



# ANNUAL STATEMENT

For the Year Ended December 31, 2012  
of the Condition and Affairs of the

## OHIO MOTORISTS LIFE INSURANCE COMPANY

NAIC Group Code.....0000, 0000 (Current Period) (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 US
Incorporated/Organized..... September 24, 1990	Commenced Business..... July 1, 1991	
Statutory Home Office	5700 BRECKSVILLE ROAD..... INDEPENDENCE ..... OH ..... US ..... 44131 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	
Main Administrative Office	5700 BRECKSVILLE ROAD..... INDEPENDENCE ..... OH ..... US..... 44131 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	<i>(Area Code) (Telephone Number)</i>
Mail Address	P.O. BOX 6150..... CLEVELAND ..... OH ..... US ..... 44101 <i>(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)</i>	
Primary Location of Books and Records	5700 BRECKSVILLE ROAD..... INDEPENDENCE ..... OH ..... US ..... 44131 <i>(Street and Number) (City or Town, State, Country and Zip Code)</i>	<i>(Area Code) (Telephone Number)</i>
Internet Web Site Address	N/A	
Statutory Statement Contact	MICHAEL R PRATT <i>(Name)</i> MPRATT@AAAEC.COM <i>(E-Mail Address)</i>	216-606-6465 <i>(Area Code) (Telephone Number) (Extension)</i> 216-606-6018 <i>(Fax Number)</i>

### OFFICERS

Name	Title	Name	Title
James McGrath	President	Michael R Pratt	Treasurer
Kenneth Friedel	Vice President	Ray Komichak	Secretary

### OTHER

### DIRECTORS OR TRUSTEES

Mary Lynn Laughlin	Michael R Pratt	Gary S Cowling	Peter E Shimrak
James McGrath			

State of..... Ohio  
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. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

_____ (Signature) James McGrath	_____ (Signature) Michael R Pratt	_____ (Signature) Kenneth Friedel
_____ (Printed Name) President	_____ (Printed Name) Treasurer	_____ (Printed Name) Vice President
_____ (Title)	_____ (Title)	_____ (Title)

Subscribed and sworn to before me  
This \_\_\_\_\_ day of \_\_\_\_\_ 2013

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 \_\_\_\_\_



DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR  
 NAIC Group Code.....0000 NAIC Company Code.....66005

**LIFE INSURANCE**

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>					
1. Life insurance.....			105,687		105,687
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	0	0	105,687	0	105,687
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
<b>Life insurance:</b>					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
<b>Annuities:</b>					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits.....			175,000		175,000
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	175,000	0	175,000

**DETAILS OF WRITE-INS**

	1	2	3	4	5	6	7	8	9	10
1301. ....										0
1302. ....										0
1303. ....										0
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0	0	0	0	0	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above).....	0	0	0	0	0	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pol. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....						90,000			0	90,000
17. Incurred during current year.....					3	185,000			3	185,000
<b>Settled during current year:</b>										
18.1 By payment in full.....					3	175,000			3	175,000
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	3	175,000	0	0	3	175,000
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	3	175,000	0	0	3	175,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	100,000	0	0	0	100,000
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....				(a).....	5	19,400,000			5	19,400,000
21. Issued during year.....									0	0
22. Other changes to in force (Net).....						(3,544,000)			0	(3,544,000)
23. In force December 31 of current year.....	0	0	0	(a).....	5	15,856,000	0	0	5	15,856,000

(a) Includes Individual Credit Life Insurance, prior year \$.....0 current year \$.....0.  
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0 current year \$.....0.  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.....0 current year \$.....0.

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....	116,102	121,841		10,151	14,688
24.1 Federal Employee Health Benefits Program premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
<b>Other Individual Policies:</b>					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	116,102	121,841	0	10,151	14,688

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

**OHIO MOTORISTS LIFE INSURANCE COMPANY**



DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR  
 NAIC Group Code....0000 NAIC Company Code....66005

**LIFE INSURANCE**

	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>					
1. Life insurance.....			105,687		105,687
2. Annuity considerations.....					0
3. Deposit-type contract funds.....		XXX		XXX	0
4. Other considerations.....					0
5. Totals (Sum of Lines 1 to 4).....	0	0	105,687	0	105,687
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
<b>Life insurance:</b>					
6.1 Paid in cash or left on deposit.....					0
6.2 Applied to pay renewal premiums.....					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....					0
6.4 Other.....					0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
<b>Annuities:</b>					
7.1 Paid in cash or left on deposit.....					0
7.2 Applied to provide paid-up annuities.....					0
7.3 Other.....					0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits.....			175,000		175,000
10. Matured endowments.....					0
11. Annuity benefits.....					0
12. Surrender values and withdrawals for life contracts.....					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid.....	0	0	0	0	0
14. All other benefits, except accident and health.....					0
15. Totals.....	0	0	175,000	0	175,000

**DETAILS OF WRITE-INS**

1301. ....					0
1302. ....					0
1303. ....					0
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0	0	0	0	0
1399. Total (Lines 1301 thru 1303 plus 1398)(Line 13 above).....	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>										
16. Unpaid December 31, prior year.....						90,000			0	90,000
17. Incurred during current year.....					3	185,000			3	185,000
<b>Settled during current year:</b>										
18.1 By payment in full.....					3	175,000			3	175,000
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	3	175,000	0	0	3	175,000
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	3	175,000	0	0	3	175,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	100,000	0	0	0	100,000
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year.....				(a).....	5	19,400,000			5	19,400,000
21. Issued during year.....									0	0
22. Other changes to in force (Net).....						(3,544,000)			0	(3,544,000)
23. In force December 31 of current year.....	0	0	0	(a).....	5	15,856,000	0	0	5	15,856,000

(a) Includes Individual Credit Life Insurance, prior year \$.....0 current year \$.....0.  
 Includes Group Credit Life Insurance Loans less than or equal to 60 months at issue, prior year \$.....0 current year \$.....0.  
 Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$.....0 current year \$.....0.

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited on Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group policies (b).....	116,102	121,841		10,151	14,688
24.1 Federal Employee Health Benefits Program premium (b).....					
24.2 Credit (group and individual).....					
24.3 Collectively renewable policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
<b>Other Individual Policies:</b>					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only.....					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5).....	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	116,102	121,841	0	10,151	14,688

(b) For health business on indicated lines report: Number of persons insured under PPO managed products.....0 and number of persons insured under indemnity only products.....0.

**FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE**

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year.....	
2. Current year's realized pre-tax capital gains/(losses) of \$.....0 transferred from the reserve net of taxes of \$.....0.....	
3. Adjustment for current year's liability gains/(losses) released from the reserve.....	
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3).....	.0
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4).....	
6. Reserve as of December 31, current year (Line 4 minus Line 5).....	.0

NONE

Amortization

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released from the Reserve	4 Balance Before Reduction for the Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2012.....				.0
2. 2013.....				.0
3. 2014.....				.0
4. 2015.....				.0
5. 2016.....				.0
6. 2017.....				.0
7. 2018.....				.0
8. 2019.....				.0
9. 2020.....				.0
10. 2021.....				.0
11. 2022.....				.0
12. 2023.....				.0
13. 2024.....				.0
14. 2025.....				.0
15. 2026.....				.0
16. 2027.....				.0
17. 2028.....				.0
18. 2029.....				.0
19. 2030.....				.0
20. 2031.....				.0
21. 2032.....				.0
22. 2033.....				.0
23. 2034.....				.0
24. 2035.....				.0
25. 2036.....				.0
26. 2037.....				.0
27. 2038.....				.0
28. 2039.....				.0
29. 2040.....				.0
30. 2041.....				.0
31. 2042 and Later.....				.0
32. Total (Lines 1 to 31).....	.0	.0	.0	.0

NONE

## ASSET VALUATION RESERVE

	Default Component			Equity Component			7 Total Amount (Cols. 3 + 6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	
1. Reserve as of December 31, prior year.....	4,035		4,035			.0	4,035
2. Realized capital gains/(losses) net of taxes - General Account.....			.0			.0	.0
3. Realized capital gains/(losses) net of taxes - Separate Accounts.....			.0			.0	.0
4. Unrealized capital gains/(losses) - net of deferred taxes - General Account.....			.0			.0	.0
5. Unrealized capital gains/(losses) - net of deferred taxes - Separate Accounts.....			.0			.0	.0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves.....			.0			.0	.0
7. Basic contribution.....	.276		.276			.0	.276
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7).....	4,311	.0	4,311	.0	.0	.0	4,311
9. Maximum reserve.....	2,072		2,072			.0	2,072
10. Reserve objective.....	1,589		1,589			.0	1,589
11. 20% of (Line 10 minus Line 8).....	(545)	.0	(545)	.0	.0	.0	(545)
12. Balance before transfers (Lines 8 + 11).....	3,767	.0	3,767	.0	.0	.0	3,767
13. Transfers.....			.0			.0	XXX
14. Voluntary contribution.....			.0			.0	.0
15. Adjustment down to maximum/up to zero.....	(1,695)		(1,695)			.0	(1,695)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15).....	2,072	.0	2,072	.0	.0	.0	2,072

## ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

### Default Component

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
<b>LONG-TERM BONDS</b>												
1		Exempt obligations.....	8,594,538	XXX	XXX	8,594,538	0.0000	0	0.0000	0	0.0000	0
2	1	Highest quality.....	690,669	XXX	XXX	690,669	0.0004	276	0.0023	1,589	0.0030	2,072
3	2	High quality.....		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
4	3	Medium quality.....		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
5	4	Low quality.....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
6	5	Lower quality.....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
7	6	In or near default.....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
8		Total unrated multi-class securities acquired by conversion.....		XXX	XXX	0	XXX	0	XXX	0	XXX	0
9		Total bonds (sum of Lines 1 through 8).....	9,285,207	XXX	XXX	9,285,207	XXX	276	XXX	1,589	XXX	2,072
<b>PREFERRED STOCKS</b>												
10	1	Highest quality.....		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
11	2	High quality.....		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
12	3	Medium quality.....		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
13	4	Low quality.....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
14	5	Lower quality.....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
15	6	In or near default.....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
16		Affiliated life with AVR.....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17		Total preferred stocks (sum of Lines 10 through 16).....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
<b>SHORT-TERM BONDS</b>												
18		Exempt obligations.....		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19	1	Highest quality.....		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
20	2	High quality.....		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
21	3	Medium quality.....		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
22	4	Low quality.....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
23	5	Lower quality.....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
24	6	In or near default.....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
25		Total short-term bonds (sum of Lines 18 thru 24).....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

## ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

### Default Component

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
<b>DERIVATIVE INSTRUMENTS</b>												
26		Exchange-traded.....		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
27	1	Highest quality.....		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
28	2	High quality.....		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
29	3	Medium quality.....		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
30	4	Low quality.....		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
31	5	Lower quality.....		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
32	6	In or near default.....		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
33		Total derivative instruments.....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
34		TOTAL (Lines 9 + 17 + 25 + 33).....	9,285,207	XXX	XXX	9,285,207	XXX	276	XXX	1,589	XXX	2,072
<b>MORTGAGE LOANS</b>												
In good standing:												
35		Farm mortgages.....			XXX	0	(a)	0	(a)	0	(a)	0
36		Residential mortgages-insured or guaranteed.....			XXX	0	0.0003	0	0.0006	0	0.0010	0
37		Residential mortgages-all other.....			XXX	0	0.0013	0	0.0030	0	0.0040	0
38		Commercial mortgages-insured or guaranteed.....			XXX	0	0.0003	0	0.0006	0	0.0010	0
39		Commercial mortgages-all other.....			XXX	0	(a)	0	(a)	0	(a)	0
40		In good standing with restructured terms.....			XXX	0	(b)	0	(b)	0	(b)	0
Overdue, not in process:												
41		Farm mortgages.....			XXX	0	0.0420	0	0.0760	0	0.1200	0
42		Residential mortgages-insured or guaranteed.....			XXX	0	0.0005	0	0.0012	0	0.0020	0
43		Residential mortgages-all other.....			XXX	0	0.0025	0	0.0058	0	0.0090	0
44		Commercial mortgages-insured or guaranteed.....			XXX	0	0.0005	0	0.0012	0	0.0020	0
45		Commercial mortgages-all other.....			XXX	0	0.0420	0	0.0760	0	0.1200	0
In process of foreclosure:												
46		Farm mortgages.....			XXX	0	0.0000	0	0.1700	0	0.1700	0
47		Residential mortgages-insured or guaranteed.....			XXX	0	0.0000	0	0.0040	0	0.0040	0
48		Residential mortgages-all other.....			XXX	0	0.0000	0	0.0130	0	0.0130	0
49		Commercial mortgages-insured or guaranteed.....			XXX	0	0.0000	0	0.0040	0	0.0040	0
50		Commercial mortgages-all other.....			XXX	0	0.0000	0	0.1700	0	0.1700	0
51		Total Schedule B mortgages (sum of Lines 35 through 50).....	0	0	XXX	0	XXX	0	XXX	0	XXX	0
52		Schedule DA mortgages.....			XXX	0	(c)	0	(c)	0	(c)	0
53		Total mortgage loans on real estate (Lines 51 + 52).....	0	0	XXX	0	XXX	0	XXX	0	XXX	0

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(a) Times the company's experience adjustment factor (EAF).

(b) Column 9 is the greater of 6.4% without any EAF adjustments or a company's EAF adjusted In Good Standing (IGS) factor plus 150 basis points. Columns 5 and 7 are 28% and 62% respectively of Column 9.

(c) Determined using the same factors and breakdowns used for directly owned mortgage loans.

**AVR-Equity Component (Lines 1-30)**  
**NONE**

**AVR-Equity Component (Lines 31-55)**  
**NONE**

**AVR-Equity Component (Lines 56-74)**  
**NONE**

**AVR-Replications (Synthetic) Assets**  
**NONE**

**Sch. F**  
**NONE**

### SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

	Total		Group Accident and Health		Credit Accident and Health (Group and Individual)		Collectively Renewable		Other Individual Contracts									
									Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other	
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
<b>PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS</b>																		
1. Premiums written.....	23,919	XXX	23,919	XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX
2. Premiums earned.....	24,932	XXX	24,932	XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX
3. Incurred claims.....	3,854	15.5	3,854	15.5		0.0		0.0		0.0		0.0		0.0		0.0		0.0
4. Cost containment expenses.....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
5. Incurred claims and cost containment expenses (Lines 3 and 4).....	3,854	15.5	3,854	15.5	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
6. Increase in contract reserves.....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
7. Commissions (a).....	5,880	23.6	5,880	23.6		0.0		0.0		0.0		0.0		0.0		0.0		0.0
8. Other general insurance expenses.....	10,479	42.0	10,479	42.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
9. Taxes, licenses and fees.....	1,696	6.8	1,696	6.8		0.0		0.0		0.0		0.0		0.0		0.0		0.0
10. Total other expenses incurred.....	18,055	72.4	18,055	72.4	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
11. Aggregate write-ins for deductions.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
12. Gain from underwriting before dividends or refunds.....	3,023	12.1	3,023	12.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
13. Dividends or refunds.....	0	0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
14. Gain from underwriting after dividends or refunds.....	3,023	12.1	3,023	12.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
<b>DETAILS OF WRITE-INS</b>																		
1101. ....		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
1102. ....		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
1103. ....		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1199. Total (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

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(a) Includes \$.....0 reported as 'Contract, membership and other fees retained by agents.'

**SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (continued)**

	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
<b>PART 2 - RESERVES AND LIABILITIES</b>									
A. Premium Reserves:									
1. Unearned premiums.....	6,567	6,567							
2. Advance premiums.....	729	729							
3. Reserve for rate credits.....	0								
4. Total premium reserves, current year.....	7,296	7,296	0	0	0	0	0	0	0
5. Total premium reserves, prior year.....	8,309	8,309							
6. Increase in total premium reserves.....	(1,013)	(1,013)	0	0	0	0	0	0	0
B. Contract Reserves:									
1. Additional reserves (a).....	0								
2. Reserve for future contingent benefits.....	0								
3. Total contract reserves, current year.....	0	0	0	0	0	0	0	0	0
4. Total contract reserves, prior year.....	0								
5. Increase in contract reserves.....	0	0	0	0	0	0	0	0	0
C. Claim Reserves and Liabilities:									
1. Total current year.....	5,656	5,656							
2. Total prior year.....	5,050	5,050							
3. Increase.....	606	606	0	0	0	0	0	0	0

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**PART 3 - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES**

1. Claims Paid During the Year:									
1.1 On claims incurred prior to current year.....	2,265	2,265							
1.2 On claims incurred during current year.....	983	983							
2. Claim Reserves and Liabilities, December 31, Current Year:									
2.1 On claims incurred prior to current year.....	1,010	1,010							
2.2 On claims incurred during current year.....	4,646	4,646							
3. Test:									
3.1 Lines 1.1 and 2.1.....	3,275	3,275	0	0	0	0	0	0	0
3.2 Claim reserves and liabilities, December 31, prior year.....	5,050	5,050							
3.3 Line 3.1 minus Line 3.2.....	(1,775)	(1,775)	0	0	0	0	0	0	0

**PART 4 - REINSURANCE**

A. Reinsurance Assumed:									
1. Premiums written.....	6,504	6,504							
2. Premiums earned.....	6,656	6,656							
3. Incurred claims.....	1,650	1,650							
4. Commissions.....	2,816	2,816							
B. Reinsurance Ceded:									
1. Premiums written.....	98,687	98,687							
2. Premiums earned.....	103,565	103,565							
3. Incurred claims.....	12,484	12,484							
4. Commissions.....	17,364	17,364							

(a) Includes \$.....0 premium deficiency reserve.

## SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred claims.....			14,688	14,688
2. Beginning claim reserves and liabilities.....			24,150	24,150
3. Ending claim reserves and liabilities.....			28,687	28,687
4. Claims paid.....	0	0	10,151	10,151
B. Assumed Reinsurance:				
5. Incurred claims.....			1,650	1,650
6. Beginning claim reserves and liabilities.....			1,428	1,428
7. Ending claim reserves and liabilities.....			1,353	1,353
8. Claims paid.....	0	0	1,725	1,725
C. Ceded Reinsurance:				
9. Incurred claims.....			12,484	12,484
10. Beginning claim reserves and liabilities.....			20,528	20,528
11. Ending claim reserves and liabilities.....			24,384	24,384
12. Claims paid.....	0	0	8,628	8,628
D. Net:				
13. Incurred claims.....	0	0	3,854	3,854
14. Beginning claim reserves and liabilities.....	0	0	5,050	5,050
15. Ending claim reserves and liabilities.....	0	0	5,656	5,656
16. Claims paid.....	0	0	3,248	3,248
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred claims and cost containment expenses.....			3,854	3,854
18. Beginning reserves and liabilities.....			5,050	5,050
19. Ending reserves and liabilities.....			5,656	5,656
20. Paid claims and cost containment expenses.....	0	0	3,248	3,248

### SCHEDULE S - PART 1 - SECTION 1

Reinsurance Assumed Life Insurance, Annuities, Deposit Funds and Other Liabilities  
 Without Life or Disability Contingencies, and Related Benefits Listed by Reinsured Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Amount of In Force at End of Year	8 Reserve	9 Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
<b>General Account - Non-Affiliates - U.S. Non-Affiliates</b>											
62596.....	31-0252460....	07/01/1992	UNION FIDELITY INSURANCE COMPANY.....	KS.....	OTH/G.....	206,000	85,992	9,410	6,920		
0499999	Total - General Account - Non-Affiliates - U.S. Non-Affiliates.....										0
0699999	Total - General Account - Non-Affiliates.....										0
0799999	Total - General Account.....										0
1599999	Total U.S.....										0
1799999	Total.....										0

**SCHEDULE S - PART 1 - SECTION 2**

Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Premiums	8 Unearned Premiums	9 Reserve Liability Other Than for Unearned Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
<b>Non-Affiliates - U.S. Non-Affiliates</b>											
62146.....	36-2136262....	07/01/1991	COMBINED INSURANCE CMOPANY OF AMERICA.....	IL.....	OTH/G.....	.....6,448	.....1,918	.....	.....1,353	.....	.....
0499999	Total - Non-Affiliates - U.S. Non-Affiliates.....					.....6,448	.....1,918	.....0	.....1,353	.....0	.....0
0699999	Total - Non-Affiliates.....					.....6,448	.....1,918	.....0	.....1,353	.....0	.....0
0799999	Total - U.S.....					.....6,448	.....1,918	.....0	.....1,353	.....0	.....0
0999999	Total.....					.....6,448	.....1,918	.....0	.....1,353	.....0	.....0

**SCHEDULE S - PART 2**

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
<b>Life and Annuity - Non-Affiliates - U.S. Non-Affiliates</b>						
80659.....	38-0397420....	01/01/1998	CANADA LIFE.....	MI.....		80,000
0499999	Total - Life and Annuity Non-Affiliates - U.S. Non-Affiliates.....				0	80,000
0699999	Total - Life and Annuity Non-Affiliates.....				0	80,000
0799999	Total - Life and Annuity.....				0	80,000
<b>Accident and Health - Non-Affiliates - U.S. Non-Affiliates</b>						
62146.....	36-2136262....	12/07/1992	COMBINED INSURANCE COMPANY OF AMERICA.....	IL.....		24,384
1199999	Total - Accident and Health Non-Affiliates - U.S. Non-Affiliates.....				0	24,384
1399999	Total - Accident and Health Non-Affiliates.....				0	24,384
1499999	Total - Accident and Health.....				0	24,384
1599999	Total U.S.....				0	104,384
1799999	Total.....				0	104,384

### SCHEDULE S - PART 3 - SECTION 1

Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities  
 Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Amount In Force at End of Year	Reserve Credit Taken		10 Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
							8 Current Year	9 Prior Year		11 Current Year	12 Prior Year		
<b>General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates</b>													
80659.....	38-0397420....	01/01/1998	CANADA LIFE.....	MI.....	OTH/G.....	13,144,000	14,812		85,719				
0499999	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....					13,144,000	14,812	0	85,719	0	0	0	0
0699999	Total - General Account - Authorized - Non-Affiliates.....					13,144,000	14,812	0	85,719	0	0	0	0
0799999	Total - General Account - Authorized.....					13,144,000	14,812	0	85,719	0	0	0	0
2299999	Total - General Account - Authorized, Unauthorized and Certified.....					13,144,000	14,812	0	85,719	0	0	0	0
4599999	Total U.S.....					13,144,000	14,812	0	85,719	0	0	0	0
4799999	Total.....					13,144,000	14,812	0	85,719	0	0	0	0

**SCHEDULE S - PART 3 - SECTION 2**

Reinsurance Ceded Accident and Health Insurance Listed by Reinsuring Company as of December 31, Current Year

1 NAIC Company Code	2 Federal ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type	7 Premiums	8 Unearned Premiums (estimated)	9 Reserve Credit Taken Other Than for Unearned Premiums	Outstanding Surplus Relief		12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
									10 Current Year	11 Prior Year		
<b>General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates</b>												
62146....	36-2136262....	12/07/1992	COMBINED INSURANCE COMPANY OF AMERICA.....	IL.....	OTH/G.....	.....99,288	.....26,344	.....	.....	.....	.....	.....
0499999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....					.....99,288	.....26,344	.....0	.....0	.....0	.....0	.....0
0699999.	Total - General Account - Authorized - Non-Affiliates.....					.....99,288	.....26,344	.....0	.....0	.....0	.....0	.....0
0799999.	Total - General Account - Authorized.....					.....99,288	.....26,344	.....0	.....0	.....0	.....0	.....0
2299999.	Total - General Account - Authorized, Unauthorized and Certified.....					.....99,288	.....26,344	.....0	.....0	.....0	.....0	.....0
4599999.	Total - U.S.....					.....99,288	.....26,344	.....0	.....0	.....0	.....0	.....0
4799999.	Total.....					.....99,288	.....26,344	.....0	.....0	.....0	.....0	.....0

**Sch. S-Pt. 4**  
**NONE**

**Sch. S-Pt. 5**  
**NONE**

**Sch. S-Pt. 5**  
**NONE**

**SCHEDULE S - PART 6**

Five-Year Exhibit of Reinsurance Ceded Business  
(000 Omitted)

	1 2012	2 2011	3 2010	4 2009	5 2008
<b>A. OPERATIONS ITEMS</b>					
1. Premiums and annuity considerations for life and accident and health contracts.....	185	205	224	245	272
2. Commissions and reinsurance expense allowances.....	17	20	23	26	30
3. Contract claims.....	160	42	106	75	121
4. Surrender benefits and withdrawals for life contracts.....					
5. Dividends to policyholders.....					
6. Reserve adjustments on reinsurance ceded.....					
7. Increase in aggregate reserves for life and accident and health contracts.....					
<b>B. BALANCE SHEET ITEMS</b>					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected.....	1	1	2	2	2
9. Aggregate reserves for life and accident and health contracts.....	41	31	35	42	48
10. Liability for deposit-type contracts.....					
11. Contract claims unpaid.....	104	93	125	126	214
12. Amounts recoverable on reinsurance.....	3	11			
13. Experience rating refunds due or unpaid.....					
14. Policyholders' dividends (not included in Line 10).....					
15. Commissions and reinsurance expense allowances due.....					
16. Unauthorized reinsurance offset.....					
17. Offset for reinsurance with certified reinsurers.....		XXX	XXX	XXX	XXX
<b>C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
18. Funds deposited by and withheld from (F).....					
19. Letters of credit (L).....					
20. Trust agreements (T).....					
21. Other (O).....					
<b>D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
22. Multiple beneficiary trust.....		XXX	XXX	XXX	XXX
23. Funds deposited by and withheld from (F).....		XXX	XXX	XXX	XXX
24. Letters of credit (L).....		XXX	XXX	XXX	XXX
25. Trust agreements (T).....		XXX	XXX	XXX	XXX
26. Other (O).....		XXX	XXX	XXX	XXX

## SCHEDULE S - PART 7

## Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12).....	9,497,241		9,497,241
2. Reinsurance (Line 16).....	3,234	(3,234)	(0)
3. Premiums and considerations (Line 15).....	1,021	993	2,014
4. Net credit for ceded reinsurance.....	XXX	0	0
5. All other admitted assets (balance).....	115,194	147,781	262,975
6. Total assets excluding Separate Accounts (Line 26).....	9,616,689	145,540	9,762,229
7. Separate Account Assets (Line 27).....			0
8. Total assets (Line 28).....	9,616,689	145,540	9,762,229
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
9. Contract reserves (Lines 1 and 2).....	95,901	41,156	137,057
10. Liability for deposit-type contracts (Line 3).....			0
11. Claim reserves (Line 4).....	32,575	104,384	136,959
12. Policyholder dividends/reserves (Lines 5 through 7).....			0
13. Premium & annuity considerations received in advance (Line 8).....	1,178		1,178
14. Other contract liabilities (Line 9).....			0
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount).....			0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount).....			0
17. Reinsurance with certified reinsurers (Line 24.02 inset amount).....			0
18. Funds held under reinsurance treaties with certified reinsurers (Line 24.03 inset amount).....			0
19. All other liabilities (balance).....	3,272		3,272
20. Total liabilities excluding Separate Accounts (Line 26).....	132,926	145,540	278,466
21. Separate Account liabilities (Line 27).....			0
22. Total liabilities (Line 28).....	132,926	145,540	278,466
23. Capital & surplus (Line 38).....	9,483,763	XXX	9,483,763
24. Total liabilities, capital & surplus (Line 39).....	9,616,689	145,540	9,762,229
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
25. Contract reserves.....	41,156		
26. Claim reserves.....	104,384		
27. Policyholder dividends/reserves.....	0		
28. Premium & annuity considerations received in advance.....	0		
29. Liability for deposit-type contracts.....	0		
30. Other contract liabilities.....	0		
31. Reinsurance ceded assets.....	3,234		
32. Other ceded reinsurance recoverables.....	(147,781)		
33. Total ceded reinsurance recoverables.....	993		
34. Premiums and considerations.....	993		
35. Reinsurance in unauthorized companies.....	0		
36. Funds held under reinsurance treaties with unauthorized reinsurers.....	0		
37. Reinsurance with certified reinsurers.....	0		
38. Funds held under reinsurance treaties with certified reinsurers.....	0		
39. Other ceded reinsurance payables/offsets.....	0		
40. Total ceded reinsurance payables/offsets.....	993		
41. Total net credit for ceded reinsurance.....	0		

**SCHEDULE T - PART 2**

**INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN**

Allocated by States and Territories

States, Etc.	Direct Business Only					6 Totals
	1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	
1. Alabama.....AL						.0
2. Alaska.....AK						.0
3. Arizona.....AZ						.0
4. Arkansas.....AR						.0
5. California.....CA						.0
6. Colorado.....CO						.0
7. Connecticut.....CT						.0
8. Delaware.....DE						.0
9. District of Columbia.....DC						.0
10. Florida.....FL						.0
11. Georgia.....GA						.0
12. Hawaii.....HI						.0
13. Idaho.....ID						.0
14. Illinois.....IL						.0
15. Indiana.....IN						.0
16. Iowa.....IA						.0
17. Kansas.....KS						.0
18. Kentucky.....KY						.0
19. Louisiana.....LA						.0
20. Maine.....ME						.0
21. Maryland.....MD						.0
22. Massachusetts.....MA						.0
23. Michigan.....MI						.0
24. Minnesota.....MN						.0
25. Mississippi.....MS						.0
26. Missouri.....MO						.0
27. Montana.....MT						.0
28. Nebraska.....NE						.0
29. Nevada.....NV						.0
30. New Hampshire.....NH						.0
31. New Jersey.....NJ						.0
32. New Mexico.....NM						.0
33. New York.....NY						.0
34. North Carolina.....NC						.0
35. North Dakota.....ND						.0
36. Ohio.....OH	105,687					105,687
37. Oklahoma.....OK						.0
38. Oregon.....OR						.0
39. Pennsylvania.....PA						.0
40. Rhode Island.....RI						.0
41. South Carolina.....SC						.0
42. South Dakota.....SD						.0
43. Tennessee.....TN						.0
44. Texas.....TX						.0
45. Utah.....UT						.0
46. Vermont.....VT						.0
47. Virginia.....VA						.0
48. Washington.....WA						.0
49. West Virginia.....WV						.0
50. Wisconsin.....WI						.0
51. Wyoming.....WY						.0
52. American Samoa.....AS						.0
53. Guam.....GU						.0
54. Puerto Rico.....PR						.0
55. US Virgin Islands.....VI						.0
56. Northern Mariana Islands.....MP						.0
57. Canada.....CAN						.0
58. Aggregate Other Alien.....OT						.0
59. Totals.....	105,687	.0	.0	.0	.0	105,687

## SCHEDULE Y

### PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
<b>Members</b>														
1318.....	Auto Club Enterprises Insurance Group	15598.....	95-0865765				Interinsurance Exchange of the Automobile Club.....	CA.....	IA.....	Automobile Club of Southern California.....	Board of Directors		Automobile Club of Southern California.....	1.....
1318.....	Auto Club Enterprises Insurance Group	15512.....	43-6029277				Automobile Club Inter-Insurance Exchange.....	MO.....	IA.....	Interinsurance Exchange of the Automobile Club	Board of Directors		Automobile Club of Southern California.....	1.....
1318.....	Auto Club Enterprises Insurance Group	27235.....	43-1453212				Auto Club Family Insurance Company.....	MO.....	IA.....	Automobile Club Inter-Insurance Exchange.....	Ownership.....	100.000	Automobile Club of Southern California.....	
1318.....	Auto Club Enterprises Insurance Group	11009.....	76-0603355				Auto Club Casualty Company.....	TX.....	IA.....	Interinsurance Exchange of the Automobile Club	Ownership.....	100.000	Automobile Club of Southern California.....	
1318.....	Auto Club Enterprises Insurance Group	11008.....	76-0603356				Auto Club Indemnity Company.....	TX.....	IA.....	Interinsurance Exchange of the Automobile Club	Ownership.....	100.000	Automobile Club of Southern California.....	
1318.....	Auto Club Enterprises Insurance Group	29327.....	74-1107185				AAA Texas County Mutual Insurance Company.....	TX.....	IA.....	Interinsurance Exchange of the Automobile Club	Management.....		Automobile Club of Southern California.....	
1318.....	Auto Club Enterprises Insurance Group	12813.....	20-5529611				Auto Club Insurance Company of Florida.....	FL.....	IA.....	Auto Club Insurance Holdings, LLC.....	Ownership.....	100.000	See Note Below.....	2.....
1318.....	Auto Club Enterprises Insurance Group	71854.....	52-0891929				AAA Life Insurance Company.....	MI.....	IA.....	ACLI Acquisition Company.....	Ownership.....	100.000	Automobile Club of Southern California.....	
1318.....	Auto Club Enterprises Insurance Group	13738.....	27-1269555				Life Alliance Reassurance Corporation.....	HI.....	IA.....	AAA Life Insurance Company.....	Ownership.....	100.000	Automobile Club of Southern California.....	
1318.....	Auto Club Enterprises Insurance Group	66005.....	34-1666970				Ohio Motorists Life Insurance Company.....	OH.....		Ohio Motorists Holding Company.....	Ownership.....	100.000	Automobile Club of Southern California.....	
1318.....	Auto Club Enterprises Insurance Group	60256.....	33-0815346				Automobile Club of Southern California Life Insurance Co.	CA.....	UDP.....	Interinsurance Exchange of the Automobile Club	Ownership.....	50.000	Automobile Club of Southern California.....	
1318.....	Auto Club Enterprises Insurance Group	60256.....	33-0815346				Automobile Club of Southern California Life Insurance Co.	CA.....	UDP.....	Automobile Club of Southern California.....	Ownership.....	50.000		
			95-2553663				ACSC Management Services, Inc. (Attorney-in-Fact)	CA.....	NIA.....	Automobile Club of Southern California.....	Ownership.....	100.000	Automobile Club of Southern California.....	
			95-0514585				Automobile Club of Southern California.....	CA.....	NIA.....	N/A.....			N/A.....	
			38-3416375				ACLI Acquisition Company.....	DE.....	NIA.....	Interinsurance Exchange of the Automobile Club	Ownership.....	13.150	See Note Below.....	3.....
			38-3416375				ACLI Acquisition Company.....	DE.....	NIA.....	Automobile Club of Southern California.....	Ownership.....	13.150	See Note Below.....	3.....
			20-4706536				Auto Club Insurance Holdings, LLC.....	DE.....	NIA.....	Interinsurance Exchange of the Automobile Club	Ownership.....	50.000	See Note Below.....	2.....
			43-0783626				Club Exchange Corporation (Attorney-in-Fact).....	MO.....	NIA.....	Automobile Club of Missouri.....	Ownership.....	100.000	Automobile Club of Southern California.....	
			33-0835940				Pleasant Travel Holding Company, LLC.....	DE.....	NIA.....	Automobile Club of Southern California.....	Ownership.....	94.000	Automobile Club of Southern California.....	
			33-0835940				Pleasant Travel Holding Company, LLC.....	DE.....	NIA.....	AAA Northern New England.....	Ownership.....	2.000	Automobile Club of Southern California.....	
			77-0495728				Pleasant Holidays, LLC.....	DE.....	NIA.....	Pleasant Travel Holding Company, LLC.....	Ownership.....	100.000	Automobile Club of Southern California.....	
			94-2446918				Hawaii World LLC.....	CA.....	NIA.....	Pleasant Holidays, LLC.....	Ownership.....	100.000	Automobile Club of Southern California.....	
			71-0919095				Auto Club Enterprises.....	CA.....	NIA.....	Automobile Club of Southern California.....	Other.....	100.000	Automobile Club of Southern California.....	4.....
			43-0166020				Automobile Club of Missouri.....	MO.....	NIA.....	Auto Club Enterprises.....	Other.....		Automobile Club of Southern California.....	4.....

### SCHEDULE Y

#### PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	Federal ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	*
53.1			25-1114373				AAA East Central.....	PA.....	NIA.....	Auto Club Enterprises.....	Other.....		Automobile Club of Southern California.....	4.....
			63-0003500				Alabama Motorists Association, Inc.....	AL.....	NIA.....	Auto Club Enterprises.....	Other.....		Automobile Club of Southern California.....	4.....
			01-0112750				AAA Northern New England.....	ME.....	NIA.....	Auto Club Enterprises.....	Other.....		Automobile Club of Southern California.....	4.....
			54-0465700				Tidewater Automobile Association of Virginia, Incorporated.....	VA.....	NIA.....	Auto Club Enterprises.....	Other.....		Automobile Club of Southern California.....	4.....
			34-1659669				Ohio Motorists Holding Company.....	OH.....	NIA.....	AAA East Central.....	Ownership.....	100.000	Automobile Club of Southern California.....	
			33-0945342				AAA Club Services, LLC.....	CA.....	NIA.....	Automobile Club of Southern California.....	Ownership.....	100.000	Automobile Club of Southern California.....	
			76-0664740				AAA Texas, LLC.....	TX.....	NIA.....	AAA Club Services, LLC.....	Ownership.....	100.000	Automobile Club of Southern California.....	
			74-2982988				AAA New Mexico, LLC.....	NM.....	NIA.....	AAA Club Services, LLC.....	Ownership.....	100.000	Automobile Club of Southern California.....	
			33-0939557				AAA Hawaii, LLC.....	HI.....	NIA.....	AAA Club Services, LLC.....	Ownership.....	100.000	Automobile Club of Southern California.....	
			43-0822493				Club Insurance Agency, Inc.....	MO.....	NIA.....	Automobile Club of Missouri.....	Ownership.....	100.000	Automobile Club of Southern California.....	
			52-0958851				AAA Insurance Agency, Inc.....	AK.....	NIA.....	Automobile Club of Missouri.....	Ownership.....	100.000	Automobile Club of Southern California.....	
			54-2106828				AAA Driving School, Inc.....	ME.....	NIA.....	AAA Northern New England.....	Ownership.....	100.000	Automobile Club of Southern California.....	
			01-0518954				AAA Car Care Center.....	ME.....	NIA.....	AAA Northern New England.....	Ownership.....	100.000	Automobile Club of Southern California.....	
			01-0411376				Triple A Leasing.....	ME.....	NIA.....	AAA Northern New England.....	Ownership.....	100.000	Automobile Club of Southern California.....	
			01-0022895				AAA Northern New England Insurance.....	ME.....	NIA.....	AAA Northern New England.....	Ownership.....	100.000	Automobile Club of Southern California.....	
			00-0000000				Hewins Travel LLC.....	ME.....	NIA.....	AAA Northern New England.....	Ownership.....	100.000	Automobile Club of Southern California.....	
			54-2040600				AAA Tidewater Virginia Car Care Center, LLC.....	VA.....	NIA.....	Tidewater Automobile Association of Virginia, Incorporated.....	OWNERSHIP.....	100.000	Automobile Club of Southern California.....	
			27-2311305				AAA Tidewater Virginia Fleet Operations, LLC.....	VA.....	NIA.....	Tidewater Automobile Association of Virginia, Incorporated.....	OWNERSHIP.....	100.000	Automobile Club of Southern California.....	
			00-0000000				TAA Chesapeake Branch Office Property, LLC.....	VA.....	NIA.....	Tidewater Automobile Association of Virginia, Incorporated.....	OWNERSHIP.....	100.000	Automobile Club of Southern California.....	
			00-0000000				TAA Corporate Center Office Property, LLC.....	VA.....	NIA.....	Tidewater Automobile Association of Virginia, Incorporated.....	OWNERSHIP.....	100.000	Automobile Club of Southern California.....	
			00-0000000				TAA Greenbrier Car Care Center Property, LLC.....	VA.....	NIA.....	Tidewater Automobile Association of Virginia, Incorporated.....	OWNERSHIP.....	100.000	Automobile Club of Southern California.....	
			00-0000000				TAA Hampton Branch/Car Care Center Property, LLC	VA.....	NIA.....	Tidewater Automobile Association of Virginia, Incorporated.....	OWNERSHIP.....	100.000	Automobile Club of Southern California.....	
			00-0000000				TAA Newport News Branch Property, LLC.....	VA.....	NIA.....	Tidewater Automobile Association of Virginia, Incorporated.....	OWNERSHIP.....	100.000	Automobile Club of Southern California.....	
			00-0000000				TAA Norfolk Car Care Center Property, LLC.....	VA.....	NIA.....	Tidewater Automobile Association of Virginia, Incorporated.....	OWNERSHIP.....	100.000	Automobile Club of Southern California.....	
			00-0000000				TAA Suffolk Branch Car Care Center Property, LLC	VA.....	NIA.....	Tidewater Automobile Association of Virginia, Incorporated.....	OWNERSHIP.....	100.000	Automobile Club of Southern California.....	
			00-0000000				TAA Virginia Beach Branch Property, LLC.....	VA.....	NIA.....	Tidewater Automobile Association of Virginia, Incorporated.....	OWNERSHIP.....	100.000	Automobile Club of Southern California.....	
			00-0000000				TAA Williamsburg Branch Property, LLC.....	VA.....	NIA.....	Tidewater Automobile Association of Virginia, Incorporated.....	OWNERSHIP.....	100.000	Automobile Club of Southern California.....	

## SCHEDULE Y

### PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 Federal ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries or Affiliates	9 Domiciliary Location	10 Relationship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership Board, Management Attorney-in-Fact, Influence, Other)	13 If Control is Ownership Provide Percentage	14 Ultimate Controlling Entity(ies)/Person(s)	15 *
			00-0000000				TAA Williamsburg Branch/Car Care Center Property, LLC	VA.....	NIA.....	Tidewater Automobile Association of Virginia, Incorporated.	OWNERSHIP.....	...100.000	Automobile Club of Southern California.....	
			61-1345548				AAA Kentucky Driver Training Center, Inc.....	KY.....	NIA.....	AAA East Central.....	Other.....		Automobile Club of Southern California.....	4.....
			23-1551796				AAA East Penn Insurance Agency, Inc.....	PA.....	NIA.....	AAA East Central.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			34-0074310				The Ashland County Automobile Club.....	OH.....	NIA.....	AAA East Central.....	Other.....		Automobile Club of Southern California.....	4.....
			25-0951930				West Penn AAA Insurance Agency, Inc.....	PA.....	NIA.....	AAA East Central.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			25-1846506				Auto Club Driving Schools, Inc.....	PA.....	NIA.....	AAA East Central.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			34-0891240				Ohio Motorists Insurance Agency, Inc.....	OH.....	NIA.....	AAA East Central.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			61-0721801				AAA Kentucky Insurance Agency, Inc.....	KY.....	NIA.....	AAA East Central.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			34-0383238				The Massillon Automobile Club.....	OH.....	NIA.....	AAA East Central.....	Other.....		Automobile Club of Southern California.....	4.....
			34-1103635				AAA Massillon Driving School, Inc.....	OH.....	NIA.....	The Massillon Automobile Club.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			34-1039384				Automobile Club Insurance Agency of Massillon Ohio, Inc.	OH.....	NIA.....	The Massillon Automobile Club.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			01-1855420				Automobile Club of California.....	CA.....	NIA.....	Automobile Club of Southern California.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
							Automobile Club of Texas, Inc.....	TX.....	NIA.....	AAA Club Services, LLC.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
							Automobile Club of Hawaii, Inc.....	HI.....	NIA.....	AAA Club Services, LLC.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
							Automobile Club of New Mexico, Inc.....	NM.....	NIA.....	AAA Club Services, LLC.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			85-0267099				All-City Towing, Inc.....	NM.....	NIA.....	AAA New Mexico, LLC.....	Ownership.....	...100.000	Automobile Club of Southern California.....	

53.2

Asterisk	Explanation
1	ACSC Management Services, Inc. serves as the attorney-in-fact for the Interinsurance Exchange of the Automobile Club. Club Exchange Corporation serves as the attorney-in-fact for the Automobile Club Inter-Insurance Exchange.
2	The Automobile Club of Southern California and its affiliates control 50% of the voting interests in Auto Club Insurance Holdings, LLC, which owns 100% of the common stock of Auto Club Insurance Company of Florida. The remainder is controlled by a non-affiliated entity.
3	The Interinsurance Exchange of the Automobile Club and the Automobile Club of Southern California each own 13.15% of ACLI Acquisition Company. The remainder is owned by several non-affiliated entities.
4	Possession of voting interests in nonprofit corporation.

**SCHEDULE Y**

**PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES**

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
<b>Affiliated Transactions</b>												
00000	95-2553663	ACSC Management Services, Incorporated, (Attorney-in-Fact)					457,750,418				457,750,418	
15598	95-0865765	Interinsurance Exchange of the Automobile Club					(457,750,418)		*		(457,750,418)	
11009	76-0603355	Auto Club Casualty Company									0	7,954
15598	95-0865765	Interinsurance Exchange of the Automobile Club							*		0	(7,954)
11008	76-0603356	Auto Club Indemnity Company									0	39,288,052
15598	95-0865765	Interinsurance Exchange of the Automobile Club							*		0	(39,288,052)
29327	74-1107185	AAA Texas County Mutual Insurance Company									0	95,902,551
15598	95-0865765	Interinsurance Exchange of the Automobile Club							*		0	(95,902,551)
00000	74-2982988	AAA New Mexico, LLC					3,442,449				3,442,449	
15598	95-0865765	Interinsurance Exchange of the Automobile Club					(3,442,449)		*		(3,442,449)	
00000	33-0939557	AAA Hawaii, LLC					1,611,574				1,611,574	
15598	95-0865765	Interinsurance Exchange of the Automobile Club					(1,611,574)		*		(1,611,574)	
71854	52-0891929	AAA Life Insurance Company					43,134,957	(41,586,047)			1,548,910	593,937,911
60256	33-0815346	Automobile Club of Southern California Life Insurance Compa					(43,134,957)	41,586,047			(1,548,910)	(593,937,911)
15598	95-0865765	Interinsurance Exchange of the Automobile Club		(4,500,000)					*		(4,500,000)	
60256	33-0815346	Automobile Club of Southern California Life Insurance Compa		4,500,000							4,500,000	
00000	95-0514585	Automobile Club of Southern California		(4,500,000)							(4,500,000)	
60256	33-0815346	Automobile Club of Southern California Life Insurance Compa		4,500,000							4,500,000	
71854	52-0891929	AAA Life Insurance Company					(2,550,713)				(2,550,713)	
00000	76-0664740	AAA Texas, LLC					2,550,713				2,550,713	
71854	52-0891929	AAA Life Insurance Company					(251,314)				(251,314)	
00000	74-2982988	AAA New Mexico, LLC					251,314				251,314	
71854	52-0891929	AAA Life Insurance Company					(185,546)				(185,546)	
00000	33-0939557	AAA Hawaii, LLC					185,546				185,546	
71854	52-0891929	AAA Life Insurance Company					(593,544)				(593,544)	
00000	01-0112750	AAA Northern New England					593,544				593,544	
00000	95-0514585	Automobile Club of Southern California					16,518,245				16,518,245	
71854	52-0891929	AAA Life Insurance Company					(16,518,245)				(16,518,245)	
12813	20-5529611	Auto Club Insurance Company of Florida		23,000,000							23,000,000	
00000	20-4706536	Auto Club Insurance Holdings, LLC		(23,000,000)							(23,000,000)	
15598	95-0865765	Interinsurance Exchange of the Automobile Club		(11,500,000)					*		(11,500,000)	
00000	20-4706536	Auto Club Insurance Holdings, LLC		11,500,000							11,500,000	
00000	43-0166020	Automobile Club of Missouri					1,041,152				1,041,152	
15512	43-6029277	Automobile Club Inter-Insurance Exchange					(1,041,152)		*		(1,041,152)	
00000	43-0166020	Automobile Club of Missouri					458,848				458,848	
27235	43-1453212	Auto Club Family Insurance Company					(458,848)		*		(458,848)	
15598	95-0865765	Interinsurance Exchange of the Automobile Club					5,468,763		*		5,468,763	
27235	43-1453212	Auto Club Family Insurance Company					(5,468,763)		*		(5,468,763)	
15598	95-0865765	Interinsurance Exchange of the Automobile Club					5,468,763		*		5,468,763	
15512	43-6029277	Automobile Club Inter-Insurance Exchange					(5,468,763)		*		(5,468,763)	
00000	25-0951930	West Penn AAA Insurance Agency, Incorporated					954,126				954,126	

**SCHEDULE Y**

**PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES**

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
15598.....	95-0865765.....	Interinsurance Exchange of the Automobile Club.....					(954,126)		*		(954,126)	
00000.....	23-1551796.....	AAA East Penn Insurance Agency, Incorporated.....					501,749				501,749	
15598.....	95-0865765.....	Interinsurance Exchange of the Automobile Club.....					(501,749)		*		(501,749)	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(436,427)				(436,427)	
00000.....	63-0003500.....	Alabama Motorists Association, Incorporated.....					436,427				436,427	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(1,073,366)				(1,073,366)	
00000.....	25-1114373.....	AAA East Central.....					1,073,366				1,073,366	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(1,400,607)				(1,400,607)	
00000.....	43-0166020.....	Automobile Club of Missouri.....					1,400,607				1,400,607	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(150,044)				(150,044)	
00000.....	61-0721801.....	AAA Kentucky Insurance Agency, Incorporated.....					150,044				150,044	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(11,905)				(11,905)	
00000.....	34-0383238.....	The Massillon Automobile Club (dba Massillon Auto Club, Inc.....					11,905				11,905	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(164,448)				(164,448)	
00000.....	34-0891240.....	Ohio Motorists Insurance Agency, Incorporated.....					164,448				164,448	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(178,107)				(178,107)	
00000.....	23-1551796.....	AAA East Penn Insurance Agency, Incorporated.....					178,107				178,107	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(182,185)				(182,185)	
00000.....	54-0465700.....	Tidewater Automobile Association of Virginia Incorporated.....					182,185				182,185	
9999999	Control Totals.....		0	0	0	0	0	0	XXX	0	0	0

54.1

**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

**MARCH FILING**

	<b>Responses</b>
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2. Will the confidential Risk-Based Capital Report be filed with the NAIC by March 1?	YES
3. Will the confidential Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4. Will an actuarial opinion be filed with this statement by March 1?	YES

**APRIL FILING**

5. Will Management's Discussion and Analysis be filed by April 1?	YES
6. Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
7. Will the Adjustment Form (if required) be filed with state of domicile and the NAIC by April 1?	YES
8. Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES

**JUNE FILING**

9. Will an audited financial report be filed by June 1?	YES
10. Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES

**AUGUST FILING**

11. Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	YES
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The following supplemental reports are required to be filed as part of your statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason, enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

**MARCH FILING**

12. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	YES
13. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
15. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	NO
16. Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	NO
17. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	NO
18. Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	NO
19. Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	NO
20. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
21. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
24. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
25. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	NO
26. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	NO
27. Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	NO
28. Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?	NO
29. Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
30. Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
31. Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
32. Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
33. Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?	NO
34. Will the Workers' Compensation Carve-Out Supplement be filed by March 1?	NO
35. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?	YES
36. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	NO
37. Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partners be filed electronically with the NAIC by March 1?	NO
38. Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	NO
39. Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	NO

**APRIL FILING**

40. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
41. Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?	NO
42. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
43. Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
44. Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1?	NO
45. Will the Analysis of Increase in Annuity Reserves During the Year be filed with the state of domicile and the NAIC by April 1?	NO
46. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1?	NO
47. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1?	NO

**AUGUST FILING**

48. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES
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# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

**EXPLANATIONS:**

**BAR CODE:**

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	 * 6 6 0 0 5 2 0 1 2 4 5 0 0 0 0 0 0 *
	 * 6 6 0 0 5 2 0 1 2 4 5 1 0 0 0 0 0 *

# SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

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**SCHEDULE O SUPPLEMENT**

For the year ended December 31, 2012  
 (To Be Filed March)

Of The.....OHIO MOTORISTS LIFE INSURANCE COMPANY

Address (City, State, Zip Code).....INDEPENDENCE, OH 44131

NAIC Group Code.....0000

NAIC Company Code.....66005

Employer's ID Number.....34-1666970

**SUPPLEMENTAL SCHEDULE O - PART 1**

Development of Incurred Losses  
 (\$000 OMITTED)

**Section A - Group Accident and Health**

Year in Which Losses Were Incurred	Net Amounts Paid Policyholders				
	1 2008	2 2009	3 2010	4 2011	5 2012 (a)
1. Prior.....	5				
2. 2008.....	3	4	1		
3. 2009.....	XXX	2	3		
4. 2010.....	XXX	XXX	3		
5. 2011.....	XXX	XXX	XXX	4	2
6. 2012.....	XXX	XXX	XXX	XXX	1

**Section B - Other Accident and Health**

1. Prior.....					
2. 2008.....					
3. 2009.....	XXX	<b>NONE</b>			
4. 2010.....	XXX	XXX			
5. 2011.....	XXX	XXX	XXX		
6. 2012.....	XXX	XXX	XXX	XXX	

**Section C - Credit Accident and Health**

1. Prior.....					
2. 2008.....					
3. 2009.....	XXX	<b>NONE</b>			
4. 2010.....	XXX	XXX			
5. 2011.....	XXX	XXX	XXX		
6. 2012.....	XXX	XXX	XXX	XXX	

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

**SCHEDULE O SUPPLEMENT  
SUPPLEMENTAL SCHEDULE O - PART 2**

Development of Incurred Losses  
(\$000 OMITTED)

**Section A - Group Accident and Health**

Year in Which Losses Were Incurred	Net Amounts Paid for Cost Containment Expenses				
	1 2008	2 2009	3 2010	4 2011	5 2012
1. Prior.....					
2. 2008.....					
3. 2009.....	XXX				
4. 2010.....	XXX	XXX			
5. 2011.....	XXX	XXX	XXX		
6. 2012.....	XXX	XXX	XXX	XXX	

**Section B - Other Accident and Health**

1. Prior.....					
2. 2008.....					
3. 2009.....	XXX				
4. 2010.....	XXX	XXX			
5. 2011.....	XXX	XXX	XXX		
6. 2012.....	XXX	XXX	XXX	XXX	

**Section C - Credit Accident and Health**

1. Prior.....					
2. 2008.....					
3. 2009.....	XXX				
4. 2010.....	XXX	XXX			
5. 2011.....	XXX	XXX	XXX		
6. 2012.....	XXX	XXX	XXX	XXX	

**SCHEDULE O SUPPLEMENT  
SUPPLEMENTAL SCHEDULE O - PART 3**

Development of Incurred Losses  
(\$000 OMITTED)

**Section A - Group Accident and Health**

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
	1 2008	2 2009	3 2010	4 2011	5 2012
1. 2008.....	10	11	8	XXX	XXX
2. 2009.....	XXX	5	6	5	XXX
3. 2010.....	XXX	XXX	9	5	
4. 2011.....	XXX	XXX	XXX	8	3
5. 2012.....	XXX	XXX	XXX	XXX	6

**Section B - Other Accident and Health**

1. 2008.....		<b>NONE</b>		XXX	XXX
2. 2009.....	XXX				XXX
3. 2010.....	XXX		XXX		
4. 2011.....	XXX		XXX	XXX	
5. 2012.....	XXX		XXX	XXX	XXX

**Section C - Credit Accident and Health**

1. 2008.....		<b>NONE</b>		XXX	XXX
2. 2009.....	XXX				XXX
3. 2010.....	XXX		XXX		
4. 2011.....	XXX		XXX	XXX	
5. 2012.....	XXX		XXX	XXX	XXX

**SCHEDULE O SUPPLEMENT  
SUPPLEMENTAL SCHEDULE O - PART 4**

Development of Incurred Losses  
(\$000 OMITTED)

**Section A - Group Accident and Health**

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1 2008	2 2009	3 2010	4 2011	5 2012
1. 2008.....	10	11	8		
2. 2009.....	XXX	5	6	5	
3. 2010.....	XXX	XXX	9	5	
4. 2011.....	XXX	XXX	XXX	8	3
5. 2012.....	XXX	XXX	XXX	XXX	6

**Section B - Other Accident and Health**

1. 2008.....		<b>NONE</b>			
2. 2009.....	XXX				
3. 2010.....	XXX		XXX		
4. 2011.....	XXX		XXX	XXX	
5. 2012.....	XXX		XXX	XXX	XXX

**Section C - Credit Accident and Health**

1. 2008.....		<b>NONE</b>			
2. 2009.....	XXX				
3. 2010.....	XXX		XXX		
4. 2011.....	XXX		XXX	XXX	
5. 2012.....	XXX		XXX	XXX	XXX

**SUPPLEMENTAL SCHEDULE O - PART 5**

(\$000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business	1 Methodology	2 Amount
1. Industrial life.....		
2. Ordinary life.....		
3. Individual annuity.....		
4. Supplementary contracts.....		
5. Credit life.....		
6. Group life.....	Development.....	27
7. Group annuities.....		
8. Group accident and health.....	Development.....	6
9. Credit accident and health.....		
10. Other accident and health.....		
11. Total.....		33

**Sch. O-Pt. 1-Sn. D  
NONE**

**Sch. O-Pt. 1-Sn. E  
NONE**

**Sch. O-Pt. 1-Sn. F  
NONE**

**Sch. O-Pt. 1-Sn. G  
NONE**

**Sch. O-Pt. 2-Sn. D  
NONE**

**Sch. O-Pt. 2-Sn. E  
NONE**

**Sch. O-Pt. 2-Sn. F  
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**Sch. O-Pt. 2-Sn. G  
NONE**

**Sch. O-Pt. 3-Sn. D  
NONE**

**Sch. O-Pt. 3-Sn. E  
NONE**

**Sch. O-Pt. 3-Sn. F  
NONE**

**Sch. O-Pt. 3-Sn. G  
NONE**

**Sch. O-Pt. 4-Sn. D  
NONE**

**Sch. O-Pt. 4-Sn. E  
NONE**

**Sch. O-Pt. 4-Sn. F  
NONE**

**Sch. O-Pt. 4-Sn. G  
NONE**

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