LIFE AND ACCIDENT AND HEALTH COMPANIES - ASSOCIATION EDITION

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ANNUAL STATEMENT

For the Year Ended December 31, 2014

of the Condition and Affairs of the

OHIO MOTORISTS LIFE INSURANCE COMPANY

NAIC Group Code..... 0, 0 (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
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office 5700 BRECKSVILLE ROAD….. INDEPENDENCE ..... OH ..... US..... 44131 216-606-6045
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Mail Address P.O. BOX 6150….. CLEVELAND ..... OH ..... US 44101
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

Primary Location of Books and Records 5700 BRECKSVILLE ROAD….. INDEPENDENCE ..... OH ..... US 44131 216-606-6045
(Street and Number) (City or Town, State, Country and Zip Code) (Area Code) (Telephone Number)

Internet Web Site Address N/A

Statutory Statement Contact ROBIN A. MERVINE 216-606-6045
(Name) (Area Code) (Telephone Number) (Extension)
RMERVINE@AAAEC.COM 216-606-6018
(E-Mail Address) (Fax Number)

OFFICERS

Name	Title	Name	Title
James E. Lehman	President	Raymond M. Komichak	Secretary

OTHER

DIRECTORS OR TRUSTEES

Mary Lynn Laughlin
Gary S. Cowling
Peter E. Shimrak
James E. Lehman

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)	(Signature)	(Signature)
James E. Lehman	Raymond M. Komichak	
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
President	Secretary	
(Title)	(Title)	(Title)

Subscribed and sworn to before me
This _____ day of _____ 2015

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.....0 NAIC Company Code.....66005

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance			93,431		93,431
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	93,431	0	93,431
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
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
	Annuities:					
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
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits			200,000		200,000
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	200,000	0	200,000
	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
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year					3	100,000			3	100,000
17.	Incurred during current year					4	200,000			4	200,000
	Settled during current year:										
18.1	By payment in full					4	200,000			4	200,000
18.2	By payment on compromised claims									0	0
18.3	Totals paid	0	0	0	0	4	200,000	0	0	4	200,000
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	0	0	0	0	4	200,000	0	0	4	200,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	3	100,000	0	0	3	100,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year				(a)	5	14,881,000			5	14,881,000
21.	Issued during year									0	0
22.	Other changes to in force (Net)						(824,000)			0	(824,000)
23.	In force December 31 of current year	0	0	0	(a) 0	5	14,057,000	0	0	5	14,057,000

(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)	88,759	93,431			(2,840)
24.1	Federal Employee Health Benefits Plan 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					
	Other Individual Policies:					
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)	88,759	93,431	0	0	(2,840)

(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.

DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR

NAIC Group Code.....0 NAIC Company Code.....66005

LIFE INSURANCE

		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
	DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1.	Life insurance			93,431		93,431
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	93,431	0	93,431
	DIRECT DIVIDENDS TO POLICYHOLDERS					
	Life insurance:					
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
	Annuities:					
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
	DIRECT CLAIMS AND BENEFITS PAID					
9.	Death benefits			200,000		200,000
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	200,000	0	200,000
	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
	DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16.	Unpaid December 31, prior year					3	100,000			3	100,000
17.	Incurred during current year					4	200,000			4	200,000
	Settled during current year:										
18.1	By payment in full					4	200,000			4	200,000
18.2	By payment on compromised claims									0	0
18.3	Totals paid	0	0	0	0	4	200,000	0	0	4	200,000
18.4	Reduction by compromise									0	0
18.5	Amount rejected									0	0
18.6	Total settlements	0	0	0	0	4	200,000	0	0	4	200,000
19.	Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6)	0	0	0	0	3	100,000	0	0	3	100,000
	POLICY EXHIBIT					No. of Pol.					
20.	In force December 31, prior year				(a)	5	14,881,000			5	14,881,000
21.	Issued during year									0	0
22.	Other changes to in force (Net)						(824,000)			0	(824,000)
23.	In force December 31 of current year	0	0	0	(a) 0	5	14,057,000	0	0	5	14,057,000

(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)	88,759	93,431			(2,840)
24.1	Federal Employee Health Benefits Plan 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					
	Other Individual Policies:					
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)	88,759	93,431	0	0	(2,840)

(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 into the reserve net of taxes of $.....0	0
3. Adjustment for current year's liability gains/(losses) released from the reserve	0
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)	0
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. 2014				0
2. 2015				0
3. 2016				0
4. 2017				0
5. 2018				0
6. 2019				0
7. 2020				0
8. 2021				0
9. 2022				0
10. 2023				0
11. 2024				0
12. 2025				0
13. 2026				0
14. 2027				0
15. 2028				0
16. 2029				0
17. 2030				0
18. 2031				0
19. 2032				0
20. 2033				0
21. 2034				0
22. 2035				0
23. 2036				0
24. 2037				0
25. 2038				0
26. 2039				0
27. 2040				0
28. 2041				0
29. 2042				0
30. 2043				0
31. 2044 and Later				0
32. Total (Lines 1 to 31)	0	0	0	0

NONE

ASSET VALUATION RESERVE

	Default Component			Equity Component			7
	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)	Total Amount (Cols. 3 + 6)
1. Reserve as of December 31, prior year	9,267		9,267			0	9,267
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	4,004		4,004			0	4,004
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7)	13,271	0	13,271	0	0	0	13,271
9. Maximum reserve	30,031		30,031			0	30,031
10. Reserve objective	23,024		23,024			0	23,024
11. 20% of (Line 10 minus Line 8)	1,951	0	1,951	0	0	0	1,951
12. Balance before transfers (Lines 8 + 11)	15,222	0	15,222	0	0	0	15,222
13. Transfers			0			0	0
14. Voluntary contribution			0			0	0
15. Adjustment down to maximum/up to zero			0			0	0
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	15,222	0	15,222	0	0	0	15,222

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Desig-nation	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 5 Factor	Basic Contribution 6 Amount (Cols. 4 x 5)	Reserve Objective 7 Factor	Reserve Objective 8 Amount (Cols. 4 x 7)	Maximum Reserve 9 Factor	Maximum Reserve 10 Amount (Cols. 4 x 9)
		LONG-TERM BONDS										
1		Exempt obligations		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
2	1	Highest quality	9,863,928	XXX	XXX	9,863,928	0.0004	3,946	0.0023	22,687	0.0030	29,592
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	
9		Total bonds (sum of Lines 1 through 8)	9,863,928	XXX	XXX	9,863,928	XXX	3,946	XXX	22,687	XXX	29,592
		PREFERRED STOCKS										
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
		SHORT-TERM BONDS										
18		Exempt obligations		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19	1	Highest quality	146,396	XXX	XXX	146,396	0.0004	59	0.0023	337	0.0030	439
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)	146,396	XXX	XXX	146,396	XXX	59	XXX	337	XXX	439
		DERIVATIVE INSTRUMENTS										
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)	10,010,323	XXX	XXX	10,010,323	XXX	4,004	XXX	23,024	XXX	30,031

AVR-Default Component (Lines 35-60)
NONE

AVR-Equity Component (Lines 1-29)
NONE

AVR-Equity Component (Lines 30-64)
NONE

AVR-Equity Component (Lines 65-86)
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 %
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS																		
1. Premiums written	18,752	XXX	18,752	XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX
2. Premiums earned	19,633	XXX	19,633	XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX
3. Incurred claims	315	1.6	315	1.6	0	0.0	0	0.0	0	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)	315	1.6	315	1.6	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	0.0	0	0.0	0	0.0
7 Commissions (a)	4,649	23.7	4,649	23.7		0.0		0.0		0.0		0.0		0.0		0.0		0.0
8 Other general insurance expenses	3,147	16.0	3,147	16.0		0.0		0.0		0.0		0.0		0.0		0.0		0.0
9 Taxes, licenses and fees	1,160	5.9	1,160	5.9		0.0		0.0		0.0		0.0		0.0		0.0		0.0
10 Total other expenses incurred	8,956	45.6	8,956	45.6	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	10,362	52.8	10,362	52.8	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	10,362	52.8	10,362	52.8	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
DETAILS OF WRITE-INS																		
1101.	0	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		0.0
1103.	0	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

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

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (continued)

	1	2	3	4	Other Individual Contracts				
					5	6	7	8	9
	Total	Group Accident and Health	Credit Accident and Health (Group and Individual)	Collectively Renewable	Non-Cancelable	Guaranteed Renewable	Non-Renewable for Stated Reasons Only	Other Accident Only	All Other
PART 2 - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums	5,194	5,194							
2. Advance premiums	495	495							
3. Reserve for rate credits	0								
4. Total premium reserves, current year	5,689	5,689	0	0	0	0	0	0	0
5. Total premium reserves, prior year	6,570	6,570							
6. Increase in total premium reserves	(881)	(881)	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	3,105	3,105	0	0	0	0	0	0	0
2. Total prior year	4,202	4,202							
3. Increase	(1,097)	(1,097)	0	0	0	0	0	0	0

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	659	659							
1.2 On claims incurred during current year	753	753							
2. Claim Reserves and Liabilities, December 31, Current Year:									
2.1 On claims incurred prior to current year	559	559							
2.2 On claims incurred during current year	2,546	2,546							
3. Test:									
3.1 Lines 1.1 and 2.1	1,218	1,218	0	0	0	0	0	0	0
3.2 Claim reserves and liabilities, December 31, prior year	4,202	4,202							
3.3 Line 3.1 minus Line 3.2	(2,984)	(2,984)	0	0	0	0	0	0	0

PART 4 - REINSURANCE

A. Reinsurance Assumed:									
1. Premiums written	5,395	5,395							
2. Premiums earned	5,619	5,619							
3. Incurred claims	741	741							
4. Commissions	2,319	2,319							
B. Reinsurance Ceded:									
1. Premiums written	75,693	75,693							
2. Premiums earned	79,417	79,417							
3. Incurred claims	(2,414)	(2,414)							
4. Commissions	13,203	13,203							

(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			(2,840)	(2,840)
2.	Beginning claim reserves and liabilities			17,305	17,305
3.	Ending claim reserves and liabilities			14,465	14,465
4.	Claims paid	0	0	0	0
B.	Assumed Reinsurance:				
5.	Incurred claims			741	741
6.	Beginning claim reserves and liabilities			1,606	1,606
7.	Ending claim reserves and liabilities			935	935
8.	Claims paid	0	0	1,412	1,412
C.	Ceded Reinsurance:				
9.	Incurred claims			(2,414)	(2,414)
10.	Beginning claim reserves and liabilities			14,709	14,709
11.	Ending claim reserves and liabilities			12,295	12,295
12.	Claims paid	0	0	0	0
D.	Net:				
13.	Incurred claims	0	0	315	315
14.	Beginning claim reserves and liabilities	0	0	4,202	4,202
15.	Ending claim reserves and liabilities	0	0	3,105	3,105
16.	Claims paid	0	0	1,412	1,412
E.	Net Incurred Claims and Cost Containment Expenses:				
17.	Incurred claims and cost containment expenses			315	315
18.	Beginning reserves and liabilities			4,202	4,202
19.	Ending reserves and liabilities			3,105	3,105
20.	Paid claims and cost containment expenses	0	0	1,412	1,412

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 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
General Account - Non-Affiliates - U.S. Non-Affiliates											
62596	31-0252460	07/01/1992	UNION FIDELITY INSURANCE COMPANY	KS	OTH/G	182,000	74,261	6,450	2,137		
0899999.	Total - General Account - Non-Affiliates - U.S. Non-Affiliates					182,000	74,261	6,450	2,137	0	0
1099999.	Total - General Account - Non-Affiliates					182,000	74,261	6,450	2,137	0	0
1199999.	Total - General Account					182,000	74,261	6,450	2,137	0	0
2399999.	Total U.S.					182,000	74,261	6,450	2,137	0	0
9999999.	Total					182,000	74,261	6,450	2,137	0	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 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
Non-Affiliates - U.S. Non-Affiliates											
62146	36-2136262	07/01/1991	COMBINED INSURANCE COMPANY OF AMERICA	IL	OTH/G	5,419	1,480		935		
0899999.	Total - Non-Affiliates - U.S. Non-Affiliates					5,419	1,480	0	935	0	0
1099999.	Total - Non-Affiliates					5,419	1,480	0	935	0	0
1199999.	Total - U.S.					5,419	1,480	0	935	0	0
9999999.	Total					5,419	1,480	0	935	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 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
Life and Annuity - Non-Affiliates - U.S. Non-Affiliates						
80659.....	38-0397420....	01/01/1998	CANADA LIFE.....	MI.....	.....	80,000
0899999.	Total - Life and Annuity Non-Affiliates - U.S. Non-Affiliates.....				0	80,000
1099999.	Total - Life and Annuity Non-Affiliates.....				0	80,000
1199999.	Total - Life and Annuity.....				0	80,000
Accident and Health - Non-Affiliates - U.S. Non-Affiliates						
62146.....	36-2136262....	12/07/1992	COMBINED INSURANCE COMPANY OF AMERICA.....	IL.....	.....	12,295
1999999.	Total - Accident and Health Non-Affiliates - U.S. Non-Affiliates.....				0	12,295
2199999.	Total - Accident and Health Non-Affiliates.....				0	12,295
2299999.	Total - Accident and Health.....				0	12,295
2399999.	Total U.S.....				0	92,295
9999999.	Total.....				0	92,295

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	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount In Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates														
80659	38-0397420	01/01/1998	CANADA LIFE	MI	OTH/G	OL	11,830,000	9,946	18,280	75,202				
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates						11,830,000	9,946	18,280	75,202	0	0	0	0
1099999.	Total - General Account - Authorized - Non-Affiliates						11,830,000	9,946	18,280	75,202	0	0	0	0
1199999.	Total - General Account - Authorized						11,830,000	9,946	18,280	75,202	0	0	0	0
3499999.	Total - General Account - Authorized, Unauthorized and Certified						11,830,000	9,946	18,280	75,202	0	0	0	0
6999999.	Total U.S.						11,830,000	9,946	18,280	75,202	0	0	0	0
9999999.	Total						11,830,000	9,946	18,280	75,202	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	2	3	4	5	6	7	8	9	10	Outstanding Surplus Relief		13	14
										11	12		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type	Type of Business Ceded	Premiums	Unearned Premiums (estimated)	Reserve Credit Taken Other Than for Unearned Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates													
62146	36-2136262	12/07/1992	COMBINED INSURANCE COMPANY OF AMERICA	IL	OTH/G	OH	77,090	20,905					
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates						77,090	20,905	0	0	0	0	0
1099999.	Total - General Account - Authorized - Non-Affiliates						77,090	20,905	0	0	0	0	0
1199999.	Total - General Account - Authorized						77,090	20,905	0	0	0	0	0
3499999.	Total - General Account - Authorized, Unauthorized and Certified						77,090	20,905	0	0	0	0	0
6999999.	Total - U.S.						77,090	20,905	0	0	0	0	0
9999999.	Total						77,090	20,905	0	0	0	0	0

Sch. S-Pt. 4
NONE

Sch. S-Pt. 5
NONE

SCHEDULE S - PART 6

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

		1 2014	2 2013	3 2012	4 2011	5 2010
A.	**OPERATIONS ITEMS**					
1.	Premiums and annuity considerations for life and accident and health contracts	152	168	185	205	224
2.	Commissions and reinsurance expense allowances	13	15	17	20	23
3.	Contract claims	158	11	160	42	106
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.	**BALANCE SHEET ITEMS**					
8.	Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	1	1	1	1	2
9.	Aggregate reserves for life and accident and health contracts	31	40	41	31	35
10.	Liability for deposit-type contracts					
11.	Contract claims unpaid	92	95	104	93	125
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
C.	**UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)**					
18.	Funds deposited by and withheld from (F)					
19.	Letters of credit (L)					
20.	Trust agreements (T)					
21.	Other (O)					
D.	**REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)**					
22.	Multiple beneficiary trust				XXX	XXX
23.	Funds deposited by and withheld from (F)				XXX	XXX
24.	Letters of credit (L)				XXX	XXX
25.	Trust agreements (T)				XXX	XXX
26.	Other (O)				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)
	ASSETS (Page 2, Col. 3)			
1.	Cash and invested assets (Line 12)	10,023,191		10,023,191
2.	Reinsurance (Line 16)	8,795	(8,795)	0
3.	Premiums and considerations (Line 15)	623	940	1,563
4.	Net credit for ceded reinsurance	XXX	0	0
5.	All other admitted assets (balance)	104,355	132,684	237,039
6.	Total assets excluding Separate Accounts (Line 26)	10,136,964	124,829	10,261,793
7.	Separate Account Assets (Line 27)			0
8.	Total assets (Line 28)	10,136,964	124,829	10,261,793
	LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9.	Contract reserves (Lines 1 and 2)	81,941	30,851	112,792
10.	Liability for deposit-type contracts (Line 3)			0
11.	Claim reserves (Line 4)	25,242	92,295	117,537
12.	Policyholder dividends/reserves (Lines 5 through 7)			0
13.	Premium & annuity considerations received in advance (Line 8)	667	1,683	2,350
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)	31,577		31,577
20.	Total liabilities excluding Separate Accounts (Line 26)	139,427	124,829	264,256
21.	Separate Account liabilities (Line 27)			0
22.	Total liabilities (Line 28)	139,427	124,829	264,256
23.	Capital & surplus (Line 38)	9,997,537	XXX	9,997,537
24.	Total liabilities, capital & surplus (Line 39)	10,136,964	124,829	10,261,793
	NET CREDIT FOR CEDED REINSURANCE			
25.	Contract reserves	30,851		
26.	Claim reserves	92,295		
27.	Policyholder dividends/reserves	0		
28.	Premium & annuity considerations received in advance	1,683		
29.	Liability for deposit-type contracts	0		
30.	Other contract liabilities	0		
31.	Reinsurance ceded assets	8,795		
32.	Other ceded reinsurance recoverables	(132,684)		
33.	Total ceded reinsurance recoverables	940		
34.	Premiums and considerations	940		
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	940		
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					
	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	6 Totals
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	93,431					93,431
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	93,431	0	0	0	0	93,431

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1 Group Code	2 Group Name	3 NAIC Company Code	4 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 *
Members														
1318.....	Auto Club Enterprises Insurance Group	15598...	95-0865765..	.....	.....	.....	Interinsurance Exchange of the Automobile Club....	CA.....	UDP.....	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..	.....	.....	.....	Auto Club 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.....	IA.....	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.....	RE.....	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.....	RE.....	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.....	UDP.....	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 Group Code	2 Group Name	3 NAIC Company Code	4 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 *
			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				Auto 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	Auto Club Services, LLC	Ownership	100.000	Automobile Club of Southern California	
			74-2982988				AAA New Mexico, LLC	NM	NIA	Auto Club Services, LLC	Ownership	100.000	Automobile Club of Southern California	
			33-0939557				AAA Hawaii, LLC	HI	NIA	Auto 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 Arkansas 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 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
			34-0074310				The Ashland County Automobile Club	OH	NIA	AAA East Central	Other		Automobile Club of Southern California	4
			25-0951930				AAA East Central Insurance Agency	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	AAA East Central	Ownership	100.000	Automobile Club of Southern California	
			34-1039384				Automobile Club Insurance Agency of Massillon Ohio, Inc.	OH	NIA	AAA East Central	Ownership	100.000	Automobile Club of Southern California	
							Automobile Club of California	CA	NIA	Automobile Club of Southern California	Ownership	100.000	Automobile Club of Southern California	
			01-1855420				Automobile Club of Texas, Inc.	TX	NIA	Auto Club Services, LLC	Ownership	100.000	Automobile Club of Southern California	
							Automobile Club of Hawaii, Inc.	HI	NIA	Auto Club Services, LLC	Ownership	100.000	Automobile Club of Southern California	
							Automobile Club of New Mexico, Inc.	NM	NIA	Auto 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	

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-affilated entities.
4	Possession of voting interests in nonprofit corporation.

SCHEDULE Y

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
00000	95-2553663	ACSC Management Services, Incorporated, (Attorney-in-Fact)					495,543,557				495,543,557	
15598	95-0865765	Interinsurance Exchange of the Automobile Club					(495,543,557)		*		(495,543,557)	
11009	76-0603355	Auto Club Casualty Company									0	4,790
15598	95-0865765	Interinsurance Exchange of the Automobile Club							*		0	(4,790)
11008	76-0603356	Auto Club Indemnity Company									0	51,624,136
15598	95-0865765	Interinsurance Exchange of the Automobile Club							*		0	(51,624,136)
29327	74-1107185	Auto Club County Mutual Insurance Company									0	112,574,057
15598	95-0865765	Interinsurance Exchange of the Automobile Club							*		0	(112,574,057)
00000	74-2982988	AAA New Mexico, LLC					4,422,342				4,422,342	
15598	95-0865765	Interinsurance Exchange of the Automobile Club					(4,422,342)		*		(4,422,342)	
00000	33-0939557	AAA Hawaii, LLC					1,634,875				1,634,875	
15598	95-0865765	Interinsurance Exchange of the Automobile Club					(1,634,875)		*		(1,634,875)	
00000	54-0465700	Tidewater Automobile Association of Virginia Incorporated					754,861				754,861	
15598	95-0865765	Interinsurance Exchange of the Automobile Club					(754,861)		*		(754,861)	
71854	52-0891929	AAA Life Insurance Company		(100,000)			61,123,011	(90,773,698)			(29,750,687)	722,197,757
13738	27-1269555	Life Alliance Reassurance Corporation		100,000							100,000	
60256	33-0815346	Automobile Club of Southern California Life Insurance Co					(61,123,011)	90,773,698			29,650,687	(722,197,757)
15598	95-0865765	Interinsurance Exchange of the Automobile Club		(9,850,000)							(9,850,000)	
60256	33-0815346	Automobile Club of Southern California Life Insurance Compa		9,850,000							9,850,000	
00000	95-0514585	Automobile Club of Southern California		(9,850,000)							(9,850,000)	
60256	33-0815346	Automobile Club of Southern California Life Insurance Compa		9,850,000							9,850,000	
71854	52-0891929	AAA Life Insurance Company					(3,021,502)				(3,021,502)	
00000	76-0664740	AAA Texas, LLC					3,021,502				3,021,502	
71854	52-0891929	AAA Life Insurance Company					(338,822)				(338,822)	
00000	74-2982988	AAA New Mexico, LLC					338,822				338,822	
71854	52-0891929	AAA Life Insurance Company					(227,895)				(227,895)	
00000	33-0939557	AAA Hawaii, LLC					227,895				227,895	
71854	52-0891929	AAA Life Insurance Company					(767,600)				(767,600)	
00000	01-0112750	AAA Northern New England					767,600				767,600	
00000	95-0514585	Automobile Club of Southern California					19,902,449				19,902,449	
71854	52-0891929	AAA Life Insurance Company					(19,902,449)				(19,902,449)	
00000	43-0166020	Automobile Club of Missouri					1,020,424				1,020,424	
15512	43-6029277	Automobile Club Inter-Insurance Exchange					(1,020,424)		*		(1,020,424)	
00000	43-0166020	Automobile Club of Missouri					479,576				479,576	
27235	43-1453212	Auto Club Family Insurance Company					(479,576)		*		(479,576)	
15598	95-0865765	Interinsurance Exchange of the Automobile Club					3,994,302		*		3,994,302	
27235	43-1453212	Auto Club Family Insurance Company					(3,994,302)		*		(3,994,302)	
15598	95-0865765	Interinsurance Exchange of the Automobile Club					7,417,990		*		7,417,990	
15512	43-6029277	Automobile Club Inter-Insurance Exchange					(7,417,990)		*		(7,417,990)	
00000	25-0951930	AAA East Central Insurance Agency, Incorporated					2,249,253				2,249,253	
15598	95-0865765	Interinsurance Exchange of the Automobile Club					(2,249,253)		*		(2,249,253)	

SCHEDULE Y

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

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12 Totals	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
71854	52-0891929	AAA Life Insurance Company					(492,024)				(492,024)	
00000	63-0003500	Alabama Motorists Association, Incorporated					492,024				492,024	
71854	52-0891929	AAA Life Insurance Company					(1,658,936)				(1,658,936)	
00000	25-1114373	AAA East Central					1,658,936				1,658,936	
71854	52-0891929	AAA Life Insurance Company					(1,827,273)				(1,827,273)	
00000	43-0166020	Automobile Club of Missouri					1,827,273				1,827,273	
71854	52-0891929	AAA Life Insurance Company					(168,227)				(168,227)	
00000	61-0721801	AAA Kentucky Insurance Agency, Incorporated					168,227				168,227	
71854	52-0891929	AAA Life Insurance Company					(14,980)				(14,980)	
00000	34-0383238	The Massillon Automobile Club (dba Massillon Auto Club, Inc					14,980				14,980	
71854	52-0891929	AAA Life Insurance Company					(177,710)				(177,710)	
00000	34-0891240	Ohio Motorists Insurance Agency, Incorporated					177,710				177,710	
71854	52-0891929	AAA Life Insurance Company					(300,605)				(300,605)	
00000	54-0465700	Tidewater Automobile Association of Virginia Incorporated					300,605				300,605	
15512	43-6029277	Automobile Club Inter-Insurance Exchange								(2,125,000)	(2,125,000)	
15598	95-0865765	Interinsurance Exchange of the Automobile Club								2,125,000	2,125,000	
9999999	Control Totals		0	0	0	0	0	0	XXX	0	0	0

53.1

Pooling Information

NAIC Code	Name of Insurer	Pooling %	NAIC Code	Name of Insurer	Pooling %
15598	Interinsurance Exchange of the Automobile Club	95.00%	11512	Automobile Club Inter-Insurance Exchange	4.00%
27235	Auto Club Family Insurance Company	1.00%			

Detailed Explanation

15512

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.

		Responses
	MARCH FILING	
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	SEE EXPLANATION
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

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?	SEE EXPLANATION
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
40.	Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by Actuarial Opinion and Memorandum Regulation (Model 822), Section 7A(5), be filed with the state of domicile by March 15?	NO
	APRIL FILING	
41.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
42.	Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?	NO
43.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
44.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
45.	Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1?	NO
46.	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
47.	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
48.	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
49.	Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?	NO
50.	Will the Supplemental XXX/AXXX Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
	AUGUST FILING	
51.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	NO

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:

1. The Company has no employees
2.
3.
4.
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7.
8.
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12. The Company has less than 100 stockholders
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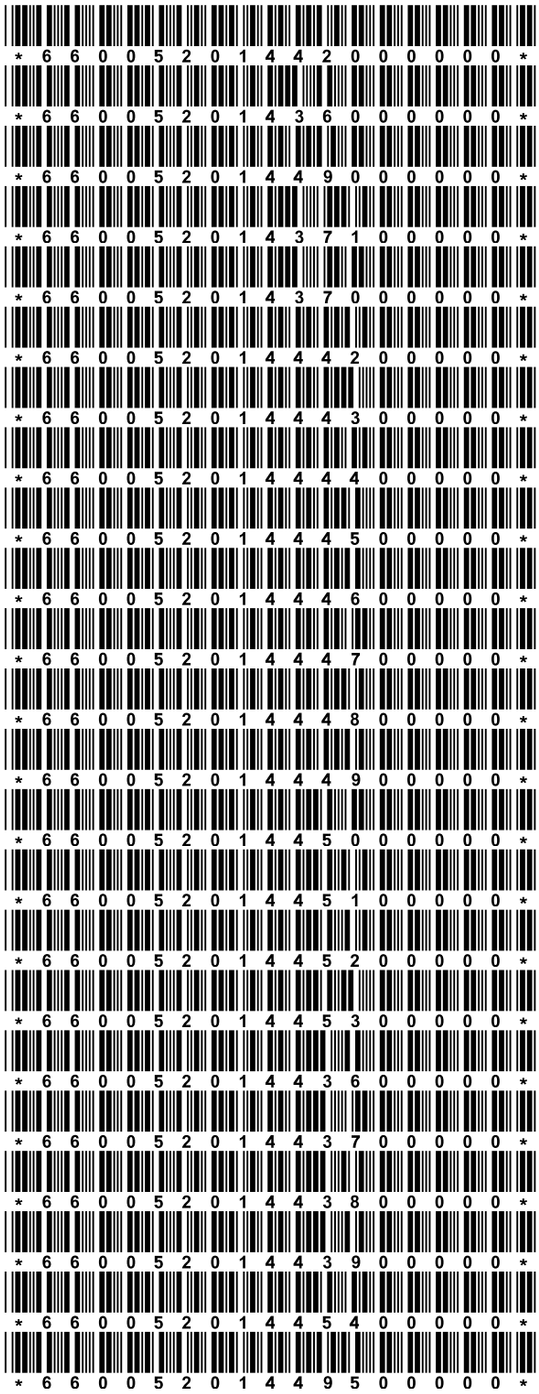

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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.

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NONE

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NONE

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SCHEDULE O SUPPLEMENT

For the year ended December 31, 2014
(To Be Filed March 1)

Of The.....OHIO MOTORISTS LIFE INSURANCE COMPANY
Address (City, State, Zip Code).....INDEPENDENCE, OH 44131
NAIC Group Code.....0 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 2010	2 2011	3 2012	4 2013	5 2014 (a)
1. Prior	4				
2. 2010	3				
3. 2011	XXX	4	2		
4. 2012	XXX	XXX	1	1	
5. 2013	XXX	XXX	XXX		
6. 2014	XXX	XXX	XXX	XXX	1

Section B - Other Accident and Health

1. Prior					
2. 2010					
3. 2011	XXX				
4. 2012	XXX	XXX			
5. 2013	XXX	XXX	XXX		
6. 2014	XXX	XXX	XXX	XXX	

NONE

Section C - Credit Accident and Health

1. Prior					
2. 2010					
3. 2011	XXX				
4. 2012	XXX	XXX			
5. 2013	XXX	XXX	XXX		
6. 2014	XXX	XXX	XXX	XXX	

NONE

(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	2	3	4	5
	2010	2011	2012	2013	2014
1. Prior					
2. 2010					
3. 2011	XXX				
4. 2012	XXX	XXX			
5. 2013	XXX	XXX	XXX		
6. 2014	XXX	XXX	XXX	XXX	

NONE

Section B - Other Accident and Health

1. Prior					
2. 2010					
3. 2011	XXX				
4. 2012	XXX	XXX			
5. 2013	XXX	XXX	XXX		
6. 2014	XXX	XXX	XXX	XXX	

NONE

Section C - Credit Accident and Health

1. Prior					
2. 2010					
3. 2011	XXX				
4. 2012	XXX	XXX			
5. 2013	XXX	XXX	XXX		
6. 2014	XXX	XXX	XXX	XXX	

NONE

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	2	3	4	5
	2010	2011	2012	2013	2014
1. 2010	9	5		XXX	XXX
2. 2011	XXX	8	3		XXX
3. 2012	XXX	XXX	6	1	1
4. 2013	XXX	XXX	XXX	4	1
5. 2014	XXX	XXX	XXX	XXX	3

Section B - Other Accident and Health

1. 2010				XXX	XXX
2. 2011	XXX				XXX
3. 2012	XXX	XXX			
4. 2013	XXX	XXX	XXX		
5. 2014	XXX	XXX	XXX	XXX	

NONE

Section C - Credit Accident and Health

1. 2010				XXX	XXX
2. 2011	XXX				XXX
3. 2012	XXX	XXX			
4. 2013	XXX	XXX	XXX		
5. 2014	XXX	XXX	XXX	XXX	

NONE

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 2010	2 2011	3 2012	4 2013	5 2014
1. 2010	9	5			
2. 2011	XXX	8	3		
3. 2012	XXX	XXX	6	1	1
4. 2013	XXX	XXX	XXX	4	1
5. 2014	XXX	XXX	XXX	XXX	3

Section B - Other Accident and Health

1. 2010					
2. 2011	XXX				
3. 2012	XXX	XXX			
4. 2013	XXX	XXX	XXX		
5. 2014	XXX	XXX	XXX	XXX	

NONE

Section C - Credit Accident and Health

1. 2010					
2. 2011	XXX				
3. 2012	XXX	XXX			
4. 2013	XXX	XXX	XXX		
5. 2014	XXX	XXX	XXX	XXX	

NONE

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	22
7. Group annuities		
8. Group accident and health	Development	3
9. Credit accident and health		
10. Other accident and health		
11. Total		25

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
NONE

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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LIFE ANNUAL STATEMENT BLANK