



ANNUAL STATEMENT

For the Year Ended December 31, 2015
of the Condition and Affairs of the

OHIO MOTORISTS LIFE INSURANCE COMPANY

NAIC Group Code.....1318, 1318
(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
(Street and Number) (City or Town, State, Country and Zip Code)

216-606-6045
(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
(Street and Number) (City or Town, State, Country and Zip Code)

216-606-6045
(Area Code) (Telephone Number)

Internet Web Site Address

N/A

Statutory Statement Contact

ROBIN A. MERVINE
(Name)

216-606-6045
(Area Code) (Telephone Number) (Extension)

RMERVINE@AAAEC.COM
(E-Mail Address)

216-606-6018
(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
Thomas J. Ashley #			

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	a. Is this an original filing?	Yes [X] No []
This _____ day of _____ 2016	b. If no	1. State the amendment number
		2. Date filed
		3. Number of pages attached

OHIO MOTORISTS LIFE INSURANCE COMPANY



DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR
NAIC Group Code.....1318 NAIC Company Code.....66005

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....			92,947		92,947
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	92,947	0	92,947
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.....					0
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	0	0	0	0
15. Totals.....	0	0	0	0	0

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	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	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.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
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	14,057,000			5	14,057,000
21. Issued during year.....									0	0
22. Other changes to in force (Net).....						(1,287,000)			0	(1,287,000)
23. In force December 31 of current year.....	0	0	0	(a).....0	5	12,770,000	0	0	5	12,770,000

(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	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	82,776	85,014		100	(1,834)
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).....	82,776	85,014	0	100	(1,834)

(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.....1318 NAIC Company Code.....66005

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....			92,947		92,947
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	92,947	0	92,947
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.....					0
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	0	0	0	0
15. Totals.....	0	0	0	0	0

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	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	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.....									0	0
Settled during current year:										
18.1 By payment in full.....									0	0
18.2 By payment on compromised claims.....									0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....									0	0
18.5 Amount rejected.....									0	0
18.6 Total settlements.....	0	0	0	0	0	0	0	0	0	0
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	14,057,000			5	14,057,000
21. Issued during year.....									0	0
22. Other changes to in force (Net).....						(1,287,000)			0	(1,287,000)
23. In force December 31 of current year.....	0	0	0	(a).....0	5	12,770,000	0	0	5	12,770,000

(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	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group policies (b).....	82,776	85,014		100	(1,834)
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).....	82,776	85,014	0	100	(1,834)

(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

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. 2015.....				0
2. 2016.....				0
3. 2017.....				0
4. 2018.....				0
5. 2019.....				0
6. 2020.....				0
7. 2021.....				0
8. 2022.....				0
9. 2023.....				0
10. 2024.....				0
11. 2025.....				0
12. 2026.....				0
13. 2027.....				0
14. 2028.....				0
15. 2029.....				0
16. 2030.....				0
17. 2031.....				0
18. 2032.....				0
19. 2033.....				0
20. 2034.....				0
21. 2035.....				0
22. 2036.....				0
23. 2037.....				0
24. 2038.....				0
25. 2039.....				0
26. 2040.....				0
27. 2041.....				0
28. 2042.....				0
29. 2043.....				0
30. 2044.....				0
31. 2045 and Later.....				0
32. Total (Lines 1 to 31).....	0	0	0	0

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.....	15,222		15,222			0	15,222
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.....	4,098		4,098			0	4,098
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7).....	19,319	0	19,319	0	0	0	19,319
9. Maximum reserve.....	30,732		30,732			0	30,732
10. Reserve objective.....	23,561		23,561			0	23,561
11. 20% of (Line 10 minus Line 8).....	848	0	848	0	0	0	848
12. Balance before transfers (Lines 8 + 11).....	20,168	0	20,168	0	0	0	20,168
13. Transfers.....			0			0	0
14. Voluntary contribution.....			0			0	0
15. Adjustment down to maximum/up to zero.....	1,109		1,109			0	1,109
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15).....	21,277	0	21,277	0	0	0	21,277

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	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.....	9,597,008	XXX.....	XXX.....	9,597,008	0.0004	3,839	0.0023	22,073	0.0030	28,791
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).....	9,597,008	XXX.....	XXX.....	9,597,008	XXX.....	3,839	XXX.....	22,073	XXX.....	28,791
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.....	647,117	XXX.....	XXX.....	647,117	0.0004	259	0.0023	1,488	0.0030	1,941
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).....	647,117	XXX.....	XXX.....	647,117	XXX.....	259	XXX.....	1,488	XXX.....	1,941
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).....	10,244,125	XXX.....	XXX.....	10,244,125	XXX.....	4,098	XXX.....	23,561	XXX.....	30,732

Asset Valuation Reserve - Default
NONE

Asset Valuation Reserve - Equity
NONE

Asset Valuation Reserve - Equity
NONE

Asset Valuation Reserve - Equity
NONE

Asset Valuation Reserve - Replications (Synthetic) Assets
NONE

Sch. F - Claims
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.....	17,334	XXX	17,334	XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX
2. Premiums earned.....	17,808	XXX	17,808	XXX		XXX		XXX		XXX		XXX		XXX		XXX		XXX
3. Incurred claims.....	279	1.6	279	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).....	279	1.6	279	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.....	2,605	14.6	2,605	14.6	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
7. Commissions (a).....	4,305	24.2	4,305	24.2		0.0		0.0		0.0		0.0		0.0		0.0		0.0
8. Other general insurance expenses.....	5,815	32.7	5,815	32.7		0.0		0.0		0.0		0.0		0.0		0.0		0.0
9. Taxes, licenses and fees.....	5,465	30.7	5,465	30.7		0.0		0.0		0.0		0.0		0.0		0.0		0.0
10. Total other expenses incurred.....	15,585	87.5	15,585	87.5	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.....	(661)	(3.7)	(661)	(3.7)	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.....	(661)	(3.7)	(661)	(3.7)	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				
	Total	Group Accident and Health	Credit Accident and Health (Group and Individual)	Collectively Renewable	5 Non-Cancelable	6 Guaranteed Renewable	7 Non-Renewable for Stated Reasons Only	8 Other Accident Only	9 All Other
PART 2 - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums.....	4,690	4,690							
2. Advance premiums.....	525	525							
3. Reserve for rate credits.....	0								
4. Total premium reserves, current year.....	5,215	5,215	0	0	0	0	0	0	0
5. Total premium reserves, prior year.....	5,689	5,689							
6. Increase in total premium reserves.....	(474)	(474)	0	0	0	0	0	0	0
B. Contract Reserves:									
1. Additional reserves (a).....	2,605	2,605							
2. Reserve for future contingent benefits.....	0								
3. Total contract reserves, current year.....	2,605	2,605	0	0	0	0	0	0	0
4. Total contract reserves, prior year.....	0								
5. Increase in contract reserves.....	2,605	2,605	0	0	0	0	0	0	0
C. Claim Reserves and Liabilities:									
1. Total current year.....	2,883	2,883	0	0	0	0	0	0	0
2. Total prior year.....	3,105	3,105							
3. Increase.....	(222)	(222)	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.....	246	246							
1.2 On claims incurred during current year.....	255	255							
2. Claim Reserves and Liabilities, December 31, Current Year:									
2.1 On claims incurred prior to current year.....	519	519							
2.2 On claims incurred during current year.....	2,364	2,364							
3. Test:									
3.1 Lines 1.1 and 2.1.....	765	765	0	0	0	0	0	0	0
3.2 Claim reserves and liabilities, December 31, prior year.....	3,105	3,105							
3.3 Line 3.1 minus Line 3.2.....	(2,340)	(2,340)	0	0	0	0	0	0	0

PART 4 - REINSURANCE

A. Reinsurance Assumed:									
1. Premiums written.....	4,943	4,943							
2. Premiums earned.....	5,056	5,056							
3. Incurred claims.....	554	554							
4. Commissions.....	2,132	2,132							
B. Reinsurance Ceded:									
1. Premiums written.....	70,216	70,216							
2. Premiums earned.....	72,262	72,262							
3. Incurred claims.....	(1,559)	(1,559)							
4. Commissions.....	12,313	12,313							

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

OHIO MOTORISTS LIFE INSURANCE COMPANY
SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred claims.....			(1,834)	(1,834)
2. Beginning claim reserves and liabilities.....			14,465	14,465
3. Ending claim reserves and liabilities.....			12,531	12,531
4. Claims paid.....	0	0	100	100
B. Assumed Reinsurance:				
5. Incurred claims.....			554	554
6. Beginning claim reserves and liabilities.....			935	935
7. Ending claim reserves and liabilities.....			1,003	1,003
8. Claims paid.....	0	0	486	486
C. Ceded Reinsurance:				
9. Incurred claims.....			(1,559)	(1,559)
10. Beginning claim reserves and liabilities.....			12,295	12,295
11. Ending claim reserves and liabilities.....			10,651	10,651
12. Claims paid.....	0	0	85	85
D. Net:				
13. Incurred claims.....	0	0	279	279
14. Beginning claim reserves and liabilities.....	0	0	3,105	3,105
15. Ending claim reserves and liabilities.....	0	0	2,883	2,883
16. Claims paid.....	0	0	501	501
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred claims and cost containment expenses.....			279	279
18. Beginning reserves and liabilities.....			3,105	3,105
19. Ending reserves and liabilities.....			2,883	2,883
20. Paid claims and cost containment expenses.....	0	0	501	501

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	2	3	4	5	6	7	8	9	10	11	12
NAIC Company Code	ID Number	Effective Date	Name of Reinsured	Domiciliary Jurisdiction	Type of Reinsurance Assumed	Amount of In Force at End of Year	Reserve	Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
General Account - Non-Affiliates - U.S. Non-Affiliates											
62596.....	31-0252460....	07/01/1992	UNION FIDELITY LIFE INSURANCE COMPANY.....	KS.....	CO/G.....	145,000	60,777	4,990	1,515	.....	.....
0899999	Total - General Account - Non-Affiliates - U.S. Non-Affiliates.....					145,000	60,777	4,990	1,515	0	0
1099999	Total - General Account - Non-Affiliates.....					145,000	60,777	4,990	1,515	0	0
1199999	Total - General Account.....					145,000	60,777	4,990	1,515	0	0
2399999	Total U.S.....					145,000	60,777	4,990	1,515	0	0
9999999	Total.....					145,000	60,777	4,990	1,515	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	2	3	4	5	6	7	8	9	10	11	12
NAIC Company Code	ID Number	Effective Date	Name of Reinsured	Domiciliary Jurisdiction	Type of Reinsurance Assumed	Premiums	Unearned Premiums	Reserve Liability Other Than for Unearned Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
Non-Affiliates - U.S. Non-Affiliates											
62146.....	36-2136262....	07/01/1991	COMBINED INSURANCE COMPANY OF AMERICA.....	IL.....	CO/G.....	4,915	1,338	.....	.....1,003	.....	.....
08999999	Total - Non-Affiliates - U.S. Non-Affiliates.....					4,915	1,338	0	1,003	0	0
10999999	Total - Non-Affiliates.....					4,915	1,338	0	1,003	0	0
11999999	Total - U.S.....					4,915	1,338	0	1,003	0	0
99999999	Total.....					4,915	1,338	0	1,003	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						
65676.....	35-0472300....	01/01/1998	The Lincoln National Life Insurance Company.....	IN.....	.....	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.....	.....	10,651
1999999.	Total - Accident and Health Non-Affiliates - U.S. Non-Affiliates.....				0	10,651
2199999.	Total - Accident and Health Non-Affiliates.....				0	10,651
2299999.	Total - Accident and Health.....				0	10,651
2399999.	Total U.S.....				0	90,651
9999999.	Total.....				0	90,651

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 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount In Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates														
65676.....	35-0472300....	01/01/1998	The Lincoln National Life Insurance Company.....	IN.....	CO/G.....	OL.....	10,795,000	12,744	9,946	90,964	.....	.....	.....	.....
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						10,795,000	12,744	9,946	90,964	0	0	0	0
1099999.	Total - General Account - Authorized - Non-Affiliates.....						10,795,000	12,744	9,946	90,964	0	0	0	0
1199999.	Total - General Account - Authorized.....						10,795,000	12,744	9,946	90,964	0	0	0	0
3499999.	Total - General Account - Authorized, Unauthorized and Certified.....						10,795,000	12,744	9,946	90,964	0	0	0	0
6999999.	Total U.S.....						10,795,000	12,744	9,946	90,964	0	0	0	0
9999999.	Total.....						10,795,000	12,744	9,946	90,964	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 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (estimated)	10 Reserve Credit Taken Other Than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11 Current Year	12 Prior Year		
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates													
62146.....	36-2136262....	..12/07/1992	COMBINED INSURANCE COMPANY OF AMERICA.....	IL.....	CO/G.....	OH.....	70,206	18,993	14,760	.....	.....	.....	.....
0899999	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						70,206	18,993	14,760	0	0	0	0
1099999	Total - General Account - Authorized - Non-Affiliates.....						70,206	18,993	14,760	0	0	0	0
1199999	Total - General Account - Authorized.....						70,206	18,993	14,760	0	0	0	0
3499999	Total - General Account - Authorized, Unauthorized and Certified.....						70,206	18,993	14,760	0	0	0	0
6999999	Total - U.S.....						70,206	18,993	14,760	0	0	0	0
9999999	Total.....						70,206	18,993	14,760	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 2015	2 2014	3 2013	4 2012	5 2011
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts.....	161	152	168	185	205
2. Commissions and reinsurance expense allowances.....	12	13	15	17	20
3. Contract claims.....	(2)	158	11	160	42
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.....	17	1	1	1	1
9. Aggregate reserves for life and accident and health contracts.....	46	31	40	41	31
10. Liability for deposit-type contracts.....					
11. Contract claims unpaid.....	91	92	95	104	93
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
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
23. Funds deposited by and withheld from (F).....					XXX
24. Letters of credit (L).....					XXX
25. Trust agreements (T).....					XXX
26. Other (O).....					XXX

OHIO MOTORISTS LIFE INSURANCE COMPANY
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).....	10,266,924		10,266,924
2. Reinsurance (Line 16).....	26,987	(26,987)	0
3. Premiums and considerations (Line 15).....	4,170	16,700	20,870
4. Net credit for ceded reinsurance.....	XXX	0	0
5. All other admitted assets (balance).....	104,181	149,128	253,309
6. Total assets excluding Separate Accounts (Line 26).....	10,402,262	138,841	10,541,103
7. Separate Account Assets (Line 27).....			0
8. Total assets (Line 28).....	10,402,262	138,841	10,541,103
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2).....	70,940	46,497	117,437
10. Liability for deposit-type contracts (Line 3).....			0
11. Claim reserves (Line 4).....	24,398	90,651	115,049
12. Policyholder dividends/reserves (Lines 5 through 7).....			0
13. Premium & annuity considerations received in advance (Line 8).....	640	1,693	2,333
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).....	46,360		46,360
20. Total liabilities excluding Separate Accounts (Line 26).....	142,338	138,841	281,179
21. Separate Account liabilities (Line 27).....			0
22. Total liabilities (Line 28).....	142,338	138,841	281,179
23. Capital & surplus (Line 38).....	10,259,924	XXX	10,259,924
24. Total liabilities, capital & surplus (Line 39).....	10,402,262	138,841	10,541,103
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves.....	46,497		
26. Claim reserves.....	90,651		
27. Policyholder dividends/reserves.....	0		
28. Premium & annuity considerations received in advance.....	1,693		
29. Liability for deposit-type contracts.....	0		
30. Other contract liabilities.....	0		
31. Reinsurance ceded assets.....	26,987		
32. Other ceded reinsurance recoverables.....	(149,128)		
33. Total ceded reinsurance recoverables.....	16,700		
34. Premiums and considerations.....	16,700		
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.....	16,700		
41. Total net credit for ceded reinsurance.....	0		

SCHEDULE T - PART 2

INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

			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
States, Etc.							
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	92,947				92,947
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.....		92,947	0	0	0	92,947

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	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)	*

Members

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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..	.....	.....	.....	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.....	RE.....	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.....	IA.....	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.....	IA.....	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.....	UIP.....	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.....	UIP.....	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

52.1

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	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)	*
			25-1114373..				AAA East Central.....	PA.....	UIP.....	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.....
							Tidewater Automobile Association of Virginia, Incorporated.....	VA.....	NIA.....	Auto Club Enterprises.....	Other.....		Automobile Club of Southern California.....	4.....
			54-0465700..				Ohio Motorists Holding Company.....	OH.....	UDP.....	AAA East Central.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			34-1659669..				Auto Club Services, LLC.....	CA.....	NIA.....	Automobile Club of Southern California.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			33-0945342..				AAA Texas, LLC.....	TX.....	NIA.....	Auto Club Services, LLC.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			76-0664740..				AAA New Mexico, LLC.....	NM.....	NIA.....	Auto Club Services, LLC.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			74-2982988..				AAA Hawaii, LLC.....	HI.....	NIA.....	Auto Club Services, LLC.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			33-0939557..				Club Insurance Agency, Inc.....	MO.....	NIA.....	Automobile Club of Missouri.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			43-0822493..				AAA Arkansas Insurance Agency, Inc.....	AK.....	NIA.....	Automobile Club of Missouri.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			52-0958851..				AAA Driving School, Inc.....	ME.....	NIA.....	AAA Northern New England.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			54-2106828..				AAA Car Care Center.....	ME.....	NIA.....	AAA Northern New England.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			01-0518954..				Triple A Leasing.....	ME.....	NIA.....	AAA Northern New England.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			01-0411376..				AAA Northern New England Insurance.....	ME.....	NIA.....	AAA Northern New England.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			01-0022895..				Hewins Travel LLC.....	ME.....	NIA.....	AAA Northern New England.....	Ownership.....	...100.000	Automobile Club of Southern California.....	
			00-0000000..							Tidewater Automobile Association of Virginia, Incorporated.....	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.....	
							AAA Tidewater Virginia Fleet Operations, LLC.....	VA.....	NIA.....	Tidewater Automobile Association of Virginia, Incorporated.....	OWNERSHIP.....	...100.000	Automobile Club of Southern California.....	
			27-2311305..							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.....	
							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.....	
							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..							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.....	
							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.....	
							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	2	3	4	5	6	7	8	9	10	11	12	13	14	15
Group Code	Group Name	NAIC Company Code	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)	*
			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.....	
			34-0383238..				The Massillon Automobile Club.....	OH.....	NIA.....	AAA East Central.....	Other.....	.....	Automobile Club of Southern California.....	4.....
							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.....	
			47-4159301..				Intelematics North America, LLC.....	DE.....	DS.....	Interinsurance Exchange of the Automobile Club	Ownership.....	...25.000	See Note Below.....	5.....
			47-4159301..				Intelematics North America, LLC.....	DE.....	DS.....	Automobile Club of Southern California.....	Ownership.....	...25.000	See Note Below.....	5.....

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.
5	The Interinsurance Exchange of the Automobile Club and the Automobile Club of Southern California each own 25% of Intelematics North America, LLC. The remainder is owned by non-affiliated entities.

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	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)
Affiliated Transactions												
00000.....	95-2553663.....	ACSC Management Services, Incorporated, (Attorney-in-Fact)					538,642,196				538,642,196	
15598.....	95-0865765.....	Interinsurance Exchange of the Automobile Club.....					(538,642,196)		*		(538,642,196)	
11009.....	76-0603355.....	Auto Club Casualty Company.....						0			0	6,233
15598.....	95-0865765.....	Interinsurance Exchange of the Automobile Club.....						0	*		0	(6,233)
11008.....	76-0603356.....	Auto Club Indemnity Company.....						0			0	64,997,333
15598.....	95-0865765.....	Interinsurance Exchange of the Automobile Club.....						0	*		0	(64,997,333)
29327.....	74-1107185.....	Auto Club County Mutual Insurance Company.....						0			0	128,172,137
15598.....	95-0865765.....	Interinsurance Exchange of the Automobile Club.....						0	*		0	(128,172,137)
00000.....	74-2982988.....	AAA New Mexico, LLC.....					4,618,121				4,618,121	
15598.....	95-0865765.....	Interinsurance Exchange of the Automobile Club.....					(4,618,121)		*		(4,618,121)	
00000.....	33-0939557.....	AAA Hawaii, LLC.....					1,594,974				1,594,974	
15598.....	95-0865765.....	Interinsurance Exchange of the Automobile Club.....					(1,594,974)		*		(1,594,974)	
00000.....	54-0465700.....	Tidewater Automobile Association of Virginia Incorporated....					941,595				941,595	
15598.....	95-0865765.....	Interinsurance Exchange of the Automobile Club.....					(941,595)		*		(941,595)	
71854.....	52-0891929.....	AAA Life Insurance Company.....					65,432,162	(99,484,488)			(34,052,326)	817,190,894
60256.....	33-0815346.....	Automobile Club of Southern California Life Insurance Compa					(65,432,162)	99,484,488			34,052,326	(817,190,894)
15598.....	95-0865765.....	Interinsurance Exchange of the Automobile Club.....		(10,200,000)					*		(10,200,000)	
60256.....	33-0815346.....	Automobile Club of Southern California Life Insurance Compa		10,200,000							10,200,000	
00000.....	95-0514585.....	Automobile Club of Southern California.....		(10,200,000)							(10,200,000)	
60256.....	33-0815346.....	Automobile Club of Southern California Life Insurance Compa		10,200,000							10,200,000	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(3,224,790)				(3,224,790)	
00000.....	76-0664740.....	AAA Texas, LLC.....					3,224,790				3,224,790	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(430,650)				(430,650)	
00000.....	74-2982988.....	AAA New Mexico, LLC.....					430,650				430,650	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(276,350)				(276,350)	
00000.....	33-0939557.....	AAA Hawaii, LLC.....					276,350				276,350	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(828,016)				(828,016)	
00000.....	01-0112750.....	AAA Northern New England.....					828,016				828,016	
00000.....	95-0514585.....	Automobile Club of Southern California.....					21,453,851				21,453,851	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(21,453,851)				(21,453,851)	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(533,659)				(533,659)	
00000.....	63-0003500.....	Alabama Motorists Association, Incorporated.....					533,659				533,659	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(1,840,834)				(1,840,834)	
00000.....	25-1114373.....	AAA East Central.....					1,840,834				1,840,834	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(2,009,517)				(2,009,517)	
00000.....	43-0166020.....	Automobile Club of Missouri.....					2,009,517				2,009,517	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(149,449)				(149,449)	
00000.....	61-0721801.....	AAA Kentucky Insurance Agency, Incorporated.....					149,449				149,449	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(15,415)				(15,415)	
00000.....	34-0383238.....	The Massillon Automobile Club (dba Massillon Auto Club, Inc)					15,415				15,415	
71854.....	52-0891929.....	AAA Life Insurance Company.....					(144,888)				(144,888)	

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	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)
00000.....	34-0891240.....	Ohio Motorists Insurance Agency, Incorporated.....	.....	.....	.....	.....	.....144,888	.....	.....	.....	.....144,888	.....
71854.....	52-0891929.....	AAA Life Insurance Company.....	.....	.....	.....	.....	.....(304,716)	.....	.....	.....	.....(304,716)	.....
00000.....	54-0465700.....	Tidewater Automobile Association of Virginia Incorporated....	.....	.....	.....	.....	.....304,716	.....	.....	.....	.....304,716	.....
00000.....	43-0166020.....	Automobile Club of Missouri.....	.....	.....	.....	.....	.....2,223,788	.....	.....	.....	.....2,223,788	.....
15512.....	43-6029277.....	Automobile Club Inter-Insurance Exchange.....	.....	.....	.....	.....	.....(2,223,788)	.....	.....*	.....	.....(2,223,788)	.....
00000.....	43-0166020.....	Automobile Club of Missouri.....	.....	.....	.....	.....	.....1,068,741	.....	.....	.....	.....1,068,741	.....
27235.....	43-1453212.....	Auto Club Family Insurance Company.....	.....	.....	.....	.....	.....(1,068,741)	.....	.....*	.....	.....(1,068,741)	.....
15598.....	95-0865765.....	Interinsurance Exchange of the Automobile Club.....	.....	.....	.....	.....	.....4,126,242	.....	.....*	.....	.....4,126,242	.....
27235.....	43-1453212.....	Auto Club Family Insurance Company.....	.....	.....	.....	.....	.....(4,126,242)	.....	.....*	.....	.....(4,126,242)	.....
15598.....	95-0865765.....	Interinsurance Exchange of the Automobile Club.....	.....	.....	.....	.....	.....7,663,024	.....	.....*	.....	.....7,663,024	.....
15512.....	43-6029277.....	Automobile Club Inter-Insurance Exchange.....	.....	.....	.....	.....	.....(7,663,024)	.....	.....*	.....	.....(7,663,024)	.....
00000.....	25-0951930.....	AAA East Central Insurance Agency, Incorporated.....	.....	.....	.....	.....	.....2,522,053	.....	.....	.....	.....2,522,053	.....
15598.....	95-0865765.....	Interinsurance Exchange of the Automobile Club.....	.....	.....	.....	.....	.....(2,522,053)	.....	.....*	.....	.....(2,522,053)	.....
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

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%			

OHIO MOTORISTS LIFE INSURANCE COMPANY

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		Responses
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		SEE EXPLANATION
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
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.

5.

6.

7.

8.

9.

10.

11.

12. The Company has less than 100 stockholders

13. The data for this supplement is not required to be filed.

14. The data for this supplement is not required to be filed.

15. The data for this supplement is not required to be filed.

16. The data for this supplement is not required to be filed.

17. The data for this supplement is not required to be filed.

18. The data for this supplement is not required to be filed.

19. The data for this supplement is not required to be filed.

20. The data for this supplement is not required to be filed.

21. The data for this supplement is not required to be filed.

22. The data for this supplement is not required to be filed.

23. The data for this supplement is not required to be filed.

24. The data for this supplement is not required to be filed.

25. The data for this supplement is not required to be filed.

26. The data for this supplement is not required to be filed.

27. The data for this supplement is not required to be filed.

28. The data for this supplement is not required to be filed.

29. The data for this supplement is not required to be filed.

30. The data for this supplement is not required to be filed.

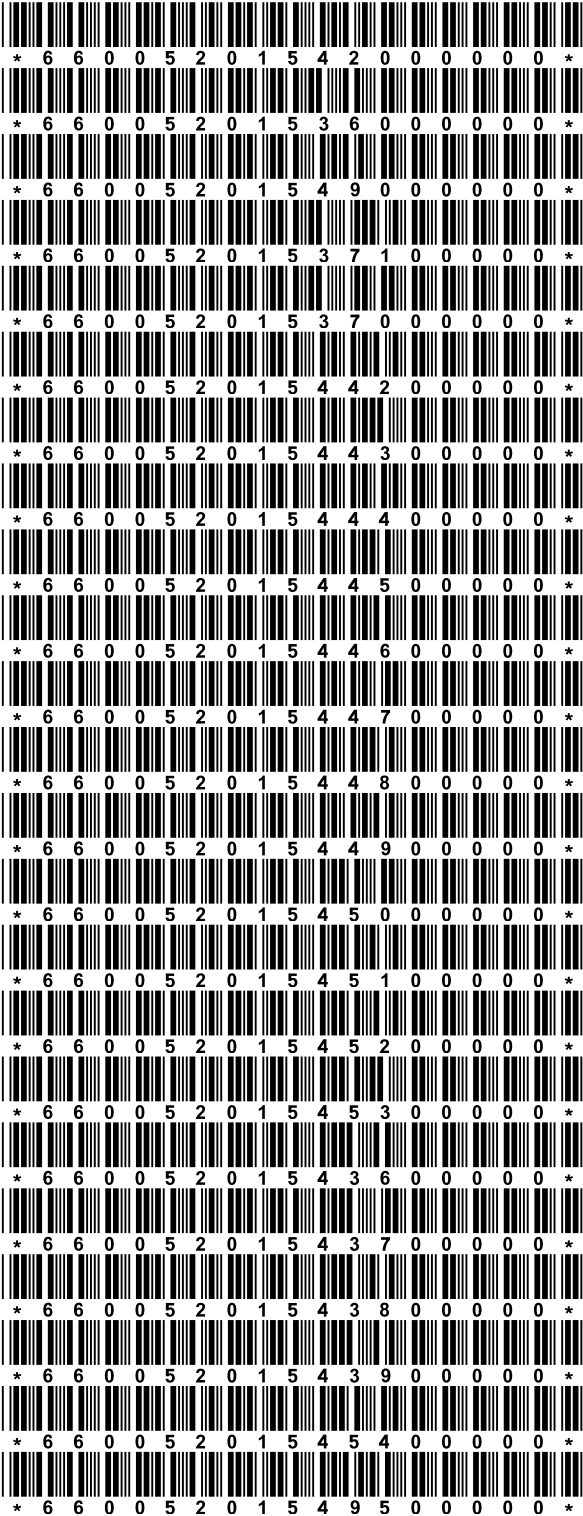
31. The data for this supplement is not required to be filed.

32. The data for this supplement is not required to be filed.

33. The data for this supplement is not required to be filed.

34. The data for this supplement is not required to be filed.

BAR CODE:



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.

35.

36. The data for this supplement is not required to be filed.



37. The data for this supplement is not required to be filed.



38. The data for this supplement is not required to be filed.



39. The data for this supplement is not required to be filed.



40. The data for this supplement is not required to be filed.



41. The data for this supplement is not required to be filed.



42. The data for this supplement is not required to be filed.



43. The data for this supplement is not required to be filed.



44.

45. The data for this supplement is not required to be filed.



46. The data for this supplement is not required to be filed.



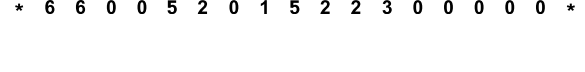
47. The data for this supplement is not required to be filed.



48. The data for this supplement is not required to be filed.



49. The data for this supplement is not required to be filed.



50. The data for this supplement is not required to be filed.



51. The data for this supplement is not required to be filed.



Overflow Page
NONE

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NONE



SCHEDULE O SUPPLEMENT
For the year ended December 31, 2015
(To Be Filed March)

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

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

NAIC Group Code.....1318

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 2011	2 2012	3 2013	4 2014	5 2015 (a)
1. Prior.....					
2. 2011.....	4	2			
3. 2012.....	XXX	1	1		
4. 2013.....	XXX	XXX			
5. 2014.....	XXX	XXX	XXX	1	
6. 2015.....	XXX	XXX	XXX	XXX	1

Section B - Other Accident and Health

1. Prior.....					
2. 2011.....					
3. 2012.....	XXX				
4. 2013.....	XXX	XXX			
5. 2014.....	XXX	XXX	XXX		
6. 2015.....	XXX	XXX	XXX	XXX	

Section C - Credit Accident and Health

1. Prior.....					
2. 2011.....					
3. 2012.....	XXX				
4. 2013.....	XXX	XXX			
5. 2014.....	XXX	XXX	XXX		
6. 2015.....	XXX	XXX	XXX	XXX	

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

OHIO MOTORISTS LIFE INSURANCE COMPANY
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 2011	2 2012	3 2013	4 2014	5 2015
1. Prior.....					
2. 2011.....					
3. 2012.....	XXX				
4. 2013.....	XXX	XXX			
5. 2014.....	XXX	XXX	XXX		
6. 2015.....	XXX	XXX	XXX	XXX	

Section B - Other Accident and Health

1. Prior.....					
2. 2011.....					
3. 2012.....	XXX				
4. 2013.....	XXX	XXX			
5. 2014.....	XXX	XXX	XXX		
6. 2015.....	XXX	XXX	XXX	XXX	

Section C - Credit Accident and Health

1. Prior.....					
2. 2011.....					
3. 2012.....	XXX				
4. 2013.....	XXX	XXX			
5. 2014.....	XXX	XXX	XXX		
6. 2015.....	XXX	XXX	XXX	XXX	

OHIO MOTORISTS LIFE INSURANCE COMPANY
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 2011	2 2012	3 2013	4 2014	5 2015
1. 2011.....	8	3		XXX	XXX
2. 2012.....	XXX	6	1	1	XXX
3. 2013.....	XXX	XXX	4	1	
4. 2014.....	XXX	XXX	XXX	3	
5. 2015.....	XXX	XXX	XXX	XXX	3

Section B - Other Accident and Health

1. 2011.....				XXX	XXX
2. 2012.....	XXX				XXX
3. 2013.....	XXX	XXX			
4. 2014.....	XXX	XXX	XXX		
5. 2015.....	XXX	XXX	XXX	XXX	

NONE

Section C - Credit Accident and Health

1. 2011.....				XXX	XXX
2. 2012.....	XXX				XXX
3. 2013.....	XXX	XXX			
4. 2014.....	XXX	XXX	XXX		
5. 2015.....	XXX	XXX	XXX	XXX	

NONE

OHIO MOTORISTS LIFE INSURANCE COMPANY
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 2011	2 2012	3 2013	4 2014	5 2015
1. 2011.....	8	3			
2. 2012.....	XXX	6	1	1	
3. 2013.....	XXX	XXX	4	1	
4. 2014.....	XXX	XXX	XXX	3	
5. 2015.....	XXX	XXX	XXX	XXX	3

Section B - Other Accident and Health

1. 2011.....		NONE			
2. 2012.....	XXX				
3. 2013.....	XXX				
4. 2014.....	XXX				
5. 2015.....	XXX				

Section C - Credit Accident and Health

1. 2011.....		NONE			
2. 2012.....	XXX				
3. 2013.....	XXX				
4. 2014.....	XXX				
5. 2015.....	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.....	21
7. Group annuities.....		
8. Group accident and health.....	Development.....	3
9. Credit accident and health.....		
10. Other accident and health.....		
11. Total.....		24

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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