



LIFE AND ACCIDENT AND HEALTH COMPANIES—ASSOCIATION EDITION

ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2002
OF THE CONDITION AND AFFAIRS OF THE

OHIO MOTORISTS LIFE INSURANCE COMPANY

NAIC Group Code 0000 (Current Period) 0000 (Prior Period) NAIC Company Code 66005 Employer's ID Number 34-1666970

Organized under the Laws of Ohio, State of Domicile or Port of Entry Ohio

Country of Domicile United States of America

Incorporated 09/24/1990 Commenced Business 07/01/1991

Statutory Home Office 5700 Brecksville Road (Street and Number), Independence, OH 44131 (City or Town, State and Zip Code)

Main Administrative Office 5700 Brecksville Road (Street and Number), Independence, OH 44131 (City or Town, State and Zip Code), 216-606-6312 (Area Code) (Telephone Number)

Mail Address PO Box 6150 (Street and Number or P.O. Box), Cleveland, OH 44101 (City or Town, State and Zip Code)

Primary Location of Books and Records 5700 Brecksville Road (Street and Number), Independence, OH 44131 (City or Town, State and Zip Code), 216-606-6465 (Area Code) (Telephone Number)

Internet Website Address

Statement Contact Michael R Pratt (Name), 216-606-6465 (Area Code) (Telephone Number) (Extension), mpratt@aaaoma.com (E-mail Address), 216-606-6371 (FAX Number)

Policyowner Relations Contact 5700 Brecksville Road (Street and Number), Independence, OH 44131 (City or Town, State and Zip Code), 216-606-6312 (Area Code) (Telephone Number) (Extension)

OFFICERS

President Peter C Ohlheiser Secretary Jean Ziembra
Treasurer Michael R Pratt Actuary

VICE PRESIDENTS

Gary S. Cowling Peter E Shimrak John J Bobinger

DIRECTORS OR TRUSTEES

Peter C Ohlheiser Jean Ziembra Michael R Pratt
Gary S. Cowling Peter E Shimrak

State of Ohio } ss
County of Cuyahoga }

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.

Peter C Ohlheiser
President

Jean Ziembra
Secretary

Michael R Pratt
Treasurer

Subscribed and sworn to before me this 28 day of February, 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	6,301,182		6,301,182	5,916,874
2. Stocks:				
2.1 Preferred stocks (Schedule D, Part 2, Section 1).....	0		0	0
2.2 Common stocks (Schedule D, Part 2, Section 2).....	0		0	0
3. Mortgage loans on real estate: (Schedule B, Part 1)				
3.1 First liens			0	0
3.2 Other than first liens			0	0
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$ encumbrances).....			0	0
4.2 Properties held for the production of income (less \$ encumbrances)			0	0
4.3 Properties held for sale (less \$ encumbrances)			0	0
5. Policy loans			0	0
6. Premium notes, including \$ for first year premiums			0	0
7. Cash (\$18,365 , Schedule E, Part 1) and short -term investments (\$239,235 , Schedule DA, Part 2)	257,600		257,600	239,047
8. Other invested assets (Schedule BA, Part 1)	0		0	0
9. Receivable for securities			0	0
10. Aggregate write-ins for invested assets	0	0	0	0
11. Subtotals, cash and invested assets (Lines 1 to 10)	6,558,782	0	6,558,782	6,155,921
12. Reinsurance ceded:				
12.1 Amounts recoverable from reinsurers (Schedule S, Part 2)	20,133		20,133	0
12.2 Commissions and expense allowances due			0	0
12.3 Experience rating and other refunds due			0	0
12.4 Other amounts receivable under reinsurance contracts			0	0
13. Electronic data processing equipment and software.....			0	0
14. Federal and foreign income tax recoverable and interest thereon (including \$ net deferred tax asset)			0	0
15. Guaranty funds receivable or on deposit			0	0
16. Life insurance premiums and annuity considerations deferred and uncollected on in force business (less premiums on reinsurance ceded and less \$0 loading)	1,877		1,877	2,079
17. Accident and health premiums due and unpaid	705		705	687
18. Investment income due and accrued	115,665		115,665	110,825
19. Net adjustment in assets and liabilities due to foreign exchange rates			0	0
20. Receivable from parent, subsidiaries and affiliates			0	0
21. Amounts receivable relating to uninsured accident and health plans			0	0
22. Amounts due from agents			0	0
23. Other assets nonadmitted (Exhibit 9)			0	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)	6,697,162	0	6,697,162	6,269,512
26. From Separate Accounts Statement			0	0
27. Total (Lines 25 and 26)	6,697,162	0	6,697,162	6,269,512
DETAILS OF WRITE-INS				
1001.				
1002.				
1003.				
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.				
2402.				
2403.				
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

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts \$191,620 (Exh. 5, Line 9999999) less \$ included in Line 6.3 (including \$ Modco Reserve)	191,620	134,402
2. Aggregate reserve for accident and health contracts (Exhibit 6, Line 17, Col. 1)(including \$ Modco Reserve)	25,257	25,734
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$ Modco Reserve)	0	0
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Col. 1 less sum of Cols. 9, 10 and 11)	27,936	22,934
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Cols. 9, 10 and 11)	96,700	83,511
5. Policyholders' dividends \$ and coupons \$ due and unpaid (Exhibit 4, Line 10)	0	0
6. Provision for policyholders' dividends and coupons payable in following calendar year—estimated amounts:		
6.1 Dividends apportioned for payment to (including \$ Modco).....	0	0
6.2 Dividends not yet apportioned (including \$ Modco)	0	0
6.3 Coupons and similar benefits (including \$ Modco)	0	0
7. Amount provisionally held for deferred dividend policies not included in Line 6	0	0
8. Premiums and annuity considerations for life and accident and health contracts received in advance less \$ discount; including \$27 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of Lines 4 and 14)	27	26
9. Contract liabilities not included elsewhere:		
9.1 Surrender values on canceled contracts	0	0
9.2 Provision for experience rating refunds, including \$176,480 accident and health experience rating refunds	176,480	171,916
9.3 Other amounts payable on reinsurance including \$ assumed and \$ ceded	0	0
9.4 Interest maintenance reserve (Page 33, Line 6)	0	0
10. Commissions to agents due or accrued-life contracts and annuity contracts \$ accident and health \$ and deposit-type contract funds \$	0	0
11. Commissions and expense allowances payable on reinsurance assumed	0	0
12. General expenses due or accrued (Exhibit 2, Line 12, Col. 5)	1,200	1,200
13. Transfers to Separate Accounts due or accrued (net) (Including \$0 accrued for expense allowances recognized in reserves)	0	0
14. Taxes, licenses and fees due or accrued, excluding federal income taxes (Exhibit 3, Line 9, Col. 5)	0	0
15. Federal and foreign income taxes including \$ on realized capital gains (losses) (including \$ net deferred tax liability)	0	0
16. Unearned investment income	0	0
17. Amounts withheld or retained by company as agent or trustee	0	0
18. Amounts held for agents' account, including \$ agents' credit balances	0	0
19. Remittances and items not allocated	0	0
20. Net adjustment in assets and liabilities due to foreign exchange rates	0	0
21. Liability for benefits for employees and agents if not included above	0	0
22. Borrowed money \$ and interest thereon \$	0	0
23. Dividends to stockholders declared and unpaid	0	0
24. Miscellaneous liabilities:		
24.1 Asset valuation reserve (Page 34, Line 16, Col. 7)	2,970	1,399
24.2 Reinsurance in unauthorized companies	0	0
24.3 Funds held under reinsurance treaties with unauthorized reinsurers	0	0
24.4 Payable to parent, subsidiaries and affiliates	0	0
24.5 Drafts outstanding	0	0
24.6 Liability for amounts held under uninsured accident and health plans	0	0
24.7 Funds held under coinsurance	0	0
24.8 Payable for securities	0	0
24.9 Capital notes \$ and interest thereon \$	0	0
25. Aggregate write-ins for liabilities	70,403	70,325
26. Total Liabilities excluding Separate Accounts business (Lines 1 to 25)	592,593	511,447
27. From Separate Accounts Statement	0	0
28. Total Liabilities (Lines 26 and 27)	592,593	511,447
29. Common capital stock	1,000,000	1,000,000
30. Preferred capital stock	0	0
31. Aggregate write-ins for other than special surplus funds	0	0
32. Surplus notes	0	0
33. Gross paid in and contributed surplus (Page 3, Line 33, Col. 2 plus Page 4, Line 51.1, Col. 1)	2,000,000	2,000,000
34. Aggregate write-ins for special surplus funds	0	0
35. Unassigned funds (surplus)	3,104,569	2,758,065
36. Less treasury stock, at cost:		
36.1 shares common (value included in Line 29 \$)	0	0
36.2 shares preferred (value included in Line 30 \$)	0	0
37. Surplus (total Lines 31+32+33+34+35-36) (Including \$0 in Separate Accounts Statement)	5,104,569	4,758,065
38. Totals of Lines 29, 30 and 37 (Page 4, Line 55)	6,104,569	5,758,065
39. Totals of Lines 28 and 38 (Page 2, Line 27, Col. 3)	6,697,162	6,269,512
DETAILS OF WRITE-INS		
2501. Net Reinsurance Settlement.....	70,403	70,325
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)	70,403	70,325
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

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)	287,709	295,947
2. Considerations for supplementary contracts with life contingencies		0
3. Net investment income (Exhibit of Net Investment Income, Line 17)	363,226	347,936
4. Amortization of interest maintenance reserve (IMR) (Page 33, Line 5)	0	0
5. Separate Accounts net gain from operations excluding unrealized gains or losses	0	0
6. Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1)	214,434	214,859
7. Reserve adjustments on reinsurance ceded		0
8. Miscellaneous Income:		
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts		0
8.2 Charges and fees for deposit-type contracts		0
8.3 Aggregate write-ins for miscellaneous income	0	0
9. Total (Lines 1 to 8.3)	865,369	858,742
10. Death benefits	20,610	43,914
11. Matured endowments (excluding guaranteed annual pure endowments)	0	0
12. Annuity benefits (Exhibit 8, Part 2, Line 6.4, Cols. 4 + 8)	0	0
13. Disability benefits and benefits under accident and health contracts	115,943	139,761
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 contracts 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	56,741	(40,568)
20. Totals (Lines 10 to 19)	193,294	143,107
21. Commissions on premiums, annuity considerations, and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1 less Col. 11)	147,956	147,797
22. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1)	31,970	34,058
23. General insurance expenses (Exhibit 2, Line 10, Cols. 1 + 2 + 3)	52,900	55,383
24. Insurance taxes, licenses and fees, excluding federal income taxes (Exhibit 3, Line 7, Cols. 1 + 2 + 3)	5,173	4,611
25. Increase in loading on deferred and uncollected premiums		(2,923)
26. Net transfers to or (from) Separate Accounts		0
27. Aggregate write-ins for deductions	0	0
28. Totals (Lines 20 to 27)	431,293	382,033
29. Net gain from operations before dividends to policyholders and federal income taxes (Line 9 minus Line 28)	434,076	476,709
30. Dividends to policyholders		0
31. Net gain from operations after dividends to policyholders and before federal income taxes (Line 29 minus Line 30)	434,076	476,709
32. Federal and foreign income taxes incurred (excluding tax on capital gains)	86,000	89,000
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)	348,076	387,709
34. Net realized capital gains or (losses) less capital gains tax of \$ (excluding taxes of \$ transferred to the IMR)		0
35. Net income (Line 33 plus Line 34)	348,076	387,709
CAPITAL AND SURPLUS ACCOUNT		
36. Capital and surplus, December 31, previous year (Page 3, Line 38, Col. 2)	5,758,065	5,371,409
37. Net income (Line 35)	348,076	387,709
38. Change in net unrealized capital gains (losses)		0
39. Change in net unrealized foreign exchange capital gain (loss)		0
40. Change in net deferred income tax		0
41. Change in nonadmitted assets and related items (Exhibit 9, Line 6, Col. 3)	0	0
42. Change in liability for reinsurance in unauthorized companies	0	0
43. Change in reserve on account of change in valuation basis, (increase) or decrease (Exhibit 5A, Line 9999999, Col. 4)	0	0
44. Change in asset valuation reserve (Page 34, Lines 2 through 5 minus Line 6 plus Line 7 plus Line 11 plus Lines 14 through 15, Col. 7)	(1,572)	(1,053)
45. Change in treasury stock (Page 3, Lines 36.1 and 36.2, Col. 2 minus Col. 1)	0	0
46. Surplus (contributed to) withdrawn from Separate Accounts during period		0
47. Other changes in surplus in Separate Accounts Statement	0	0
48. Change in surplus notes	0	0
49. Cumulative effect of changes in accounting principles		0
50. Capital changes:		
50.1 Paid in		0
50.2 Transferred from surplus (Stock Dividend)		0
50.3 Transferred to surplus		0
51. Surplus adjustment:		
51.1 Paid in		0
51.2 Transferred to capital (Stock Dividend)		0
51.3 Transferred from capital		0
51.4 Change in surplus as a result of reinsurance		0
52. Dividends to stockholders		0
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)	346,504	386,656
55. Capital and surplus, December 31, current year (Lines 36 + 54) (Page 3, Line 38)	6,104,569	5,758,065
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

CASH FLOW

	1 Current Year	2 Prior Year
Cash from Operations		
1. Premiums and annuity considerations for life and accident and health contracts	287,893	302,329
2. Charges and fees for deposit-type contracts	0	0
3. Considerations for supplementary contracts with life contingencies	0	0
4. Net investment income	368,578	348,913
5. Commissions and expense allowances on reinsurance ceded	214,434	214,859
6. Fees associated with investment management, administration and contract guarantees from Separate Accounts	0	0
7. Aggregate write-ins for miscellaneous income	0	0
8. Total (Lines 1 to 7)	870,905	866,101
9. Death benefits	15,608	57,703
10. Matured endowments	0	0
11. Annuity benefits	0	0
12. Disability benefits and benefits under accident and health contracts	102,754	142,110
13. Coupons, guaranteed annual pure endowments and similar benefits	0	0
14. Surrender benefits and withdrawals for life contracts	0	0
15. Group conversions	0	0
16. Interest and adjustments on contracts or deposit-type contract funds	0	0
17. Payments on supplementary contracts with life contingencies	0	0
18. Total (Lines 9 to 17)	118,362	199,813
19. Commissions on premiums, annuity considerations and deposit-type contract funds	147,956	147,797
20. Commissions and expense allowances on reinsurance assumed	31,970	34,058
21. General insurance expenses	52,900	55,383
22. Insurance taxes, licenses and fees, excluding federal income taxes	5,173	4,611
23. Net transfers to or (from) Separate Accounts	0	0
24. Aggregate write-ins for deductions	(4,564)	25,376
25. Total (Lines 18 to 24)	351,797	467,038
26. Dividends paid to policyholders	0	0
27. Federal income taxes (excluding tax on capital gains)	86,000	89,000
28. Total (Lines 25 to 27)	437,797	556,038
29. Net cash from operations (Line 8 minus Line 28)	433,108	310,063
Cash from Investments		
30. Proceeds from investments sold, matured or repaid:		
30.1 Bonds	650,000	825,000
30.2 Stocks	0	0
30.3 Mortgage loans	0	0
30.4 Real estate	0	0
30.5 Other invested assets	0	0
30.6 Net gains (losses) on cash and short-term investments	0	0
30.7 Miscellaneous proceeds	0	0
30.8 Total investment proceeds (Lines 30.1 to 30.7)	650,000	825,000
31. Net tax on capital gains (losses)	0	0
32. Total (Line 30.8 minus Line 31)	650,000	825,000
33. Cost of investments acquired (long-term only):		
33.1 Bonds	1,044,500	1,110,894
33.2 Stocks	0	0
33.3 Mortgage loans	0	0
33.4 Real estate	0	0
33.5 Other invested assets	0	0
33.6 Miscellaneous applications	0	0
33.7 Total investments acquired (Lines 33.1 to 33.6)	1,044,500	1,110,894
34. Net increase (or decrease) in policy loans and premium notes	0	0
35. Net cash from investments (Line 32 minus Line 33.7 minus Line 34)	(394,500)	(285,894)
Cash from Financing and Miscellaneous Sources		
36. Cash provided:		
36.1 Surplus notes, capital and surplus paid in	0	0
36.2 Borrowed money \$ less amounts repaid \$	0	0
36.3 Capital notes \$ less amounts repaid \$	0	0
36.4 Deposits on deposit-type contract funds and other liabilities without life or disability contingencies	0	0
36.5 Other cash provided	78	2,297
36.6 Total (Lines 36.1 to 36.5)	78	2,297
37. Cash applied:		
37.1 Dividends to stockholders paid	0	0
37.2 Interest on indebtedness	0	0
37.3 Withdrawals on deposit-type contract funds and other liabilities without life or disability contingencies	0	0
37.4 Other applications (net)	20,133	0
37.5 Total (Lines 37.1 to 37.4)	20,133	0
38. Net cash from financing and miscellaneous sources (Line 36.6 minus Line 37.5)	(20,055)	2,297
RECONCILIATION OF CASH AND SHORT-TERM INVESTMENTS		
39. Net change in cash and short-term investments (Line 29, plus Line 35, plus Line 38)	18,553	26,466
40. Cash and short-term investments:		
40.1 Beginning of year	239,047	212,581
40.2 End of year (Line 39 plus Line 40.1)	257,600	239,047
DETAILS OF WRITE-INS		
0701.	0	0
0702.		
0703.		
0798. Summary of remaining write-ins for Line 7 from overflow page	0	0
0799. TOTALS (Lines 0701 thru 0703 plus 0798) (Line 7 above)	0	0
2401. Net Change Contingency Refund	(4,564)	25,376
2402.		
2403.		
2498. Summary of remaining write-ins for Line 24 from overflow page	0	0
2499. TOTALS (Lines 2401 thru 2403 plus 2498) (Line 24 above)	(4,564)	25,376

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE OHIO MOTORISTS LIFE INSURANCE COMPANY

ANALYSIS OF OPERATIONS 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)	11 Other	
1. Premiums and annuity considerations for life and accident and health contracts	287,709	.0	.0	.0	.0	.0	69,219	.0	218,490	.0	.0	.0
2. Considerations for supplementary contracts with life contingencies	.0											
3. Net investment income	363,226						50,307		312,919			
4. Amortization of Interest Maintenance Reserve (IMR)	.0											
5. Separate Accounts net gain from operations excluding unrealized gains or losses	.0											
6. Commissions and expense allowances on reinsurance ceded	214,434	.0	.0	.0	.0	.0	.0	.0	214,434	.0	.0	.0
7. Reserve adjustments on reinsurance ceded	.0											
8. Miscellaneous Income:												
8.1 Fees associated with income from investment management, administration and contract guarantees from Separate Accounts	.0											
8.2 Charges and fees for deposit-type contracts	.0											
8.3 Aggregate write-ins for miscellaneous income	.0											
9. Totals (Lines 1 to 8.3)	865,369	.0	.0	.0	.0	.0	119,526	.0	745,843	.0	.0	.0
10. Death benefits	20,610						20,610					
11. Matured endowments (excluding guaranteed annual pure endowments)	.0	.0	.0				.0					
12. Annuity benefits	.0			.0				.0				
13. Disability benefits and benefits under accident and health contracts	115,943								115,943	.0	.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	56,741						57,218		(477)			
20. Totals (Lines 10 to 19)	193,294	.0	.0	.0	.0	.0	77,828	.0	115,466	.0	.0	.0
21. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only)	147,956	.0	.0	.0	.0	.0	.0	.0	147,956	.0	.0	.0
22. Commissions and expense allowances on reinsurance assumed	31,970	.0	.0	.0	.0	.0	22,502	.0	9,468	.0	.0	.0
23. General insurance expenses	52,900						7,119		45,781	.0	.0	.0
24. Insurance taxes, licenses and fees, excluding federal income taxes (FIT)	5,173						1,330		3,843	.0	.0	.0
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	.0
28. Totals (Lines 20 to 27)	431,293	.0	.0	.0	.0	.0	108,779	.0	322,514	.0	.0	.0
29. Net gain from operations before dividends to policyholders and FIT (Line 9 - Line 28)	434,076	.0	.0	.0	.0	.0	10,747	.0	423,329	.0	.0	.0
30. Dividends to policyholders	.0								.0	.0	.0	
31. Net gain from operations after dividends to policyholders and before FIT (Line 29 - Line 30)	434,076	.0	.0	.0	.0	.0	10,747	.0	423,329	.0	.0	.0
32. Federal income taxes incurred (excluding tax on capital gains)	86,000						11,911		74,089			
33. Net gain from operations after dividends to policyholders and FIT and before realized capital gains or (losses) (Line 31 - Line 32)	348,076	.0	.0	.0	.0	.0	(1,164)	.0	349,240	.0	.0	.0
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)	0	0	0	0	0	0	0	0	0	0	0	0
2701.												
2702.												
2703.												
2798. Summary of remaining write-ins for Line 27 from overflow page	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
2799. Totals (Lines 2701 thru 2703 plus 2798) (Line 27 above)	0	0	0	0	0	0	0	0	0	0	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE OHIO MOTORISTS LIFE INSURANCE COMPANY

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	134,402	.0	.0	.0	.0	.0	134,402	.0
2. Tabular net premiums or considerations	27,295						27,295	
3. Present value of disability claims incurred .....	.0				.XXX			
4. Tabular interest	6,410						6,410	
5. Tabular less actual reserve released .....	.0							
6. Increase in reserve on account of change in valuation basis .....	.0							
7. Other increases (net)	56,832						56,832	
8. Totals (Lines 1 to 7)	224,939	0	0	0	0	0	224,939	0
9. Tabular cost	8,886				.XXX		8,886	
10. Reserves released by death	2,265			.XXX	.XXX		2,265	.XXX
11. Reserves released by other terminations (net)	22,168						22,168	
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)	33,319	0	0	0	0	0	33,319	0
15. Reserve December 31, current year	191,620	0	0	0	0	0	191,620	0

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EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. Government bonds	(a) 249,074	238,424
1.1 Bonds exempt from U.S. tax	(a)	
1.2 Other bonds (unaffiliated)	(a) 120,521	136,011
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) 1,972	1,972
7. Derivative instruments	(f)	
8. Other invested assets		
9. Aggregate write-ins for investment income	0	0
10. Total gross investment income	371,567	376,407
11. Investment expenses		(g) 13,181
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)
15. Aggregate write-ins for deductions from investment income		0
16. Total (Lines 11 through 15)		13,181
17. Net Investment Income - (Line 10 minus Line 16)		363,226
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 through 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. Total (Lines 1501 through 1503 plus 1598) (Line 15, above)		0

- (a) Includes \$ 2,910 accrual of discount less \$ 13,102 amortization of premium and less \$ 17,828 paid for accrued interest on purchases.
- (b) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued dividends on purchases.
- (c) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (d) Includes \$ for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
- (e) Includes \$ accrual of discount less \$ amortization of premium and less \$ paid for accrued interest on purchases.
- (f) Includes \$ accrual of discount less \$ amortization of premium.
- (g) Includes \$ investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$ interest on surplus notes and \$ interest on capital notes.
- (i) Includes \$ depreciation on real estate and \$ 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 (Loss) from Change in Difference Between Basis Book/ Adjusted Carrying and Admitted Values	5 Total
1. U.S. Government bonds					
1.1 Bonds exempt from U.S. tax					
1.2 Other bonds (unaffiliated)					
1.3 Bonds of affiliates					
2.1 Preferred stocks (unaffiliated)					
2.11 Preferred stocks of affiliates					
2.2 Common stocks (unaffiliated)					
2.21 Common stocks of affiliates					
3. Mortgage loans					
4. Real estate					
5. Contract loans					
6. Cash/Short-term investments					
7. Derivative instruments					
8. Other invested assets					
9. Aggregate write-ins for capital gains (losses)					
10. Total capital gains (losses)					
NONE					
DETAILS OF WRITE-INS					
0901.					
0902.					
0903.					
0998. Summary of remaining write-ins for Line 9 from overflow page					
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9, above)					

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE OHIO MOTORISTS LIFE INSURANCE COMPANY

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

	1		2		3		4		5		6		7		8		9		10		11			
	Total	Industrial Life	Life Insurance	Individual Annuities	Credit Life (Group and Individual)	Life Insurance	Life Insurance	Group	Life Insurance	Group	Life Insurance	Group	Life Insurance	Group	Life Insurance	Group	Life Insurance	Group	Life Insurance	Group	Life Insurance	Group	Life Insurance	Group
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	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4. Advance	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
5. Line 3.4 - Line 4	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
6. Collected during year:																								
6.1 Direct	230,012															230,012								
6.2 Reinsurance assumed	.0															.0								
6.3 Reinsurance ceded	200,016															200,016								
6.4 Net	29,996	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	29,996	.0	.0	.0	.0	.0	.0	.0	.0
7. Line 5 + Line 6.4	29,996	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	29,996	.0	.0	.0	.0	.0	.0	.0	.0
8. Prior year (uncollected + deferred and accrued - advance)	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
9. First year premiums and considerations:																								
9.1 Direct	230,012	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	230,012	.0	.0	.0	.0	.0	.0	.0	.0
9.2 Reinsurance assumed	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
9.3 Reinsurance ceded	200,016	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	200,016	.0	.0	.0	.0	.0	.0	.0	.0
9.4 Net (Line 7 - Line 8)	29,996	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	29,996	.0	.0	.0	.0	.0	.0	.0	.0
SINGLE																								
10. Single premiums and considerations:																								
10.1 Direct	.0																							
10.2 Reinsurance assumed	.0																							
10.3 Reinsurance ceded	.0																							
10.4 Net	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
RENEWAL																								
11. Uncollected	2,581											1,877				704								
12. Deferred and accrued	.0																							
13. Deferred, accrued and uncollected:																								
13.1 Direct	3,215											524				2,691								
13.2 Reinsurance assumed	2,074											1,773				301								
13.3 Reinsurance ceded	2,707											419				2,288								
13.4 Net (Line 11 + Line 12)	2,581	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1,877	.0	.0	.0	704	.0	.0	.0	.0	.0	.0	.0	.0
14. Advance	27	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	27	.0	.0	.0	.0	.0	.0	.0	.0
15. Line 13.4 - Line 14	2,554	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	1,877	.0	.0	.0	677	.0	.0	.0	.0	.0	.0	.0	.0
16. Collected during year:																								
16.1 Direct	757,400											137,681				619,719								
16.2 Reinsurance assumed	67,292											46,003				21,289								
16.3 Reinsurance ceded	566,795											114,265				452,530								
16.4 Net	257,897	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	69,419	.0	.0	.0	188,478	.0	.0	.0	.0	.0	.0	.0	.0
17. Line 15 + Line 16.4	260,451	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	71,296	.0	.0	.0	189,155	.0	.0	.0	.0	.0	.0	.0	.0
18. Prior year (uncollected + deferred and accrued - advance)	2,739	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	2,078	.0	.0	.0	661	.0	.0	.0	.0	.0	.0	.0	.0
19. Renewal premiums and considerations:																								
19.1 Direct	756,151	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	136,631	.0	.0	.0	619,520	.0	.0	.0	.0	.0	.0	.0	.0
19.2 Reinsurance assumed	67,349	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	46,013	.0	.0	.0	21,336	.0	.0	.0	.0	.0	.0	.0	.0
19.3 Reinsurance ceded	565,787	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	113,425	.0	.0	.0	452,362	.0	.0	.0	.0	.0	.0	.0	.0
19.4 Net (Line 17 - Line 18)	257,713	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	69,219	.0	.0	.0	188,494	.0	.0	.0	.0	.0	.0	.0	.0
TOTAL																								
20. Total premiums and annuity considerations:																								
20.1 Direct	986,163	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	136,631	.0	.0	.0	849,532	.0	.0	.0	.0	.0	.0	.0	.0
20.2 Reinsurance assumed	67,349	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	46,013	.0	.0	.0	21,336	.0	.0	.0	.0	.0	.0	.0	.0
20.3 Reinsurance ceded	765,803	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	113,425	.0	.0	.0	652,378	.0	.0	.0	.0	.0	.0	.0	.0
20.4 Net (Line 9.4 + 10.4 + 19.4)	287,709	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	69,219	.0	.0	.0	218,490	.0	.0	.0	.0	.0	.0	.0	.0

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ANNUAL STATEMENT FOR THE YEAR 2002 OF THE OHIO MOTORISTS LIFE INSURANCE COMPANY

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 and 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	72,862							72,862			
23.2 Reinsurance assumed	0										
23.3 Net ceded less assumed	72,862	0	0	0	0	0	0	72,862	0	0	0
24. Single:											
24.1 Reinsurance ceded	0										
24.2 Reinsurance assumed	0										
24.3 Net ceded less assumed	0	0	0	0	0	0	0	0	0	0	0
25. Renewal:											
25.1 Reinsurance ceded	141,572							141,572			
25.2 Reinsurance assumed	31,970					22,502		9,468			
25.3 Net ceded less assumed	109,602	0	0	0	0	(22,502)	0	132,104	0	0	0
26. Totals:											
26.1 Reinsurance ceded (Page 6, Line 6)	214,434	0	0	0	0	0	0	214,434	0	0	0
26.2 Reinsurance assumed (Page 6, Line 23)	31,970	0	0	0	0	22,502	0	9,468	0	0	0
26.3 Net ceded less assumed	182,464	0	0	0	0	(22,502)	0	204,966	0	0	0
COMMISSIONS INCURRED (direct business only)											
27. First year (other than single)	46,320							46,320			
28. Single	0										
29. Renewal	101,636							101,636			
30. Deposit-type contract funds	0										
31. Totals (to agree with Page 6, Line 21)	147,956	0	0	0	0	0	0	147,956	0	0	0

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	402	2,498			2,900
4.5 Expense of investigation and settlement of policy claims					0
5.1 Traveling expenses					0
5.2 Advertising	2,337				2,337
5.3 Postage, express, telegraph and telephone	23	143			166
5.4 Printing and stationery	363	2,260			2,623
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					0
6.1 Books and periodicals	184	1,142			1,326
6.2 Bureau and association fees					0
6.3 Insurance, except on real estate	692	4,308			5,000
6.4 Miscellaneous losses					0
6.5 Collection and bank service charges					0
6.6 Sundry general expenses	1,716	10,673			12,389
6.7 Group service and administration fees	1,402	24,757			26,159
6.8 Reimbursements by uninsured accident and health plans					0
7.1 Agency expense allowance					0
7.2 Agents' balances charged off (less \$ recovered)					0
7.3 Agency conferences other than local meetings					0
9.1 Real estate expenses					0
9.2 Investment expenses not included elsewhere				13,181	13,181
9.3 Aggregate write-ins for expenses	0	0	0	0	0
10. General expenses incurred	7,119	45,781	0	13,181 (a)	66,081
11. General expenses unpaid December 31, prior year	0	0	0	1,200	1,200
12. General expenses unpaid December 31, current year				1,200	1,200
13. Amounts receivable relating to uninsured accident and health plans, prior year	0	0	0	0	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)	7,119	45,781	0	13,181	66,081
DETAILS OF WRITE-INS					
09.301.					
09.302.					
09.303.					
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 \$ to affiliates and \$ 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	304	1,891			2,195
3. State taxes on premiums	1,026	1,952			2,978
4. Other state taxes, incl. \$ for employee benefits					0
5. U.S. Social Security taxes					0
6. All other taxes					0
7. Taxes, licenses and fees incurred	1,330	3,843	0	0	5,173
8. Taxes, licenses and fees unpaid December 31, prior year	0	0	0	0	0
9. Taxes, licenses and fees unpaid December 31, current year					0
10. Taxes, licenses and fees paid during year (Lines 7 + 8 - 9)	1,330	3,843	0	0	5,173

EXHIBIT 4 - DIVIDENDS OR REFUNDS

	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 thru 4		
6. Paid in cash		
7. Left on deposit		
8. Aggregate write-ins for dividend or refund options		
9. Total Lines 5 thru 8		
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 thru 14		
16. Total from prior year		
17. Total Dividends or refunds (Lines 9 + 15 - 16)		
DETAILS OF WRITE-INS		
0801.		
0802.		
0803.		
0898. Summary of remaining write-ins for Line 8 from overflow page		
0899. Totals (Lines 0801 thru 0803 plus 0898) (Line 8 above)		

NONE



ANNUAL STATEMENT FOR THE YEAR 2002 OF THE OHIO MOTORISTS LIFE INSURANCE COMPANY

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? 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 the 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	
LIFE CONTRACTS (Including supplementary contracts set upon a basis other than that used to determine benefits) (Exhibit 5)			
0199999 - Subtotal (Page 7, Line 6)	XXX	XXX	
ACCIDENT AND HEALTH CONTRACTS (Exhibit 6)			
0299999 - Subtotal	XXX	XXX	
DEPOSIT-TYPE CONTRACTS (Exhibit 7)	NONE		
0399999 - Subtotal	XXX	XXX	
9999999 - Total (Column 4, only)			

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE OHIO MOTORISTS LIFE INSURANCE COMPANY

EXHIBIT 6 - AGGREGATE RESERVE 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 reserve	210,776	210,776							
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)	210,776	210,776	0	0	0	0	0	0	0
8. Reinsurance ceded	185,519	185,519							
9. Totals (Net)	25,257	25,257	0	0	0	0	0	0	0
CLAIM RESERVE									
10. Present value of amounts not yet due on claims	0								
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)	0	0	0	0	0	0	0	0	0
15. Reinsurance ceded	0								
16. Totals (Net)	0	0	0	0	0	0	0	0	0
17. TOTAL (Net)	25,257	25,257	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 plus 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						
2. Deposits received during the year						
3. Investment earnings credited to the account						
4. Other net change in reserves						
5. Fees and other charges assessed						
6. Surrender charges						
7. Net surrender or withdrawal payments						
8. Other net transfers to or (from) Separate Accounts						
9. Balance at the end of current year before reinsurance (Lines 1+2+3+4-5-6-7-8)						
10. Reinsurance balance at the beginning of the year						
11. Net change in reinsurance assumed						
12. Net change in reinsurance ceded						
13. Reinsurance balance at the end of the year (Lines 10+11-12)						
14. Net balance at the end of current year after reinsurance (Lines 9 + 13)						

NONE

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE OHIO MOTORISTS LIFE INSURANCE COMPANY

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	.0										
1.2 Reinsurance assumed	.0										
1.3 Reinsurance ceded	.0										
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	(b) .0	(b) .0	(b) .0	(b) .0	(b) .0	(b) .0	(b) .0
2.2 Other											
2.21 Direct	60,180								60,180		
2.22 Reinsurance assumed	5,017						2,312		2,705		
2.23 Reinsurance ceded	51,153								51,153		
2.24 Net	14,044	.0	(b) .0	(b) .0	(b) .0	(b) .0	(b) 2,312	(b) .0	(b) 11,732	(b) .0	(b) .0
3. Incurred but unreported:											
3.1 Direct	263,968						117,500		146,468		
3.2 Reinsurance assumed	3,283						2,124		1,159		
3.3 Reinsurance ceded	156,659						94,000		62,659		
3.4 Net	110,592	.0	(b) .0	(b) .0	(b) .0	(b) .0	(b) 25,624	(b) .0	(b) 84,968	(b) .0	(b) .0
4. TOTALS											
4.1 Direct	324,148	.0	.0	.0	.0	.0	117,500	.0	206,648	.0	.0
4.2 Reinsurance assumed	8,300	.0	.0	.0	.0	.0	4,436	.0	3,864	.0	.0
4.3 Reinsurance ceded	207,812	.0	.0	.0	.0	.0	94,000	.0	113,812	.0	.0
4.4 Net	124,636	(a) 0	(a) 0	0	0	0	(a) 27,936	0	96,700	0	0

(a) Including matured endowments (but not guaranteed annual pure endowments) unpaid amounting to \$ in Column 2, \$ in Column 3 and \$ 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 \$, Individual Annuities \$, Credit Life (Group and Individual) \$, and Group Life \$, are included in Page 3, Line 1, (See Exhibit 5, Section on Disability Disabled Lives); and for Group Accident and Health \$, Credit (Group and Individual) Accident and Health \$, and Other Accident and Health \$ are included in Page 3, Line 2 (See Exhibit 6, Claim Reserve).

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ANNUAL STATEMENT FOR THE YEAR 2002 OF THE OHIO MOTORISTS LIFE INSURANCE COMPANY

EXHIBIT 8 - 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	190,061						26,174			163,887	
1.2 Reinsurance assumed	15,063						10,575			4,488	
1.3 Reinsurance ceded	86,762						21,141			65,621	
1.4 Net	118,362	0	0	0	0	0	15,608	0		102,754	0
2. Liability December 31, current year from Part 1:											
2.1 Direct	324,148	0	0	0	0	0	117,500	0		206,648	0
2.2 Reinsurance assumed	8,300	0	0	0	0	0	4,436	0		3,864	0
2.3 Reinsurance ceded	207,812	0	0	0	0	0	94,000	0		113,812	0
2.4 Net	124,636	0	0	0	0	0	27,936	0		96,700	0
3. Amounts recoverable from reinsurers December 31, current year	0										
4. Liability December 31, prior year:											
4.1 Direct	258,943	0	0	0	0	0	86,500	0		172,443	0
4.2 Reinsurance assumed	9,404	0	0	0	0	0	5,634	0		3,770	0
4.3 Reinsurance ceded	161,902	0	0	0	0	0	69,200	0		92,702	0
4.4 Net	106,445	0	0	0	0	0	22,934	0		83,511	0
5. Amounts recoverable from reinsurers December 31, prior year	0	0	0	0	0	0	0	0		0	0
6. Incurred Benefits:											
6.1 Direct	255,266	0	0	0	0	0	57,174	0		198,092	0
6.2 Reinsurance assumed	13,959	0	0	0	0	0	9,377	0		4,582	0
6.3 Reinsurance ceded	132,672	0	0	0	0	0	45,941	0		86,731	0
6.4 Net	136,553	0	0	0	0	0	20,610	0		115,943	0

- (a) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ in Line 1.1, \$ in Line 1.4.
 \$ in Line 6.1 and \$ in Line 6.4.
- (b) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ in Line 1.1, \$ in Line 1.4.
 \$ in Line 6.1 and \$ in Line 6.4.
- (c) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$ in Line 1.1, \$ in Line 1.4.
 \$ in Line 6.1 and \$ in Line 6.4.
- (d) Includes \$ premiums waived under total and permanent disability benefits.

EXHIBIT 9
ANALYSIS OF NON-ADMITTED ASSETS AND RELATED ITEMS

	1	2	3
	End of Current Year	End of Prior Year	Changes for Year (Increase) or Decrease
1. Summary of Items Page 2, Lines 12 to 17 and 19 to 22, Column 2.....			
2. Other Nonadmitted Assets:			
2.1 Bills receivable			
2.2 Furniture and equipment			
2.3 Leasehold improvements			
2.4 Cash advanced to or in the hands of officers or agents			
2.5 Loans on personal security, endorsed or not			
2.6 Supplies, stationery, printed matter			
2.7 Commuted commissions			
3. Total (Lines 2.1 thru 2.7)			
4. Disallowed interest maintenance reserve			
5. Aggregate write-ins for other assets			
6. Total (Line 1 plus Lines 3 to 5)			
DETAILS OF WRITE-INS			
0501.			
0502.			
0503.			
0598. Summary of remaining write-ins for Line 5 from overflow page			
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)			

NONE

NOTES TO FINANCIAL STATEMENTS

1. Summary of Significant Accounting Policies
 - A. Accounting Practices

The accompanying financials of the Company have been completed in accordance with NAIC Accounting Practices and Procedures manual and the State of Ohio.
 - 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

Premiums are recognized as income over the premium paying period of the related policies. Expenses incurred in connection with acquiring new insurance business, including acquisition costs are charged to operations as incurred.

 1. Short-term investments are stated at amortized cost.
 2. Bonds are stated at amortized cost using the interest method since 1/1/2000 and straight line method prior to that date.
 3. There are no common stocks.
 4. There are no preferred stocks.
 5. There are no mortgage loans.
 6. There are no loan-backed securities.
 7. There are no subsidiaries, controlled or affiliated companies.
 8. There are no joint ventures, partnerships or limited liability companies.
 9. There are no derivatives.
 10. The Company does not utilize anticipated investment income as a factor in the premium deficiency calculation.
 11. The claim reserve for the Personal Accident Insurance Policies utilizes the projected loss ratio method. For other accident policies triangular method is used.
2. Accounting Changes and Corrections of Errors

There are no accounting changes or corrections of errors.
3. Business Combinations and Goodwill

There are no business combinations or goodwill.
4. Discontinued Operations

No operations were discontinued by the Company.
5. Investments
 - A. Mortgage Loans -- None
 - B. Debt Restructuring -- None
 - C. Reverse Mortgages -- None
 - D. Loan-Backed Securities -- None
 - E. Repurchase Agreements -- None
6. Joint Ventures, Partnerships and Limited Liability Companies

The Company does not have any joint ventures, partnerships or limited liability companies.
7. Investment Income

No due and accrued income was excluded from investment income.
8. Derivative Instruments

The Company has no derivative investments.
9. Income Taxes
 - A. The Company does not have any deferred tax asset or liability at December 31, 2002.
 - B. There are no unrecognized deferred tax liabilities.

NOTES TO FINANCIAL STATEMENTS

- C. The only component of incurred income tax expense is current income taxes of \$86,000.
D. The Company's income tax expense does not differ from the amount obtained by applying the federal statutory rate of 34% (17% with small life deduction and alt min tax) to Net Gain from Operations. The expected federal income tax expense and total incurred tax expense (Page 4 Line 32) is \$86,000.
10. Information Concerning Parent, Subsidiaries and Affiliates
A. All outstanding shares of Ohio Motorists Life Insurance Company are owned by the Ohio Motorist Holding Company, domiciled in the State of Ohio.
B. There were no inter company transactions, guarantees or management/service contracts involving the company.
11. Debt
A. Capital Notes -- None
B. All Other Debt -- None
12. Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans -- None as there are no employees.
13. Capital and Surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations
1. The Company has 10,000 shares authorized, issued and outstanding.
2. The Company has no preferred stock.
3. The Company has not and does not plan in the current year to declare or pay any dividends.
4. There are no restrictions placed on the portion of Company profits that may be paid as ordinary dividends to stockholders
5. There are no restrictions placed on unassigned surplus, including for whom the surplus is being held.
6. The total amount of advances to surplus not repaid is \$0.

7. The total amount of stock held by the company, including stock of affiliated companies, for special purposes is NONE.
8. Changes in balances to special surplus funds from the prior year are NONE.
9. The portion of unassigned funds (surplus) represented or reduced by each item below is as follows:
 a. unrealized gains and losses: \$None
 b. nonadmitted asset values: \$None
 c. separate account business: \$None
 d. asset valuation reserves: \$2,970
 e. reinsurance in unauthorized companies \$None
10.. Surplus Notes -- None
11. There was no restatement due to quasi-reorganization.
12. There was no quasi-reorganization in the prior 10 years.
14. Contingencies
A. The Company has no contingent commitments.
B. The Company is not aware of any assessments.
C. There are no gain contingencies.
D. As of December 31, 2002 there were no other contingencies.
15. Leases
 The Company does not have any lease obligations at this time.
16. Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk.
 The Company does not have any off-balance sheet financial instruments.
17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities -- NONE
18. Gain or Loss to the Reporting Entity from Uninsured A&H Plans and the Uninsured Portion of Partially Insured Plans -- NONE

NOTES TO FINANCIAL STATEMENTS

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators.						
Name and Address of Third Party Administrators	FEI	Exclusive Contract	Business Written	Type of Authority Granted	Written Premium	
Combined Insurance of America						
Chicago, IL	36-2136262	NO	LAH	U,C,CA,R,B,P	\$404,848	
Direct Response Insurance Admin Service						
Bloomington, MN	41-1430210	NO	LAH	U,C,CA,R,B,P	\$137,681	

20. Other Items
- A. Extraordinary Items -- NONE
 - B. Troubled Debt Restructuring: Debtors -- NONE
 - C. Other Disclosures NONE
 - D. There is no portion that is reasonably possible to be uncollectible for assets covered by SSAP No 6.

21. Events Subsequent
- The Company is not aware of any event occurring subsequent to the close of the books for this statement which may have a material effect on its financial condition.

22. Reinsurance
- A. Ceded Reinsurance Report

Section1 - General Interrogatories

1. 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? NO
2. Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding US Branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business? NO

NOTES TO FINANCIAL STATEMENTS

Section 2 - Ceded Reinsurance Report - Part A

1. 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? NO
2. 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 that, in aggregate and allowing for the offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies? NO

Section 3 - Ceded Reinsurance Report - Part B

1. 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? NONE
2. Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement? NONE

23. Retrospectively Rated Contracts -- NONE

24. Change in Incurred Losses and Loss Adjustment Expenses

25. Intercompany Pooling Arrangements

The Company does not have any intercompany pooling arrangements.

26. Reserves for Life Contracts and Deposit-Type Contracts

27. Variable Annuities with Guaranteed Living Benefits NONE

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

The Company does not have any annuities or deposit liabilities.

29. Premium and Annuity Considerations Deferred and Uncollected

Deferred and uncollected life insurance premium assumed (no annuities) as of December 31, 2002 was as follows:

Type	Gross	Net of Loading
Group Life	\$1,877	\$1,877
Total	\$1,877	\$1,877

30. Separate Accounts -- NONE

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	3,356,291	51.172	3,356,291	51.172
1.2 U.S. government agency and corporate obligations (excluding mortgage-backed securities):				
1.21 Issued by U.S. government agencies	300,111	4.576	300,111	4.576
1.22 Issued by U.S. government sponsored agencies		0.000		0.000
1.3 Foreign government (including Canada, excluding mortgaged-backed securities)		0.000		0.000
1.4 Securities issued by states, territories, and possessions and political subdivisions in the U.S.:				
1.41 States, territories and possessions general obligations		0.000		0.000
1.42 Political subdivisions of states, territories and possessions and political subdivisions general obligations		0.000		0.000
1.43 Revenue and assessment obligations		0.000		0.000
1.44 Industrial development and similar obligations		0.000		0.000
1.5 Mortgage-backed securities (includes residential and commercial MBS):				
1.51 Pass-through securities:				
1.511 Guaranteed by GNMA		0.000		0.000
1.512 Issued by FNMA and FHLMC		0.000		0.000
1.513 Privately issued		0.000		0.000
1.52 CMOs and REMICs:				
1.521 Issued by FNMA and FHLMC		0.000		0.000
1.522 Privately issued and collateralized by MBS issued or guaranteed by GNMA, FNMA, or FHLMC		0.000		0.000
1.523 All other privately issued		0.000		0.000
2. Other debt and other fixed income securities (excluding short-term):				
2.1 Unaffiliated domestic securities (includes credit tenant loans rated by the SVO)	2,644,780	40.324	2,644,780	40.324
2.2 Unaffiliated foreign securities		0.000		0.000
2.3 Affiliated securities		0.000		0.000
3. Equity interests:				
3.1 Investments in mutual funds		0.000		0.000
3.2 Preferred stocks:				
3.21 Affiliated		0.000		0.000
3.22 Unaffiliated		0.000		0.000
3.3 Publicly traded equity securities (excluding preferred stocks):				
3.31 Affiliated		0.000		0.000
3.32 Unaffiliated		0.000		0.000
3.4 Other equity securities:				
3.41 Affiliated		0.000		0.000
3.42 Unaffiliated		0.000		0.000
3.5 Other equity interests including tangible personal property under lease:				
3.51 Affiliated		0.000		0.000
3.52 Unaffiliated		0.000		0.000
4. Mortgage loans:				
4.1 Construction and land development		0.000		0.000
4.2 Agricultural		0.000		0.000
4.3 Single family residential properties		0.000		0.000
4.4 Multifamily residential properties		0.000		0.000
4.5 Commercial loans		0.000		0.000
5. Real estate investments:				
5.1 Property occupied by the company		0.000	0	0.000
5.2 Property held for the production of income (includes \$ of property acquired in satisfaction of debt)		0.000	0	0.000
5.3 Property held for sale (\$ including property acquired in satisfaction of debt)		0.000	0	0.000
6. Policy loans		0.000	0	0.000
7. Receivables for securities		0.000	0	0.000
8. Cash and short-term investments	257,600	3.928	257,600	3.928
9. Other invested assets		0.000		0.000
10. Total invested assets	6,558,782	100.000	6,558,782	100.000

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 [] NA []
- 1.3 State Regulating? OHIO DEPARTMENT OF INSURANCE
- 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.12/31/1999
- 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.12/31/1999
- 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).03/30/2000
- 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 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;
- 7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the entity is a mutual or reciprocal, the nationality of its manager or attorney in fact; and identify the type of entity(s) (e.g., individual, corporation or 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?
 Hausser+Taylor, Four Commerce Park Square, 23240 Chagrin Blvd., Beachwood, Ohio 44122.....
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?
 Gary D. Lake, Lake Consulting, Inc, 252 N. Washington St, Falls Church, Va. 22046.....
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 [] NA []

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 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 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 of the assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in this statement? Yes [] No [X]
- 15.2 If yes, state the amount thereof at December 31 of the current year:
- | | | |
|--|----------------------------------|----------|
| | 15.21 Rented from others | \$ |
| | 15.22 Borrowed from others | \$ |
| | 15.23 Leased from others | \$ |
| | 15.24 Other | \$ |
- Disclose in Notes to Financial Statements the nature of each of these obligations.
- 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 | \$ |
| | 16.22 Amount paid as expenses | \$ |
| | 16.23 Other amounts paid | \$ |

GENERAL INTERROGATORIES

(continued)
INVESTMENT

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

Class	1	2	3	4	5		6	
	Number of Shares Authorized	Number of Shares Outstanding	Par Value Per Share	Redemption Price if Callable	Is Dividend Rate Limited?		Are Dividends Cumulative?	
					Yes	No	Yes	No
					[]	[]	[]	[]
Preferred					XXX	XXX	XXX	XXX
Common	10,000	10,000	100.000	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 the 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	\$
19.22	Subject to repurchase agreements	\$
19.23	Subject to reverse repurchase agreements	\$
19.24	Subject to dollar repurchase agreements	\$
19.25	Subject to reverse dollar repurchase agreements	\$
19.26	Pledged as collateral	\$
19.27	Placed under option agreements	\$
19.28	Letter stock or other securities restricted as to sale	\$
19.29	Other	\$

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

19.31	19.35
19.32	19.36
19.33	19.37
19.34	19.38
	19.39

For categories (19.21) and (19.23) above, and for any other 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	2	3
Nature of Restriction	Description	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 [] NA [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. \$

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	2
Name of Custodian(s)	Custodian's Address
National City Bank.....	1900 E. 9th Street Cleveland, Ohio 44114.....
.....

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 []

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
National City Safekeeping.....	NatCity Investments.....	1900 E. 9th Street Cleveland, Ohio 44114.....

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 \$
- 1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit? \$
- 1.31 Reason for excluding
- 1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above. \$
- 1.5 Indicate total incurred claims on all Medicare Supplement Insurance. \$
- 1.6 Individual policies:
- Most current three years:
- 1.61 Total premium earned \$0
- 1.62 Total incurred claims \$0
- 1.63 Number of covered lives \$0
- All years prior to most current three years:
- 1.64 Total premium earned \$0
- 1.65 Total incurred claims \$0
- 1.66 Number of covered lives \$0
- 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 [] NA [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? \$
- 2.4 State the authority under which Separate Accounts are maintained:
- 2.5 Was any of the reporting entity's Separate Accounts business reinsured as of December 31? Yes [] No [X]
- 2.6 Has the reporting entity assumed by reinsurance any Separate Accounts business as of December 31? Yes [] No [X]
- 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 [] No [X]
- 3.2 Net reimbursement of such expenses between reporting entities:
- 3.21 Paid: \$
- 3.22 Received: \$
- 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 \$
- 4.22 Page 4, Line 1 \$
5. For stock reporting entities only:
- 5.1 Total amount paid in by stockholders as surplus funds since organization of the reporting entity: \$
6. Total dividends paid stockholders since organization of the reporting entity:
- 6.11 Cash: \$
- 6.12 Stock: \$
- 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
- 7.12 Number of parcels involved
- 7.13 Total book/adjusted carrying value \$
- 7.2 If yes, provide explanation:

GENERAL INTERROGATORIES

(continued)

PART 2 - LIFE INTERROGATORIES

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 expositors, 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.....
8.32 Paid claims.....
8.33 Claim liability and reserve (beginning of year).....
8.34 Claim liability and reserve (end of year).....
8.35 Incurred Claims.....

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	.....	.....
8.42	\$25,000 – 99,999	.....	.....
8.43	\$100,000 – 249,999	.....	.....
8.44	\$250,000 – 999,999	.....	.....
8.45	\$1,000,000 or more	.....	.....

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

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)	0	0	0	0	0
2. Ordinary - Term (Line 21, Col. 4, less Line 34, Col. 4)	0	0	0	0	0
3. Credit Life (Line 21, Col. 6)	0	0	0	0	0
4. Group, excluding FEGLI/SGLI (Line 21, Col. 9 less Lines 43 & 44, Col. 4)	43,975	51,033	51,498	67,230	8,856
5. Industrial (Line 21, Col. 2)	0	0	0	0	0
6. FEGLI/SGLI (Lines 43 & 44, Col. 4)	0	0	0	0	0
7. Total (Line 21, Col. 10)	43,975	51,033	51,498	67,230	8,856
New Business Issued					
(Exhibit of Life Insurance)					
8. Ordinary - Whole Life and Endowment (Line 34, Col. 2)	0	0	0	0	0
9. Ordinary - Term (Line 2, Col. 4, less Line 34, Col. 2)	0	0	0	0	0
10. Credit Life (Line 2, Col. 6)	0	0	0	0	0
11. Group (Line 2, Col. 9)	0	275	0	2,700	6,375
12. Industrial (Line 2, Col. 2)	0	0	0	0	0
13. Total (Line 2, Col. 10)	0	275	0	2,700	6,375
Premium Income - Lines of Business					
14. Industrial Life (Exhibit 1-Part 1, Line 20.4, Col. 2)	0	0	0	0	0
15.1 Ordinary-Life Insurance (Exhibit 1-Part 1, Line 20.4, Col. 3)	0	0	0	0	0
15.2 Ordinary-Individual Annuities (Exhibit 1-Part 1, Line 20.4, Col. 4)	0	0	0	0	0
16. Credit Life (Group and Individual) (Exhibit 1-Part 1, Line 20.4, Col. 5)	0	0	0	0	0
17.1 Group Life Insurance (Exhibit 1-Part 1, Line 20.4, Col. 6)	69,219	66,028	77,429	88,436	67,971
17.2 Group Annuities (Exhibit 1-Part 1, Line 20.4, Col. 7)	0	0	0	0	0
18.1 A & H-Group (Exhibit 1-Part 1, Line 20.4, Col. 8)	218,490	229,919	213,805	210,683	257,562
18.2 A & H-Credit (Group and Individual) (Exhibit 1-Part 1, Line 20.4, Col. 9)	0	0	0	0	0
18.3 A & H-Other (Exhibit 1-Part 1, Line 20.4, Col. 10)	0	0	0	0	0
19. Aggregate of All Other Lines of Business (Exhibit 1-Part 1, Line 20.4, Col. 11)	0	0	0	0	0
20. Deposit-type funds	XXX	XXX	0	0	0
21. Total	287,709	295,947	291,234	299,119	325,533
Balance Sheet Items (Pages 2 & 3)					
22. Total Admitted Assets Excluding Separate Accounts Business (Page 2, Line 25, Col. 3)	6,697,162	6,269,512	5,961,734	202,348	5,151,718
23. Total Liabilities Excluding Separate Accounts Business (Page 3, Line 26)	592,593	511,447	590,325	25,808	496,052
24. Aggregate Life Reserves (Page 3, Line 1)	191,620	134,402	172,868	0	188,498
25. Aggregate A & H Reserves (Page 3, Line 2)	25,257	25,734	27,836	1,000,000	26,476
26. Deposit-type contract funds (Page 3, Line 3)	0	0	XXX	XXX	XXX
27. Asset Valuation Reserve (Page 3, Line 24.1)	2,970	1,399	346	0	0
28. Capital (Page 3, Lines 29 and 30)	1,000,000	1,000,000	1,000,000	1,000,000	1,000,000
29. Surplus (Page 3, Line 37)	5,104,569	4,758,065	4,371,409	3,982,215	3,655,666
Risk-Based Capital Analysis					
30. Total Adjusted Capital	6,107,539	5,759,464	5,371,755	4,982,215	4,655,666
31. Authorized Control Level Risk - Based Capital	15,101	11,153	6,870	5,087	5,131
Percentage Distribution of Assets (Page 2, Col. 3) (Line No. / Page 2, Line 11, Col. 3) x 100.0					
32. Bonds (Line 1)	96.1	96.1	96.4	97.6	95.9
33. Stocks (Lines 2.1 and 2.2)	0.0	0.0	0.0	0.0	0.0
34. Mortgage Loans on Real Estate (Lines 3.1 and 3.2)	0.0	0.0	0.0	0.0	0.0
35. Real Estate (Lines 4.1, 4.2 and 4.3)	0.0	0.0	0.0	0.0	0.0
36. Policy Loans (Line 5)	0.0	0.0	0.0	0.0	0.0
37. Premium Notes (Line 6)	0.0	0.0	0.0	0.0	0.0
38. Cash and Short - Term Investments (Line 7)	3.9	3.9	3.6	2.4	4.1
39. Other Invested Assets (Line 8)	0.0	0.0	0.0	0.0	0.0
40. Receivable for Securities (Line 9)	0.0	0.0	0.0	0.0	0.0
41. Aggregate Write-ins for Invested Assets (Line 10)	0.0	0.0	0.0	0.0	0.0
42. Cash and Invested Assets (Line 11)	100.0	100.0	100.0	100.0	100.0

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2002	2 2001	3 2000	4 1999	5 1998
Investments in Parent, Subsidiaries and Affiliates					
43. Affiliated Bonds (Schedule D Summary, Line 25, Col. 1)	0	0	0	0	0
44. Affiliated Preferred Stocks (Schedule D Summary, Line 39, Col. 1)	0	0	0	0	0
45. Affiliated Common Stocks (Schedule D Summary, Line 53, Col. 2)	0	0	0	0	0
46. Affiliated Short-Term Investments (Subtotals included in Schedule DA Part 2 Col. 5, Line 11)	0	0	0	0	0
47. Affiliated Mortgage Loans on Real Estate	0	0	0	0	0
48. All Other Affiliated	0	0	0	0	0
49. Total of above Lines 43 to 48	0	0	0	0	0
Total Non-admitted and Admitted Assets					
50. Total Non admitted Assets (Page 2, Line 27, Col. 2)	0	0	0	2,528	5,286
51. Total Admitted Assets (Page 2, Line 27, Col. 3)	6,697,162	6,269,512	5,961,734	5,539,411	5,151,718
Investment Data					
52. Net Investment Income (Exhibit of Net Investment Income)	363,226	347,936	333,073	310,282	299,323
53. Realized Capital Gains (Losses)	0	0	0	0	0
54. Unrealized Capital Gains (Losses)	0	0	0	0	0
55. Total of above Lines 52, 53 & 54	363,226	347,936	333,073	310,282	299,323
Benefits and Reserve Increases (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)	20,610	43,914	34,625	30,643	16,398
57. Total contract benefits - A & H (Lines 13 & 14, Cols. 9, 10 & 11)	115,943	139,761	119,322	119,825	161,484
58. Increase in Life Reserves - Other than Group and Annuities (Line 19, Cols. 2 and 3)	0	0	0	0	0
59. Increase in A & H Reserves (Line 19, Cols. 9, 10 & 11)	(477)	(2,103)	2,028	(669)	(4,340)
60. Dividends to Policyholders (Line 30, Col. 1)	0	0	0	0	0
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 100.0	6.4	7.6	8.7	17.6	11.8
62. Lapse Percent (Ordinary Only) (Exhibit of Life Insurance, Col. 4, Lines 14 & 15) x 100.0 / 1/2 (Lines 1 & 21)	0.0	0.0	0.0	0.0	0.0
63. A & H Loss Percent (Schedule H, Part 1, Lines 3 and 4, Col. 2)	53.0	60.2	56.3	56.6	61.9
64. A & H Expense Percent (Schedule H, Pt. 1, Line 8, Col. 2)	(3.4)	(2.2)	2.1	7.2	9.5
A & H Claim Reserve Adequacy					
65. Incurred Losses on Prior Years' Claims - Group Health (Schedule H, Part 3, Line 3.1 Col. 2)	83,030	111,109	86,839	102,880	77,472
66. Prior Years' Claim Liability and Reserve - Group Health (Schedule H, Part 3, Line 3.2 Col. 2)	83,511	85,861	76,950	89,842	87,197
67. Incurred Losses on Prior Years' Claims-Health other than Group (Schedule H, Part 3, Line 3.1 Col. 1 less Col. 2)	0	0	0	0	0
68. Prior Years' Claim Liability and Reserve-Health other than Group (Schedule H, Part 3, Line 3.2 Col. 1 less Col. 2)	0	0	0	0	0
Net Gains From Operations After Federal Income Taxes by Lines of Business (Page 6, Line 33)					
69. Industrial Life (Col. 2)	0	0	0	0	0
70. Ordinary - Life (Col. 3)	0	0	0	0	0
71. Ordinary - Individual Annuities (Col. 4)	0	0	0	0	0
72. Ordinary-Supp. Contracts (Col. 5)	0	0	0	0	0
73. Credit Life (Col. 6)	0	0	0	0	0
74. Group Life (Col. 7)	(1,164)	64,855	72,686	45,793	10,571
75. Group Annuities (Col. 8)	0	0	0	0	0
76. A & H-Group (Col. 9)	349,240	322,854	314,326	277,998	295,322
77. A & H-Credit (Col. 10)	0	0	0	0	0
78. A & H-Other (Col. 11)	0	0	0	0	0
79. Aggregate of All Other Lines of Business (Col. 12)	0	0	0	0	0
80. Total (Col. 1)	348,076	387,709	387,012	323,791	305,893

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE OHIO MOTORISTS LIFE INSURANCE COMPANY

EXHIBIT OF LIFE INSURANCE

	Industrial		Ordinary		Credit Life (Group and Individual)		Group			10 Total Amount of Insurance (a)
	1	2	3	4	5	6	Number of		9	
	Number of Policies	Amount of Insurance (a)	Number of Policies	Amount of Insurance (a)	Number of Individual Policies and Group Certificates	Amount of Insurance (a)	7 Policies	8 Certificates	Amount of Insurance (a)	
1. In force end of prior year	0	0	0	0	0	0	5	1,203	51,033	51,033
2. Issued during year		0	0	0	0	0			0	0
3. Reinsurance assumed										0
4. Revived during year										0
5. Increased during year (net)										0
6. Subtotals, Lines 2 to 5	0	0	0	0	0	0	0	0	0	0
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	0	0	0	0	5	1,203	51,033	51,033
Deductions during year:										
10. Death							XXX	11	37	37
11. Maturity							XXX			0
12. Disability							XXX			0
13. Expiry										0
14. Surrender										0
15. Lapse								230	7,021	7,021
16. Conversion							XXX	XXX	XXX	0
17. Decreased (net)										0
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	0	0	0	0	0	241	7,058	7,058
21. In force end of year, (Line 9 minus Line 20)	0	0	0	0	0	0	5	962	43,975	43,975
22. Reinsurance ceded end of year	XXX		XXX		XXX		XXX	XXX	36,635	36,635
23. Line 21 minus Line 22	XXX	0	XXX	0	XXX	(b)	XXX	XXX	7,340	7,340
DETAILS OF WRITE-INS										
0801.										
0802.										
0803.										
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.										
1902.										
1903.										
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 \$; Individual \$

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE OHIO MOTORISTS LIFE INSURANCE COMPANY

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	
25. Other paid-up insurance				
26. Debit ordinary insurance	XXX	XXX		

ADDITIONAL INFORMATION ON ORDINARY 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				
29. Other term insurance - decreasing	XXX		XXX	
30. Other term insurance	XXX		XXX	
31. Totals, Line 27 to 30				
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. Total (Lines 31 to 34)				

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	2	3	4
	Non-Participating	Participating	Non-Participating	Participating
36. Industrial				
37. Ordinary				
38. Credit Life (Group and Individual)				
39. Group			43,975	
40. Totals (Lines 36 to 39)	0	0	43,975	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		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 ACCIDENTAL DEATH BENEFITS

46. Amount of additional accidental death benefits in force end of year under ordinary policies (a)	
---	--

BASIS OF CALCULATION OF ORDINARY TERM INSURANCE

47. State basis of calculation of (47.1) decreasing term insurance covering Family Income 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	
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			XXX	XXX				
51. Other								
52. Total	0 (b)	0	0 (b)	0	0 (b)	0	0 (b)	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
NONE				
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)				
Deductions during year:				
6. Decreased (net)				
7. Reinsurance				
8. Totals (Lines 6 and 7)				
9. In force end of year				
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
NONE				
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)				
Deductions during year:				
6. Decreased (net)				
7. Reinsurance				
8. Totals (Lines 6 and 7)				
9. In force end of year				
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	0	0	2	401,167	0	0
2. Issued during year				98,266		
3. Reinsurance assumed				21,289		
4. Increased during year (net)		XXX		XXX		XXX
5. Total (Lines 1 to 4)	0	XXX	2	XXX	0	XXX
Deductions during year:						
6. Conversions	XXX	XXX		XXX	XXX	XXX
7. Decreased (net)		XXX		XXX		XXX
8. Reinsurance		XXX		XXX		XXX
9. Total (Lines 6 thru 8)	0	XXX	0	XXX	0	XXX
10. In force end of year	0 (a)		2 (a)	426,137	0 (a)	

DEPOSIT FUNDS AND DIVIDEND ACCUMULATIONS

	1	2
	Deposit Funds Contracts	Dividend Accumulations Contracts
NONE		
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)		
Deductions During Year:		
6. Decreased (net)		
7. Reinsurance		
8. Totals (Lines 6 and 7)		
9. In force end of year		
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.

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 3,656,402	4,002,633	3,679,678	3,635,000
	2. Canada 0	0	0	0
	3. Other Countries 0	0	0	0
	4. Totals 3,656,402	4,002,633	3,679,678	3,635,000
States, Territories and Possessions (Direct and guaranteed)	5. United States 0	0	0	0
	6. Canada 0	0	0	0
	7. Other Countries 0	0	0	0
	8. Totals 0	0	0	0
Political Subdivisions of States, Territories and Possessions (Direct and guaranteed)	9. United States 0	0	0	0
	10. Canada 0	0	0	0
	11. Other Countries 0	0	0	0
	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 0	0	0	0
	14. Canada 0	0	0	0
	15. Other Countries 0	0	0	0
	16. Totals 0	0	0	0
Public Utilities (unaffiliated)	17. United States 0	0	0	0
	18. Canada 0	0	0	0
	19. Other Countries 0	0	0	0
	20. Totals 0	0	0	0
Industrial and Miscellaneous and Credit Tenant Loans (unaffiliated)	21. United States 2,644,780	2,799,160	2,649,120	2,600,000
	22. Canada 0	0	0	0
	23. Other Countries 0	0	0	0
	24. Totals 2,644,780	2,799,160	2,649,120	2,600,000
Parent, Subsidiaries and Affiliates	25. Totals 0	0	0	0
	26. Total Bonds 6,301,182	6,801,793	6,328,798	6,235,000
PREFERRED STOCKS				
Public Utilities (unaffiliated)	27. United States 0	0	0	0
	28. Canada 0	0	0	0
	29. Other Countries 0	0	0	0
	30. Totals 0	0	0	0
Banks, Trust and Insurance Companies (unaffiliated)	31. United States 0	0	0	0
	32. Canada 0	0	0	0
	33. Other Countries 0	0	0	0
	34. Totals 0	0	0	0
Industrial and Miscellaneous (unaffiliated)	35. United States 0	0	0	0
	36. Canada 0	0	0	0
	37. Other Countries 0	0	0	0
	38. Totals 0	0	0	0
Parent, Subsidiaries and Affiliates	39. Totals 0	0	0	0
	40. Total Preferred Stocks 0	0	0	0
COMMON STOCKS				
Public Utilities (unaffiliated)	41. United States 0	0	0	0
	42. Canada 0	0	0	0
	43. Other Countries 0	0	0	0
	44. Totals 0	0	0	0
Banks, Trust and Insurance Companies (unaffiliated)	45. United States 0	0	0	0
	46. Canada 0	0	0	0
	47. Other Countries 0	0	0	0
	48. Totals 0	0	0	0
Industrial and Miscellaneous (unaffiliated)	49. United States 0	0	0	0
	50. Canada 0	0	0	0
	51. Other Countries 0	0	0	0
	52. Totals 0	0	0	0
Parent, Subsidiaries and Affiliates	53. Totals 0	0	0	0
	54. Total Common Stocks 0	0	0	0
	55. Total Stocks 0	0	0	0
	56. Total Bonds and Stocks 6,301,182	6,801,793	6,328,798	

(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 5,916,874	6. Foreign Exchange Adjustment:
2. Cost of bonds and stocks acquired, Column 6, Part 3 1,044,500	6.1 Column 17, Part 1 0
3. Increase (decrease) by adjustment:	6.2 Column 13, Part 2, Sec. 1 0
3.1 Column 16, Part 1 (7,712)	6.3 Column 11, Part 2, Sec. 2 0
3.2 Column 12, Part 2, Sec. 1 0	6.4 Column 11, Part 4 0
3.3 Column 10, Part 2, Sec. 2 0	7. Book/adjusted carrying value at end of current period 6,301,182
3.4 Column 10, Part 4 (2,480) (10,192)	8. Total valuation allowance 0
4. Total gain (loss), Col. 14, Part 4 0	9. Subtotal (Lines 7 plus 8) 6,301,182
5. Deduct consideration for bonds and stocks disposed of Column 6, Part 4 650,000	10. Total nonadmitted amounts 0
	11. Statement value of bonds and stocks, current period 6,301,182

ANNUAL STATEMENT FOR THE YEAR 2002 OF THE OHIO MOTORISTS LIFE INSURANCE COMPANY

SCHEDULE T—PREMIUMS AND ANNUITY CONSIDERATIONS

Allocated by States and Territories

States, Etc.	1	Life Contracts		Direct Business Only					
		2	3	4	5	6			
							Life Insurance Premiums	Annuity Considerations	Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	Deposit-Type Contract Funds	Other Considerations
1. Alabama	AL	No.	.0	.0	.0	.0	.0	.0	
2. Alaska	AK	No.	.0	.0	.0	.0	.0	.0	
3. Arizona	AZ	No.	.0	.0	.0	.0	.0	.0	
4. Arkansas	AR	No.	.0	.0	.0	.0	.0	.0	
5. California	CA	No.	.0	.0	.0	.0	.0	.0	
6. Colorado	CO	No.	.0	.0	.0	.0	.0	.0	
7. Connecticut	CT	No.	.0	.0	.0	.0	.0	.0	
8. Delaware	DE	No.	.0	.0	.0	.0	.0	.0	
9. District of Columbia	DC	No.	.0	.0	.0	.0	.0	.0	
10. Florida	FL	No.	.0	.0	.0	.0	.0	.0	
11. Georgia	GA	No.	.0	.0	.0	.0	.0	.0	
12. Hawaii	HI	No.	.0	.0	.0	.0	.0	.0	
13. Idaho	ID	No.	.0	.0	.0	.0	.0	.0	
14. Illinois	IL	No.	.0	.0	.0	.0	.0	.0	
15. Indiana	IN	No.	.0	.0	.0	.0	.0	.0	
16. Iowa	IA	No.	.0	.0	.0	.0	.0	.0	
17. Kansas	KS	No.	.0	.0	.0	.0	.0	.0	
18. Kentucky	KY	No.	.0	.0	.0	.0	.0	.0	
19. Louisiana	LA	No.	.0	.0	.0	.0	.0	.0	
20. Maine	ME	No.	.0	.0	.0	.0	.0	.0	
21. Maryland	MD	No.	.0	.0	.0	.0	.0	.0	
22. Massachusetts	MA	No.	.0	.0	.0	.0	.0	.0	
23. Michigan	MI	No.	.0	.0	.0	.0	.0	.0	
24. Minnesota	MN	No.	.0	.0	.0	.0	.0	.0	
25. Mississippi	MS	No.	.0	.0	.0	.0	.0	.0	
26. Missouri	MO	No.	.0	.0	.0	.0	.0	.0	
27. Montana	MT	No.	.0	.0	.0	.0	.0	.0	
28. Nebraska	NE	No.	.0	.0	.0	.0	.0	.0	
29. Nevada	NV	No.	.0	.0	.0	.0	.0	.0	
30. New Hampshire	NH	No.	.0	.0	.0	.0	.0	.0	
31. New Jersey	NJ	No.	.0	.0	.0	.0	.0	.0	
32. New Mexico	NM	No.	.0	.0	.0	.0	.0	.0	
33. New York	NY	No.	.0	.0	.0	.0	.0	.0	
34. North Carolina	NC	No.	.0	.0	.0	.0	.0	.0	
35. North Dakota	ND	No.	.0	.0	.0	.0	.0	.0	
36. Ohio	OH	Yes.	137,681	.0	849,732	.0	.0	.0	
37. Oklahoma	OK	No.	.0	.0	.0	.0	.0	.0	
38. Oregon	OR	No.	.0	.0	.0	.0	.0	.0	
39. Pennsylvania	PA	No.	.0	.0	.0	.0	.0	.0	
40. Rhode Island	RI	No.	.0	.0	.0	.0	.0	.0	
41. South Carolina	SC	No.	.0	.0	.0	.0	.0	.0	
42. South Dakota	SD	No.	.0	.0	.0	.0	.0	.0	
43. Tennessee	TN	No.	.0	.0	.0	.0	.0	.0	
44. Texas	TX	No.	.0	.0	.0	.0	.0	.0	
45. Utah	UT	No.	.0	.0	.0	.0	.0	.0	
46. Vermont	VT	No.	.0	.0	.0	.0	.0	.0	
47. Virginia	VA	No.	.0	.0	.0	.0	.0	.0	
48. Washington	WA	No.	.0	.0	.0	.0	.0	.0	
49. West Virginia	WV	No.	.0	.0	.0	.0	.0	.0	
50. Wisconsin	WI	No.	.0	.0	.0	.0	.0	.0	
51. Wyoming	WY	No.	.0	.0	.0	.0	.0	.0	
52. American Samoa	AS	No.	.0	.0	.0	.0	.0	.0	
53. Guam	GU	No.	.0	.0	.0	.0	.0	.0	
54. Puerto Rico	PR	No.	.0	.0	.0	.0	.0	.0	
55. US Virgin Islands	VI	No.	.0	.0	.0	.0	.0	.0	
56. Canada	CN	No.	.0	.0	.0	.0	.0	.0	
57. Aggregate Other Alien	OT	XXX	.0	.0	.0	.0	.0	.0	
58. Subtotal	(a)	.1	137,681	.0	849,732	.0	.0	.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 of other amounts not allocable by State	XXX		.0	.0	.0	.0	.0	.0	
95. Totals (Direct Business)	XXX		137,681	.0	849,732	.0	.0	.0	
96. Plus Reinsurance Assumed	XXX		46,012	.0	21,289	.0	.0	.0	
97. Totals (All Business)	XXX		183,693	.0	871,021	.0	.0	.0	
98. Less Reinsurance Ceded	XXX		114,265	.0	652,546	.0	.0	.0	
99. Totals (All Business) less Reinsurance Ceded	XXX		69,428	0	218,475	0	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	.0	.0	.0
5799. Totals (Lines 5701 thru 5703 plus 5798)(Line 57 above)	XXX		0	0	0	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	.0	.0	.0
9499. Totals (Lines 9401 thru 9403 plus 9498)(Line 94 above)	XXX		0	0	0	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, Line 1, indicate which: Schedule H, Part 1, Line 1.

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

PART 1 - ORGANIZATIONAL CHART

Ohio Motorists Association (34-0148760)

Ohio Motorists Holding Company (34-1659669) (100% owned by Ohio Motorists Association)

Ohio Motorists Life Insurance Company (34-1666970) (100% owned by Ohio Motorists Holding Company)
NAIC Company Code 66005 OH