Net).....	56,047	0	56,047	0	0
9999999. Totals (Net) - Page 3, Line 1.....	114,086	0	114,086	0	0

EXHIBIT 5 - INTERROGATORIES

- 1.1 Has the reporting entity ever issued both participating and non-participating contracts? Yes [] No [X]
- 1.2 If not, state which kind is issued.....
- 2.1 Does the reporting entity at present issue both participating and non-participating contracts? Yes [] No [X]
- 2.2 If not, state which kind is issued.....
- 3. Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements? Yes [] No [X]
If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.



- 4. Has the reporting entity any assessment or stipulated premium contracts in force? If so, state: Yes [] No [X]
 - 4.1 Amount of insurance? \$.....
 - 4.2 Amount of reserve? \$.....
 - 4.3 Basis of reserve:
 - 4.4 Basis of regular assessments:
 - 4.5 Basis of special assessments:
 - 4.6 Assessments collected during year: \$.....
- 5. If the contract loan interest rate guaranteed in any one or more of its currently issued contracts is less than 5 %, not in advance, state the contract loan rate guarantees on any such contracts.
- 6. Does the reporting entity hold reserves for any annuity contracts which are less than the reserves that would be held on a standard basis? Yes [] No [X]
 - 6.1 If so, state the amount of reserve on such contracts on the basis actually held: \$.....
 - 6.2 Which would have been held (on an exact or approximate basis) using the actual ages of the annuitants; the interest rate(s) used in 6.1; and the same mortality basis used by the reporting entity for the valuation of comparable annuity benefits issued to standard lives. If the reporting entity has no comparable annuity benefits for standard lives to be valued, the mortality basis shall be the table most recently approved by the state of domicile for valuing individual annuity benefits: \$.....
Attach statement of methods employed in their valuation.
- 7. Does the reporting entity have any Synthetic GIC contracts, or agreements in effect as of December 31 of the current year? Yes [] No [X]
 - 7.1 If yes, state the total dollar amount of assets covered by these contracts or agreements: \$.....
 - 7.2 Specify the basis (fair value, amortized cost, etc.) for determining the amount:
 - 7.3 State the amount of reserves established for this business: \$.....
 - 7.4 Identify where the reserves are reported in the blank.

EXHIBIT 5A - CHANGES IN BASES OF VALUATION DURING THE YEAR

1 Description of Valuation Class	Valuation Basis		4 Increase in Actuarial Reserve Due To Change
	2 Changed From	3 Changed To	

NONE

EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS

	1 Total	2 Group Accident and Health	3 Credit Accident and Health (Group and Individual)	4 Collectively Renewable	Other Individual Contracts				
					5 Non- Cancelable	6 Guaranteed Renewable	7 Non-Renewable for Stated Reasons Only	8 Other Accident Only	9 All Other
ACTIVE LIFE RESERVE									
1. Unearned premium reserves.....	13,794,382		13,794,382						
2. Additional contract reserves (a).....	0								
3. Additional actuarial reserves - Asset/Liability analysis.....	0								
4. Reserve for future contingent benefits.....	0								
5. Reserve for rate credits.....	0								
6. Aggregate write-ins for reserves.....	0	0	0	0	0	0	0	0	0
7. Totals (Gross).....	13,794,382	0	13,794,382	0	0	0	0	0	0
8. Reinsurance ceded.....	13,794,382		13,794,382						
9. Totals (Net).....	0	0	0	0	0	0	0	0	0
CLAIM RESERVE									
10. Present value of amounts not yet due on claims.....	4,835,262		4,835,262						
11. Additional actuarial reserves - Asset/Liability analysis.....	0								
12. Reserve for future contingent benefits.....	0								
13. Aggregate write-ins for reserves.....	0	0	0	0	0	0	0	0	0
14. Totals (Gross).....	4,835,262	0	4,835,262	0	0	0	0	0	0
15. Reinsurance ceded.....	4,835,262		4,835,262						
16. Totals (Net).....	0	0	0	0	0	0	0	0	0
17. TOTALS (Net).....	0	0	0	0	0	0	0	0	0
18. TABULAR FUND INTEREST.....	0								

DETAILS OF WRITE-INS

0601.									
0602.									
0603.									
0698. Summary of remaining write-ins for Line 6 from overflow page.....	0	0	0	0	0	0	0	0	0
0699. Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above).....	0	0	0	0	0	0	0	0	0
1301.									
1302.									
1303.									
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0	0	0	0	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 + 1398) (Line 13 above).....	0	0	0	0	0	0	0	0	0

(a) Attach statement as to valuation standard used in calculating this reserve, specifying reserve bases, interest rates and methods.

EXHIBIT 7 - DEPOSIT-TYPE CONTRACTS

	1 Total	2 Guaranteed Interest Contracts	3 Supplemental Contracts and Annuities Certain	4 Dividend Accumulations or Refunds	5 Premium and Other Deposit Funds	6 Other
1. Balance at the beginning of the year before reinsurance.....	0					
2. Deposits received during the year.....	0					
3. Investment earnings credited to the account.....	0					
4. Other net change in reserves.....	0					
5. Fees and other charges assessed.....	0					
6. Surrender charges.....	0					
7. Net surrender or withdrawal payments.....	0					
8. Other net transfers to or (from) Separate Accounts.....	0					
9. Balance at the end of current year before reinsurance (Lines 1 + 2 + 3 + 4 - 5 - 6 - 7 - 8).....	0					
10. Reinsurance balance at the beginning of the year.....	0					
11. Net change in reinsurance assumed.....	0					
12. Net change in reinsurance ceded.....	0					
13. Reinsurance balance at the end of the year (Lines 10 + 11 - 12).....	0					
14. Balance at the end of the current year after reinsurance (Lines 9 + 13).....	0					

NONE

EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

PART 1 - Liability End of Current Year

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Due and unpaid:											
1.1 Direct.....	489,156					169,939				319,217	
1.2 Reinsurance assumed.....	0										
1.3 Reinsurance ceded.....	489,156					169,939				319,217	
1.4 Net.....	0	0	0	0	0	0	0	0	0	0	0
2. In course of settlement:											
2.1 Resisted:											
2.11 Direct.....	0										
2.12 Reinsurance assumed.....	0										
2.13 Reinsurance ceded.....	0										
2.14 Net.....	0	0	(b) 0	(b) 0	0	(b) 0	(b) 0	0	0	0	0
2.2 Other:											
2.21 Direct.....	0										
2.22 Reinsurance assumed.....	0										
2.23 Reinsurance ceded.....	0										
2.24 Net.....	0	0	(b) 0	(b) 0	0	(b) 0	(b) 0	0	(b) 0	(b) 0	(b) 0
3. Incurred but unreported:											
3.1 Direct.....	547,553		15,916			196,703				334,934	
3.2 Reinsurance assumed.....	0										
3.3 Reinsurance ceded.....	547,182		15,545			196,703				334,934	
3.4 Net.....	371	0	(b) 371	(b) 0	0	(b) 0	(b) 0	0	(b) 0	(b) 0	(b) 0
4. Totals:											
4.1 Direct.....	1,036,709	0	15,916	0	0	366,642	0	0	0	654,151	0
4.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded.....	1,036,338	0	15,545	0	0	366,642	0	0	0	654,151	0
4.4 Net.....	371	(a) 0	(a) 371	0	0	0	(a) 0	0	0	0	0

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(a) Including matured endowments (but not guaranteed annual pure endowments) unpaid amounting to \$.....0 in Column 2, \$.....0 in Column 3 and \$.....0 in Column 7.

(b) Include only portion of disability and accident and health claim liabilities applicable to assumed "accrued" benefits. Reserves (including reinsurance assumed and net of reinsurance ceded) for unaccrued benefits for Ordinary Life Insurance \$.....0, Individual Annuities \$.....0, Credit Life (Group and Individual) \$.....0, and Group Life \$.....0, are included in Page 3, Line 1, (See Exhibit 5, Section on Disability Disabled Lives); and for Group Accident and Health \$.....0, Credit (Group and Individual) Accident and Health \$.....0 and Other Accident and Health \$.....0 are included in Page 3, Line 2, (See Exhibit 6, Claim Reserve).

EXHIBIT 8 - CONTRACT CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

PART 2 - Incurred During the Year

	1 Total	2 Industrial Life (a)	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance (b)	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance (c)	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Settlements during the year:											
1.1 Direct.....	6,013,179		93,000			1,722,646				4,197,533	
1.2 Reinsurance assumed.....	0										
1.3 Reinsurance ceded.....	6,004,972		84,793			1,722,646				4,197,533	
1.4 Net..... (d)	8,207	0	8,207	0	0	0	0	0	0	0	0
2. Liability December 31, current year from Part 1:											
2.1 Direct.....	1,036,709		15,916			366,642				654,151	
2.2 Reinsurance assumed.....	0										
2.3 Reinsurance ceded.....	1,036,338		15,545			366,642				654,151	
2.4 Net.....	371	0	371	0	0	0	0	0	0	0	0
3. Amounts recoverable from reinsurers December 31, current year.....	0										
4. Liability December 31, prior year:											
4.1 Direct.....	1,096,926		18,971			475,475				602,480	
4.2 Reinsurance assumed.....	0										
4.3 Reinsurance ceded.....	1,081,063		3,108			475,475				602,480	
4.4 Net.....	15,863	0	15,863	0	0	0	0	0	0	0	0
5. Amounts recoverable from reinsurers December 31, prior year.....	0										
6. Incurred benefits:											
6.1 Direct.....	5,952,962	0	89,945	0	0	1,613,813	0	0	0	4,249,204	0
6.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0
6.3 Reinsurance ceded.....	5,960,247	0	97,230	0	0	1,613,813	0	0	0	4,249,204	0
6.4 Net.....	(7,285)	0	(7,285)	0	0	0	0	0	0	0	0

(a) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$.....0 in Line 1.1, \$.....0 in Line 1.4, \$.....0 in Line 6.1 and \$.....0 in line 6.4.

(b) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$.....0 in Line 1.1, \$.....0 in Line 1.4, \$.....0 in Line 6.1 and \$.....0 in line 6.4.

(c) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$.....0 in Line 1.1, \$.....0 in Line 1.4, \$.....0 in Line 6.1 and \$.....0 in line 6.4.

(d) Includes \$.....0 premiums waived under total and permanent disability benefits.

EXHIBIT 9 - ANALYSIS OF NONADMITTED ASSETS AND RELATED ITEMS

	1 End of Current Year	2 End of Prior Year	3 Changes for Year (Increase) or Decrease
1. Summary of Items Page 2, Lines 12 to 17 and 19 to 22, Column 2.....	185,356	270,264	84,908
2. Other Nonadmitted Assets:			
2.1 Bills receivable.....			.0
2.2 Furniture and equipment.....			.0
2.3 Leasehold improvements.....			.0
2.4 Cash advanced to or in the hands of officers or agents.....			.0
2.5 Loans on personal security, endorsed or not.....			.0
2.6 Supplies, stationery, printed matter.....			.0
2.7 Commuted commissions.....			.0
3. Total (Lines 2.1 to 2.7).....	.0	.0	.0
4. Disallowed interest maintenance reserve.....			.0
5. Aggregate write-ins for other assets.....	.0	.0	.0
6. Total (Line 1 plus Lines 3 to 5).....	185,356	270,264	84,908

DETAILS OF WRITE-INS

0501.			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page.....	.0	.0	.0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above).....	.0	.0	.0

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies

A. Accounting Practices

The financial statements of Protective Life Insurance Company of Ohio (the Company) are presented on the basis of accounting practices prescribed or permitted by the Ohio Insurance Department.

The Ohio Insurance Department recognizes only statutory practices prescribed or permitted by the state of Ohio for determining and reporting the financial condition and results of operations of an insurance company, for determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures* manual, version effective January 1, 2001, (NAIC SAP) has been adopted as a component of prescribed or permitted practices by the state of Ohio. The state has adopted certain prescribed accounting practices that differ from those found in NAIC SAP.

The following reconciles the Company's net income and capital and surplus prepared in accordance with NAIC SAP as compared to that prepared in accordance with practices prescribed and permitted by the state of Ohio:

	<u>12/31/2002</u>
Net Income (Loss), State of Ohio Basis	\$ 66,339
State Prescribed and Permitted Practices: None	
Net Income (Loss), NAIC SAP	<u>\$ 66,339</u>
Statutory Surplus, State of Ohio Basis	\$ 3,370,083
State Prescribed Practices: None	
Statutory Surplus, NAIC SAP	<u>\$ 3,370,083</u>

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy

The Company uses the following accounting policies:

- (1) Short-term investments are stated at amortized cost or market value as appropriate.
- (2) Bonds not backed by other loans are stated at amortized cost using the interest method; loan-backed bonds and structured securities at amortized cost using the interest method including anticipated prepayments, at the date of purchase; significant changes in estimated cash flows from the original purchase assumptions are accounted for using the retrospective method.
- (3) The Company does not own any common stocks.
- (4) The Company does not own any preferred stocks.
- (5) The Company does not own any mortgage loans.
- (6) The Company does not own any loan-backed securities.
- (7) The Company owns no equity interest in any subsidiary.
- (8) The Company has no joint ventures.
- (9) The Company does not own any derivative instruments.
- (10) The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with SSAP NO. 54, Individual and Group Accident and Health Contracts.

NOTES TO FINANCIAL STATEMENTS

- (11) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability are continually reviewed and any adjustment are reflected in the period determined.

2. Accounting Changes and Corrections of Errors

- A. Correction of Errors
N/A

- B. Cumulative Effect of Changes in Accounting Principles as a result of the initial implementation of Codification January 1, 2001

The Company prepares its statutory financial statements in conformity with accounting principles prescribed or permitted by the State of Ohio. Effective January 1, 2001, the State of Ohio required that insurance companies domiciled in the State of Ohio prepare their statutory basis financial statements in accordance with the NAIC *Accounting Practices and Procedures* manual – Version effective January 1, 2001, subject to any deviations prescribed or permitted by the State of Ohio insurance commissioner.

Accounting changes adopted to conform to the provisions of the NAIC *Accounting Practices and Procedures* manual – Version effective January 1, 2001, are reported as changes in accounting principles. The cumulative effect of changes in accounting principles is reported as an adjustment to unassigned funds (surplus) in the period of the change in accounting principle. The cumulative effect is the difference between the amount of capital and surplus at the beginning of the year and the amount of capital and surplus that would have been reported at that date if the new accounting principles had been applied retroactively for all prior periods.

3. Business Combinations and Goodwill

On March 29, 2002 Protective Life Insurance Company (the Company's parent) sold Lyndon Life Insurance Company to an unaffiliated insurance company. As part of the transaction Protective Life Insurance Company coinsured all of the business in Lyndon Life and was paid \$13.4 million by the unaffiliated insurance company for Lyndon Life Insurance Company.

On June 28, 2002, Protective Life completed the acquisition through coinsurance of a block of traditional life and interest-sensitive life insurance business from Consecro Variable Insurance Company. In the transaction, Protective Life received approximately \$470 million of reserves. The ceding commission paid to Consecro was approximately \$44.7 million.

On July 1, 2002, Inter-State Assurance Company (an affiliate company) merged with Protective Life. After the merger, Protective Life assumed all of the policy liabilities of Inter-State.

4. Discontinued Operations
N/A

5. Investments

- A. Mortgage Loans, including Mezzanine Real Estate Loans
N/A

- B. Debt Restructuring
N/A

- C. Reverse Mortgages
N/A

- D. Loan Backed Securities
N/A

- E. Repurchase Agreements

For repurchase agreements, Company policies require a minimum of 100% of the fair value of securities purchased under repurchase agreements to be maintained as collateral.

6. Joint Ventures, Partnerships, and Limited Liability Companies
N/A

7. Investment Income

- A. Due and accrued income is excluded from investment income on the following basis:
Bonds - where collection of interest is uncertain.

- B. No amount was excluded from investment income during 2002.

8. Derivative Instruments
N/A

NOTES TO FINANCIAL STATEMENTS

9. Income Taxes

A. The components of the net DTA recognized in the Company's Asset, Liabilities, Surplus and Other Funds are as follows:

	<u>2001</u>	<u>2002</u>
Total of gross deferred tax assets	9,795	8,660
Total of deferred tax Liabilities	<u>0</u>	<u>0</u>
Net deferred tax asset	9,795	8,660
Deferred tax asset nonadmitted	<u>(6,342)</u>	<u>(7,456)</u>
Net admitted deferred tax asset	<u>3,453</u>	<u>1,204</u>
(Increase) decrease in nonadmitted asset	<u>(6,342)</u>	<u>(1,114)</u>

B. The provisions for incurred taxes on earnings for the year ended December 31 are:

	<u>2001</u>	<u>2002</u>
Federal	137,797	36,682
Utilization of Inter-company Loss Carry-forward	<u>0</u>	<u>0</u>
Federal income taxes incurred	<u>137,797</u>	<u>36,682</u>

C. The tax effects of temporary differences that give rise to significant portions of the deferred tax assets and deferred tax liabilities are as follows:

	<u>2001</u>	<u>2002</u>
Deferred tax assets:		
Deferred acquisition costs	9,795	8,660
Bond Basis Differential	0	0
Reserves	0	0
Other	<u>0</u>	<u>0</u>
Total deferred tax assets	9,795	8,660
Nonadmitted deferred tax assets	<u>(6,342)</u>	<u>(7,456)</u>
Admitted deferred tax assets	3,453	1,204
Deferred tax liabilities		
Total deferred tax liabilities	<u>0</u>	<u>0</u>
Net admitted deferred tax asset	<u>3,453</u>	<u>1,204</u>

D. The change in net deferred income taxes is comprised of the following (this analysis is exclusive of nonadmitted assets as the Change in Nonadmitted Assets is reported separately from the Change in Net Deferred Income Taxes in the surplus section of the Annual Statement):

	Dec 31, <u>2001</u>	Dec 31, <u>2002</u>	<u>Change</u>
Total deferred tax assets	9,795	8,660	1,135
Total deferred tax liabilities	<u>0</u>	<u>0</u>	<u>0</u>
Net deferred tax asset (liability)	9,795	8,660	<u>1,135</u>
Change in net deferred income tax			<u>1,135</u>

E. The provision for federal and foreign income taxes incurred is different from that which would be obtained by applying the statutory Federal income tax rate to income before income taxes. The significant items causing this difference are as follows:

	<u>2002</u>	<u>Effective Tax Rate</u>
Provision computed at statutory rate	36,057	35.00%
Prior year true-up	<u>1,760</u>	<u>1.71%</u>
Total	<u>37,817</u>	<u>36.71%</u>
Federal income taxes incurred	36,682	35.61%
Change in net deferred income taxes	<u>1,135</u>	<u>1.10%</u>
Total statutory income taxes	<u>37,817</u>	<u>36.71%</u>

NOTES TO FINANCIAL STATEMENTS

- F. (1) The Company's federal income tax return for 2002 is consolidated with the following entities: Acceleration Life Insurance Company, Acceleration National Service Corporation, Advantage Warranty Corp, Autoquest Insurance Services of Nevada, Autoquest Insurance Services of Utah, Checker Flag Protection, Inc., Citizen's Accident & Health Insurance Company, Delaware Newco, Inc., Dublin International, LTD, Empire General Life Assurance Corporation, Financial Protection Marketing, Inc., First Protection Company, First Protection Corp., First Protection Corp of Florida, First Protection, LTD., First Protective Insurance Group, FPC Insurance Agency, Inc., Gulfco Insurance Services, Inc., Gulfco Life Insurance Company, Hotel Development Company, Inc., Income Development Specialists, International Dental Plans, Inc., Investment Distributors, Inc., Lyndon American, Inc., Lyndon Financial Corporation, Lyndon General Agency of Texas, Inc., Lyndon Insurance Group, Inc., Lyndon Life Insurance Company, Lyndon Property Insurance Company, Lyndon Southern Insurance Company, Lyndon-DFS Warranty Services, Inc., Matrix Direct, Inc., National Health Care Systems of Florida, Inc., Oracare Consultants, Inc., Oracare Dental Assoc., PA, Paramount Financial Group, Inc., PES Insurance Agency of Massachusetts, PES of Maryland, Inc., PES of Ohio, Inc., Product Resources Group, Proequities of Texas, Inc., Proequities, Inc., Protective Agency of Texas, Protective Asset Management Group, Inc., Protective Benefits Communication of Ohio, Protective Benefits Communication of Texas, Protective Finance Corporation, Protective Finance Corporation II, Protective Finance Corporation III, Protective Investment Advisors, Inc., Protective Life Insurance Company, Protective Life Corporation, Protective Life Insurance Company of Kentucky, Protective Life and Annuity Insurance Company, Protective Marketing Enterprises, Inc., Protective Producers Association, Protective Services, Inc., Protective Real Estate Holdings, Inc., Real Estate Asset Purchase Corporation, Specialty Asset Management Corporation, Western Diversified Accident & Health, LTD., Western Diversified Capital Funding, Western Diversified Casualty Insurance, and Western Diversified Service, Inc.
- (2) The Company is included in the consolidated federal income tax return of PLC and its subsidiaries. Pursuant to PLC's tax sharing agreement, income tax expense is allocated to those entities within the group as if each individual entity filed as separate return and the Company incurs a liability to PLC to the extent that a separate return calculation indicates that the Company has a federal income tax liability. If the Company has an income tax benefit, the benefit is not recorded currently, but is instead used as an offset to income tax expenses realized in the future. Income tax expense is recorded in the due to/from affiliates account and is settled periodically.

10. Information Concerning Parent, Subsidiaries, and Affiliates

The Company is a wholly owned subsidiary of Protective Life Insurance Company (Protective Life). Protective Life is a wholly owned subsidiary of Protective Life Corporation (PLC), an insurance holding company domiciled in the State of Delaware. Affiliated insurers include Empire General Life Assurance Corporation, Protective Life Insurance Company of Kentucky, Protective Life and Annuity Insurance Company, West Coast Life Insurance Company (West Coast), Citizens Accident and Health Insurance Company, Checker Flag Protection, Inc., Financial Protection Marketing, Inc., Western Diversified Services, Inc., Western Diversified Capital Funding Corporation, Advantage Warranty Corporation, Western Diversified Accident and Health Ltd., Insurance Company of the South, Regions Life Insurance Company, MCB Life Insurance Company, Western Diversified Casualty Insurance Company, Lyndon Insurance Group, Inc., Dublin International, Ltd., First Agents Alliance LLC, Prizm Solutions LLC, Lyndon-DFS Administrative Services, Inc., Acceleration National Service Corporation, Lyndon American, Inc., Lyndon DFS Warranty Services, Inc., First Protection Company, First Protection Corporation of Florida, FPC Insurance Agency, Inc., First Protection Limited, Paramount Financial Group, Inc., First Protection Corporation, Gulfco Insurance Services, Inc., Consumer Auto Resale Express, LLC (C.A.R.E. LLC), Lyndon Property Insurance Company, Lyndon General Agency of Texas, Inc., Lyndon Southern Insurance Company, Gulfco Life Insurance Company, Acceleration Life Insurance Company, First Variable Life Insurance Company, National Health Care Systems of Florida, Inc., Oracare Dental Associates, Inc., Oracare Consultants, Inc., and Lyndon Financial Corporation.

In September 2002, Protective Life made a capital contribution of \$15 million to Empire General Life Assurance Corporation.

In September 2002, Protective Life made a capital contribution of \$25 million to West Coast Life Insurance Company.

In December 2002, PLC made capital contributions of \$61.2 million to Protective Life, and \$70 million to the Company.

In December 2002, Protective Life made capital contributions of \$5 million to First Variable Life Insurance Company and \$3.5 million to Western Diversified Services. Western Diversified Services then paid a capital contribution of \$3.5 million to Western Diversified Casualty Insurance Company in December 2002.

During the fourth quarter of 2002, Protective Life and Annuity Insurance Company paid a \$14.75 million dividend to Protective Life.

The Company does not hold any bonds, notes, preferred stocks or mortgage loans of its parent or affiliates.

The Company does not own any shares of an upstream or intermediate parent, either directly or indirectly.

There are no guarantees or undertakings for the benefit of an affiliate which result in an actual contingent exposure of the Company's or any affiliated insurer's assets to liability, other than insurance contracts entered into in the ordinary course of business, except as follows:

Protective Life entered into a guaranty agreement on February 23, 1993, whereby Protective Life guaranteed that Empire General will pay all insurance policy claims made by the holders or beneficiaries of Empire General policies which were issued after the date of the guaranty agreement in accordance with the terms of said policies. Total liabilities for policies covered by this agreement were \$317,659,660 at December 31, 2002.

NOTES TO FINANCIAL STATEMENTS

Protective Life entered into a similar guaranty agreement on October 27, 1993, with Protective Life and Annuity Insurance Company whereby Protective Life has guaranteed the payment of all insurance policy claims made by the holders or beneficiaries of any policies which were issued after the date of the guaranty agreement in accordance with the terms of said policies. Total liabilities for policies covered by this agreement were \$50,627,628 at December 31, 2002.

Protective Life entered into a guaranty agreement on December 31, 1995, whereby Protective Life guaranteed that Protective Life and Annuity Insurance Company will perform all of the obligations of Protective Life pursuant to the terms and conditions of an indemnity coinsurance agreement between Protective Life and an unaffiliated life insurance company. Total liabilities related to this coinsurance agreement were \$9,685,562 at December 31, 2002.

Protective Life entered into a guaranty agreement, effective December 23, 1997, whereby Protective Life has agreed to guarantee that West Coast will pay all insurance policy claims made on insurance policies or binders issued by West Coast to SouthTrust Corporation or its affiliated banks. Total liabilities for policies covered by this agreement were \$64,591,893 at December 31, 2002.

Protective Life entered into a guaranty agreement on January 12, 1998, whereby Protective Life guaranteed that the capital and surplus of West Coast as of the end of any calendar quarter will be maintained at a level no less than 250% of the "Company Action Level RBC" as defined by the State of Alabama. In the event that the capital and surplus of West Coast is less than the "Company Action Level RBC" at the end of a calendar quarter, Protective Life will make a capital contribution to West Coast in such amount necessary to cure the deficiency. However, in no event shall the cumulative capital contributions be more than 2% of Protective Life's assets as of the date of the capital contribution. As of December 31, 2002, Protective Life has not been required to make capital contributions to West Coast in connection with this agreement.

Protective Life Corporation has contracts with its affiliates under which it supplies investment, legal and data processing services on a fee basis and other managerial and administrative services on a shared cost basis. In addition, the affiliates have a joint contract relating to allocation of costs for services performed by employees of one affiliate for another.

Certain affiliates lease office space, equipment and/or electronic data processing equipment from Protective Life based upon amounts that would be similar to those charged to an unrelated company in an arms-length transaction.

11. Debt

A. Capital Notes

The Company has no capital notes outstanding.

B. All Other Debt

As of December 31, 2002, the Company had no liability for borrowed money and had no reverse repurchase agreements outstanding.

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

The Company has no Employees.

13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations

(1) The Company has 850 common stock shares authorized. All shares are issued and outstanding. Each share has a par value of \$1.00.

(2) The Company has no preferred stock authorized or outstanding.

(3)&(4) Dividends on the Company's common stock are noncumulative and are paid as determined by the Board of Directors. Dividends are paid from statutory operating earnings. There were no dividends declared or paid in 2002.

(5) There are no restrictions on the Company's unassigned surplus funds.

(6) N/A

(7) N/A

(8) N/A

(9) Unassigned funds have been reduced by \$185,356 as a result of non-admitted asset values.

(10) The Company has no surplus debentures outstanding.

(11) N/A

(12) N/A

NOTES TO FINANCIAL STATEMENTS

14. Contingencies

A. Contingent Commitments

The Company is not aware of any material contingent liabilities as of December 31, 2002, other than those provided for in this statement. The Company has committed no reserves to cover any contingent liabilities.

B. Assessments
N/AC. Gain Contingencies
N/A

D. All Other Contingencies

Various lawsuits against the Company have arisen in the course of the Company's business. Contingent liabilities arising from litigation, income taxes and other matters are not considered material in relation to the financial position of the Company.

15. Leases

The Company has no material lease obligations.

16. Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk
N/A

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities

The Company has no assets transferred with put options.

The Company had no Wash Sales during the year.

18. Gain or Loss to the Reporting Entity from Uninsured A&H Plans and the Uninsured Portion of Partially Insured Plans
N/A

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

The Company had no premium written or produced by Managing General Agents or Third Party Administrators during 2002.

20. Other Items

A. Extraordinary Items
N/AB. Troubled Debt Restructuring
N/A

C. Other Disclosures

Certain assets are pledged or on deposit as collateral with state insurance departments. These assets are identified on Schedule D with a C per NAIC instructions. Assets that are only partially pledged will be identified with a C followed by an *.

D. Balance That is Reasonably Possible to be Uncollectible
N/A

E.-O. N/A

21. Events Subsequent

No events have occurred subsequent to the close of the books of accounts for this statement which would have a material effect on the financial condition of the Company.

NOTES TO FINANCIAL STATEMENTS

22. Reinsurance

CEDED REINSURANCE REPORT

Section 1 - General Interrogatories

A. Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company? Yes No If yes, give full details.

B. Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) which is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor of an insured or any other person not primarily engaged in the insurance business?

Yes No If yes, give full details.

Section 2 - Ceded Reinsurance Report - Part A

A. Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits? Yes No

i) If yes, what is the estimated amount of the aggregate reduction in surplus of a unilateral cancellation by the reinsurer as of the date of this statement, for those agreements in which cancellation results in a net obligation of the company to the reinsurer, and for which such obligation is not presently accrued? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate. \$ N/A

ii) What is the total amount of reinsurance credits taken, whether as an asset or as a reduction of liability, for these agreements in this statement? \$ N/A

B. Does the company have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts which, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies? Yes No If yes, give full details.

Section 3 - Ceded Reinsurance Report - Part B

A. What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of all reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured making this estimate. N/A

B. Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts which were in-force or which had existing reserves established by the company as the effective date of the agreement? Yes No

If yes, what is the amount of reinsurance credits, whether an asset or a reduction of liability, taken for such new agreements or amendments. N/A

UNCOLLECTIBLE REINSURANCE

The Company has not written off any reinsurance receivables during the year. At December 31, 2002, the Company has no reinsurance receivables considered uncollectible.

COMMUTATION OF CEDED REINSURANCE

The Company has not commuted any ceded reinsurance amounts during the year.

23. Retrospectively Rated Contracts
N/A

24. Change in Incurred Losses and Loss Adjustment Expenses
N/A

25. Intercompany Pooling Arrangements
N/A

26. Reserves for Life Contracts and Deposit-Type Contracts

A. The Company waives deduction of deferred fractional premiums upon death of the insureds and returns any portion of the final premium beyond the month of death. The Company has certain surrender values in excess of the legally computed reserves which are included in Exhibit 5, Section A.

B. The Company does not have substandard policies.

NOTES TO FINANCIAL STATEMENTS

C. As of December 31, 2002, the Company has \$8,313,302 of insurance in force for which the gross premiums are less than the net premiums according to the standard valuation set by the State of Ohio. Reserves to cover this insurance totaled \$56,047 and are reported in Exhibit 5, Section G.

D. The Tabular Interest (Page 7, Line 4) has been determined by formula as described in the calculation of policy reserves, depending on the line of business.

The Tabular Less Actuarial Reserve Released (Page 7, Line 5) has been determined by formula as described in the instructions for Page 7.

The Tabular Cost (Page 7, Line 9) has been determined by formula as described in the instructions for Page 7.

E. For the determination of Investment Earnings on funds not involving life contingencies under Exhibit 7, Line 3 for each valuation rate of interest the tabular interest is calculated as one-hundredth of the product of such valuation rate of interest times the mean of the amounts of funds subject to such valuation rate of interest held at the beginning and the end of the year of valuation. The total amount of all such products is entered under Exhibit 7, Line 3.

27. Variable Annuities with Guaranteed Living Benefits
N/A

28. Analysis of Annuity Actuarial Reserves and Deposit Liabilities by Withdrawal Characteristics
N/A

29. Premium and Annuity Considerations Deferred and Uncollected
N/A

30. Separate Accounts
N/A

PROTECTIVE LIFE INSURANCE COMPANY OF OHIO

SUMMARY INVESTMENT SCHEDULE

Investment Categories	Gross Investment Holdings		Admitted Assets as Reported in the Annual Statement	
	1 Amount	2 Percentage	3 Amount	4 Percentage
1. Bonds:				
1.1 U.S. treasury securities.....	123,039	4.0	123,039	4.0
1.2 U.S. government agency and corporate obligations (excluding mortgage-backed securities):				
1.21 Issued by U.S. government agencies.....		0.0		0.0
1.22 Issued by U.S. government sponsored agencies.....		0.0		0.0
1.3 Foreign government (including Canada, excluding mortgage-backed securities).....		0.0		0.0
1.4 Securities issued by states, territories and possessions and political subdivisions in the U.S.:				
1.41 States, territories and possessions general obligations.....		0.0		0.0
1.42 Political subdivisions of states, territories & possessions & political subdivisions general obligations.....		0.0		0.0
1.43 Revenue and assessment obligations.....		0.0		0.0
1.44 Industrial development and similar obligations.....		0.0		0.0
1.5 Mortgage-backed securities (includes residential and commercial MBS):				
1.51 Pass-through securities:				
1.511 Guaranteed by GNMA.....		0.0		0.0
1.512 Issued by FNMA and FHLMC.....		0.0		0.0
1.513 Privately issued.....		0.0		0.0
1.52 CMOs and REMICs:				
1.521 Issued by FNMA and FHLMC.....		0.0		0.0
1.522 Privately issued and collateralized by MBS issued or guaranteed by GNMA, FNMA or FHLMC.....		0.0		0.0
1.523 All other privately issued.....		0.0		0.0
2. Other debt and other fixed income securities (excluding short-term):				
2.1 Unaffiliated domestic securities (includes credit tenant loans rated by the SVO).....		0.0		0.0
2.2 Unaffiliated foreign securities.....		0.0		0.0
2.3 Affiliated securities.....		0.0		0.0
3. Equity interests:				
3.1 Investments in mutual funds.....		0.0		0.0
3.2 Preferred stocks:				
3.21 Affiliated.....		0.0		0.0
3.22 Unaffiliated.....		0.0		0.0
3.3 Publicly traded equity securities (excluding preferred stocks):				
3.31 Affiliated.....		0.0		0.0
3.32 Unaffiliated.....		0.0		0.0
3.4 Other equity securities:				
3.41 Affiliated.....		0.0		0.0
3.42 Unaffiliated.....		0.0		0.0
3.5 Other equity interests including tangible personal property under lease:				
3.51 Affiliated.....		0.0		0.0
3.52 Unaffiliated.....		0.0		0.0
4. Mortgage loans:				
4.1 Construction and land development.....		0.0		0.0
4.2 Agricultural.....		0.0		0.0
4.3 Single family residential properties.....		0.0		0.0
4.4 Multifamily residential properties.....		0.0		0.0
4.5 Commercial loans.....		0.0		0.0
5. Real estate investments:				
5.1 Property occupied by company.....		0.0		0.0
5.2 Property held for production of income (includes \$.....0 of property acquired in satisfaction of debt).....		0.0		0.0
5.3 Property held for sale (\$.....0 including property acquired in satisfaction of debt).....		0.0		0.0
6. Policy loans.....		0.0		0.0
7. Receivables for securities.....		0.0		0.0
8. Cash and short-term investments.....	2,925,271	96.0	2,925,271	96.0
9. Other invested assets.....		0.0		0.0
10. Total invested assets.....	3,048,310	100.0	3,048,310	100.0

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []

1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [X] No [] N/A []

1.3 State regulating? Ohio

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]

2.2 If yes, date of change: _____
If not previously filed, furnish herewith a certified copy of the instrument as amended.

3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2000

3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2000

3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 03/27/2002

3.4 By what department or departments? Ohio Department of Insurance

4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under a common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.11 sales of new business? Yes [] No [X]

4.12 renewals? Yes [] No [X]

4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.21 sales of new business? Yes [] No [X]

4.22 renewals? Yes [] No [X]

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]

5.2 If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Company Code	3 State of Domicile

6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? (You need not report an action, either formal or informal, if a confidentiality clause is part of the agreement.) Yes [] No [X]

6.2 If yes, give full information: _____

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]

7.2 If yes,
7.21 State the percentage of foreign control.0.000 %

7.22 State the nationality(ies) of the foreign person(s) or entity(ies); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(ies) (e.g., individual, corporation, government, manager or attorney-in-fact)

1 Nationality	2 Type of Entity

GENERAL INTERROGATORIES (continued)

8. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
PriceWaterhouseCoopers
1901 6th Ave N. Birmingham, AL 35068
9. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with a(n) actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
Thomas Michael Presley 2801 Hwy 280 S. Birmingham, AL 35223
Officer
10. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:
- 10.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

- 10.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No []
- 10.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No []
- 10.4 If answer to (10.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A []

BOARD OF DIRECTORS

11. Is the purchase or sale of all investments of the reporting entity passed upon either by the Board of Directors or a subordinate committee thereof? Yes [X] No []
12. Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors and all subordinate committees thereof? Yes [X] No []
13. Has the reporting entity an established procedure for disclosure to its Board of Directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees which is in or is likely to conflict with the official duties of such person? Yes [X] No []

FINANCIAL

- 14.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):
- 14.11 To directors or other officers \$.....0
- 14.12 To stockholders not officers \$.....0
- 14.13 Trustees, supreme or grand (Fraternal only) \$.....0
- 14.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):
- 14.21 To directors or other officers \$.....0
- 14.22 To stockholders not officers \$.....0
- 14.23 Trustees, supreme or grand (Fraternal only) \$.....0
- 15.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]
- 15.2 If yes, state the amount thereof at December 31 of the current year:
- 15.21 Rented from others \$.....0
- 15.22 Borrowed from others \$.....0
- 15.23 Leased from others \$.....0
- 15.24 Other \$.....0
- Disclose in the Notes to Financial the nature of each obligation.
- 16.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [] No [X]
- 16.2 If answer is yes:
- 16.21 Amount paid as losses or risk adjustment \$.....0
- 16.22 Amount paid as expenses \$.....0
- 16.23 Other amounts paid \$.....0

GENERAL INTERROGATORIES (continued)

INVESTMENT

17. List the following capital stock information for the reporting entity:

Class	1 Number of Shares Authorized	2 Number of Shares Outstanding	3 Par Value Per Share	4 Redemption Price If Callable	5 Is Dividend Rate Limited?	6 Are Dividends Cumulative?
Preferred.....	.....	.....	.....	.....	Yes [].....No [].....	Yes [].....No [].....
Common.....	.....850.000	.....850.000	.....1.00	.....XXX.....	.....XXX.....XXX.....	.....XXX.....XXX.....

18.1 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date, except as shown by Schedule E-Part 2-Special Deposits? Yes [X] No []

18.2 If no, give full and complete information relating thereto.

19.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity, except as shown on Schedule E-Part 2-Special Deposits, or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 15.1) Yes [] No [X]

19.2 If yes, state the amount thereof at December 31 of the current year:

19.21 Loaned to others	\$.....0
19.22 Subject to repurchase agreements	\$.....0
19.23 Subject to reverse repurchase agreements	\$.....0
19.24 Subject to dollar repurchase agreements	\$.....0
19.25 Subject to reverse dollar repurchase agreements	\$.....0
19.26 Pledged as collateral	\$.....0
19.27 Placed under option agreements	\$.....0
19.28 Letter stock or securities restricted as to sale	\$.....0
19.29 Other	\$.....0

19.3 For each category above, if any of these assets are held by others, identify by whom held:

19.31	_____
19.32	_____
19.33	_____
19.34	_____
19.35	_____
19.36	_____
19.37	_____
19.38	_____
19.39	_____

For categories (19.21) and (19.23) above, and for any securities that were made available for use by another person during the period covered by this statement, attach a schedule as shown in the instructions to the annual statement.

19.4 For category (19.28) provide the following:

1 Nature of Restriction	2 Description	3 Amount

20.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]

20.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A [X]
If no, attach a description with this statement.

21.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No [X]

21.2 If yes, state the amount thereof at December 31 of the current year: \$.....0

22. Excluding items in Schedule E, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Part 1-General, Section IV.H-Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []

22.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
Bank of New York	1 Wall Street NY, NY

GENERAL INTERROGATORIES (continued)

INVESTMENT

22.02 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

22.03 Have there been any changes, including name changes, in the custodian(s) identified in 22.01 during the current year? Yes [] No [X]

22.04 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason

22.05 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository Number(s)	2 Name	3 Address

OTHER

23.1 Amount of payments to Trade Associations, Service Organizations and Statistical or Rating Bureaus, if any? \$.....0

23.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to Trade Associations, Service Organizations and Statistical or Rating Bureaus during the period covered by this statement.

1 Name	2 Amount Paid

24.1 Amount of payments for legal expenses, if any? \$.....0

24.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid

25.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$.....0

25.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid

GENERAL INTERROGATORIES (continued)

PART 2 - LIFE INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force?	Yes []	No [X]	
1.2	If yes, indicate premium earned on U.S. business only	\$.....		0
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?	\$.....		0
1.31	Reason for excluding			
<hr/>				
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.	\$.....		0
1.5	Indicate total incurred claims on all Medicare Supplement insurance.	\$.....		0
1.6	Individual policies:			
	Most current three years:			
1.61	Total premium earned	\$.....		291,846
1.62	Total incurred claims	\$.....		43,262
1.63	Number of covered lives	.....		8,912
	All years prior to most current three years:			
1.64	Total premium earned	\$.....		48,999
1.65	Total incurred claims	\$.....		40,334
1.66	Number of covered lives	.....		2,432
1.7	Group policies:			
	Most current three years:			
1.71	Total premium earned	\$.....		0
1.72	Total incurred claims	\$.....		0
1.73	Number of covered lives	.....		0
	All years prior to most current three years:			
1.74	Total premium earned	\$.....		0
1.75	Total incurred claims	\$.....		0
1.76	Number of covered lives	.....		0
2.1	Does this reporting entity have Separate Accounts?	Yes []	No [X]	
2.2	If yes, has a Separate Accounts statement been filed with this Department?	Yes []	No []	N/A [X]
2.3	What portion of capital and surplus funds of the reporting entity covered by assets in the Separate Accounts statement, is not currently distributable from the Separate Accounts to the general account for use by the general account?	\$.....		0
2.4	State the authority under which Separate Accounts are maintained:			
<hr/>				
2.5	Was any of the reporting entity's Separate Accounts business reinsured as of December 31?	Yes []	No []	
2.6	Has the reporting entity assumed by reinsurance any Separate Accounts business as of December 31?	Yes []	No []	
3.1	Are personnel or facilities of this reporting entity used by another entity or entities or are personnel or facilities of another entity or entities used by this reporting entity (except for activities such as administration of jointly underwritten group contracts and joint mortality or morbidity studies)?	Yes [X]	No []	
3.2	Net reimbursement of such expenses between reporting entities:			
3.21	Paid	\$.....		0
3.22	Received	\$.....		0
4.1	Does the reporting entity write any guaranteed interest contracts?	Yes []	No [X]	
4.2	If yes, what amount pertaining to these items is included in:			
4.21	Page 3, Line 3	\$.....		0
4.22	Page 4, Line 1	\$.....		0
5.	For stock reporting entities only:			
5.1	Total amount paid in by stockholders as surplus funds since organization of the reporting entity:	\$.....		2,800,000
6.	Total dividends paid stockholders, since organization of the reporting entity:			
6.11	Cash	\$.....		0
6.12	Stock	\$.....		0
7.1	Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly?	Yes []	No [X]	
7.11	Name of real estate holding company			
<hr/>				
7.12	Number of parcels involved	.....		0
7.13	Total book/adjusted carrying value	\$.....		0
7.2	If yes, provide explanation			
<hr/>				
<hr/>				

PROTECTIVE LIFE INSURANCE COMPANY OF OHIO GENERAL INTERROGATORIES (continued)

PART 2 - LIFE INTERROGATORIES (continued)

8.1 Does the company reinsure any Workers' Compensation Carve-Out business defined as: Yes [] No [X]
 Workers' compensation carve-out business is defined as reinsurance (including retrocessional reinsurance) assumed by life and health insurers of medical, wage loss and death benefits of the occupational illness and accident exposures, but not the employers liability exposures, of business originally written as workers' compensation insurance.

8.2 If yes, has the reporting entity completed the Workers' Compensation Carve-Out Supplement to the Annual Statement? Yes [] No []

8.3 If 8.1 is yes, the amounts of earned premiums and claims incurred in this statement are:

	1 Reinsurance Assumed	2 Reinsurance Ceded	3 Net Retained
8.31 Earned premium.....	\$.....0	\$.....0	\$.....0
8.32 Paid claims.....	\$.....0	\$.....0	\$.....0
8.33 Claim liability and reserve (beginning of year).....	\$.....0	\$.....0	\$.....0
8.34 Claim liability and reserve (end of year).....	\$.....0	\$.....0	\$.....0
8.35 Incurred claims.....	\$.....0	\$.....0	\$.....0

8.4 If reinsurance assumed included amounts with attachment points below \$1,000,000, the distribution of the amounts reported in Lines 8.31 and 8.34 for Column (1) are:

Attachment Point	1 Earned Premium	2 Claim Liability and Reserve
8.41 < \$25,000.....	\$.....0	\$.....0
8.42 \$25,000 -- 99,999.....	\$.....0	\$.....0
8.43 \$100,000 -- 249,999.....	\$.....0	\$.....0
8.44 \$250,000 -- 999,999.....	\$.....0	\$.....0
8.45 \$1,000,000 or more.....	\$.....0	\$.....0

8.5 What portion of earned premium reported in 8.31, Column 1 was assumed from pools? \$.....0

PROTECTIVE LIFE INSURANCE COMPANY OF OHIO

FIVE YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e., 17.6.

Show amounts of life insurance in this exhibit in thousands (omit \$000)

	1 2002	2 2001	3 2000	4 1999	5 1998
Life Insurance in Force (Exhibit of Life Insurance)					
1. Ordinary - whole life and endowment (Line 34, Col. 4).....					
2. Ordinary - term (Line 21, Col. 4, less Line 34, Col. 4).....	27,354	31,021	32,345	17,347	8,014
3. Credit life (Line 21, Col. 6).....	539,887	593,320	692,493	553,087	294,794
4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4).....					
5. Industrial (Line 21, Col. 2).....					
6. FEGLI/SGLI (Lines 43 & 44, Col. 4).....					
7. Total (Line 21, Col. 10).....	567,241	624,341	724,838	570,434	302,808
New Business Issued (Exhibit of Life Insurance)					
8. Ordinary - whole life and endowment (Line 34, Col. 2).....					
9. Ordinary - term (Line 2, Col. 4, less Line 34, Col. 2).....	7,503	11,782	19,842	11,474	8,014
10. Credit life (Line 2, Col. 6).....	246,618	240,083	418,217	433,790	340,182
11. Group (Line 2, Col. 9).....					
12. Industrial (Line 2, Col. 2).....					
13. Total (Line 2, Col. 10).....	254,121	251,865	438,059	445,264	348,196
Premium Income - Lines of Business					
14. Industrial life (Exhibit 1-Part 1, Line 20.4, Col. 2).....					
15.1 Ordinary life insurance (Exhibit 1-Part 1, Line 20.4, Col. 3).....	55,195	(159,345)	388,127	95,808	75,146
15.2 Ordinary individual annuities (Exhibit 1-Part 1, Line 20.4, Col. 4).....					
16. Credit life (group and individual) (Exhibit 1-Part 1, Line 20.4, Col. 5).....					
17.1 Group life insurance (Exhibit 1-Part 1, Line 20.4, Col. 6).....					
17.2 Group annuities (Exhibit 1-Part 1, Line 20.4, Col. 7).....					
18.1 A&H - group (Exhibit 1-Part 1, Line 20.4, Col. 8).....					
18.2 A&H - credit (group and individual) (Exhibit 1-Part 1, Line 20.4, Col. 9).....					
18.3 A&H - other (Exhibit 1-Part 1, Line 20.4, Col. 10).....					
19. Aggregate of all other lines of business (Exhibit 1-Part 1, Line 20.4, Col. 11).....					
20. Deposit-type funds.....	XXX	XXX			
21. Total.....	55,195	(159,345)	388,127	95,808	75,146
Balance Sheet Items (Pages 2 and 3)					
22. Total admitted assets excluding Separate Accounts business (Page 2, Line 25, Col. 3).....	3,665,870	4,777,545	11,257,825	5,949,912	4,626,274
23. Total liabilities excluding Separate Accounts business (Page 3, Line 26).....	295,788	1,557,573	8,576,056	3,304,633	1,822,477
24. Aggregate life reserves (Page 3, Line 1).....	114,086	150,451	377,918	121,955	96,180
25. Aggregate A&H reserves (Page 3, Line 2).....					
26. Deposit-type contract funds (Page 3, Line 3).....			XXX	XXX	XXX
27. Asset valuation reserve (Page 3, Line 24.1).....			1,044	2,092	873
28. Capital (Page 3, Lines 29 & 30).....	850	850	850	850	850
29. Surplus (Page 3, Line 37).....	3,369,232	3,219,121	2,680,918	2,644,428	2,802,947
Risk-Based Capital Analysis					
30. Total adjusted capital.....	3,370,082	3,219,971	2,682,812	2,647,370	2,793,245
31. Authorized control level risk-based capital.....	155,679	164,093	253,353	229,522	166,192
Percentage Distribution of Assets (Page 2, Col. 3) (Line No. /Page 2, Line 11, Col. 3) x 100.0					
32. Bonds (Line 1).....	4.0	55.4	25.4	45.1	58.6
33. Stocks (Lines 2.1 and 2.2).....					
34. Mortgage loans on real estate (Lines 3.1 and 3.2).....					
35. Real estate (Line 4.1, 4.2 and 4.3).....					
36. Policy loans (Line 5).....					
37. Premium notes (Line 6).....					
38. Cash and short-term investments (Line 7).....	96.0	44.6	74.6	54.9	41.4
39. Other invested assets (Line 8).....					
40. Receivable for securities (Line 9).....					
41. Aggregate write-ins for invested assets (Line 10).....					
42. Cash and invested assets (Line 11).....	100.0	100.0	100.0	100.0	100.0

PROTECTIVE LIFE INSURANCE COMPANY OF OHIO

FIVE YEAR HISTORICAL DATA

(continued)

	1 2002	2 2001	3 2000	4 1999	5 1998
Investments in Parent, Subsidiaries and Affiliates					
43. Affiliated bonds (Sch. D Summary, Line 25 Col. 1).....					
44. Affiliated preferred stocks (Sch. D Summary, Line 39 Col. 1).....					
45. Affiliated common stocks (Sch. D Summary, Line 53 Col. 2).....					
46. Affiliated short-term investments (subtotal included in Schedule DA, Part 2 Col. 5, Line 11).....					
47. Affiliated mortgage loans on real estate.....					
48. All other affiliated.....					
49. Total of above Lines 43 to 48.....	0	0	0	0	0
Total Nonadmitted and Admitted Assets					
50. Total nonadmitted assets (Page 2, Line 27, Col. 2).....	185,356	270,264	172,391	121,938	112,459
51. Total admitted assets (Page 2, Line 27, Col. 3).....	3,665,870	4,777,545	11,257,825	5,949,912	4,626,274
Investment Data					
52. Net investment income (Exhibit of Net Investment Income).....	116,617	320,001	397,576	219,196	196,179
53. Realized capital gains (losses).....					
54. Unrealized capital gains (losses).....					
55. Total of above Lines 52, 53 and 54.....	116,617	320,001	397,576	219,196	196,179
Benefits and Reserve Increase (Page 6)					
56. Total contract benefits - life (Lines 10, 11, 12, 13, 14 and 15 Col. 1 less Lines 10, 11, 12, 13, 14 and 15, Cols. 9, 10 & 11).....	(7,285)	18,327	32,220	40,334	
57. Total contract benefits - A&H (Lines 13 & 14, Cols. 9, 10 & 11).....					
58. Increase in life reserves - other than group and annuities (Line 19, Cols. 2 & 3).....	(36,365)	(227,467)	255,963	25,775	96,180
59. Increase in A&H reserves (Line 19, Cols. 9, 10 & 11).....					
60. Dividends to policyholders (Line 30, Col 1).....					
Operating Percentages					
61. Insurance expense percent (Page 6, Col. 1, Lines 21, 22, & 23 less Line 6)/(Page 6 Col. 1, Line 1 plus group annuity contribution funds) x 100.00.....	10.2	54.5	52.5	36.4	0.0
62. Lapse percent (ordinary only) (Exhibit of Life Insurance, Col. 4, Lines 14 & 15) x 100.00 / 1/2 (Lines 1 & 21).....	1.5	4.9	2.7	16.5	
63. A&H loss percent (Schedule H, Part 1, Lines 3 & 4, Col. 2).....					
64. A&H expense percent (Schedule H, Part 1, Line 8, Col. 2).....					
A&H Claim Reserve Adequacy					
65. Incurred losses on prior years' claims - group health (Sch. H, Part 3, Line 3.1, Col. 2).....					
66. Prior years' claim liability and reserve - group health (Sch. H, Part 3, Line 3.2, Col. 2).....					
67. Incurred losses on prior years' claims - health other than group (Sch. H, Part 3, Line 3.1, Col. 1 less Col. 2).....					
68. Prior years' claim liability and reserve - health other than group (Sch. H, Part 3, Line 3.2, Col. 1 less Col. 2).....					
Net Gains From Operations After Federal Income Taxes by Lines of Business (Page 6, Line 33)					
69. Industrial life (Col. 2).....					
70. Ordinary - life (Col. 3).....	47,049	101,652	(63,682)	(38,660)	(30,303)
71. Ordinary - individual annuities (Col. 4).....					
72. Ordinary - supplementary contracts (Col. 5).....					
73. Credit life (Col. 6).....	7,142	65,787	128,423	40,106	56,780
74. Group life (Col. 7).....					
75. Group annuities (Col. 8).....					
76. A&H - group (Col. 9).....					
77. A&H - credit (Col. 10).....	12,147	104,436	164,464	60,786	90,652
78. A&H - other (Col. 11).....					
79. Aggregate of all other lines of business (Col. 12).....					
80. Total (Col. 1).....	66,338	271,875	229,205	62,232	117,129

EXHIBIT OF LIFE INSURANCE

	Industrial		Ordinary		Credit Life (Group and Individual)		Group			10 Total Amount of Insurance (a)
	1 Number of Policies	2 Amount of Insurance (a)	3 Number of Policies	4 Amount of Insurance (a)	5 Number of Individual Policies and Group Certificates	6 Amount of Insurance (a)	Number of		9 Amount of Insurance (a)	
							7 Policies	8 Certificates		
1. In force end of prior year.....			3,134	31,021	68,368	593,320				624,341
2. Issued during year.....			734	7,503	16,785	246,618				254,121
3. Reinsurance assumed.....										0
4. Revived during year.....										0
5. Increased during year (net).....			1	4	1	4,168				4,172
6. Subtotals, Lines 2 to 5.....	0	0	735	7,507	16,786	250,786	0	0	0	258,293
7. Additions by dividends during year.....	XXX		XXX		XXX		XXX	XXX		0
8. Aggregate write-ins for increases.....	0	0	0	0	0	0	0	0	0	0
9. Totals (Lines 1 and 6 to 8).....	0	0	3,869	38,528	85,154	844,106	0	0	0	882,634
Deductions during year:										
10. Death.....			9	93	236	2,245	XXX			2,338
11. Maturity.....							XXX			0
12. Disability.....							XXX			0
13. Expiry.....			1,295	10,637	10,677	18,820				29,457
14. Surrender.....			31	444	8,153	75,763				76,207
15. Lapse.....										0
16. Conversion.....							XXX	XXX	XXX	0
17. Decreased (net).....					317	207,391				207,391
18. Reinsurance.....										0
19. Aggregate write-ins for decreases.....	0	0	0	0	0	0	0	0	0	0
20. Totals (Lines 10 to 19).....	0	0	1,335	11,174	19,383	304,219	0	0	0	315,393
21. In force end of year (Line 9 minus Line 20).....	0	0	2,534	27,354	65,771	539,887	0	0	0	567,241
22. Reinsurance ceded end of year.....	XXX		XXX	19,041	XXX	539,887	XXX	XXX		558,928
23. Line 21 minus Line 22.....	XXX	0	XXX	8,313	XXX	(b) 0	XXX	XXX	0	8,313

DETAILS OF WRITE-INS

0801.										0
0802.										0
0803.										0
0898. Summary of remaining write-ins for Line 8 from overflow page.....	0	0	0	0	0	0	0	0	0	0
0899. Totals (Lines 0801 thru 0803 plus 0898) (Line 8 above).....	0	0	0	0	0	0	0	0	0	0
1901.										0
1902.										0
1903.										0
1998. Summary of remaining write-ins for Line 19 from overflow page.....	0	0	0	0	0	0	0	0	0	0
1999. Totals (Lines 1901 thru 1903 plus 1998) (Line 19 above).....	0	0	0	0	0	0	0	0	0	0

(a) Amounts of life insurance in this exhibit shall be shown in thousands (omit 000).

(b) Group \$.....0; Individual \$.....0.

PROTECTIVE LIFE INSURANCE COMPANY OF OHIO

EXHIBIT OF LIFE INSURANCE (continued)

ADDITIONAL INFORMATION ON INSURANCE IN FORCE END OF YEAR

	Industrial		Ordinary	
	1 Number of Policies	2 Amount of Insurance (a)	3 Number of Policies	4 Amount of Insurance (a)
24. Additions by dividends.....	XXX		XXX	
25. Other paid-up insurance.....				
26. Debit ordinary insurance.....	XXX	XXX		

ADDITIONAL INFORMATION ON ORDINARY INSURANCE

Term Insurance Excluding Extended Term Insurance	Issued During Year (Included in Page 30, Line 2)		In Force End of Year (Included in Page 30, Line 21)	
	1 Number of Policies	2 Amount of Insurance (a)	3 Number of Policies	4 Amount of Insurance (a)
27. Term policies-decreasing.....				
28. Term policies-other.....	734	7,503	2,534	27,354
29. Other term insurance-decreasing.....	XXX		XXX	
30. Other term insurance.....	XXX		XXX	
31. Totals, Lines 27 to 30.....	734	7,503	2,534	27,354
Reconciliation to Page 30, Lines 2 and 21:				
32. Term additions.....	XXX		XXX	
33. Totals, extended term insurance.....	XXX	XXX		
34. Totals, whole life and endowment.....				
35. Totals, Lines 31 to 34.....	734	7,503	2,534	27,354

CLASSIFICATION OF AMOUNT OF INSURANCE (a) BY PARTICIPATING STATUS

	Issued During Year (Included in Page 30, Line 2)		In Force End of Year (Included in Page 30, Line 21)	
	1 Non-Participating	2 Participating	3 Non-Participating	4 Participating
36. Industrial.....				
37. Ordinary.....	7,503		27,354	
38. Credit Life (Group and Individual).....	246,618		539,887	
39. Group.....				
40. Totals (Lines 36 to 39).....	254,121	0	567,241	0

ADDITIONAL INFORMATION ON CREDIT LIFE AND GROUP INSURANCE

	Credit Life		Group	
	1 Number of Individual Policies and Group Certificates	2 Amount of Insurance (a)	3 Number of Certificates	4 Amount of Insurance (a)
41. Amount of insurance included in Page 30, Line 2 ceded to other companies.....	XXX	246,618	XXX	
42. Number in force end of year if the number under shared groups is counted on a pro-rata basis.....		XXX		XXX
43. Federal Employees' Group Life Insurance included in Page 30, Line 21.....				
44. Servicemen's Group Life Insurance included in Page 30, Line 21.....				
45. Group Permanent Insurance included in Page 30, Line 21.....				

ADDITIONAL ACCIDENT DEATH BENEFITS

46. Amount of additional accident death benefits in force end of year under ordinary policies.....	
--	--

BASIS OF CALCULATION OF ORDINARY TERM INSURANCE

47. State basis of calculation of (47.1) decreasing term insurance contained in Family Income, Mortgage Protection, etc., policies and riders and of (47.2) term insurance on wife and children under Family, Parent and Children, etc., policies and riders included above.....	NONE
47.1	
47.2	

POLICIES WITH DISABILITY PROVISIONS

Disability Provision	Industrial		Ordinary		Credit		Group	
	1 Number of Policies	2 Amount of Insurance (a)	3 Number of Policies	4 Amount of Insurance (a)	5 Number of Policies	6 Amount of Insurance (a)	7 Number of Certificates	8 Amount of Insurance (a)
48. Waiver of Premium.....								
49. Disability Income.....								
50. Extended Benefits.....								
51. Other.....								
52. Total.....	0	0	0	0	0	0	0	0

(a) Amounts of life insurance in this exhibit shall be shown in thousands (omit 000).

(b) See Paragraph 9 of the Annual Audited Financial Reports in the General section of the annual statement instructions.

EXHIBIT OF NUMBER OF POLICIES, CONTRACTS, CERTIFICATES, INCOME PAYABLE AND ACCOUNT VALUES IN FORCE FOR SUPPLEMENTARY CONTRACTS, ANNUITIES, ACCIDENT & HEALTH AND OTHER POLICIES

SUPPLEMENTARY CONTRACTS

	Ordinary		Group					
	1 Involving Life Contingencies	2 Not Involving Life Contingencies	3 Involving Life Contingencies	4 Not Involving Life Contingencies				
1. In force end of prior year.....	NONE							
2. Issued during year.....								
3. Reinsurance assumed.....								
4. Increased during year (net).....								
5. Total (Lines 1 to 4).....					0	0	0	0
Deductions during year:								
6. Decreased (net).....								
7. Reinsurance.....								
8. Totals (Lines 6 and 7).....					0	0	0	0
9. In force end of year.....					0	0	0	0
10. Amount on deposit.....					(a)		(a)	
11. Income now payable.....								
12. Amount of income payable.....	(a)	(a)	(a)	(a)				

ANNUITIES

	Ordinary		Group					
	1 Immediate	2 Deferred	3 Contracts	4 Certificates				
1. In force end of prior year.....	NONE							
2. Issued during year.....								
3. Reinsurance assumed.....								
4. Increased during year (net).....								
5. Total (Lines 1 to 4).....					0	0	0	0
Deductions during year:								
6. Decreased (net).....								
7. Reinsurance.....								
8. Totals (Lines 6 and 7).....					0	0	0	0
9. In force end of year.....					0	0	0	0
Income now payable:								
10. Amount of income payable.....					(a)	XXX	XXX	(a)
Deferred fully paid:								
11. Account balance.....	XXX	(a)	XXX	(a)				
Deferred not fully paid:								
12. Account balance.....	XXX	(a)	XXX	(a)				

ACCIDENT AND HEALTH INSURANCE

	Ordinary		Group		Credit	
	1 Policies	2 Premiums in force	3 Policies	4 Premiums in force	5 Policies	6 Premiums in force
1. In force end of prior year.....					59,569	43,242,204
2. Issued during year.....					14,361	10,091,017
3. Reinsurance assumed.....						
4. Increased during year (net).....		XXX		XXX		XXX
5. Total (Lines 1 to 4).....	0	XXX	0	XXX	73,930	XXX
Deductions during year:						
6. Conversions.....	XXX	XXX		XXX	XXX	XXX
7. Decreased (net).....		XXX		XXX	17,832	XXX
8. Reinsurance.....		XXX		XXX	56,098	XXX
9. Totals (Lines 6 to 8).....	0	XXX	0	XXX	73,930	XXX
10. In force end of year.....	0	(a)	0	(a)	0	(a)

DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS

	1	2		
	Deposit Funds Contracts	Dividend Accumulations Contracts		
1. In force end of prior year.....				
2. Issued during year.....				
3. Reinsurance assumed.....				
4. Increased during year (net).....				
5. Total (Lines 1 to 4).....	0	0		
Deductions during year:				
6. Decreased (net).....	NONE			
7. Reinsurance.....				
8. Totals (Lines 6 and 7).....			0	0
9. In force end of year.....			0	0
10. Amount of account balance.....			(a)	(a)

(a) See Paragraph 9 of the Annual Audited Financial Reports in the General section of the Annual Statement Instructions.

PROTECTIVE LIFE INSURANCE COMPANY OF OHIO

SCHEDULE D - SUMMARY BY COUNTRY

Long-Term Bonds and Stocks OWNED December 31 of Current Year

Description		1 Book/Adjusted Carrying Value	2 Fair Value (a)	3 Actual Cost	4 Par Value of Bonds
BONDS					
Governments (Including all obligations guaranteed by governments)	1. United States.....	123,039	126,500	123,888	110,000
	2. Canada.....				
	3. Other Countries.....				
	4. Totals.....	123,039	126,500	123,888	110,000
States, Territories and Possessions (Direct and guaranteed)	5. United States.....				
	6. Canada.....				
	7. Other Countries.....				
	8. Totals.....	0	0	0	0
Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	9. United States.....				
	10. Canada.....				
	11. Other Countries.....				
	12. Totals.....	0	0	0	0
Special Revenue and Special Assessment Obligations and all Non-guaranteed Obligations of Agencies and Authorities of Governments and their Political Subdivisions	13. United States.....				
	14. Canada.....				
	15. Other Countries.....				
	16. Totals.....	0	0	0	0
Public Utilities (unaffiliated)	17. United States.....				
	18. Canada.....				
	19. Other Countries.....				
	20. Totals.....	0	0	0	0
Industrial and Miscellaneous and Credit Tenant Loans (Unaffiliated)	21. United States.....				
	22. Canada.....				
	23. Other Countries.....				
	24. Totals.....	0	0	0	0
Parent, Subsidiaries and Affiliates	25. Totals.....				
	26. Total Bonds.....	123,039	126,500	123,888	110,000
PREFERRED STOCKS					
Public Utilities (Unaffiliated)	27. United States.....				
	28. Canada.....				
	29. Other Countries.....				
	30. Totals.....	0	0	0	0
Banks, Trust and Insurance Companies (Unaffiliated)	31. United States.....				
	32. Canada.....				
	33. Other Countries.....				
	34. Totals.....	0	0	0	0
Industrial and Miscellaneous (Unaffiliated)	35. United States.....				
	36. Canada.....				
	37. Other Countries.....				
	38. Totals.....	0	0	0	0
Parent, Subsidiaries and Affiliates	39. Totals.....				
	40. Total Preferred Stocks.....	0	0	0	0
COMMON STOCKS					
Public Utilities (Unaffiliated)	41. United States.....				
	42. Canada.....				
	43. Other Countries.....				
	44. Totals.....	0	0	0	0
Banks, Trust and Insurance Companies (Unaffiliated)	45. United States.....				
	46. Canada.....				
	47. Other Countries.....				
	48. Totals.....	0	0	0	0
Industrial and Miscellaneous (Unaffiliated)	49. United States.....				
	50. Canada.....				
	51. Other Countries.....				
	52. Totals.....	0	0	0	0
Parent, Subsidiaries and Affiliates	53. Totals.....				
	54. Total Common Stocks.....	0	0	0	0
	55. Total Stocks.....	0	0	0	0
	56. Total Bonds and Stocks...	123,039	126,500	123,888	

(a) The aggregate value of bonds which are valued at other than actual fair value is \$.....0.

SCHEDULE D - VERIFICATION BETWEEN YEARS

1. Book/adjusted carrying value of bonds and stocks, prior year.....	2,615,112	6. Foreign exchange adjustment:	
2. Cost of bonds and stocks acquired, Column 6, Part 3.....	123,888	6.1 Column 17, Part 1.....	
3. Increase (decrease) by adjustment:		6.2 Column 13, Part 2, Section 1.....	
3.1 Column 16, Part 1.....	(848)	6.3 Column 11, Part 2, Section 2.....	
3.2 Column 12, Part 2, Section 1.....		6.4 Column 11, Part 4.....	0
3.3 Column 10, Part 2, Section 2.....		7. Book/adjusted carrying value at end of current period.....	123,040
3.4 Column 10, Part 4.....	(15,112)	(15,960)	
4. Total gain (loss), Column 14, Part 4.....		8. Total valuation allowance.....	
5. Deduct consideration for bonds and stocks disposed of, Column 6, Part 4...	2,600,000	9. Subtotal (Lines 7 plus 8).....	123,040
		10. Total nonadmitted amounts.....	
		11. Statement value of bonds and stocks, current period.....	123,040

PROTECTIVE LIFE INSURANCE COMPANY OF OHIO SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS

Allocated by States and Territories

States, Etc.	1 Is Insurer Licensed? (Yes or No)	Direct Business Only				
		Life Contracts		4 Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	5 Deposit-Type Contract Funds	6 Other Considerations
		2 Life Insurance Premiums	3 Annuity Considerations			
1. Alabama.....	AL	NO				
2. Alaska.....	AK	NO				
3. Arizona.....	AZ	NO				
4. Arkansas.....	AR	NO				
5. California.....	CA	NO				
6. Colorado.....	CO	NO				
7. Connecticut.....	CT	NO				
8. Delaware.....	DE	NO				
9. District of Columbia.....	DC	NO				
10. Florida.....	FL	NO				
11. Georgia.....	GA	NO				
12. Hawaii.....	HI	NO				
13. Idaho.....	ID	NO				
14. Illinois.....	IL	NO				
15. Indiana.....	IN	NO				
16. Iowa.....	IA	NO				
17. Kansas.....	KS	NO				
18. Kentucky.....	KY	NO				
19. Louisiana.....	LA	NO				
20. Maine.....	ME	NO				
21. Maryland.....	MD	NO				
22. Massachusetts.....	MA	NO				
23. Michigan.....	MI	NO				
24. Minnesota.....	MN	NO				
25. Mississippi.....	MS	NO				
26. Missouri.....	MO	NO				
27. Montana.....	MT	NO				
28. Nebraska.....	NE	NO				
29. Nevada.....	NV	NO				
30. New Hampshire.....	NH	NO				
31. New Jersey.....	NJ	NO				
32. New Mexico.....	NM	NO				
33. New York.....	NY	NO				
34. North Carolina.....	NC	NO				
35. North Dakota.....	ND	NO				
36. Ohio.....	OH	YES	4,967,280	6,512,863		
37. Oklahoma.....	OK	NO				
38. Oregon.....	OR	NO				
39. Pennsylvania.....	PA	NO				
40. Rhode Island.....	RI	NO				
41. South Carolina.....	SC	NO				
42. South Dakota.....	SD	NO				
43. Tennessee.....	TN	NO				
44. Texas.....	TX	NO				
45. Utah.....	UT	NO				
46. Vermont.....	VT	NO				
47. Virginia.....	VA	NO				
48. Washington.....	WA	NO				
49. West Virginia.....	WV	NO				
50. Wisconsin.....	WI	NO				
51. Wyoming.....	WY	NO				
52. American Samoa.....	AS	NO				
53. Guam.....	GU	NO				
54. Puerto Rico.....	PR	NO				
55. US Virgin Islands.....	VI	NO				
56. Canada.....	CN	NO				
57. Aggregate Other Alien.....	OT	XXX	0	0	0	0
58. Subtotal.....	(a).....	1	4,967,280	0	6,512,863	0
90. Reporting entity contributions for employee benefit plans.....	XXX					
91. Dividends or refunds applied to purchase paid-up additions and annuities.....	XXX					
92. Dividends or refunds applied to shorten endowment or premium paying period.....	XXX					
93. Premium or annuity considerations waived under disability or other contract provisions.....	XXX					
94. Aggregate other amounts not allocable by State.....	XXX		0	0	0	0
95. Totals (Direct Business).....	XXX		4,967,280	0	6,512,863	0
96. Plus reinsurance assumed.....	XXX					
97. Totals (All Business).....	XXX		4,967,280	0	6,512,863	0
98. Less reinsurance ceded.....	XXX		4,912,085		6,512,863	
99. Totals (All Business) less reinsurance ceded.....	XXX		55,195	(b).....	(0)	0

DETAILS OF WRITE-INS

5701.	XXX					
5702.	XXX					
5703.	XXX					
5798. Summary of remaining write-ins for line 57 from overflow page.....	XXX		0	0	0	0
5799. Total (Lines 5701 thru 5703 plus 5798) (Line 57 above).....	XXX		0	0	0	0
9401.	XXX					
9402.	XXX					
9403.	XXX					
9498. Summary of remaining write-ins for line 94 from overflow page.....	XXX		0	0	0	0
9499. Total (Lines 9401 thru 9403 plus 9498) (Line 94 above).....	XXX		0	0	0	0

Explanation of basis of allocation by states, etc., of premiums and annuity considerations.

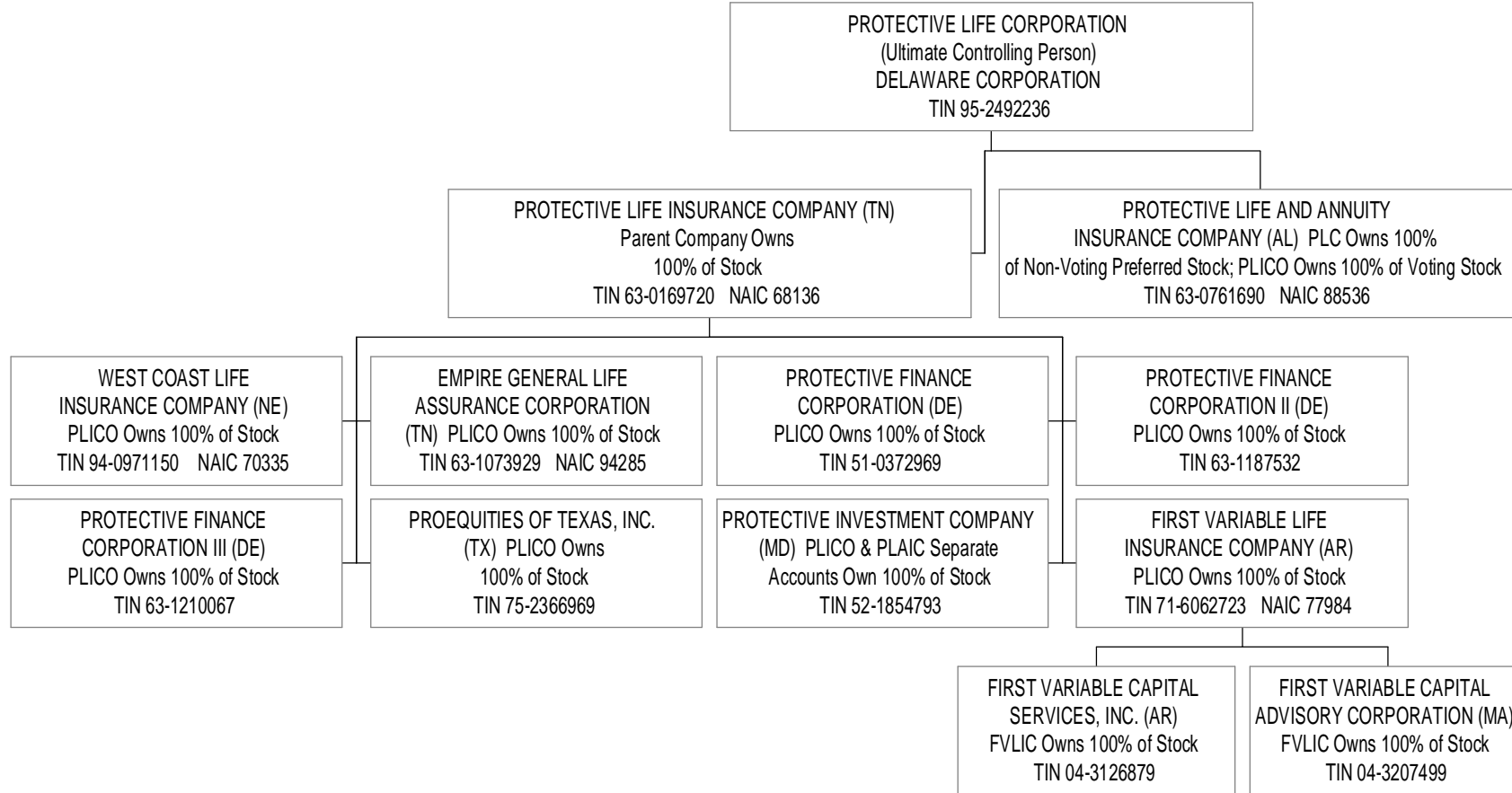
(a) Insert the number of yes responses except for Canada and Other Alien.

(b) Column 4 should balance with Exhibit 1, Lines 6.4, 10.4 and 16.4, Cols. 8, 9, and 10, or with Schedule H, Part 1, Column, Line 1. Indicate which:
N/A

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

PART 1 – ORGANIZATIONAL CHART

PROTECTIVE LIFE CORPORATION ORGANIZATIONAL CHART
 as of DECEMBER 31 , 2002
 Page 1 of 4
 (PLICO INSURANCE SUBSIDIARIES, EXCLUDING APD)

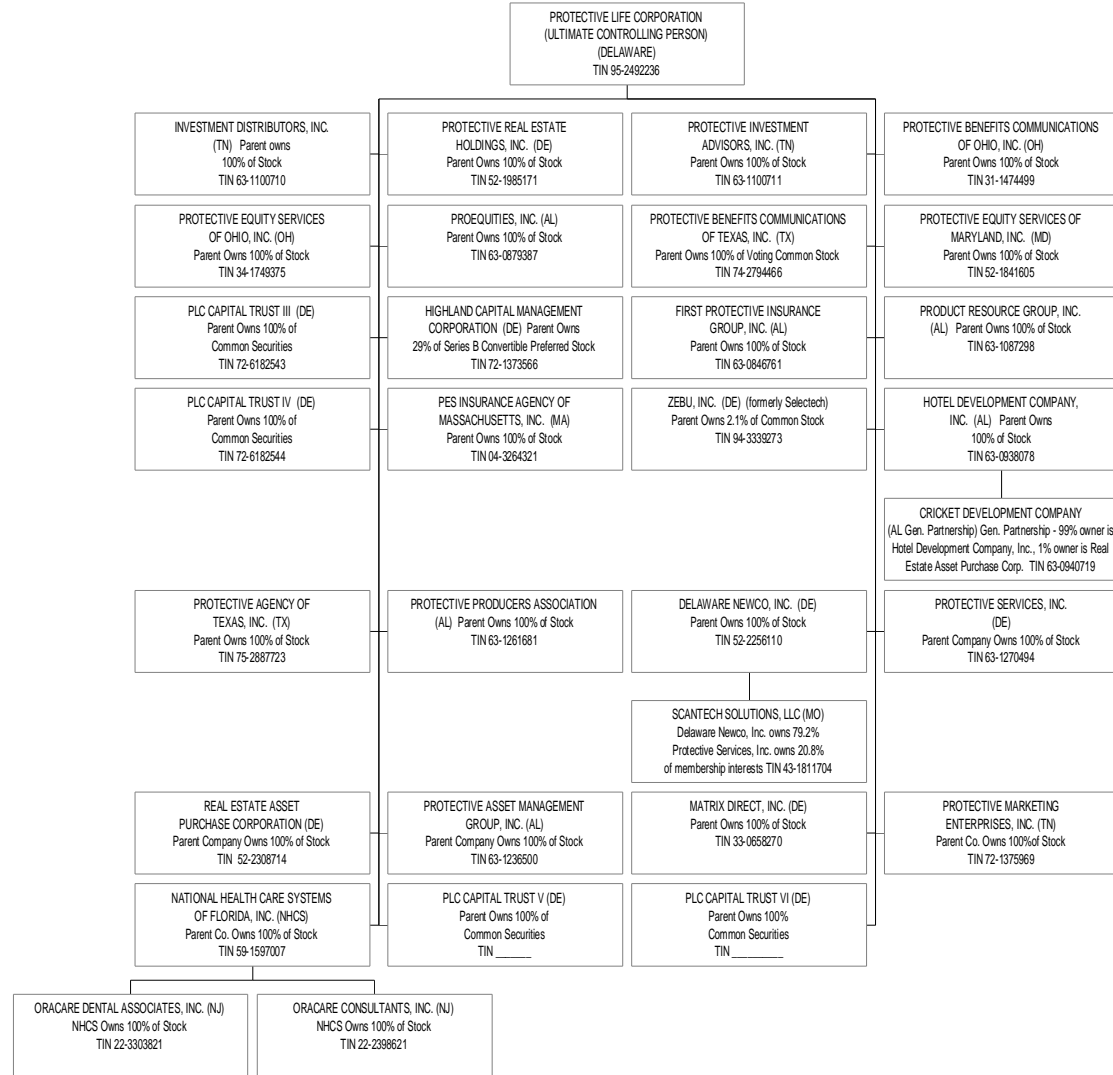


SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

PROTECTIVE LIFE CORPORATION ORGANIZATIONAL CHART
AS OF DECEMBER 31, 2002
Page 2 of 4

PLC NON-INSURANCE COMPANIES (EXCLUDING APD)



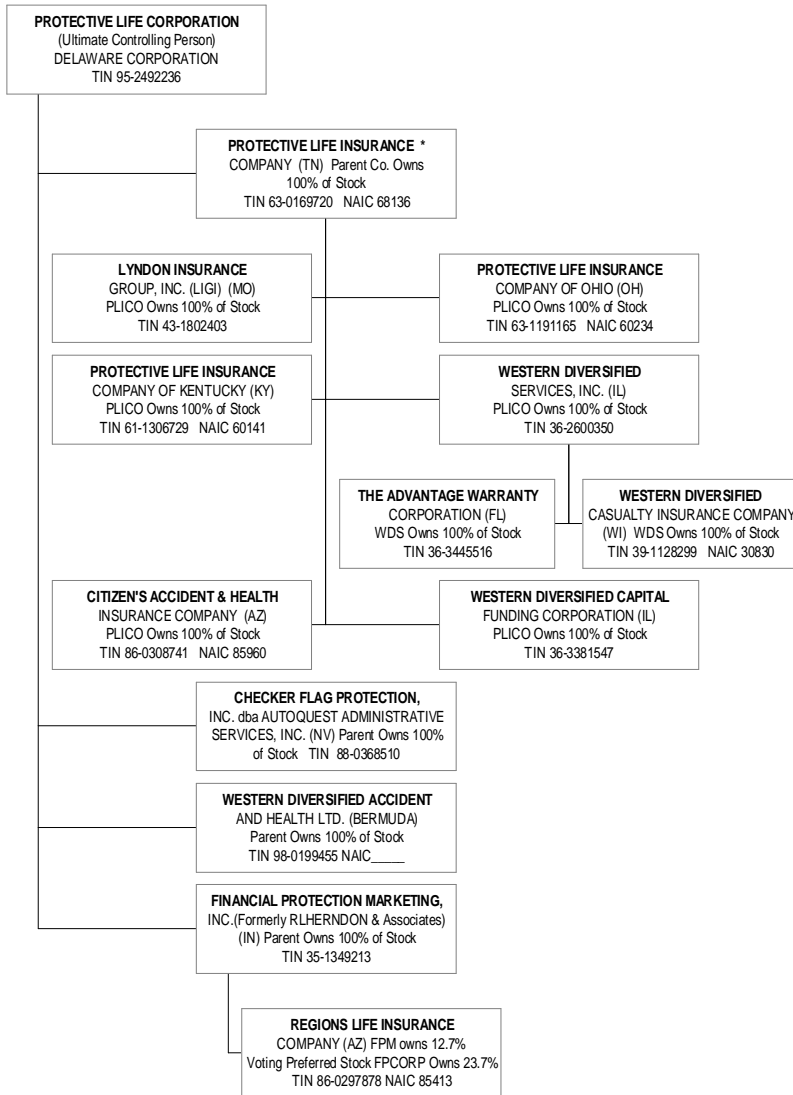
69.1

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

PART 1 – ORGANIZATIONAL CHART

PROTECTIVE LIFE CORPORATION ORGANIZATIONAL CHART
AS OF DECEMBER 31, 2002
Page 3 of 4

ASSET PROTECTION DIVISION - Page 1 of 2 (See organization of Lyndon Group on Page 2 of 2)



69.2

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

PART 1 – ORGANIZATIONAL CHART

PROTECTIVE LIFE CORPORATION ORGANIZATIONAL CHART
AS OF DECEMBER 31, 2002
Page 4 of 4

ASSET PROTECTION DIVISION - Page 2 of 2 (Lyndon Group Organization)

* Denotes insurance company

**Pursuant to Louisiana Insurance Code 22:81(2) each director of a domestic insurer must own at least 10 shares

