



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

OHIO NATIONAL LIFE ASSURANCE CORPORATION

NAIC Group Code.....0704, 0704 (Current Period) (Prior Period)	NAIC Company Code..... 89206	Employer's ID Number..... 31-0962495
Organized under the Laws of Ohio	State of Domicile or Port of Entry Ohio	Country of Domicile US
Incorporated/Organized..... June 26, 1979	Commenced Business..... August 22, 1979	
Statutory Home Office	One Financial Way..... Cincinnati OH US 45242 (Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	One Financial Way..... Cincinnati OH US..... 45242 (Street and Number) (City or Town, State, Country and Zip Code)	513-794-6100 (Area Code) (Telephone Number)
Mail Address	Post Office Box 237..... Cincinnati OH US 45201 (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	One Financial Way..... Cincinnati OH US 45242 (Street and Number) (City or Town, State, Country and Zip Code)	513-794-6100-6015 (Area Code) (Telephone Number)
Internet Web Site Address	N/A	
Statutory Statement Contact	Amber Dawn Roberts (Name) amber_roberts@ohionational.com (E-Mail Address)	513-794-6100-6015 (Area Code) (Telephone Number) (Extension) 513-794-4516 (Fax Number)

OFFICERS

Name	Title	Name	Title
Gary Thomas Huffman	President, Chairman & Chief Executive Officer	Therese Susan McDonough	Secretary
Doris Lee Paul #	Treasurer	Kush Vijay Kotecha #	Senior Vice President & Chief Corporate Actuary
OTHER			
Thomas Abdo Barefield	Vice Chairman & Chief Distribution Officer	Nancy Arline Dalessio #	Executive Vice President & Chief Administrative Officer
Christopher Allen Carlson	Vice Chairman & Chief Investment Officer	Ronald John Dolan	Vice Chairman & Chief Risk Officer
Kristal Elaine Hambrick	Executive Vice President & Chief Product Officer	Charles Thomas Lanigan #	Senior Vice President
Arthur James Roberts	Senior Vice President & Chief Financial Officer	Dennis Lee Schoff	Senior Vice President & General Counsel, Assistant Secretary, Chief Compliance Officer
Barbara Ann Turner	Senior Vice President		

DIRECTORS OR TRUSTEES

Thomas Abdo Barefield	Ronald John Dolan	Gary Thomas Huffman
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State of..... Ohio
County of..... Hamilton

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) Gary Thomas Huffman	(Signature) Therese Susan McDonough	(Signature) Doris Lee Paul
(Printed Name) President, Chairman & Chief Executive Officer	(Printed Name) Secretary	(Printed Name) Treasurer
(Title)	(Title)	(Title)
Subscribed and sworn to before me This _____ day of February 2016	a. Is this an original filing? b. If no	Yes [X] No [] 1. State the amendment number 2. Date filed 3. Number of pages attached

Roxanna S Henry, Notary Public
May 11, 2019

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN Other Alien # 1 DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	0	0	0	0	0
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	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

NONE

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	0	0	0	(a).....0	0	0	0	0	0	0
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year.....	0	0	0	(a).....0	0	0	0	0	0	0

NONE

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
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).....	0	0	0	0	0

NONE

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF ALASKA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	103,177	0	0	0	103,177
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	103,177	0	0	0	103,177
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	35,281	0	0	0	35,281
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	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.....	35,281	0	0	0	35,281

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	39	18,797,500	0	(a).....0	0	0	0	0	39	18,797,500
21. Issued during year.....	2	2,000,000	0	0	0	0	0	0	2	2,000,000
22. Other changes to in force (Net).....	8	6,365,000	0	0	0	0	0	0	8	6,365,000
23. In force December 31 of current year.....	49	27,162,500	0	(a).....0	0	0	0	0	49	27,162,500

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	1,649	1,653	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	1,649	1,653	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,649	1,653	0	0	0

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF ALABAMA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	6,358,627	0	0	0	6,358,627
2. Annuity considerations.....	240	0	0	0	240
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	6,358,867	0	0	0	6,358,867
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	2,882,716	0	0	0	2,882,716
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	94,652	0	0	0	94,652
12. Surrender values and withdrawals for life contracts.....	487,710	0	0	0	487,710
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.....	3,465,078	0	0	0	3,465,078

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	6	1,758,937	0	0	0	0	0	0	6	1,758,937
17. Incurred during current year.....	10	2,782,716	0	0	0	0	0	0	10	2,782,716
Settled during current year:										
18.1 By payment in full.....	12	3,282,726	0	0	0	0	0	0	12	3,282,726
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	12	3,282,726	0	0	0	0	0	0	12	3,282,726
18.4 Reduction by compromise.....	1	1,000,000	0	0	0	0	0	0	1	1,000,000
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	13	4,282,726	0	0	0	0	0	0	13	4,282,726
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	258,927	0	0	0	0	0	0	3	258,927
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,402	1,965,575,638	0	(a).....0	0	0	0	0	3,402	1,965,575,638
21. Issued during year.....	287	173,164,604	0	0	0	0	0	0	287	173,164,604
22. Other changes to in force (Net).....	(203)	(135,198,668)	0	0	0	0	0	0	(203)	(135,198,668)
23. In force December 31 of current year.....	3,486	2,003,541,574	0	(a).....0	0	0	0	0	3,486	2,003,541,574

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	341,065	341,810	0	347,562	347,562
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	7,667	7,684	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	348,732	349,494	0	347,562	347,562
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	348,732	349,494	0	347,562	347,562

(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 ARKANSAS DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	8,955,772	0	0	0	8,955,772
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	8,955,772	0	0	0	8,955,772
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	2,102,624	0	0	0	2,102,624
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	1,095	0	0	0	1,095
12. Surrender values and withdrawals for life contracts.....	518,414	0	0	0	518,414
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.....	2,622,133	0	0	0	2,622,133

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	1	88,398	0	0	0	0	0	0	1	88,398
17. Incurred during current year.....	6	2,052,624	0	0	0	0	0	0	6	2,052,624
Settled during current year:										
18.1 By payment in full.....	6	2,052,624	0	0	0	0	0	0	6	2,052,624
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	6	2,052,624	0	0	0	0	0	0	6	2,052,624
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	6	2,052,624	0	0	0	0	0	0	6	2,052,624
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	88,398	0	0	0	0	0	0	1	88,398
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	2,582	1,302,723,271	0	(a).....0	0	0	0	0	2,582	1,302,723,271
21. Issued during year.....	282	169,880,419	0	0	0	0	0	0	282	169,880,419
22. Other changes to in force (Net).....	(183)	(78,692,766)	0	0	0	0	0	0	(183)	(78,692,766)
23. In force December 31 of current year.....	2,681	1,393,910,924	0	(a).....0	0	0	0	0	2,681	1,393,910,924

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	123,018	123,286	0	42,208	42,208
25.2 Guaranteed renewable (b).....	3,755	3,764	0	0	0
25.3 Non-renewable for stated reasons only (b).....	1,160	1,162	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	127,933	128,212	0	42,208	42,208
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	127,933	128,212	0	42,208	42,208

(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 AMERICAN SAMOA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	0	0	0	0	0
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	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	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	0	0	0	(a).....0	0	0	0	0	0	0
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year.....	0	0	0	(a).....0	0	0	0	0	0	0

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
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).....	0	0	0	0	0

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	5,874,668	0	0	0	5,874,668
2. Annuity considerations.....	330	0	0	0	330
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	5,874,998	0	0	0	5,874,998
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	3,150,000	0	0	0	3,150,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	17,754	0	0	0	17,754
12. Surrender values and withdrawals for life contracts.....	456,440	0	0	0	456,440
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.....	3,624,194	0	0	0	3,624,194

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	1	10,000	0	0	0	0	0	0	1	10,000
17. Incurred during current year.....	9	3,500,000	0	0	0	0	0	0	9	3,500,000
Settled during current year:										
18.1 By payment in full.....	10	3,510,000	0	0	0	0	0	0	10	3,510,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	10	3,510,000	0	0	0	0	0	0	10	3,510,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	10	3,510,000	0	0	0	0	0	0	10	3,510,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,758	2,518,939,701	0	(a).....0	0	0	0	0	3,758	2,518,939,701
21. Issued during year.....	344	278,895,948	0	0	0	0	0	0	344	278,895,948
22. Other changes to in force (Net).....	(237)	(145,526,856)	0	0	0	0	0	0	(237)	(145,526,856)
23. In force December 31 of current year.....	3,865	2,652,308,793	0	(a).....0	0	0	0	0	3,865	2,652,308,793

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	191,842	192,261	0	41,522	41,522
25.2 Guaranteed renewable (b).....	7,683	7,699	0	0	0
25.3 Non-renewable for stated reasons only (b).....	1,703	1,707	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	201,228	201,667	0	41,522	41,522
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	201,228	201,667	0	41,522	41,522

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	55,771,580	0	0	0	55,771,580
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	1,255,522	XXX	0	XXX	1,255,522
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	57,027,102	0	0	0	57,027,102
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	18,641,066	0	0	0	18,641,066
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	43,759	0	0	0	43,759
12. Surrender values and withdrawals for life contracts.....	4,747,805	0	0	0	4,747,805
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.....	23,432,630	0	0	0	23,432,630

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	17	1,086,020	0	0	0	0	0	0	17	1,086,020
17. Incurred during current year.....	52	17,335,219	0	0	0	0	0	0	52	17,335,219
Settled during current year:										
18.1 By payment in full.....	51	17,902,245	0	0	0	0	0	0	51	17,902,245
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	51	17,902,245	0	0	0	0	0	0	51	17,902,245
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	51	17,902,245	0	0	0	0	0	0	51	17,902,245
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	18	518,994	0	0	0	0	0	0	18	518,994
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	23,277	17,441,757,008	0	(a).....0	0	0	0	0	23,277	17,441,757,008
21. Issued during year.....	2,169	1,828,942,909	0	0	0	0	0	0	2,169	1,828,942,909
22. Other changes to in force (Net).....	(1,619)	(1,123,300,275)	0	0	0	0	0	0	(1,619)	(1,123,300,275)
23. In force December 31 of current year.....	23,827	18,147,399,642	0	(a).....0	0	0	0	0	23,827	18,147,399,642

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	1,291,636	1,294,457	0	5,147,265	5,146,406
25.2 Guaranteed renewable (b).....	8,703	8,722	0	4,000	4,000
25.3 Non-renewable for stated reasons only (b).....	19,967	20,011	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	1,320,306	1,323,190	0	5,151,265	5,150,406
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,320,306	1,323,190	0	5,151,265	5,150,406

(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 CANADA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	7,868	0	0	0	7,868
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	7,868	0	0	0	7,868
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	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	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	9	8,112,500	0	(a).....0	0	0	0	0	9	8,112,500
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	(12,500)	0	0	0	0	0	0	0	(12,500)
23. In force December 31 of current year.....	9	8,100,000	0	(a).....0	0	0	0	0	9	8,100,000

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	48,000	48,000
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	0	0	0	48,000	48,000
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	0	0	0	48,000	48,000

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF COLORADO DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	12,415,903	0	0	0	12,415,903
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	12,415,903	0	0	0	12,415,903
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	1,720,269	0	0	0	1,720,269
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	2,145	0	0	0	2,145
12. Surrender values and withdrawals for life contracts.....	1,279,400	0	0	0	1,279,400
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.....	3,001,814	0	0	0	3,001,814

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	6	1,894,467	0	0	0	0	0	0	6	1,894,467
17. Incurred during current year.....	7	1,789,354	0	0	0	0	0	0	7	1,789,354
Settled during current year:										
18.1 By payment in full.....	7	1,369,354	0	0	0	0	0	0	7	1,369,354
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	7	1,369,354	0	0	0	0	0	0	7	1,369,354
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	7	1,369,354	0	0	0	0	0	0	7	1,369,354
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	6	2,314,467	0	0	0	0	0	0	6	2,314,467
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	6,995	4,339,828,152	0	(a).....0	0	0	0	0	6,995	4,339,828,152
21. Issued during year.....	536	374,625,646	0	0	0	0	0	0	536	374,625,646
22. Other changes to in force (Net).....	(504)	(338,777,632)	0	0	0	0	0	0	(504)	(338,777,632)
23. In force December 31 of current year.....	7,027	4,375,676,166	0	(a).....0	0	0	0	0	7,027	4,375,676,166

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	1,327,354	1,330,253	0	1,824,935	1,763,690
25.2 Guaranteed renewable (b).....	20,078	20,122	0	4,800	4,800
25.3 Non-renewable for stated reasons only (b).....	14,420	14,452	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	1,361,852	1,364,827	0	1,829,735	1,768,490
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,361,852	1,364,827	0	1,829,735	1,768,490

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	8,337,013	0	0	0	8,337,013
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	8,337,013	0	0	0	8,337,013
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	2,499,476	0	0	0	2,499,476
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	3,600	0	0	0	3,600
12. Surrender values and withdrawals for life contracts.....	352,772	0	0	0	352,772
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.....	2,855,848	0	0	0	2,855,848

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	4	1,897,904	0	0	0	0	0	0	4	1,897,904
17. Incurred during current year.....	7	2,420,000	0	0	0	0	0	0	7	2,420,000
Settled during current year:										
18.1 By payment in full.....	9	2,817,904	0	0	0	0	0	0	9	2,817,904
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	9	2,817,904	0	0	0	0	0	0	9	2,817,904
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	9	2,817,904	0	0	0	0	0	0	9	2,817,904
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	1,500,000	0	0	0	0	0	0	2	1,500,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,945	2,454,954,652	0	(a).....0	0	0	0	0	3,945	2,454,954,652
21. Issued during year.....	366	217,539,853	0	0	0	0	0	0	366	217,539,853
22. Other changes to in force (Net).....	(222)	(147,825,093)	0	0	0	0	0	0	(222)	(147,825,093)
23. In force December 31 of current year.....	4,089	2,524,669,412	0	(a).....0	0	0	0	0	4,089	2,524,669,412

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	191,816	192,235	0	0	0
25.2 Guaranteed renewable (b).....	20,037	20,080	0	0	0
25.3 Non-renewable for stated reasons only (b).....	4,189	4,199	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	216,042	216,514	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	216,042	216,514	0	0	0

(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 DISTRICT OF COLUMBIA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	786,495	0	0	0	786,495
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	786,495	0	0	0	786,495
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	1,108	0	0	0	1,108
12. Surrender values and withdrawals for life contracts.....	545	0	0	0	545
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.....	1,653	0	0	0	1,653

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	358	387,378,866	0	(a).....0	0	0	0	0	358	387,378,866
21. Issued during year.....	33	43,677,233	0	0	0	0	0	0	33	43,677,233
22. Other changes to in force (Net).....	(25)	(6,605,895)	0	0	0	0	0	0	(25)	(6,605,895)
23. In force December 31 of current year.....	366	424,450,204	0	(a).....0	0	0	0	0	366	424,450,204

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	51,564	51,677	0	0	19
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	2,578	2,583	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	54,142	54,260	0	0	19
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	54,142	54,260	0	0	19

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF DELAWARE DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	5,827,290	0	0	0	5,827,290
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	5,827,290	0	0	0	5,827,290
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	100,000	0	0	0	100,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	157	0	0	0	157
12. Surrender values and withdrawals for life contracts.....	267,698	0	0	0	267,698
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.....	367,855	0	0	0	367,855

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	1	100,000	0	0	0	0	0	0	1	100,000
Settled during current year:										
18.1 By payment in full.....	1	100,000	0	0	0	0	0	0	1	100,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1	100,000	0	0	0	0	0	0	1	100,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	1	100,000	0	0	0	0	0	0	1	100,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	543	296,874,240	0	(a).....0	0	0	0	0	543	296,874,240
21. Issued during year.....	64	39,974,378	0	0	0	0	0	0	64	39,974,378
22. Other changes to in force (Net).....	(30)	(31,553,082)	0	0	0	0	0	0	(30)	(31,553,082)
23. In force December 31 of current year.....	577	305,295,536	0	(a).....0	0	0	0	0	577	305,295,536

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	34,614	34,690	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	34,614	34,690	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	34,614	34,690	0	0	0

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	26,144,928	0	0	0	26,144,928
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	26,144,928	0	0	0	26,144,928
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	25,063,411	0	0	0	25,063,411
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	150,041	0	0	0	150,041
12. Surrender values and withdrawals for life contracts.....	3,330,969	0	0	0	3,330,969
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.....	28,544,421	0	0	0	28,544,421

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	7	3,842,013	0	0	0	0	0	0	7	3,842,013
17. Incurred during current year.....	48	24,130,945	0	0	0	0	0	0	48	24,130,945
Settled during current year:										
18.1 By payment in full.....	48	20,178,964	0	0	0	0	0	0	48	20,178,964
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	48	20,178,964	0	0	0	0	0	0	48	20,178,964
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	48	20,178,964	0	0	0	0	0	0	48	20,178,964
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	7	7,793,994	0	0	0	0	0	0	7	7,793,994
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	15,485	9,305,372,781	0	(a).....0	0	0	0	0	15,485	9,305,372,781
21. Issued during year.....	1,464	1,018,307,949	0	0	0	0	0	0	1,464	1,018,307,949
22. Other changes to in force (Net).....	(976)	(570,964,394)	0	0	0	0	0	0	(976)	(570,964,394)
23. In force December 31 of current year.....	15,973	9,752,716,336	0	(a).....0	0	0	0	0	15,973	9,752,716,336

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	932,291	934,328	0	1,757,143	1,711,428
25.2 Guaranteed renewable (b).....	10,734	10,758	0	0	0
25.3 Non-renewable for stated reasons only (b).....	34,716	34,792	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	977,741	979,878	0	1,757,143	1,711,428
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	977,741	979,878	0	1,757,143	1,711,428

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	19,715,078	0	0	0	19,715,078
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	200,156	XXX	0	XXX	200,156
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	19,915,234	0	0	0	19,915,234
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	5,899,567	0	0	0	5,899,567
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	30,680	0	0	0	30,680
12. Surrender values and withdrawals for life contracts.....	1,418,591	0	0	0	1,418,591
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.....	7,348,838	0	0	0	7,348,838

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	4	737,042	0	0	0	0	0	0	4	737,042
17. Incurred during current year.....	28	5,699,567	0	0	0	0	0	0	28	5,699,567
Settled during current year:										
18.1 By payment in full.....	27	5,399,567	0	0	0	0	0	0	27	5,399,567
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	27	5,399,567	0	0	0	0	0	0	27	5,399,567
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	27	5,399,567	0	0	0	0	0	0	27	5,399,567
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	5	1,037,042	0	0	0	0	0	0	5	1,037,042
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	9,278	5,442,450,837	0	(a).....0	0	0	0	0	9,278	5,442,450,837
21. Issued during year.....	551	346,107,575	0	0	0	0	0	0	551	346,107,575
22. Other changes to in force (Net).....	(594)	(328,042,740)	0	0	0	0	0	0	(594)	(328,042,740)
23. In force December 31 of current year.....	9,235	5,460,515,672	0	(a).....0	0	0	0	0	9,235	5,460,515,672

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	377,313	378,137	0	504,137	520,437
25.2 Guaranteed renewable (b).....	20,059	20,103	0	0	0
25.3 Non-renewable for stated reasons only (b).....	17,857	17,896	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	415,229	416,136	0	504,137	520,437
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	415,229	416,136	0	504,137	520,437

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	562,002,833	0	0	0	562,002,833
2. Annuity considerations.....	97,843	0	0	0	97,843
3. Deposit-type contract funds.....	3,399,737	XXX	0	XXX	3,399,737
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	565,500,413	0	0	0	565,500,413
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	241,042,648	0	0	0	241,042,648
10. Matured endowments.....	15,580	0	0	0	15,580
11. Annuity benefits.....	4,194,878	0	0	0	4,194,878
12. Surrender values and withdrawals for life contracts.....	77,121,322	0	0	0	77,121,322
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.....	322,374,428	0	0	0	322,374,428

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	181	35,398,680	0	0	0	0	0	0	181	35,398,680
17. Incurred during current year.....	788	240,365,413	0	0	0	0	0	0	788	240,365,413
Settled during current year:										
18.1 By payment in full.....	801	225,651,892	0	0	0	0	0	0	801	225,651,892
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	801	225,651,892	0	0	0	0	0	0	801	225,651,892
18.4 Reduction by compromise.....	2	1,500,000	0	0	0	0	0	0	2	1,500,000
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	803	227,151,892	0	0	0	0	0	0	803	227,151,892
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	166	48,612,202	0	0	0	0	0	0	166	48,612,202
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	262,832	147,838,974,145	0	(a).....0	0	0	0	0	262,832	147,838,974,145
21. Issued during year.....	20,912	14,597,916,669	0	0	0	0	0	0	20,912	14,597,916,669
22. Other changes to in force (Net).....	(16,875)	(8,957,900,638)	0	0	0	0	0	0	(16,875)	(8,957,900,638)
23. In force December 31 of current year.....	266,869	153,478,990,176	0	(a).....0	0	0	0	0	266,869	153,478,990,176

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	17,487,785	17,525,978	0	20,175,660	20,015,406
25.2 Guaranteed renewable (b).....	711,083	712,633	0	254,427	199,976
25.3 Non-renewable for stated reasons only (b).....	575,076	576,329	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	18,773,944	18,814,940	0	20,430,087	20,215,382
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	18,773,944	18,814,940	0	20,430,087	20,215,382

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN GUAM DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	0	0	0	0	0
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	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

NONE

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	0	0	0	(a).....0	0	0	0	0	0	0
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year.....	0	0	0	(a).....0	0	0	0	0	0	0

NONE

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
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).....	0	0	0	0	0

NONE

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF HAWAII DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	115,833	0	0	0	115,833
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	115,833	0	0	0	115,833
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	31,526	0	0	0	31,526
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.....	31,526	0	0	0	31,526

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	1	590,169	0	0	0	0	0	0	1	590,169
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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).....	1	590,169	0	0	0	0	0	0	1	590,169
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	72	47,540,530	0	(a).....0	0	0	0	0	72	47,540,530
21. Issued during year.....	3	2,275,000	0	0	0	0	0	0	3	2,275,000
22. Other changes to in force (Net).....	7	7,590,000	0	0	0	0	0	0	7	7,590,000
23. In force December 31 of current year.....	82	57,405,530	0	(a).....0	0	0	0	0	82	57,405,530

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	6,931	6,946	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	6,931	6,946	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	6,931	6,946	0	0	0

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF IOWA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	5,904,446	0	0	0	5,904,446
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	110,000	XXX	0	XXX	110,000
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	6,014,446	0	0	0	6,014,446
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	1,092,729	0	0	0	1,092,729
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	2,615	0	0	0	2,615
12. Surrender values and withdrawals for life contracts.....	1,719,383	0	0	0	1,719,383
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.....	2,814,727	0	0	0	2,814,727

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	10	483,880	0	0	0	0	0	0	10	483,880
17. Incurred during current year.....	15	1,308,164	0	0	0	0	0	0	15	1,308,164
Settled during current year:										
18.1 By payment in full.....	16	1,358,164	0	0	0	0	0	0	16	1,358,164
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	16	1,358,164	0	0	0	0	0	0	16	1,358,164
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	16	1,358,164	0	0	0	0	0	0	16	1,358,164
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	9	433,880	0	0	0	0	0	0	9	433,880
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,112	1,150,276,938	0	(a).....0	0	0	0	0	4,112	1,150,276,938
21. Issued during year.....	174	79,743,917	0	0	0	0	0	0	174	79,743,917
22. Other changes to in force (Net).....	(242)	(38,580,728)	0	0	0	0	0	0	(242)	(38,580,728)
23. In force December 31 of current year.....	4,044	1,191,440,127	0	(a).....0	0	0	0	0	4,044	1,191,440,127

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	114,831	115,081	0	112,399	108,889
25.2 Guaranteed renewable (b).....	50,312	50,421	0	0	0
25.3 Non-renewable for stated reasons only (b).....	1,281	1,284	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	166,424	166,786	0	112,399	108,889
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	166,424	166,786	0	112,399	108,889

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF IDAHO DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	3,594,741	0	0	0	3,594,741
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	3,594,741	0	0	0	3,594,741
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	4,020,792	0	0	0	4,020,792
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	1,630,585	0	0	0	1,630,585
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.....	5,651,377	0	0	0	5,651,377

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	2	120,000	0	0	0	0	0	0	2	120,000
17. Incurred during current year.....	20	3,583,662	0	0	0	0	0	0	20	3,583,662
Settled during current year:										
18.1 By payment in full.....	22	3,703,662	0	0	0	0	0	0	22	3,703,662
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	22	3,703,662	0	0	0	0	0	0	22	3,703,662
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	22	3,703,662	0	0	0	0	0	0	22	3,703,662
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,357	1,369,252,494	0	(a).....0	0	0	0	0	3,357	1,369,252,494
21. Issued during year.....	192	86,766,178	0	0	0	0	0	0	192	86,766,178
22. Other changes to in force (Net).....	(258)	(82,522,685)	0	0	0	0	0	0	(258)	(82,522,685)
23. In force December 31 of current year.....	3,291	1,373,495,987	0	(a).....0	0	0	0	0	3,291	1,373,495,987

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	200,554	200,992	0	74,570	76,361
25.2 Guaranteed renewable (b).....	20,549	20,594	0	16,033	13,900
25.3 Non-renewable for stated reasons only (b).....	10,114	10,136	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	231,217	231,722	0	90,603	90,261
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	231,217	231,722	0	90,603	90,261

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	19,399,126	0	0	0	19,399,126
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	19,399,126	0	0	0	19,399,126
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	3,378,524	0	0	0	3,378,524
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	107,505	0	0	0	107,505
12. Surrender values and withdrawals for life contracts.....	2,220,090	0	0	0	2,220,090
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.....	5,706,119	0	0	0	5,706,119

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	15	3,261,747	0	0	0	0	0	0	15	3,261,747
Settled during current year:										
18.1 By payment in full.....	15	3,261,747	0	0	0	0	0	0	15	3,261,747
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	15	3,261,747	0	0	0	0	0	0	15	3,261,747
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	15	3,261,747	0	0	0	0	0	0	15	3,261,747
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	8,924	5,083,070,323	0	(a).....0	0	0	0	0	8,924	5,083,070,323
21. Issued during year.....	626	425,748,286	0	0	0	0	0	0	626	425,748,286
22. Other changes to in force (Net).....	(599)	(308,906,147)	0	0	0	0	0	0	(599)	(308,906,147)
23. In force December 31 of current year.....	8,951	5,199,912,462	0	(a).....0	0	0	0	0	8,951	5,199,912,462

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	456,766	457,764	0	170,252	193,452
25.2 Guaranteed renewable (b).....	25,045	25,100	0	21,650	21,650
25.3 Non-renewable for stated reasons only (b).....	23,122	23,172	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	504,933	506,036	0	191,902	215,102
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	504,933	506,036	0	191,902	215,102

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF INDIANA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	8,278,580	0	0	0	8,278,580
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	8,278,580	0	0	0	8,278,580
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	2,717,748	0	0	0	2,717,748
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	134,227	0	0	0	134,227
12. Surrender values and withdrawals for life contracts.....	3,108,099	0	0	0	3,108,099
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.....	5,960,074	0	0	0	5,960,074

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	8	1,153,095	0	0	0	0	0	0	8	1,153,095
17. Incurred during current year.....	15	2,717,748	0	0	0	0	0	0	15	2,717,748
Settled during current year:										
18.1 By payment in full.....	13	2,517,701	0	0	0	0	0	0	13	2,517,701
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	13	2,517,701	0	0	0	0	0	0	13	2,517,701
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	13	2,517,701	0	0	0	0	0	0	13	2,517,701
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	10	1,353,142	0	0	0	0	0	0	10	1,353,142
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	5,224	2,478,458,974	0	(a).....0	0	0	0	0	5,224	2,478,458,974
21. Issued during year.....	229	140,173,899	0	0	0	0	0	0	229	140,173,899
22. Other changes to in force (Net).....	(368)	(166,109,706)	0	0	0	0	0	0	(368)	(166,109,706)
23. In force December 31 of current year.....	5,085	2,452,523,167	0	(a).....0	0	0	0	0	5,085	2,452,523,167

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	239,884	240,408	0	348,682	357,452
25.2 Guaranteed renewable (b).....	13,401	13,430	0	0	0
25.3 Non-renewable for stated reasons only (b).....	1,838	1,842	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	255,123	255,680	0	348,682	357,452
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	255,123	255,680	0	348,682	357,452

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF KANSAS DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	7,169,191	0	0	0	7,169,191
2. Annuity considerations.....	17,086	0	0	0	17,086
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	7,186,277	0	0	0	7,186,277
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	4,575,000	0	0	0	4,575,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	16,789	0	0	0	16,789
12. Surrender values and withdrawals for life contracts.....	2,402,928	0	0	0	2,402,928
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.....	6,994,717	0	0	0	6,994,717

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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	785,667	0	0	0	0	0	0	3	785,667
17. Incurred during current year.....	11	4,650,000	0	0	0	0	0	0	11	4,650,000
Settled during current year:										
18.1 By payment in full.....	14	5,435,667	0	0	0	0	0	0	14	5,435,667
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	14	5,435,667	0	0	0	0	0	0	14	5,435,667
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	14	5,435,667	0	0	0	0	0	0	14	5,435,667
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,907	2,464,900,035	0	(a).....0	0	0	0	0	4,907	2,464,900,035
21. Issued during year.....	285	195,319,490	0	0	0	0	0	0	285	195,319,490
22. Other changes to in force (Net).....	(313)	(154,945,842)	0	0	0	0	0	0	(313)	(154,945,842)
23. In force December 31 of current year.....	4,879	2,505,273,683	0	(a).....0	0	0	0	0	4,879	2,505,273,683

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	289,275	289,907	0	444,833	444,944
25.2 Guaranteed renewable (b).....	25,027	25,082	0	12,750	11,642
25.3 Non-renewable for stated reasons only (b).....	1,127	1,129	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	315,429	316,118	0	457,583	456,586
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	315,429	316,118	0	457,583	456,586

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,516,867	0	0	0	4,516,867
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	4,516,867	0	0	0	4,516,867
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	6,310,322	0	0	0	6,310,322
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	866	0	0	0	866
12. Surrender values and withdrawals for life contracts.....	1,395,151	0	0	0	1,395,151
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.....	7,706,339	0	0	0	7,706,339

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	1	100,000	0	0	0	0	0	0	1	100,000
17. Incurred during current year.....	17	5,073,453	0	0	0	0	0	0	17	5,073,453
Settled during current year:										
18.1 By payment in full.....	17	5,073,453	0	0	0	0	0	0	17	5,073,453
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	17	5,073,453	0	0	0	0	0	0	17	5,073,453
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	17	5,073,453	0	0	0	0	0	0	17	5,073,453
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	100,000	0	0	0	0	0	0	1	100,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,578	1,752,512,153	0	(a).....0	0	0	0	0	3,578	1,752,512,153
21. Issued during year.....	254	172,314,943	0	0	0	0	0	0	254	172,314,943
22. Other changes to in force (Net).....	(234)	(103,297,496)	0	0	0	0	0	0	(234)	(103,297,496)
23. In force December 31 of current year.....	3,598	1,821,529,600	0	(a).....0	0	0	0	0	3,598	1,821,529,600

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	273,541	274,138	0	342,159	342,159
25.2 Guaranteed renewable (b).....	6,181	6,195	0	0	0
25.3 Non-renewable for stated reasons only (b).....	2,361	2,366	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	282,083	282,699	0	342,159	342,159
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	282,083	282,699	0	342,159	342,159

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,462,590	0	0	0	4,462,590
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	4,462,590	0	0	0	4,462,590
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	725,000	0	0	0	725,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	98,157	0	0	0	98,157
12. Surrender values and withdrawals for life contracts.....	105,190	0	0	0	105,190
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.....	928,347	0	0	0	928,347

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	62,970	0	0	0	0	0	0	1	62,970
17. Incurred during current year.....	6	4,725,000	0	0	0	0	0	0	6	4,725,000
Settled during current year:										
18.1 By payment in full.....	6	4,725,000	0	0	0	0	0	0	6	4,725,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	6	4,725,000	0	0	0	0	0	0	6	4,725,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	6	4,725,000	0	0	0	0	0	0	6	4,725,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	62,970	0	0	0	0	0	0	1	62,970
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	2,589	1,704,443,061	0	(a).....0	0	0	0	0	2,589	1,704,443,061
21. Issued during year.....	339	253,598,475	0	0	0	0	0	0	339	253,598,475
22. Other changes to in force (Net).....	(168)	(99,477,297)	0	0	0	0	0	0	(168)	(99,477,297)
23. In force December 31 of current year.....	2,760	1,858,564,239	0	(a).....0	0	0	0	0	2,760	1,858,564,239

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	233,695	234,206	0	130,000	121,977
25.2 Guaranteed renewable (b).....	6,492	6,506	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	240,187	240,712	0	130,000	121,977
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	240,187	240,712	0	130,000	121,977

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	12,680,163	0	0	0	12,680,163
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	12,680,163	0	0	0	12,680,163
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	2,450,000	0	0	0	2,450,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	149,404	0	0	0	149,404
12. Surrender values and withdrawals for life contracts.....	364,861	0	0	0	364,861
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.....	2,964,265	0	0	0	2,964,265

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	2	600,000	0	0	0	0	0	0	2	600,000
17. Incurred during current year.....	5	2,450,000	0	0	0	0	0	0	5	2,450,000
Settled during current year:										
18.1 By payment in full.....	6	2,937,159	0	0	0	0	0	0	6	2,937,159
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	6	2,937,159	0	0	0	0	0	0	6	2,937,159
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	6	2,937,159	0	0	0	0	0	0	6	2,937,159
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	112,841	0	0	0	0	0	0	1	112,841
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	5,492	3,535,095,333	0	(a).....0	0	0	0	0	5,492	3,535,095,333
21. Issued during year.....	587	393,858,293	0	0	0	0	0	0	587	393,858,293
22. Other changes to in force (Net).....	(312)	(211,948,447)	0	0	0	0	0	0	(312)	(211,948,447)
23. In force December 31 of current year.....	5,767	3,717,005,179	0	(a).....0	0	0	0	0	5,767	3,717,005,179

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	186,199	186,606	0	0	0
25.2 Guaranteed renewable (b).....	31,293	31,361	0	22,400	22,267
25.3 Non-renewable for stated reasons only (b).....	4,012	4,021	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	221,504	221,988	0	22,400	22,267
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	221,504	221,988	0	22,400	22,267

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	8,341,265	0	0	0	8,341,265
2. Annuity considerations.....	5,939	0	0	0	5,939
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	8,347,204	0	0	0	8,347,204
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	11,315,460	0	0	0	11,315,460
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	104,598	0	0	0	104,598
12. Surrender values and withdrawals for life contracts.....	530,483	0	0	0	530,483
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.....	11,950,541	0	0	0	11,950,541

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	2	155,000	0	0	0	0	0	0	2	155,000
17. Incurred during current year.....	18	11,150,412	0	0	0	0	0	0	18	11,150,412
Settled during current year:										
18.1 By payment in full.....	16	8,705,412	0	0	0	0	0	0	16	8,705,412
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	16	8,705,412	0	0	0	0	0	0	16	8,705,412
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	16	8,705,412	0	0	0	0	0	0	16	8,705,412
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	4	2,600,000	0	0	0	0	0	0	4	2,600,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	6,140	4,128,096,760	0	(a).....0	0	0	0	0	6,140	4,128,096,760
21. Issued during year.....	500	378,543,675	0	0	0	0	0	0	500	378,543,675
22. Other changes to in force (Net).....	(376)	(241,882,895)	0	0	0	0	0	0	(376)	(241,882,895)
23. In force December 31 of current year.....	6,264	4,264,757,540	0	(a).....0	0	0	0	0	6,264	4,264,757,540

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	460,608	461,614	0	364,987	395,803
25.2 Guaranteed renewable (b).....	15,029	15,062	0	0	0
25.3 Non-renewable for stated reasons only (b).....	7,301	7,317	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	482,938	483,993	0	364,987	395,803
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	482,938	483,993	0	364,987	395,803

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF MAINE DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	7,877,340	0	0	0	7,877,340
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	7,877,340	0	0	0	7,877,340
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	800,000	0	0	0	800,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	2,000	0	0	0	2,000
12. Surrender values and withdrawals for life contracts.....	112,239	0	0	0	112,239
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.....	914,239	0	0	0	914,239

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	1	150,000	0	0	0	0	0	0	1	150,000
17. Incurred during current year.....	2	600,000	0	0	0	0	0	0	2	600,000
Settled during current year:										
18.1 By payment in full.....	2	250,000	0	0	0	0	0	0	2	250,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	2	250,000	0	0	0	0	0	0	2	250,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	2	250,000	0	0	0	0	0	0	2	250,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	500,000	0	0	0	0	0	0	1	500,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,125	556,390,406	0	(a).....0	0	0	0	0	1,125	556,390,406
21. Issued during year.....	77	57,432,620	0	0	0	0	0	0	77	57,432,620
22. Other changes to in force (Net).....	(53)	(21,763,806)	0	0	0	0	0	0	(53)	(21,763,806)
23. In force December 31 of current year.....	1,149	592,059,220	0	(a).....0	0	0	0	0	1,149	592,059,220

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	4,806	4,817	0	56,400	56,400
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	4,806	4,817	0	56,400	56,400
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	4,806	4,817	0	56,400	56,400

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	19,210,742	0	0	0	19,210,742
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	19,210,742	0	0	0	19,210,742
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	6,683,414	0	0	0	6,683,414
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	176,099	0	0	0	176,099
12. Surrender values and withdrawals for life contracts.....	4,037,271	0	0	0	4,037,271
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.....	10,896,784	0	0	0	10,896,784

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	7	443,599	0	0	0	0	0	0	7	443,599
17. Incurred during current year.....	27	7,045,524	0	0	0	0	0	0	27	7,045,524
Settled during current year:										
18.1 By payment in full.....	25	6,449,119	0	0	0	0	0	0	25	6,449,119
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	25	6,449,119	0	0	0	0	0	0	25	6,449,119
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	25	6,449,119	0	0	0	0	0	0	25	6,449,119
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	9	1,040,004	0	0	0	0	0	0	9	1,040,004
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	9,187	4,427,596,057	0	(a).....0	0	0	0	0	9,187	4,427,596,057
21. Issued during year.....	794	488,198,413	0	0	0	0	0	0	794	488,198,413
22. Other changes to in force (Net).....	(663)	(312,046,995)	0	0	0	0	0	0	(663)	(312,046,995)
23. In force December 31 of current year.....	9,318	4,603,747,475	0	(a).....0	0	0	0	0	9,318	4,603,747,475

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	920,058	922,067	0	669,349	666,837
25.2 Guaranteed renewable (b).....	42,262	42,354	0	34,728	34,728
25.3 Non-renewable for stated reasons only (b).....	113,518	113,765	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	1,075,838	1,078,186	0	704,077	701,565
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,075,838	1,078,186	0	704,077	701,565

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	11,982,515	0	0	0	11,982,515
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	11,982,515	0	0	0	11,982,515
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	5,804,921	0	0	0	5,804,921
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	43,007	0	0	0	43,007
12. Surrender values and withdrawals for life contracts.....	988,879	0	0	0	988,879
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.....	6,836,807	0	0	0	6,836,807

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	1	400,000	0	0	0	0	0	0	1	400,000
17. Incurred during current year.....	11	1,257,000	0	0	0	0	0	0	11	1,257,000
Settled during current year:										
18.1 By payment in full.....	10	1,532,000	0	0	0	0	0	0	10	1,532,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	10	1,532,000	0	0	0	0	0	0	10	1,532,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	10	1,532,000	0	0	0	0	0	0	10	1,532,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	125,000	0	0	0	0	0	0	2	125,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,842	2,497,122,933	0	(a).....0	0	0	0	0	4,842	2,497,122,933
21. Issued during year.....	376	222,993,323	0	0	0	0	0	0	376	222,993,323
22. Other changes to in force (Net).....	(339)	(190,767,027)	0	0	0	0	0	0	(339)	(190,767,027)
23. In force December 31 of current year.....	4,879	2,529,349,229	0	(a).....0	0	0	0	0	4,879	2,529,349,229

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	232,082	232,589	0	105,082	105,082
25.2 Guaranteed renewable (b).....	26,293	26,350	0	7,480	10,098
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	258,375	258,939	0	112,562	115,180
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	258,375	258,939	0	112,562	115,180

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	16,498,031	0	0	0	16,498,031
2. Annuity considerations.....	340	0	0	0	340
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	16,498,371	0	0	0	16,498,371
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	2,736,742	0	0	0	2,736,742
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	104,128	0	0	0	104,128
12. Surrender values and withdrawals for life contracts.....	8,433,651	0	0	0	8,433,651
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.....	11,274,521	0	0	0	11,274,521

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	1	30,000	0	0	0	0	0	0	1	30,000
17. Incurred during current year.....	20	4,317,394	0	0	0	0	0	0	20	4,317,394
Settled during current year:										
18.1 By payment in full.....	21	4,347,394	0	0	0	0	0	0	21	4,347,394
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	21	4,347,394	0	0	0	0	0	0	21	4,347,394
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	21	4,347,394	0	0	0	0	0	0	21	4,347,394
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,723	2,036,463,585	0	(a).....0	0	0	0	0	4,723	2,036,463,585
21. Issued during year.....	342	209,737,779	0	0	0	0	0	0	342	209,737,779
22. Other changes to in force (Net).....	(308)	(91,574,965)	0	0	0	0	0	0	(308)	(91,574,965)
23. In force December 31 of current year.....	4,757	2,154,626,399	0	(a).....0	0	0	0	0	4,757	2,154,626,399

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	239,314	239,837	0	420,572	426,327
25.2 Guaranteed renewable (b).....	17,535	17,573	0	6,000	6,000
25.3 Non-renewable for stated reasons only (b).....	2,388	2,394	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	259,237	259,804	0	426,572	432,327
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	259,237	259,804	0	426,572	432,327

(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 NORTHERN MARIANA ISLANDS DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	0	0	0	0	0
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	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	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	0	0	0	(a).....0	0	0	0	0	0	0
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year.....	0	0	0	(a).....0	0	0	0	0	0	0

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
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).....	0	0	0	0	0

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,422,262	0	0	0	2,422,262
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	2,422,262	0	0	0	2,422,262
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	1,800,000	0	0	0	1,800,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	3,600	0	0	0	3,600
12. Surrender values and withdrawals for life contracts.....	318,231	0	0	0	318,231
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.....	2,121,831	0	0	0	2,121,831

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	2	135,000	0	0	0	0	0	0	2	135,000
17. Incurred during current year.....	5	1,675,000	0	0	0	0	0	0	5	1,675,000
Settled during current year:										
18.1 By payment in full.....	6	1,775,000	0	0	0	0	0	0	6	1,775,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	6	1,775,000	0	0	0	0	0	0	6	1,775,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	6	1,775,000	0	0	0	0	0	0	6	1,775,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	35,000	0	0	0	0	0	0	1	35,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,361	779,038,565	0	(a).....0	0	0	0	0	1,361	779,038,565
21. Issued during year.....	133	91,261,860	0	0	0	0	0	0	133	91,261,860
22. Other changes to in force (Net).....	(108)	(53,693,748)	0	0	0	0	0	0	(108)	(53,693,748)
23. In force December 31 of current year.....	1,386	816,606,677	0	(a).....0	0	0	0	0	1,386	816,606,677

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	181,625	182,022	0	208,565	208,660
25.2 Guaranteed renewable (b).....	3,502	3,509	0	58	58
25.3 Non-renewable for stated reasons only (b).....	2,014	2,018	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	187,141	187,549	0	208,623	208,718
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	187,141	187,549	0	208,623	208,718

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF MONTANA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	7,577,781	0	0	0	7,577,781
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	7,577,781	0	0	0	7,577,781
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	510,000	0	0	0	510,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	1,953	0	0	0	1,953
12. Surrender values and withdrawals for life contracts.....	288,158	0	0	0	288,158
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.....	800,111	0	0	0	800,111

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	6	684,108	0	0	0	0	0	0	6	684,108
Settled during current year:										
18.1 By payment in full.....	4	424,108	0	0	0	0	0	0	4	424,108
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	4	424,108	0	0	0	0	0	0	4	424,108
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	4	424,108	0	0	0	0	0	0	4	424,108
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	260,000	0	0	0	0	0	0	2	260,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	2,095	998,970,556	0	(a).....0	0	0	0	0	2,095	998,970,556
21. Issued during year.....	203	109,214,482	0	0	0	0	0	0	203	109,214,482
22. Other changes to in force (Net).....	(144)	(63,058,107)	0	0	0	0	0	0	(144)	(63,058,107)
23. In force December 31 of current year.....	2,154	1,045,126,931	0	(a).....0	0	0	0	0	2,154	1,045,126,931

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	78,007	78,177	0	24,000	24,000
25.2 Guaranteed renewable (b).....	2,632	2,638	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	80,639	80,815	0	24,000	24,000
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	80,639	80,815	0	24,000	24,000

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

NAIC Group Code.....0704

NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	12,589,083	0	0	0	12,589,083
2. Annuity considerations.....	5,580	0	0	0	5,580
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	12,594,663	0	0	0	12,594,663
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	5,695,588	0	0	0	5,695,588
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	831,941	0	0	0	831,941
12. Surrender values and withdrawals for life contracts.....	1,296,097	0	0	0	1,296,097
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.....	7,823,626	0	0	0	7,823,626

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	6	903,521	0	0	0	0	0	0	6	903,521
17. Incurred during current year.....	19	4,035,207	0	0	0	0	0	0	19	4,035,207
Settled during current year:										
18.1 By payment in full.....	21	4,359,207	0	0	0	0	0	0	21	4,359,207
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	21	4,359,207	0	0	0	0	0	0	21	4,359,207
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	21	4,359,207	0	0	0	0	0	0	21	4,359,207
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	4	579,521	0	0	0	0	0	0	4	579,521
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	6,791	4,095,625,911	0	(a).....0	0	0	0	0	6,791	4,095,625,911
21. Issued during year.....	416	346,056,465	0	0	0	0	0	0	416	346,056,465
22. Other changes to in force (Net).....	(372)	(228,667,199)	0	0	0	0	0	0	(372)	(228,667,199)
23. In force December 31 of current year.....	6,835	4,213,015,177	0	(a).....0	0	0	0	0	6,835	4,213,015,177

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	464,007	465,020	0	380,498	380,498
25.2 Guaranteed renewable (b).....	1,081	1,084	0	6,090	6,042
25.3 Non-renewable for stated reasons only (b).....	5,797	5,809	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	470,885	471,913	0	386,588	386,540
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	470,885	471,913	0	386,588	386,540

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,043,176	0	0	0	1,043,176
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	1,043,176	0	0	0	1,043,176
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	1,134,975	0	0	0	1,134,975
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	528,446	0	0	0	528,446
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.....	1,663,421	0	0	0	1,663,421

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	11	2,034,975	0	0	0	0	0	0	11	2,034,975
Settled during current year:										
18.1 By payment in full.....	11	2,034,975	0	0	0	0	0	0	11	2,034,975
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	11	2,034,975	0	0	0	0	0	0	11	2,034,975
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	11	2,034,975	0	0	0	0	0	0	11	2,034,975
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,054	443,056,916	0	(a).....0	0	0	0	0	1,054	443,056,916
21. Issued during year.....	62	53,220,917	0	0	0	0	0	0	62	53,220,917
22. Other changes to in force (Net).....	(78)	(38,773,430)	0	0	0	0	0	0	(78)	(38,773,430)
23. In force December 31 of current year.....	1,038	457,504,403	0	(a).....0	0	0	0	0	1,038	457,504,403

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	40,822	40,911	0	217	(1,482)
25.2 Guaranteed renewable (b).....	8,438	8,456	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	49,260	49,367	0	217	(1,482)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	49,260	49,367	0	217	(1,482)

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,822,933	0	0	0	4,822,933
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	4,822,933	0	0	0	4,822,933
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	4,778,599	0	0	0	4,778,599
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	12,569	0	0	0	12,569
12. Surrender values and withdrawals for life contracts.....	1,239,695	0	0	0	1,239,695
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.....	6,030,863	0	0	0	6,030,863

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	28	5,041,954	0	0	0	0	0	0	28	5,041,954
Settled during current year:										
18.1 By payment in full.....	28	5,041,954	0	0	0	0	0	0	28	5,041,954
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	28	5,041,954	0	0	0	0	0	0	28	5,041,954
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	28	5,041,954	0	0	0	0	0	0	28	5,041,954
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,375	1,312,889,724	0	(a).....0	0	0	0	0	4,375	1,312,889,724
21. Issued during year.....	134	62,948,510	0	0	0	0	0	0	134	62,948,510
22. Other changes to in force (Net).....	(257)	(59,133,938)	0	0	0	0	0	0	(257)	(59,133,938)
23. In force December 31 of current year.....	4,252	1,316,704,296	0	(a).....0	0	0	0	0	4,252	1,316,704,296

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	105,452	105,682	0	29,400	28,770
25.2 Guaranteed renewable (b).....	14,687	14,719	0	15,007	15,007
25.3 Non-renewable for stated reasons only (b).....	14,119	14,150	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	134,258	134,551	0	44,407	43,777
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	134,258	134,551	0	44,407	43,777

(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 NEW HAMPSHIRE DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,377,180	0	0	0	2,377,180
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	2,377,180	0	0	0	2,377,180
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	420,000	0	0	0	420,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	700,874	0	0	0	700,874
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.....	1,120,874	0	0	0	1,120,874

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	2	270,000	0	0	0	0	0	0	2	270,000
Settled during current year:										
18.1 By payment in full.....	2	270,000	0	0	0	0	0	0	2	270,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	2	270,000	0	0	0	0	0	0	2	270,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	2	270,000	0	0	0	0	0	0	2	270,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,587	951,694,629	0	(a).....0	0	0	0	0	1,587	951,694,629
21. Issued during year.....	190	129,776,493	0	0	0	0	0	0	190	129,776,493
22. Other changes to in force (Net).....	(93)	(66,047,250)	0	0	0	0	0	0	(93)	(66,047,250)
23. In force December 31 of current year.....	1,684	1,015,423,872	0	(a).....0	0	0	0	0	1,684	1,015,423,872

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	84,479	84,663	0	0	0
25.2 Guaranteed renewable (b).....	2,127	2,132	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	86,606	86,795	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	86,606	86,795	0	0	0

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF NEW JERSEY DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	17,431,369	0	0	0	17,431,369
2. Annuity considerations.....	400	0	0	0	400
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	17,431,769	0	0	0	17,431,769
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	8,750,000	0	0	0	8,750,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	14,079	0	0	0	14,079
12. Surrender values and withdrawals for life contracts.....	829,748	0	0	0	829,748
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.....	9,593,827	0	0	0	9,593,827

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	2	2,285,342	0	0	0	0	0	0	2	2,285,342
17. Incurred during current year.....	9	8,896,749	0	0	0	0	0	0	9	8,896,749
Settled during current year:										
18.1 By payment in full.....	9	9,032,091	0	0	0	0	0	0	9	9,032,091
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	9	9,032,091	0	0	0	0	0	0	9	9,032,091
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	9	9,032,091	0	0	0	0	0	0	9	9,032,091
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	2,150,001	0	0	0	0	0	0	2	2,150,001
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	5,403	3,678,794,194	0	(a).....0	0	0	0	0	5,403	3,678,794,194
21. Issued during year.....	685	462,322,739	0	0	0	0	0	0	685	462,322,739
22. Other changes to in force (Net).....	(311)	(209,169,204)	0	0	0	0	0	0	(311)	(209,169,204)
23. In force December 31 of current year.....	5,777	3,931,947,729	0	(a).....0	0	0	0	0	5,777	3,931,947,729

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	429,128	430,066	0	694,473	691,263
25.2 Guaranteed renewable (b).....	0	0	0	0	633
25.3 Non-renewable for stated reasons only (b).....	20,492	20,536	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	449,620	450,602	0	694,473	691,896
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	449,620	450,602	0	694,473	691,896

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,109,073	0	0	0	1,109,073
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	1,109,073	0	0	0	1,109,073
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	260,000	0	0	0	260,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	606,809	0	0	0	606,809
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.....	866,809	0	0	0	866,809

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	1	260,000	0	0	0	0	0	0	1	260,000
Settled during current year:										
18.1 By payment in full.....	1	260,000	0	0	0	0	0	0	1	260,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1	260,000	0	0	0	0	0	0	1	260,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	1	260,000	0	0	0	0	0	0	1	260,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	566	273,168,362	0	(a).....0	0	0	0	0	566	273,168,362
21. Issued during year.....	39	26,936,332	0	0	0	0	0	0	39	26,936,332
22. Other changes to in force (Net).....	(40)	(17,690,664)	0	0	0	0	0	0	(40)	(17,690,664)
23. In force December 31 of current year.....	565	282,414,030	0	(a).....0	0	0	0	0	565	282,414,030

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	35,889	35,967	0	37,600	37,600
25.2 Guaranteed renewable (b).....	239	240	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	36,128	36,207	0	37,600	37,600
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	36,128	36,207	0	37,600	37,600

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF NEVADA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,875,152	0	0	0	1,875,152
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	1,875,152	0	0	0	1,875,152
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	1,215,000	0	0	0	1,215,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	429,256	0	0	0	429,256
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.....	1,644,256	0	0	0	1,644,256

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	2	800,000	0	0	0	0	0	0	2	800,000
Settled during current year:										
18.1 By payment in full.....	2	800,000	0	0	0	0	0	0	2	800,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	2	800,000	0	0	0	0	0	0	2	800,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	2	800,000	0	0	0	0	0	0	2	800,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,004	682,659,618	0	(a).....0	0	0	0	0	1,004	682,659,618
21. Issued during year.....	68	55,355,000	0	0	0	0	0	0	68	55,355,000
22. Other changes to in force (Net).....	(63)	(20,550,150)	0	0	0	0	0	0	(63)	(20,550,150)
23. In force December 31 of current year.....	1,009	717,464,468	0	(a).....0	0	0	0	0	1,009	717,464,468

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	56,538	56,662	0	5,653	5,653
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	56,538	56,662	0	5,653	5,653
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	56,538	56,662	0	5,653	5,653

(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 NEW YORK DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	905,735	0	0	0	905,735
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	905,735	0	0	0	905,735
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	189,522	0	0	0	189,522
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.....	189,522	0	0	0	189,522

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	385	375,910,590	0	(a).....0	0	0	0	0	385	375,910,590
21. Issued during year.....	13	10,728,667	0	0	0	0	0	0	13	10,728,667
22. Other changes to in force (Net).....	(5)	(10,249,606)	0	0	0	0	0	0	(5)	(10,249,606)
23. In force December 31 of current year.....	393	376,389,651	0	(a).....0	0	0	0	0	393	376,389,651

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	45,249	45,348	0	35,850	35,850
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	45,249	45,348	0	35,850	35,850
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	45,249	45,348	0	35,850	35,850

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	39,583,970	0	0	0	39,583,970
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	1,117,687	XXX	0	XXX	1,117,687
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	40,701,657	0	0	0	40,701,657
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	18,758,133	0	0	0	18,758,133
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	239,682	0	0	0	239,682
12. Surrender values and withdrawals for life contracts.....	10,875,065	0	0	0	10,875,065
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.....	29,872,880	0	0	0	29,872,880

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	39	4,150,674	0	0	0	0	0	0	39	4,150,674
17. Incurred during current year.....	99	21,523,429	0	0	0	0	0	0	99	21,523,429
Settled during current year:										
18.1 By payment in full.....	103	23,473,787	0	0	0	0	0	0	103	23,473,787
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	103	23,473,787	0	0	0	0	0	0	103	23,473,787
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	103	23,473,787	0	0	0	0	0	0	103	23,473,787
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	35	2,200,316	0	0	0	0	0	0	35	2,200,316
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	22,913	10,217,336,657	0	(a).....0	0	0	0	0	22,913	10,217,336,657
21. Issued during year.....	1,393	853,108,343	0	0	0	0	0	0	1,393	853,108,343
22. Other changes to in force (Net).....	(1,452)	(536,380,486)	0	0	0	0	0	0	(1,452)	(536,380,486)
23. In force December 31 of current year.....	22,854	10,534,064,514	0	(a).....0	0	0	0	0	22,854	10,534,064,514

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	1,527,280	1,530,615	0	935,518	947,398
25.2 Guaranteed renewable (b).....	53,962	54,080	0	12,927	12,927
25.3 Non-renewable for stated reasons only (b).....	24,145	24,197	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	1,605,387	1,608,892	0	948,445	960,325
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,605,387	1,608,892	0	948,445	960,325

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	7,352,015	0	0	0	7,352,015
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	7,352,015	0	0	0	7,352,015
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	6,612,128	0	0	0	6,612,128
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	2,000	0	0	0	2,000
12. Surrender values and withdrawals for life contracts.....	280,836	0	0	0	280,836
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.....	6,894,964	0	0	0	6,894,964

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	1	3,000,000	0	0	0	0	0	0	1	3,000,000
17. Incurred during current year.....	9	6,594,037	0	0	0	0	0	0	9	6,594,037
Settled during current year:										
18.1 By payment in full.....	8	1,594,037	0	0	0	0	0	0	8	1,594,037
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	8	1,594,037	0	0	0	0	0	0	8	1,594,037
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	8	1,594,037	0	0	0	0	0	0	8	1,594,037
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	8,000,000	0	0	0	0	0	0	2	8,000,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,413	1,678,749,352	0	(a).....0	0	0	0	0	3,413	1,678,749,352
21. Issued during year.....	364	251,901,084	0	0	0	0	0	0	364	251,901,084
22. Other changes to in force (Net).....	(165)	(81,364,072)	0	0	0	0	0	0	(165)	(81,364,072)
23. In force December 31 of current year.....	3,612	1,849,286,364	0	(a).....0	0	0	0	0	3,612	1,849,286,364

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	253,410	253,963	0	36,000	36,000
25.2 Guaranteed renewable (b).....	4,950	4,960	0	0	0
25.3 Non-renewable for stated reasons only (b).....	6,602	6,616	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	264,962	265,539	0	36,000	36,000
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	264,962	265,539	0	36,000	36,000

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF OREGON DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	6,112,272	0	0	0	6,112,272
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	6,112,272	0	0	0	6,112,272
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	2,739,707	0	0	0	2,739,707
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	2,056,535	0	0	0	2,056,535
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.....	4,796,242	0	0	0	4,796,242

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	1	160,000	0	0	0	0	0	0	1	160,000
17. Incurred during current year.....	8	2,214,707	0	0	0	0	0	0	8	2,214,707
Settled during current year:										
18.1 By payment in full.....	7	1,660,000	0	0	0	0	0	0	7	1,660,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	7	1,660,000	0	0	0	0	0	0	7	1,660,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	7	1,660,000	0	0	0	0	0	0	7	1,660,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	714,707	0	0	0	0	0	0	2	714,707
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,977	2,204,310,580	0	(a).....0	0	0	0	0	3,977	2,204,310,580
21. Issued during year.....	401	264,966,438	0	0	0	0	0	0	401	264,966,438
22. Other changes to in force (Net).....	(240)	(127,879,122)	0	0	0	0	0	0	(240)	(127,879,122)
23. In force December 31 of current year.....	4,138	2,341,397,896	0	(a).....0	0	0	0	0	4,138	2,341,397,896

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	225,989	226,482	0	120,422	118,495
25.2 Guaranteed renewable (b).....	20,937	20,982	0	0	0
25.3 Non-renewable for stated reasons only (b).....	20,577	20,621	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	267,503	268,085	0	120,422	118,495
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	267,503	268,085	0	120,422	118,495

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN OTHER ALIEN GRAND TOTAL DURING THE YEAR

NAIC Group Code.....0704

NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	0	0	0	0	0
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	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

NONE

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	0	0	0	(a).....0	0	0	0	0	0	0
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year.....	0	0	0	(a).....0	0	0	0	0	0	0

NONE

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
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).....	0	0	0	0	0

NONE

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	19,009,585	0	0	0	19,009,585
2. Annuity considerations.....	57,155	0	0	0	57,155
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	19,066,740	0	0	0	19,066,740
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	12,716,323	0	0	0	12,716,323
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	1,033,541	0	0	0	1,033,541
12. Surrender values and withdrawals for life contracts.....	2,831,394	0	0	0	2,831,394
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.....	16,581,258	0	0	0	16,581,258

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	88	13,737,390	0	0	0	0	0	0	88	13,737,390
Settled during current year:										
18.1 By payment in full.....	86	10,245,390	0	0	0	0	0	0	86	10,245,390
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	86	10,245,390	0	0	0	0	0	0	86	10,245,390
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	86	10,245,390	0	0	0	0	0	0	86	10,245,390
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	3,492,000	0	0	0	0	0	0	2	3,492,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	14,477	6,257,357,912	0	(a).....0	0	0	0	0	14,477	6,257,357,912
21. Issued during year.....	845	563,916,537	0	0	0	0	0	0	845	563,916,537
22. Other changes to in force (Net).....	(925)	(435,445,333)	0	0	0	0	0	0	(925)	(435,445,333)
23. In force December 31 of current year.....	14,397	6,385,829,116	0	(a).....0	0	0	0	0	14,397	6,385,829,116

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	905,441	907,418	0	388,936	311,973
25.2 Guaranteed renewable (b).....	121,746	122,012	0	54,556	0
25.3 Non-renewable for stated reasons only (b).....	30,213	30,279	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	1,057,400	1,059,709	0	443,492	311,973
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,057,400	1,059,709	0	443,492	311,973

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN PUERTO RICO DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,527,234	0	0	0	4,527,234
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	4,527,234	0	0	0	4,527,234
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	250,000	0	0	0	250,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	625,259	0	0	0	625,259
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.....	875,259	0	0	0	875,259

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	1	100,000	0	0	0	0	0	0	1	100,000
17. Incurred during current year.....	2	750,000	0	0	0	0	0	0	2	750,000
Settled during current year:										
18.1 By payment in full.....	2	350,000	0	0	0	0	0	0	2	350,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	2	350,000	0	0	0	0	0	0	2	350,000
18.4 Reduction by compromise.....	1	500,000	0	0	0	0	0	0	1	500,000
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	3	850,000	0	0	0	0	0	0	3	850,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,120	1,119,327,862	0	(a).....0	0	0	0	0	1,120	1,119,327,862
21. Issued during year.....	46	39,298,612	0	0	0	0	0	0	46	39,298,612
22. Other changes to in force (Net).....	(60)	(44,556,630)	0	0	0	0	0	0	(60)	(44,556,630)
23. In force December 31 of current year.....	1,106	1,114,069,844	0	(a).....0	0	0	0	0	1,106	1,114,069,844

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	898,957	900,920	0	410	410
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	48,821	48,928	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	947,778	949,848	0	410	410
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	947,778	949,848	0	410	410

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,303,492	0	0	0	1,303,492
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	1,303,492	0	0	0	1,303,492
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	1,710,000	0	0	0	1,710,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	44,288	0	0	0	44,288
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.....	1,754,288	0	0	0	1,754,288

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	1	270,909	0	0	0	0	0	0	1	270,909
17. Incurred during current year.....	5	1,610,000	0	0	0	0	0	0	5	1,610,000
Settled during current year:										
18.1 By payment in full.....	5	1,610,000	0	0	0	0	0	0	5	1,610,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	5	1,610,000	0	0	0	0	0	0	5	1,610,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	5	1,610,000	0	0	0	0	0	0	5	1,610,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	270,909	0	0	0	0	0	0	1	270,909
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,148	656,140,315	0	(a).....0	0	0	0	0	1,148	656,140,315
21. Issued during year.....	129	70,330,743	0	0	0	0	0	0	129	70,330,743
22. Other changes to in force (Net).....	(68)	(47,308,578)	0	0	0	0	0	0	(68)	(47,308,578)
23. In force December 31 of current year.....	1,209	679,162,480	0	(a).....0	0	0	0	0	1,209	679,162,480

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	37,756	37,839	0	0	0
25.2 Guaranteed renewable (b).....	2,500	2,505	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	40,256	40,344	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	40,256	40,344	0	0	0

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	9,228,107	0	0	0	9,228,107
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	9,228,107	0	0	0	9,228,107
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	1,590,748	0	0	0	1,590,748
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	13,619	0	0	0	13,619
12. Surrender values and withdrawals for life contracts.....	344,523	0	0	0	344,523
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.....	1,948,890	0	0	0	1,948,890

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	2	523,481	0	0	0	0	0	0	2	523,481
17. Incurred during current year.....	8	1,880,198	0	0	0	0	0	0	8	1,880,198
Settled during current year:										
18.1 By payment in full.....	7	1,605,954	0	0	0	0	0	0	7	1,605,954
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	7	1,605,954	0	0	0	0	0	0	7	1,605,954
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	7	1,605,954	0	0	0	0	0	0	7	1,605,954
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	797,725	0	0	0	0	0	0	3	797,725
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	2,971	1,448,620,363	0	(a).....0	0	0	0	0	2,971	1,448,620,363
21. Issued during year.....	296	175,527,674	0	0	0	0	0	0	296	175,527,674
22. Other changes to in force (Net).....	(143)	(52,274,074)	0	0	0	0	0	0	(143)	(52,274,074)
23. In force December 31 of current year.....	3,124	1,571,873,963	0	(a).....0	0	0	0	0	3,124	1,571,873,963

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	92,845	93,047	0	72,325	68,895
25.2 Guaranteed renewable (b).....	8,245	8,263	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	101,090	101,310	0	72,325	68,895
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	101,090	101,310	0	72,325	68,895

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	552,186	0	0	0	552,186
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	552,186	0	0	0	552,186
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	200,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	15,744	0	0	0	15,744
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.....	215,744	0	0	0	215,744

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	430	204,468,236	0	(a).....0	0	0	0	0	430	204,468,236
21. Issued during year.....	26	21,225,000	0	0	0	0	0	0	26	21,225,000
22. Other changes to in force (Net).....	(22)	(2,874,490)	0	0	0	0	0	0	(22)	(2,874,490)
23. In force December 31 of current year.....	434	222,818,746	0	(a).....0	0	0	0	0	434	222,818,746

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	27,047	27,106	0	0	0
25.2 Guaranteed renewable (b).....	536	537	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	27,583	27,643	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	27,583	27,643	0	0	0

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	22,450,907	0	0	0	22,450,907
2. Annuity considerations.....	4,000	0	0	0	4,000
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	22,454,907	0	0	0	22,454,907
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	8,043,760	0	0	0	8,043,760
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	600,853	0	0	0	600,853
12. Surrender values and withdrawals for life contracts.....	3,854,729	0	0	0	3,854,729
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.....	12,499,342	0	0	0	12,499,342

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	2	413,580	0	0	0	0	0	0	2	413,580
17. Incurred during current year.....	30	7,185,035	0	0	0	0	0	0	30	7,185,035
Settled during current year:										
18.1 By payment in full.....	32	7,598,615	0	0	0	0	0	0	32	7,598,615
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	32	7,598,615	0	0	0	0	0	0	32	7,598,615
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	32	7,598,615	0	0	0	0	0	0	32	7,598,615
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	8,403	4,971,271,481	0	(a).....0	0	0	0	0	8,403	4,971,271,481
21. Issued during year.....	544	391,413,275	0	0	0	0	0	0	544	391,413,275
22. Other changes to in force (Net).....	(520)	(261,456,584)	0	0	0	0	0	0	(520)	(261,456,584)
23. In force December 31 of current year.....	8,427	5,101,228,172	0	(a).....0	0	0	0	0	8,427	5,101,228,172

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	516,300	517,428	0	201,144	196,103
25.2 Guaranteed renewable (b).....	11,117	11,141	0	0	0
25.3 Non-renewable for stated reasons only (b).....	54,962	55,082	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	582,379	583,651	0	201,144	196,103
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	582,379	583,651	0	201,144	196,103

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF TEXAS DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	54,003,523	0	0	0	54,003,523
2. Annuity considerations.....	113	0	0	0	113
3. Deposit-type contract funds.....	503,782	XXX	0	XXX	503,782
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	54,507,418	0	0	0	54,507,418
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	19,488,576	0	0	0	19,488,576
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	2,154	0	0	0	2,154
12. Surrender values and withdrawals for life contracts.....	4,631,065	0	0	0	4,631,065
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.....	24,121,795	0	0	0	24,121,795

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	17	2,411,557	0	0	0	0	0	0	17	2,411,557
17. Incurred during current year.....	55	18,916,155	0	0	0	0	0	0	55	18,916,155
Settled during current year:										
18.1 By payment in full.....	53	17,477,711	0	0	0	0	0	0	53	17,477,711
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	53	17,477,711	0	0	0	0	0	0	53	17,477,711
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	53	17,477,711	0	0	0	0	0	0	53	17,477,711
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	19	3,850,001	0	0	0	0	0	0	19	3,850,001
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	18,756	11,640,008,540	0	(a).....0	0	0	0	0	18,756	11,640,008,540
21. Issued during year.....	1,581	1,148,786,622	0	0	0	0	0	0	1,581	1,148,786,622
22. Other changes to in force (Net).....	(1,216)	(744,890,752)	0	0	0	0	0	0	(1,216)	(744,890,752)
23. In force December 31 of current year.....	19,121	12,043,904,410	0	(a).....0	0	0	0	0	19,121	12,043,904,410

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	1,251,422	1,254,155	0	1,491,265	1,439,144
25.2 Guaranteed renewable (b).....	6,880	6,895	0	0	1,533
25.3 Non-renewable for stated reasons only (b).....	19,268	19,310	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	1,277,570	1,280,360	0	1,491,265	1,440,677
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,277,570	1,280,360	0	1,491,265	1,440,677

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF UTAH DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	5,327,390	0	0	0	5,327,390
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	5,327,390	0	0	0	5,327,390
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	5,264,456	0	0	0	5,264,456
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	667,152	0	0	0	667,152
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.....	5,931,608	0	0	0	5,931,608

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	5	2,200,000	0	0	0	0	0	0	5	2,200,000
17. Incurred during current year.....	6	5,761,188	0	0	0	0	0	0	6	5,761,188
Settled during current year:										
18.1 By payment in full.....	10	7,861,188	0	0	0	0	0	0	10	7,861,188
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	10	7,861,188	0	0	0	0	0	0	10	7,861,188
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	10	7,861,188	0	0	0	0	0	0	10	7,861,188
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	100,000	0	0	0	0	0	0	1	100,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,877	3,240,512,228	0	(a).....0	0	0	0	0	4,877	3,240,512,228
21. Issued during year.....	788	671,010,375	0	0	0	0	0	0	788	671,010,375
22. Other changes to in force (Net).....	(291)	(137,448,481)	0	0	0	0	0	0	(291)	(137,448,481)
23. In force December 31 of current year.....	5,374	3,774,074,122	0	(a).....0	0	0	0	0	5,374	3,774,074,122

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	159,790	160,139	0	0	0
25.2 Guaranteed renewable (b).....	9,603	9,624	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	169,393	169,763	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	169,393	169,763	0	0	0

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	30,578,843	0	0	0	30,578,843
2. Annuity considerations.....	1,260	0	0	0	1,260
3. Deposit-type contract funds.....	212,590	XXX	0	XXX	212,590
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	30,792,693	0	0	0	30,792,693
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	19,748,937	0	0	0	19,748,937
10. Matured endowments.....	15,580	0	0	0	15,580
11. Annuity benefits.....	90,336	0	0	0	90,336
12. Surrender values and withdrawals for life contracts.....	1,504,592	0	0	0	1,504,592
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.....	21,359,445	0	0	0	21,359,445

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	1	208,101	0	0	0	0	0	0	1	208,101
17. Incurred during current year.....	22	20,091,055	0	0	0	0	0	0	22	20,091,055
Settled during current year:										
18.1 By payment in full.....	21	15,183,793	0	0	0	0	0	0	21	15,183,793
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	21	15,183,793	0	0	0	0	0	0	21	15,183,793
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	21	15,183,793	0	0	0	0	0	0	21	15,183,793
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	5,115,363	0	0	0	0	0	0	2	5,115,363
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	7,003	4,276,822,200	0	(a).....0	0	0	0	0	7,003	4,276,822,200
21. Issued during year.....	616	419,459,555	0	0	0	0	0	0	616	419,459,555
22. Other changes to in force (Net).....	(532)	(302,425,369)	0	0	0	0	0	0	(532)	(302,425,369)
23. In force December 31 of current year.....	7,087	4,393,856,386	0	(a).....0	0	0	0	0	7,087	4,393,856,386

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	325,576	326,287	0	1,019,404	1,033,138
25.2 Guaranteed renewable (b).....	7,207	7,223	0	2,055	2,055
25.3 Non-renewable for stated reasons only (b).....	7,301	7,317	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	340,084	340,827	0	1,021,459	1,035,193
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	340,084	340,827	0	1,021,459	1,035,193

(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 U.S. VIRGIN ISLANDS DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	15,444	0	0	0	15,444
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	15,444	0	0	0	15,444
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	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	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4	2,300,000	0	(a).....0	0	0	0	0	4	2,300,000
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	1	500,000	0	0	0	0	0	0	1	500,000
23. In force December 31 of current year.....	5	2,800,000	0	(a).....0	0	0	0	0	5	2,800,000

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	0	0	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
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).....	0	0	0	0	0

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF VERMONT DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	537,404	0	0	0	537,404
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	537,404	0	0	0	537,404
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	720	0	0	0	720
12. Surrender values and withdrawals for life contracts.....	53,343	0	0	0	53,343
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.....	54,063	0	0	0	54,063

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	1	180,000	0	0	0	0	0	0	1	180,000
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	1	180,000	0	0	0	0	0	0	1	180,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1	180,000	0	0	0	0	0	0	1	180,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	1	180,000	0	0	0	0	0	0	1	180,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	520	269,168,606	0	(a).....0	0	0	0	0	520	269,168,606
21. Issued during year.....	49	36,650,000	0	0	0	0	0	0	49	36,650,000
22. Other changes to in force (Net).....	(31)	(35,658,870)	0	0	0	0	0	0	(31)	(35,658,870)
23. In force December 31 of current year.....	538	270,159,736	0	(a).....0	0	0	0	0	538	270,159,736

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	7,505	7,522	0	0	0
25.2 Guaranteed renewable (b).....	2,214	2,219	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	9,719	9,741	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	9,719	9,741	0	0	0

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF WASHINGTON DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	17,188,298	0	0	0	17,188,298
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	17,188,298	0	0	0	17,188,298
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	2,570,843	0	0	0	2,570,843
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	992,085	0	0	0	992,085
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.....	3,562,928	0	0	0	3,562,928

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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	343,046	0	0	0	0	0	0	3	343,046
17. Incurred during current year.....	13	2,354,794	0	0	0	0	0	0	13	2,354,794
Settled during current year:										
18.1 By payment in full.....	16	2,697,840	0	0	0	0	0	0	16	2,697,840
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	16	2,697,840	0	0	0	0	0	0	16	2,697,840
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	16	2,697,840	0	0	0	0	0	0	16	2,697,840
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	5,953	3,464,268,812	0	(a).....0	0	0	0	0	5,953	3,464,268,812
21. Issued during year.....	539	433,552,800	0	0	0	0	0	0	539	433,552,800
22. Other changes to in force (Net).....	(367)	(199,203,172)	0	0	0	0	0	0	(367)	(199,203,172)
23. In force December 31 of current year.....	6,125	3,698,618,440	0	(a).....0	0	0	0	0	6,125	3,698,618,440

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	339,923	340,665	0	953,510	954,132
25.2 Guaranteed renewable (b).....	22,447	22,496	0	26,401	26,401
25.3 Non-renewable for stated reasons only (b).....	29,992	30,058	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	392,362	393,219	0	979,911	980,533
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	392,362	393,219	0	979,911	980,533

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	6,435,681	0	0	0	6,435,681
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	6,435,681	0	0	0	6,435,681
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	1,990,094	0	0	0	1,990,094
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	18,898	0	0	0	18,898
12. Surrender values and withdrawals for life contracts.....	1,321,907	0	0	0	1,321,907
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.....	3,330,899	0	0	0	3,330,899

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	11	1,724,305	0	0	0	0	0	0	11	1,724,305
17. Incurred during current year.....	8	1,973,904	0	0	0	0	0	0	8	1,973,904
Settled during current year:										
18.1 By payment in full.....	10	3,081,382	0	0	0	0	0	0	10	3,081,382
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	10	3,081,382	0	0	0	0	0	0	10	3,081,382
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	10	3,081,382	0	0	0	0	0	0	10	3,081,382
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	9	616,827	0	0	0	0	0	0	9	616,827
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	6,294	3,121,120,137	0	(a).....0	0	0	0	0	6,294	3,121,120,137
21. Issued during year.....	341	236,611,881	0	0	0	0	0	0	341	236,611,881
22. Other changes to in force (Net).....	(444)	(222,244,508)	0	0	0	0	0	0	(444)	(222,244,508)
23. In force December 31 of current year.....	6,191	3,135,487,510	0	(a).....0	0	0	0	0	6,191	3,135,487,510

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	397,009	397,876	0	89,000	84,988
25.2 Guaranteed renewable (b).....	32,005	32,075	0	7,492	6,235
25.3 Non-renewable for stated reasons only (b).....	17,251	17,288	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	446,265	447,239	0	96,492	91,223
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	446,265	447,239	0	96,492	91,223

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,083,629	0	0	0	1,083,629
2. Annuity considerations.....	5,400	0	0	0	5,400
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	1,089,029	0	0	0	1,089,029
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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.....	125,000	0	0	0	125,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	9,266	0	0	0	9,266
12. Surrender values and withdrawals for life contracts.....	143,486	0	0	0	143,486
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.....	277,752	0	0	0	277,752

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	2	125,000	0	0	0	0	0	0	2	125,000
Settled during current year:										
18.1 By payment in full.....	2	125,000	0	0	0	0	0	0	2	125,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	2	125,000	0	0	0	0	0	0	2	125,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	2	125,000	0	0	0	0	0	0	2	125,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,155	381,217,796	0	(a).....0	0	0	0	0	1,155	381,217,796
21. Issued during year.....	70	37,057,000	0	0	0	0	0	0	70	37,057,000
22. Other changes to in force (Net).....	(67)	(25,244,589)	0	0	0	0	0	0	(67)	(25,244,589)
23. In force December 31 of current year.....	1,158	393,030,207	0	(a).....0	0	0	0	0	1,158	393,030,207

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	252,092	252,643	0	499,413	496,963
25.2 Guaranteed renewable (b).....	3,044	3,050	0	0	0
25.3 Non-renewable for stated reasons only (b).....	2,203	2,208	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	257,339	257,901	0	499,413	496,963
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	257,339	257,901	0	499,413	496,963

(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 NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF WYOMING DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,229,280	0	0	0	4,229,280
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	4,229,280	0	0	0	4,229,280
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	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	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	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	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	511,803	0	0	0	511,803
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.....	511,803	0	0	0	511,803

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	0	0	0	0	0	0	0	0	0	0
Settled during current year:										
18.1 By payment in full.....	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	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	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	854	380,179,275	0	(a).....0	0	0	0	0	854	380,179,275
21. Issued during year.....	65	35,458,460	0	0	0	0	0	0	65	35,458,460
22. Other changes to in force (Net).....	(51)	(18,343,295)	0	0	0	0	0	0	(51)	(18,343,295)
23. In force December 31 of current year.....	868	397,294,440	0	(a).....0	0	0	0	0	868	397,294,440

(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).....	0	0	0	0	0
24.1 Federal Employee Health Benefits Plan premium (b).....	0	0	0	0	0
24.2 Credit (group and individual).....	0	0	0	0	0
24.3 Collectively renewable policies (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	25,541	25,596	0	0	0
25.2 Guaranteed renewable (b).....	516	517	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	26,057	26,113	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	26,057	26,113	0	0	0

(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 NATIONAL LIFE ASSURANCE CORPORATION

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year.....	10,346,703
2. Current year's realized pre-tax capital gains/(losses) of \$.....2,466,120 transferred into the reserve net of taxes of \$.....863,142.....	1,602,978
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).....	11,949,681
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4).....	2,854,544
6. Reserve as of December 31, current year (Line 4 minus Line 5).....	9,095,138

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.....	2,444,674	409,870	0	2,854,544
2. 2016.....	1,795,278	481,705	0	2,276,983
3. 2017.....	1,397,632	211,814	0	1,609,446
4. 2018.....	1,142,560	167,197	0	1,309,757
5. 2019.....	908,455	121,597	0	1,030,052
6. 2020.....	708,807	74,367	0	783,174
7. 2021.....	552,804	44,983	0	597,788
8. 2022.....	427,404	36,251	0	463,656
9. 2023.....	316,393	26,783	0	343,176
10. 2024.....	218,258	16,954	0	235,211
11. 2025.....	161,869	6,400	0	168,269
12. 2026.....	112,158	1,208	0	113,366
13. 2027.....	56,893	1,019	0	57,913
14. 2028.....	15,700	813	0	16,513
15. 2029.....	(1,479)	590	0	(889)
16. 2030.....	(5,710)	388	0	(5,322)
17. 2031.....	(3,385)	250	0	(3,135)
18. 2032.....	2,809	213	0	3,022
19. 2033.....	6,679	175	0	6,853
20. 2034.....	10,665	132	0	10,797
21. 2035.....	12,696	92	0	12,787
22. 2036.....	13,538	62	0	13,600
23. 2037.....	14,007	51	0	14,057
24. 2038.....	13,054	36	0	13,090
25. 2039.....	10,412	22	0	10,434
26. 2040.....	7,735	8	0	7,743
27. 2041.....	5,028	0	0	5,028
28. 2042.....	1,616	0	0	1,616
29. 2043.....	117	0	0	117
30. 2044.....	35	0	0	35
31. 2045 and Later.....	0	0	0	0
32. Total (Lines 1 to 31).....	10,346,703	1,602,978	0	11,949,681

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.....	18,922,411	2,681,718	21,604,129	8,451,839	20,674	8,472,512	30,076,641
2. Realized capital gains/(losses) net of taxes - General Account.....	(992,213)	0	(992,213)	0	0	0	(992,213)
3. Realized capital gains/(losses) net of taxes - Separate Accounts.....	0	0	0	0	0	0	0
4. Unrealized capital gains/(losses) - net of deferred taxes - General Account.....	(36,258)	0	(36,258)	(1,412)	0	(1,412)	(37,670)
5. Unrealized capital gains/(losses) - net of deferred taxes - Separate Accounts.....	0	0	0	0	0	0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves.....	0	0	0	0	0	0	0
7. Basic contribution.....	3,728,933	438,352	4,167,285	0	0	0	4,167,285
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7).....	21,622,873	3,120,070	24,742,943	8,450,427	20,674	8,471,100	33,214,043
9. Maximum reserve.....	18,275,338	2,640,021	20,915,359	10,493,554	20,409	10,513,964	31,429,323
10. Reserve objective.....	12,693,837	2,031,078	14,724,915	10,493,554	20,409	10,513,964	25,238,879
11. 20% of (Line 10 minus Line 8).....	(1,785,807)	(217,798)	(2,003,606)	408,625	(53)	408,573	(1,595,033)
12. Balance before transfers (Lines 8 + 11).....	19,837,066	2,902,271	22,739,337	8,859,052	20,621	8,879,673	31,619,010
13. Transfers.....	262,251	(262,251)	0	212	(212)	0	0
14. Voluntary contribution.....	0	0	0	0	0	0	0
15. Adjustment down to maximum/up to zero.....	(1,823,979)	0	(1,823,979)	0	0	0	(1,823,979)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15).....	18,275,338	2,640,020	20,915,358	8,859,264	20,409	8,879,673	29,795,031

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Desig- nation	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.....	69,529,650	XXX	XXX	69,529,650	0.0000	0	0.0000	0	0.0000	0
2	1	Highest quality.....	1,462,124,465	XXX	XXX	1,462,124,465	0.0004	584,850	0.0023	3,362,886	0.0030	4,386,373
3	2	High quality.....	921,594,429	XXX	XXX	921,594,429	0.0019	1,751,029	0.0058	5,345,248	0.0090	8,294,350
4	3	Medium quality.....	98,275,735	XXX	XXX	98,275,735	0.0093	913,964	0.0230	2,260,342	0.0340	3,341,375
5	4	Low quality.....	18,351,008	XXX	XXX	18,351,008	0.0213	390,876	0.0530	972,603	0.0750	1,376,326
6	5	Lower quality.....	822,106	XXX	XXX	822,106	0.0432	35,515	0.1100	90,432	0.1700	139,758
7	6	In or near default.....	2,587,761	XXX	XXX	2,587,761	0.0000	0	0.2000	517,552	0.2000	517,552
8		Total unrated multi-class securities acquired by conversion.....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
9		Total bonds (sum of Lines 1 through 8).....	2,573,285,154	XXX	XXX	2,573,285,154	XXX	3,676,235	XXX	12,549,063	XXX	18,055,734
PREFERRED STOCKS												
10	1	Highest quality.....	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
11	2	High quality.....	13,120,000	XXX	XXX	13,120,000	0.0019	24,928	0.0058	76,096	0.0090	118,080
12	3	Medium quality.....	2,986,000	XXX	XXX	2,986,000	0.0093	27,770	0.0230	68,678	0.0340	101,524
13	4	Low quality.....	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
14	5	Lower quality.....	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
15	6	In or near default.....	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
16		Affiliated life with AVR.....	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
17		Total preferred stocks (sum of Lines 10 through 16).....	16,106,000	XXX	XXX	16,106,000	XXX	52,698	XXX	144,774	XXX	219,604
SHORT-TERM BONDS												
18		Exempt obligations.....	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19	1	Highest quality.....	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
20	2	High quality.....	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
21	3	Medium quality.....	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
22	4	Low quality.....	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
23	5	Lower quality.....	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
24	6	In or near default.....	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
25		Total short-term bonds (sum of Lines 18 thru 24).....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
DERIVATIVE INSTRUMENTS												
26		Exchange traded.....	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
27	1	Highest quality.....	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
28	2	High quality.....	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
29	3	Medium quality.....	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
30	4	Low quality.....	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
31	5	Lower quality.....	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
32	6	In or near default.....	0	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).....	2,589,391,154	XXX	XXX	2,589,391,154	XXX	3,728,933	XXX	12,693,837	XXX	18,275,338

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Desig- nation	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)
31		MORTGAGE LOANS										
		In good standing:										
	35	Farm mortgages - CM1 - highest quality.....	0	0	XXX.....	0	0.0010	0	0.0050	0	0.0065	0
	36	Farm mortgages - CM2 - high quality.....	0	0	XXX.....	0	0.0035	0	0.0100	0	0.0130	0
	37	Farm mortgages - CM3 - medium quality.....	0	0	XXX.....	0	0.0060	0	0.0175	0	0.0225	0
	38	Farm mortgages - CM4 - low medium quality.....	0	0	XXX.....	0	0.0105	0	0.0300	0	0.0375	0
	39	Farm mortgages - CM5 - low quality.....	0	0	XXX.....	0	0.0160	0	0.0425	0	0.0550	0
	40	Residential mortgages-insured or guaranteed.....	0	0	XXX.....	0	0.0003	0	0.0006	0	0.0010	0
	41	Residential mortgages-all other.....	0	0	XXX.....	0	0.0013	0	0.0030	0	0.0040	0
	42	Commercial mortgages-insured or guaranteed.....	0	0	XXX.....	0	0.0003	0	0.0006	0	0.0010	0
	43	Commercial mortgages-all other - CM1 - highest quality.....	363,113,046	0	XXX.....	363,113,046	0.0010	363,113	0.0050	1,815,565	0.0065	2,360,235
	44	Commercial mortgages-all other - CM2 - high quality.....	18,889,328	0	XXX.....	18,889,328	0.0035	66,113	0.0100	188,893	0.0130	245,561
	45	Commercial mortgages-all other - CM3 - medium quality.....	1,521,105	0	XXX.....	1,521,105	0.0060	9,127	0.0175	26,619	0.0225	34,225
	46	Commercial mortgages-all other - CM4 - low medium quality.....	0	0	XXX.....	0	0.0105	0	0.0300	0	0.0375	0
	47	Commercial mortgages-all other - CM5 - low quality.....	0	0	XXX.....	0	0.0160	0	0.0425	0	0.0550	0
		Overdue, not in process:										
	48	Farm mortgages.....	0	0	XXX.....	0	0.0420	0	0.0760	0	0.1200	0
	49	Residential mortgages-insured or guaranteed.....	0	0	XXX.....	0	0.0005	0	0.0012	0	0.0020	0
	50	Residential mortgages-all other.....	0	0	XXX.....	0	0.0025	0	0.0058	0	0.0090	0
	51	Commercial mortgages-insured or guaranteed.....	0	0	XXX.....	0	0.0005	0	0.0012	0	0.0020	0
	52	Commercial mortgages-all other.....	0	0	XXX.....	0	0.0420	0	0.0760	0	0.1200	0
		In process of foreclosure:										
	53	Farm mortgages.....	0	0	XXX.....	0	0.0000	0	0.1700	0	0.1700	0
	54	Residential mortgages-insured or guaranteed.....	0	0	XXX.....	0	0.0000	0	0.0040	0	0.0040	0
	55	Residential mortgages-all other.....	0	0	XXX.....	0	0.0000	0	0.0130	0	0.0130	0
	56	Commercial mortgages-insured or guaranteed.....	0	0	XXX.....	0	0.0000	0	0.0040	0	0.0040	0
	57	Commercial mortgages-all other.....	0	0	XXX.....	0	0.0000	0	0.1700	0	0.1700	0
	58	Total Schedule B mortgages (sum of Lines 35 through 57).....	383,523,479	0	XXX.....	383,523,479	XXX.....	438,352	XXX.....	2,031,078	XXX.....	2,640,021
	59	Schedule DA mortgages.....	0	0	XXX.....	0	0.0030	0	0.0100	0	0.0130	0
	60	Total mortgage loans on real estate (Lines 58 + 59).....	383,523,479	0	XXX.....	383,523,479	XXX.....	438,352	XXX.....	2,031,078	XXX.....	2,640,021

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

Line Number	NAIC Desig- nation	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)
		COMMON STOCK										
1		Unaffiliated public.....	1,479	XXX	XXX	1,479	0.0000	0	(a).....0.2000	296	(a).....0.2000	296
2		Unaffiliated private.....	65,582,865	XXX	XXX	65,582,865	0.0000	0	0.1600	10,493,258	0.1600	10,493,258
3		Federal Home Loan Bank.....	0	XXX	XXX	0	0.0000	0	0.0050	0	0.0080	0
4		Affiliated life with AVR.....	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
		Affiliated Investment Subsidiary:										
5		Fixed income exempt obligations.....	0	0	0	0	XXX	0	XXX	0	XXX	0
6		Fixed income highest quality.....	0	0	0	0	XXX	0	XXX	0	XXX	0
7		Fixed income high quality.....	0	0	0	0	XXX	0	XXX	0	XXX	0
8		Fixed income medium quality.....	0	0	0	0	XXX	0	XXX	0	XXX	0
9		Fixed income low quality.....	0	0	0	0	XXX	0	XXX	0	XXX	0
10		Fixed income lower quality.....	0	0	0	0	XXX	0	XXX	0	XXX	0
11		Fixed income in or near default.....	0	0	0	0	XXX	0	XXX	0	XXX	0
12		Unaffiliated common stock public.....	0	0	0	0	0.0000	0	(a).....0.0000	0	(a).....0.0000	0
13		Unaffiliated common stock private.....	0	0	0	0	0.0000	0	0.1600	0	0.1600	0
14		Real estate.....	0	0	0	0	(b).....0.0000	0	(b).....0.0000	0	(b).....0.0000	0
15		Affiliated - certain other (see SVO Purposes and Procedures manual).....	0	XXX	XXX	0	0.0000	0	0.1300	0	0.1300	0
16		Affiliated - all other.....	0	XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
17		Total common stock (sum of Lines 1 through 16).....	65,584,344	0	0	65,584,344	XXX	0	XXX	10,493,554	XXX	10,493,554
		REAL ESTATE										
18		Home office property (General Account only).....	0	0	0	0	0.0000	0	0.0750	0	0.0750	0
19		Investment properties.....	0	0	0	0	0.0000	0	0.0750	0	0.0750	0
20		Properties acquired in satisfaction of debt.....	0	0	0	0	0.0000	0	0.1100	0	0.1100	0
21		Total real estate (sum of Lines 18 through 20).....	0	0	0	0	XXX	0	XXX	0	XXX	0
		OTHER INVESTED ASSETS										
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS										
22		Exempt obligations.....	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
23	1	Highest quality.....	0	XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
24	2	High quality.....	0	XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
25	3	Medium quality.....	0	XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
26	4	Low quality.....	0	XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
27	5	Lower quality.....	0	XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
28	6	In or near default.....	0	XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
29		Total with bond characteristics (sum of Lines 22 through 28).....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

ASSET VALUATION RESERVE (continued)
Basic Contribution, Reserve Objective and Maximum Reserve Calculations
Equity and Other Invested Asset Component

Line Number	NAIC Desig- nation	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)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
30	1	Highest quality.....	.0	XXX	XXX	.0	0.0004	.0	0.0023	.0	0.0030	.0
31	2	High quality.....	.0	XXX	XXX	.0	0.0019	.0	0.0058	.0	0.0090	.0
32	3	Medium quality.....	.0	XXX	XXX	.0	0.0093	.0	0.0230	.0	0.0340	.0
33	4	Low quality.....	.0	XXX	XXX	.0	0.0213	.0	0.0530	.0	0.0750	.0
34	5	Lower quality.....	.0	XXX	XXX	.0	0.0432	.0	0.1100	.0	0.1700	.0
35	6	In or near default.....	.0	XXX	XXX	.0	0.0000	.0	0.2000	.0	0.2000	.0
36		Affiliated life with AVR.....	.0	XXX	XXX	.0	0.0000	.0	0.0000	.0	0.0000	.0
37		Total with preferred stock characteristics (sum of Lines 30 through 36).....	.0	XXX	XXX	.0	XXX	.0	XXX	.0	XXX	.0
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing Affiliated:										
38		Mortgages - CM1 - highest quality.....	.0	0	XXX	.0	0.0010	.0	0.0050	.0	0.0065	.0
39		Mortgages - CM2 - high quality.....	.0			.0	0.0035	.0	0.0100	.0	0.0130	.0
40		Mortgages - CM3 - medium quality.....	.0		XXX	.0	0.0060	.0	0.0175	.0	0.0225	.0
41		Mortgages - CM4 - low medium quality.....	.0			.0	0.0105	.0	0.0300	.0	0.0375	.0
42		Mortgages - CM5 - low quality.....	.0	0	XXX	.0	0.0160	.0	0.0425	.0	0.0550	.0
43		Residential mortgages-insured or guaranteed.....	.0	0	XXX	.0	0.0003	.0	0.0006	.0	0.0010	.0
44		Residential mortgages-all other.....	.0	XXX	XXX	.0	0.0013	.0	0.0030	.0	0.0040	.0
45		Commercial mortgages-insured or guaranteed.....	.0	0	XXX	.0	0.0003	.0	0.0006	.0	0.0010	.0
		Overdue, Not in Process Affiliated:										
46		Farm mortgages.....	.0	0	XXX	.0	0.0420	.0	0.0760	.0	0.1200	.0
47		Residential mortgages-insured or guaranteed.....	.0	0	XXX	.0	0.0005	.0	0.0012	.0	0.0020	.0
48		Residential mortgages-all other.....	.0	0	XXX	.0	0.0025	.0	0.0058	.0	0.0090	.0
49		Commercial mortgages-insured or guaranteed.....	.0	0	XXX	.0	0.0005	.0	0.0012	.0	0.0020	.0
50		Commercial mortgages-all other.....	.0	0	XXX	.0	0.0420	.0	0.0760	.0	0.1200	.0
		In Process of foreclosure Affiliated:										
51		Farm mortgages.....	.0	0	XXX	.0	0.0000	.0	0.1700	.0	0.1700	.0
52		Residential mortgages-insured or guaranteed.....	.0	0	XXX	.0	0.0000	.0	0.0040	.0	0.0040	.0
53		Residential mortgages-all other.....	.0	0	XXX	.0	0.0000	.0	0.0130	.0	0.0130	.0
54		Commercial mortgages-insured or guaranteed.....	.0	0	XXX	.0	0.0000	.0	0.0040	.0	0.0040	.0
55		Commercial mortgages-all other.....	.0	0	XXX	.0	0.0000	.0	0.1700	.0	0.1700	.0
56		Total Affiliated (Sum of Lines 38 through 55).....	.0	0	XXX	.0	XXX	.0	XXX	.0	XXX	.0
57		Unaffiliated - In Good Standing with Covenants.....	.0	0	XXX	.0	(c).....0.0000	.0	(c).....0.0000	.0	(c).....0.0000	.0
58		Unaffiliated - In Good Standing Defeased with Government Securities.....	.0	0	XXX	.0	0.0010	.0	0.0050	.0	0.0065	.0
59		Unaffiliated - In Good Standing Primarily Senior.....	.0	0	XXX	.0	0.0035	.0	0.0100	.0	0.0130	.0
60		Unaffiliated - In Good Standing All Other.....	.0	0	XXX	.0	0.0060	.0	0.0175	.0	0.0225	.0
61		Unaffiliated - Overdue, Not in Process.....	.0	0	XXX	.0	0.0420	.0	0.0760	.0	0.1200	.0
62		Unaffiliated - In Process of Foreclosure.....	.0	0	XXX	.0	0.0000	.0	0.1700	.0	0.1700	.0
63		Total Unaffiliated (Sum of Lines 57 through 62).....	.0	0	XXX	.0	XXX	.0	XXX	.0	XXX	.0
64		Total with Mortgage Loan Characteristics (Lines 56 + 63).....	.0	0	XXX	.0	XXX	.0	XXX	.0	XXX	.0

ASSET VALUATION RESERVE (continued)
Basic Contribution, Reserve Objective and Maximum Reserve Calculations
Equity and Other Invested Asset Component

Line Number	NAIC Design- ation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
65		Unaffiliated public.....	0	XXX.....	XXX.....	0	0.0000	0	(a).....0.0000	0	(a).....0.0000	0
66		Unaffiliated private.....	127,559	XXX.....	XXX.....	127,559	0.0000	0	0.1600	20,409	0.1600	20,409
67		Affiliated life with AVR.....	0	XXX.....	XXX.....	0	0.0000	0	0.0000	0	0.0000	0
68		Affiliated certain other (see SVO Purposes and Procedures manual).....	0	XXX.....	XXX.....	0	0.0000	0	0.1300	0	0.1300	0
69		Affiliated other - all other.....	0	XXX.....	XXX.....	0	0.0000	0	0.1600	0	0.1600	0
70		Total with Common Stock Characteristics (Sum of Lines 65 through 69).....	127,559	XXX.....	XXX.....	127,559	XXX.....	0	XXX.....	20,409	XXX.....	20,409
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE										
71		Home office property (general account only).....	0	0	0	0	0.0000	0	0.0750	0	0.0750	0
72		Investment properties.....	0	0	0	0	0.0000	0	0.0750	0	0.0750	0
73		Properties acquired in satisfaction of debt.....	0	0	0	0	0.0000	0	0.1100	0	0.1100	0
74		Total with Real Estate Characteristics (Sum of Lines 71 through 73).....	0	0	0	0	XXX.....	0	XXX.....	0	XXX.....	0
		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
75		Guaranteed federal low income housing tax credit.....	0	0	0	0	0.0003	0	0.0006	0	0.0010	0
76		Non-guaranteed federal low income housing tax credit.....	0	0	0	0	0.0063	0	0.0120	0	0.0190	0
77		Guaranteed state low income housing tax credit.....	0	0	0	0	0.0003	0	0.0006	0	0.0010	0
78		Non-guaranteed state low income housing tax credit.....	0	0	0	0	0.0063	0	0.0120	0	0.0190	0
79		All other low income housing tax credit.....	0	0	0	0	0.0273	0	0.0600	0	0.0975	0
80		Total LIHTC (Sum of Lines 75 through 79).....	0	0	0	0	XXX.....	0	XXX.....	0	XXX.....	0
		ALL OTHER INVESTMENTS										
81		NAIC 1 working capital finance investments.....	0	XXX.....	0	0	0.0000	0	0.0037	0	0.0037	0
82		NAIC 2 working capital finance investments.....	0	XXX.....	0	0	0.0000	0	0.0120	0	0.0120	0
83		Other invested assets - Schedule BA.....	0	XXX.....	0	0	0.0000	0	0.1300	0	0.1300	0
84		Other short-term invested assets - Schedule DA.....	0	XXX.....	0	0	0.0000	0	0.1300	0	0.1300	0
85		Total All Other (sum of Lines 81, 82, 83 and 84).....	0	XXX.....	0	0	XXX.....	0	XXX.....	0	XXX.....	0
86		Total Other Invested Assets - Schedule BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80 and 85).....	127,559	0	0	127,559	XXX.....	0	XXX.....	20,409	XXX.....	20,409

(a) Times the company's weighted average portfolio beta (Minimum .10, Maximum .20).
(b) Determined using same factors and breakdowns used for directly owned real estate.
(c) This will be the factor associated with the risk category determined in the company generated worksheet.

ASSET VALUATION RESERVE (continued)

Basic Contributions, Reserve Objective and Maximum Reserve Calculations

Replications (Synthetic) Assets

1	2	3	4	5	6	7	8	9
RSAT Number	Type	CUSIP	Description of Asset(s)	NAIC Designation or Other Description of Asset	Value of Asset	AVR Basic Contribution	AVR Reserve Objective	AVR Maximum Reserve

NONE

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE F

Showing all claims for death losses and all other contract claims resisted or compromised during the year,
and all claims for death losses and all other contract claims resisted December 31 of current year

1	2	3	4	5	6	7	8
Contract Numbers	Claim Numbers	State of Residence of Claimant	Year of Claim for Death or Disability	Amount Claimed	Amount Paid During the Year	Amount Resisted Dec. 31 of Current Year	Why Compromised or Resisted

CLAIMS DISPOSED OF DURING CURRENT YEAR

Death Claims - Ordinary

6997036.....	8625.....	CA.....	2013.....	2,000,000	400,000	0	Policy lapsed prior to the date of death due to non-payment of the required premium.
6683329.....	9091.....	MO.....	2014.....	100,000	20,000	0	Policy lapsed prior to the date of death due to non-payment of the required premium.
0199999. Death Claims - Ordinary.....				2,100,000	420,000	0	XXX.....
0599999. Subtotal - Disposed Death Claims.....				2,100,000	420,000	0	XXX.....
2699999. Subtotal - Claims Disposed of During Current Year.....				2,100,000	420,000	0	XXX.....

CLAIMS RESISTED DURING CURRENT YEAR

Death Claims - Ordinary

6452920.....	9584.....	PR.....	2015.....	500,000	0	500,000	Policy lapsed prior to death due to nonpayment of premiums.
7079925.....	9873.....	AL.....	2015.....	1,000,000	0	1,000,000	Claim resisted during contestability period due to material misrepresentation.
2799999. Death Claims - Ordinary.....				1,500,000	0	1,500,000	XXX.....
3199999. Subtotal - Resisted Death Claims.....				1,500,000	0	1,500,000	XXX.....
5299999. Subtotal - Claims Resisted of During Current Year.....				1,500,000	0	1,500,000	XXX.....
5399999. Totals.....				3,600,000	420,000	1,500,000	XXX.....

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.....	9,483,510	XXX	0	XXX	0	XXX	0	XXX	8,421,777	XXX	843,573	XXX	218,160	XXX	0	XXX	0	XXX
2. Premiums earned.....	9,433,524	XXX	0	XXX	0	XXX	0	XXX	8,368,157	XXX	847,495	XXX	217,872	XXX	0	XXX	0	XXX
3. Incurred claims.....	10,829,741	114.8	0	0.0	0	0.0	0	0.0	10,515,836	125.7	309,088	36.5	4,817	2.2	0	0.0	0	0.0
4. Cost containment expenses.....	351,968	3.7	0	0.0	0	0.0	0	0.0	344,950	4.1	6,779	0.8	239	0.1	0	0.0	0	0.0
5. Incurred claims and cost containment expenses (Lines 3 and 4).....	11,181,709	118.5	0	0.0	0	0.0	0	0.0	10,860,786	129.8	315,867	37.3	5,056	2.3	0	0.0	0	0.0
6. Increase in contract reserves.....	(5,525,481)	(58.6)	0	0.0	0	0.0	0	0.0	(4,559,535)	(54.5)	(911,065)	(107.5)	(54,881)	(25.2)	0	0.0	0	0.0
7. Commissions (a).....	223,443	2.4	0	0.0	0	0.0	0	0.0	159,721	1.9	68,549	8.1	(4,827)	(2.2)	0	0.0	0	0.0
8. Other general insurance expenses.....	9,924,967	105.2	0	0.0	0	0.0	0	0.0	9,248,733	110.5	390,712	46.1	285,522	131.1	0	0.0	0	0.0
9. Taxes, licenses and fees.....	590,773	6.3	0	0.0	0	0.0	0	0.0	550,521	6.6	23,257	2.7	16,995	7.8	0	0.0	0	0.0
10. Total other expenses incurred.....	10,739,183	113.8	0	0.0	0	0.0	0	0.0	9,958,975	119.0	482,518	56.9	297,690	136.6	0	0.0	0	0.0
11. Aggregate write-ins for deductions.....	6,567,892	69.6	0	0.0	0	0.0	0	0.0	6,243,594	74.6	227,210	26.8	97,088	44.6	0	0.0	0	0.0
12. Gain from underwriting before dividends or refunds.....	(13,529,779)	(143.4)	0	0.0	0	0.0	0	0.0	(14,135,663)	(168.9)	732,965	86.5	(127,081)	(58.3)	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	0.0	0	0.0	0	0.0
14. Gain from underwriting after dividends or refunds.....	(13,529,779)	(143.4)	0	0.0	0	0.0	0	0.0	(14,135,663)	(168.9)	732,965	86.5	(127,081)	(58.3)	0	0.0	0	0.0
DETAILS OF WRITE-INS																		
1101. Surrender/ROP benefits.....	6,567,892	69.6	0	0.0	0	0.0	0	0.0	6,243,594	74.6	227,210	26.8	97,088	44.6	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	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	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).....	6,567,892	69.6	0	0.0	0	0.0	0	0.0	6,243,594	74.6	227,210	26.8	97,088	44.6	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.....	(1,701,390)	0	0	0	(1,774,172)	138,293	(65,511)	0	0
2. Advance premiums.....	140,764	0	0	0	136,979	3,164	621	0	0
3. Reserve for rate credits.....	0	0	0	0	0	0	0	0	0
4. Total premium reserves, current year.....	(1,560,626)	0	0	0	(1,637,193)	141,457	(64,890)	0	0
5. Total premium reserves, prior year.....	(1,610,612)	0	0	0	(1,690,813)	145,379	(65,178)	0	0
6. Increase in total premium reserves.....	49,986	0	0	0	53,620	(3,922)	288	0	0
B. Contract Reserves:									
1. Additional reserves (a).....	25,725,199	0	0	0	22,080,527	3,351,283	293,389	0	0
2. Reserve for future contingent benefits.....	0	0	0	0	0	0	0	0	0
3. Total contract reserves, current year.....	25,725,199	0	0	0	22,080,527	3,351,283	293,389	0	0
4. Total contract reserves, prior year.....	31,250,680	0	0	0	26,640,062	4,262,348	348,270	0	0
5. Increase in contract reserves.....	(5,525,481)	0	0	0	(4,559,535)	(911,065)	(54,881)	0	0
C. Claim Reserves and Liabilities:									
1. Total current year.....	69,409,463	0	0	0	68,025,573	1,336,838	47,052	0	0
2. Total prior year.....	68,656,378	0	0	0	67,202,173	1,411,970	42,235	0	0
3. Increase.....	753,085	0	0	0	823,400	(75,132)	4,817	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.....	9,930,367	.0	.0	.0	9,561,056	369,311	.0	.0	.0
1.2 On claims incurred during current year.....	146,289	.0	.0	.0	131,380	14,909	.0	.0	.0
2. Claim Reserves and Liabilities, December 31, Current Year:									
2.1 On claims incurred prior to current year.....	62,200,232	.0	.0	.0	61,519,850	680,381	1	.0	.0
2.2 On claims incurred during current year.....	7,209,231	.0	.0	.0	6,505,723	656,457	47,051	.0	.0
3. Test:									
3.1 Lines 1.1 and 2.1.....	72,130,599	.0	.0	.0	71,080,906	1,049,692	1	.0	.0
3.2 Claim reserves and liabilities, December 31, prior year.....	68,656,378	.0	.0	.0	67,202,173	1,411,970	42,235	.0	.0
3.3 Line 3.1 minus Line 3.2.....	3,474,221	.0	.0	.0	3,878,733	(362,278)	(42,234)	.0	.0

PART 4 - REINSURANCE									
A. Reinsurance Assumed:									
1. Premiums written.....	557,504	.0	.0	.0	495,359	61,188	957	.0	.0
2. Premiums earned.....	585,906	.0	.0	.0	523,203	61,746	957	.0	.0
3. Incurred claims.....	872,802	.0	.0	.0	802,854	69,948	.0	.0	.0
4. Commissions.....	39,244	.0	.0	.0	35,746	3,498	.0	.0	.0
B. Reinsurance Ceded:									
1. Premiums written.....	10,933,247	.0	.0	.0	10,579,731	(594)	354,110	.0	.0
2. Premiums earned.....	10,774,744	.0	.0	.0	10,395,738	904	378,102	.0	.0
3. Incurred claims.....	16,586,789	.0	.0	.0	16,612,198	(5,665)	(19,744)	.0	.0
4. Commissions.....	2,979,009	.0	.0	.0	2,887,663	(535)	91,881	.0	.0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE H - PART 5 - HEALTH CLAIMS

	1	2	3	4
	Medical	Dental	Other	Total
A. Direct:				
1. Incurred claims.....	0	0	26,543,728	26,543,728
2. Beginning claim reserves and liabilities.....	0	0	155,620,632	155,620,632
3. Ending claim reserves and liabilities.....	0	0	160,697,757	160,697,757
4. Claims paid.....	0	0	21,466,603	21,466,603
B. Assumed Reinsurance:				
5. Incurred claims.....	0	0	872,802	872,802
6. Beginning claim reserves and liabilities.....	0	0	7,637,506	7,637,506
7. Ending claim reserves and liabilities.....	0	0	7,229,911	7,229,911
8. Claims paid.....	0	0	1,280,397	1,280,397
C. Ceded Reinsurance:				
9. Incurred claims.....	0	0	16,586,789	16,586,789
10. Beginning claim reserves and liabilities.....	0	0	101,169,262	101,169,262
11. Ending claim reserves and liabilities.....	0	0	102,789,947	102,789,947
12. Claims paid.....	0	0	14,966,104	14,966,104
D. Net:				
13. Incurred claims.....	0	0	10,829,741	10,829,741
14. Beginning claim reserves and liabilities.....	0	0	62,088,876	62,088,876
15. Ending claim reserves and liabilities.....	0	0	65,137,721	65,137,721
16. Claims paid.....	0	0	7,780,896	7,780,896
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred claims and cost containment expenses.....	0	0	11,181,709	11,181,709
18. Beginning reserves and liabilities.....	0	0	62,095,376	62,095,376
19. Ending reserves and liabilities.....	0	0	65,145,108	65,145,108
20. Paid claims and cost containment expenses.....	0	0	8,131,977	8,131,977

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

NONE

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											
61301.....	47-0098400....	05/01/1985	Ameritas Life Ins Corp.....	NE.....	CO/l.....	194,518	30,051	2,878,695	15,318	0	0
64017.....	75-0300900....	11/23/1987	Jefferson Natl Life Ins Co.....	TX.....	CO/l.....	247,467	45,778	4,258,501	60,989	0	0
57320.....	47-0339250....	09/09/1990	Woodmen World Life Ins Soc.....	NE.....	CO/l.....	121,942	12,824	1,720,524	106,446	0	0
0899999.	Total - Non-Affiliates - U.S. Non-Affiliates.....					563,927	88,653	8,857,720	182,753	0	0
1099999.	Total - Non-Affiliates.....					563,927	88,653	8,857,720	182,753	0	0
1199999.	Total - U.S.....					563,927	88,653	8,857,720	182,753	0	0
9999999.	Total.....					563,927	88,653	8,857,720	182,753	0	0

SCHEDULE S - PART 2

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

1	2	3	4	5	6	7
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Paid Losses	Unpaid Losses
Life and Annuity - Affiliates - U.S. - Captive						
13575.....	26-3791519....	06/30/2009	Montgomery Re.....	VT.....	0	198,786
13575.....	26-3791519....	05/01/2011	Montgomery Re.....	VT.....	250,000	1,205,740
13575.....	26-3791519....	07/01/2012	Montgomery Re.....	VT.....	0	912,479
15363.....	80-0955278....	12/31/2013	Kenwood Re.....	VT.....	1,400,000	10,507,545
0199999.	Total - Life and Annuity Affiliates - U.S. - Captive.....				1,650,000	12,824,550
Life and Annuity - Affiliates - U.S. - Other						
67172.....	31-0397080....	10/01/2009	The Ohio National Life Insurance Comp.....	OH.....	0	144,120
67172.....	31-0397080....	09/01/2014	The Ohio National Life Insurance Comp.....	OH.....	0	77,971
0299999.	Total - Life and Annuity Affiliates - U.S. - Other.....				0	222,091
0399999.	Total - Life and Annuity Affiliates - U.S. - Total.....				1,650,000	13,046,641
0799999.	Total - Life and Annuity Affiliates.....				1,650,000	13,046,641
Life and Annuity - Non-Affiliates - U.S. Non-Affiliates						
90611.....	41-1366075....	07/31/2001	Allianz Life Insurance Co. of North Amer.....	MN.....	0	217,545
90611.....	41-1366075....	04/01/2003	Allianz Life Insurance Co. of North Amer.....	MN.....	126,000	36,000
39845.....	48-0921045....	09/01/1967	Employer's Reassurance Corporation.....	KS.....	681	0
86258.....	13-2572994....	12/01/2005	General & Cologne Life Re of America.....	CT.....	0	80,000
86258.....	13-2572994....	01/19/2005	General & Cologne Life Re of America.....	CT.....	19,487	7,693
86258.....	13-2572994....	01/01/2006	General & Cologne Life Re of America.....	CT.....	0	1,200,000
88340.....	59-2859797....	12/01/2005	Hannover Life Reassurance Comp of America.....	FL.....	0	225,000
88340.....	59-2859797....	01/01/2006	Hannover Life Reassurance Comp of America.....	FL.....	22,500	22,500
88340.....	59-2859797....	01/01/2006	Hannover Life Reassurance Comp of America.....	FL.....	0	20,108
88340.....	59-2859797....	01/01/2010	Hannover Life Reassurance Comp of America.....	FL.....	0	28,501
65676.....	35-0472300....	07/31/2001	The Lincoln National Life Insurance Comp.....	IN.....	0	217,413
65676.....	35-0472300....	06/01/1998	The Lincoln National Life Insurance Comp.....	IN.....	0	36,333
65676.....	35-0472300....	04/15/1999	The Lincoln National Life Insurance Comp.....	IN.....	1,862	0
66346.....	58-0828824....	07/31/2001	Munich American Reassurance Company.....	GA.....	0	435,084
66346.....	58-0828824....	04/01/2003	Munich American Reassurance Company.....	GA.....	0	108,000
66346.....	58-0828824....	04/01/2004	Munich American Reassurance Company.....	GA.....	0	351,000
66346.....	58-0828824....	01/19/2005	Munich American Reassurance Company.....	GA.....	0	90,000
66346.....	58-0828824....	01/01/2006	Munich American Reassurance Company.....	GA.....	22,500	22,500
66346.....	58-0828824....	06/04/2007	Munich American Reassurance Company.....	GA.....	132,586	1,900,000
66346.....	58-0828824....	06/01/1998	Munich American Reassurance Company.....	GA.....	0	36,333
66346.....	58-0828824....	04/15/1999	Munich American Reassurance Company.....	GA.....	1,860	0
66346.....	58-0828824....	01/19/2005	Munich American Reassurance Company.....	GA.....	38,974	15,386
66346.....	58-0828824....	12/01/2005	Munich American Reassurance Company.....	GA.....	0	220,000
66346.....	58-0828824....	01/01/2006	Munich American Reassurance Company.....	GA.....	0	1,000,000
93572.....	43-1235868....	07/31/2001	RGA Reinsurance Company.....	MO.....	0	217,413
93572.....	43-1235868....	01/01/1987	RGA Reinsurance Company.....	MO.....	34,000	182,743
93572.....	43-1235868....	10/01/1995	RGA Reinsurance Company.....	MO.....	376,772	24,760
93572.....	43-1235868....	06/01/1998	RGA Reinsurance Company.....	MO.....	0	72,666
93572.....	43-1235868....	01/19/2005	RGA Reinsurance Company.....	MO.....	19,487	7,693
68713.....	84-0499703....	06/01/1998	Security Life of Denver Insurance Co.....	CO.....	0	90,000
68713.....	84-0499703....	07/31/2001	Security Life of Denver Insurance Co.....	CO.....	0	217,545
68713.....	84-0499703....	04/01/2003	Security Life of Denver Insurance Co.....	CO.....	0	5,036,000
68713.....	84-0499703....	04/01/2004	Security Life of Denver Insurance Co.....	CO.....	9,000	153,000
68713.....	84-0499703....	10/01/1995	Security Life of Denver Insurance Co.....	CO.....	98,111	24,760
68713.....	84-0499703....	06/01/1998	Security Life of Denver Insurance Co.....	CO.....	0	72,666
68713.....	84-0499703....	04/15/1999	Security Life of Denver Insurance Co.....	CO.....	2,791	0
68713.....	84-0499703....	05/01/2002	Security Life of Denver Insurance Co.....	CO.....	0	58,494
82627.....	06-0839705....	06/04/2007	Swiss Re Life & Health America, Inc.....	CT.....	132,627	1,900,000
82627.....	06-0839705....	10/01/1995	Swiss Re Life & Health America, Inc.....	CT.....	1,130,316	74,280
82627.....	06-0839705....	06/01/1998	Swiss Re Life & Health America, Inc.....	CT.....	0	145,332
82627.....	06-0839705....	04/15/1999	Swiss Re Life & Health America, Inc.....	CT.....	2,791	0
82627.....	06-0839705....	01/01/2006	Swiss Re Life & Health America, Inc.....	CT.....	39,537	0
82627.....	06-0839705....	01/01/2010	Swiss Re Life & Health America, Inc.....	CT.....	0	28,501
87572.....	23-2038295....	01/01/2006	Scottish Re USA Inc.....	NC.....	19,769	0
86231.....	39-0989781....	01/01/2006	Transamerica Life Insurance Company.....	NC.....	0	27,000
86231.....	39-0989781....	01/01/2006	Transamerica Life Insurance Company.....	NC.....	0	1,235,995
80659.....	38-0397420....	04/01/2004	The Canada Life Assurance Company.....	MI.....	0	126,000
80659.....	38-0397420....	01/19/2005	The Canada Life Assurance Company.....	MI.....	0	36,000
0899999.	Total - Life and Annuity Non-Affiliates - U.S. Non-Affiliates.....				2,231,651	16,000,244
Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates						
00000.....	AA-3190770....	01/01/2006	Ace Tempest Life Reinsurance.....	BMU.....	0	600,000
0999999.	Total - Life and Annuity Non-Affiliates - Non-U.S. Non-Affiliates.....				0	600,000
1099999.	Total - Life and Annuity Non-Affiliates.....				2,231,651	16,600,244
1199999.	Total - Life and Annuity.....				3,881,651	29,646,885
Accident and Health - Non-Affiliates - U.S. Non-Affiliates						
68276.....	48-1024691....	09/01/1967	Employers Reassurance Corporation.....	MO.....	5,143	820
86258.....	13-2572994....	01/01/1999	General Re Life Corp.....	CT.....	5,965	17,692
66346.....	58-0828824....	01/01/1999	Munich Amer Reassur Co.....	GA.....	35,101	42,569
82627.....	06-0839705....	02/01/1981	Swiss Re Life & Health America, Inc.....	CT.....	3,227,584	444,546

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
67598.....	04-1768571....	11/01/1988	Paul Revere Life Ins Co.....	MA.....	997,948	35,048
1999999.	Total - Accident and Health Non-Affiliates - U.S. Non-Affiliates.....				4,271,741	540,675
2199999.	Total - Accident and Health Non-Affiliates.....				4,271,741	540,675
2299999.	Total - Accident and Health.....				4,271,741	540,675
2399999.	Total U.S.....				8,153,392	29,587,560
2499999.	Total Non-U.S.....				0	600,000
9999999.	Total.....				8,153,392	30,187,560

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 - Affiliates - U.S. - Other														
67172.....	31-0397080....	10/04/2006	Ohio National Life Insurance Company.....	OH.....	CO/I.....	XXXL.....	303,241,660	148,039,325	143,525,232	0	0	0	0	0
67172.....	31-0397080....	10/01/2009	Ohio National Life Insurance Company.....	OH.....	CO/I.....	XXXL.....	1,409,845,622	499,784,904	489,895,827	67,714,790	0	0	0	0
67172.....	31-0397080....	09/01/2014	Ohio National Life Insurance Company.....	OH.....	CO/I.....	XXXL.....	413,244,483	146,606,548	53,826,706	19,848,105	0	0	0	0
0299999.	Total - General Account - Authorized - Affiliates - U.S. - Other.....						2,126,331,765	794,430,777	687,247,765	87,562,895	0	0	0	0
0399999.	Total - General Account - Authorized - Affiliates - U.S. - Total.....						2,126,331,765	794,430,777	687,247,765	87,562,895	0	0	0	0
0799999.	Total - General Account - Authorized - Affiliates.....						2,126,331,765	794,430,777	687,247,765	87,562,895	0	0	0	0
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates														
90611.....	41-1366075....	04/01/1982	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	0	0	2,458	(1,608)	0	0	0	0
90611.....	41-1366075....	11/01/1983	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	545,046	17,772	18,806	19,581	0	0	0	0
90611.....	41-1366075....	01/01/1987	Allianz Life Insurance Co. of North America.....	MN.....	DIS/I.....	OL.....	0	15	50	97	0	0	0	0
90611.....	41-1366075....	01/01/1987	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	3,333,997	61,753	58,742	90,801	0	0	0	0
90611.....	41-1366075....	06/01/1988	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	775,000	5,194	7,226	7,545	0	0	0	0
90611.....	41-1366075....	02/01/1999	Allianz Life Insurance Co. of North America.....	MN.....	DIS/I.....	OL.....	0	562	532	261	0	0	0	0
90611.....	41-1366075....	02/01/1999	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	5,970,486	57,925	51,709	44,824	0	0	0	0
90611.....	41-1366075....	04/15/1999	Allianz Life Insurance Co. of North America.....	MN.....	CO/I.....	OL.....	169,325,884	959,879	899,774	238,513	0	0	0	0
90611.....	41-1366075....	04/15/1999	Allianz Life Insurance Co. of North America.....	MN.....	DIS/I.....	OL.....	0	84,541	135,952	4,960	0	0	0	0
90611.....	41-1366075....	04/15/1999	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	81,941,992	505,396	527,362	349,457	0	0	0	0
90611.....	41-1366075....	03/15/2000	Allianz Life Insurance Co. of North America.....	MN.....	DIS/I.....	OL.....	0	1,423	1,324	195	0	0	0	0
90611.....	41-1366075....	03/15/2000	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	12,768,315	62,870	85,386	37,996	0	0	0	0
90611.....	41-1366075....	09/01/2000	Allianz Life Insurance Co. of North America.....	MN.....	DIS/I.....	OL.....	0	380	342	51	0	0	0	0
90611.....	41-1366075....	09/01/2000	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	4,250,370	19,405	22,505	12,972	0	0	0	0
90611.....	41-1366075....	09/30/2000	Allianz Life Insurance Co. of North America.....	MN.....	DIS/I.....	OL.....	0	1,006	932	439	0	0	0	0
90611.....	41-1366075....	09/30/2000	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	13,786,246	82,559	75,359	81,923	0	0	0	0
90611.....	41-1366075....	07/31/2001	Allianz Life Insurance Co. of North America.....	MN.....	CO/I.....	XXXL.....	492,960,267	10,541,846	11,469,895	732,816	0	0	0	0
90611.....	41-1366075....	07/31/2001	Allianz Life Insurance Co. of North America.....	MN.....	DIS/I.....	OL.....	0	148,433	131,997	15,260	0	0	0	0
90611.....	41-1366075....	07/31/2001	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	17,142,089	97,249	86,425	72,855	0	0	0	0
90611.....	41-1366075....	01/01/2002	Allianz Life Insurance Co. of North America.....	MN.....	DIS/I.....	OL.....	0	601	616	1,019	0	0	0	0
90611.....	41-1366075....	01/01/2002	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	22,476,456	106,266	119,671	75,478	0	0	0	0
90611.....	41-1366075....	07/01/2002	Allianz Life Insurance Co. of North America.....	MN.....	DIS/I.....	OL.....	0	295	281	396	0	0	0	0
90611.....	41-1366075....	07/01/2002	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	14,826,881	121,117	131,330	81,941	0	0	0	0
90611.....	41-1366075....	01/01/2003	Allianz Life Insurance Co. of North America.....	MN.....	CO/I.....	XXXL.....	113,635,105	2,661,076	2,780,137	172,392	0	0	0	0
90611.....	41-1366075....	01/01/2003	Allianz Life Insurance Co. of North America.....	MN.....	DIS/I.....	OL.....	0	36,599	32,288	3,985	0	0	0	0
90611.....	41-1366075....	01/01/2003	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	12,196,786	65,517	58,810	55,076	0	0	0	0
90611.....	41-1366075....	04/01/2003	Allianz Life Insurance Co. of North America.....	MN.....	CO/I.....	XXXL.....	687,577,988	16,447,238	16,790,972	929,027	0	0	0	0
90611.....	41-1366075....	04/01/2003	Allianz Life Insurance Co. of North America.....	MN.....	DIS/I.....	OL.....	0	303,343	169,331	25,688	0	0	0	0
90611.....	41-1366075....	04/01/2003	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	99,148,875	571,783	517,390	431,350	0	0	0	0
62413.....	36-0947200....	01/01/1987	Continental Assurance Company.....	IL.....	YRT/I.....	OL.....	92,465	7,640	18,738	7,520	0	0	0	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION

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		
86258.....	13-2572994....	07/01/1982	General & Cologne Life Re of America.....	CT.....	YRT/I.....	OL.....	162,355	7,343	9,758	5,256	0	0	0	0
86258.....	13-2572994....	01/01/1987	General & Cologne Life Re of America.....	CT.....	DIS/I.....	OL.....	0	264	245	45	0	0	0	0
86258.....	13-2572994....	01/01/1987	General & Cologne Life Re of America.....	CT.....	YRT/I.....	OL.....	1,805,374	88,371	96,382	131,351	0	0	0	0
86258.....	13-2572994....	04/01/2004	General & Cologne Life Re of America.....	CT.....	DIS/I.....	OL.....	0	1,464	1,553	1,213	0	0	0	0
86258.....	13-2572994....	04/01/2004	General & Cologne Life Re of America.....	CT.....	YRT/I.....	OL.....	56,665,627	302,400	305,535	216,051	0	0	0	0
86258.....	13-2572994....	01/19/2005	General & Cologne Life Re of America.....	CT.....	DIS/I.....	OL.....	0	2,470	1,725	3,260	0	0	0	0
86258.....	13-2572994....	01/19/2005	General & Cologne Life Re of America.....	CT.....	YRT/I.....	OL.....	66,209,764	260,039	205,150	189,422	0	0	0	0
86258.....	13-2572994....	12/01/2005	General & Cologne Life Re of America.....	CT.....	DIS/I.....	OL.....	0	4,669	3,681	272	0	0	0	0
86258.....	13-2572994....	12/01/2005	General & Cologne Life Re of America.....	CT.....	YRT/I.....	OL.....	22,691,061	82,910	82,982	35,832	0	0	0	0
86258.....	13-2572994....	01/01/2006	General & Cologne Life Re of America.....	CT.....	ADB/I.....	OL.....	0	0	0	0	0	0	0	0
86258.....	13-2572994....	01/01/2006	General & Cologne Life Re of America.....	CT.....	DIS/I.....	OL.....	0	51,231	43,863	6,519	0	0	0	0
86258.....	13-2572994....	01/01/2006	General & Cologne Life Re of America.....	CT.....	YRT/I.....	OL.....	308,196,913	998,812	939,897	679,915	0	0	0	0
97071.....	13-3126819....	06/04/2007	Generali USA Life Reassurance Company.....	MO.....	DIS/I.....	OL.....	0	131	133	(36)	0	0	0	0
97071.....	13-3126819....	06/04/2007	Generali USA Life Reassurance Company.....	MO.....	YRT/I.....	OL.....	9,252,999	16,038	17,516	14,718	0	0	0	0
97071.....	13-3126819....	10/01/2007	Generali USA Life Reassurance Company.....	MO.....	DIS/I.....	OL.....	0	3	3	26	0	0	0	0
97071.....	13-3126819....	10/01/2007	Generali USA Life Reassurance Company.....	MO.....	YRT/I.....	OL.....	2,728,584	5,703	5,267	7,179	0	0	0	0
97071.....	13-3126819....	10/10/2009	Generali USA Life Reassurance Company.....	MO.....	DIS/I.....	OL.....	0	42,587	29,356	3,098	0	0	0	0
97071.....	13-3126819....	10/10/2009	Generali USA Life Reassurance Company.....	MO.....	YRT/I.....	OL.....	282,505,339	793,552	698,331	1,132,042	0	0	0	0
88340.....	59-2859797....	01/19/2005	Hannover Life Reassurance Company Of America.....	FL.....	DIS/I.....	OL.....	0	19	27	41	0	0	0	0
88340.....	59-2859797....	01/19/2005	Hannover Life Reassurance Company Of America.....	FL.....	YRT/I.....	OL.....	1,691,825	2,929	2,702	3,981	0	0	0	0
88340.....	59-2859797....	09/01/2005	Hannover Life Reassurance Company Of America.....	FL.....	CO/I.....	XXXL.....	197,752,408	4,229,141	4,142,543	262,779	0	0	0	0
88340.....	59-2859797....	09/01/2005	Hannover Life Reassurance Company Of America.....	FL.....	DIS/I.....	OL.....	0	41,867	30,348	6,739	0	0	0	0
88340.....	59-2859797....	12/01/2005	Hannover Life Reassurance Company Of America.....	FL.....	CO/I.....	XXXL.....	70,982,759	1,560,013	1,591,420	90,057	0	0	0	0
88340.....	59-2859797....	12/01/2005	Hannover Life Reassurance Company Of America.....	FL.....	DIS/I.....	OL.....	0	15,865	11,725	1,884	0	0	0	0
88340.....	59-2859797....	01/01/2006	Hannover Life Reassurance Company Of America.....	FL.....	CO/I.....	XXXL.....	1,138,410,090	23,097,157	22,045,716	1,520,982	0	0	0	0
88340.....	59-2859797....	01/01/2006	Hannover Life Reassurance Company Of America.....	FL.....	DIS/I.....	OL.....	0	261,036	223,673	43,866	0	0	0	0
88340.....	59-2859797....	01/01/2006	Hannover Life Reassurance Company Of America.....	FL.....	YRT/I.....	OL.....	9,494,193	13,032	9,885	22,190	0	0	0	0
88340.....	59-2859797....	01/01/2010	Hannover Life Reassurance Company Of America.....	FL.....	YRT/I.....	OL.....	111,605,966	104,687	65,859	177,312	0	0	0	0
88340.....	59-2859797....	01/01/2014	Hannover Life Reassurance Company Of America.....	FL.....	DIS/I.....	OL.....	0	277	0	1,474	0	0	0	0
88340.....	59-2859797....	01/01/2014	Hannover Life Reassurance Company Of America.....	FL.....	YRT/I.....	OL.....	23,924,019	56,535	18,092	70,412	0	0	0	0
86258.....	13-2572994....	10/01/1988	General & Cologne Life Re of America.....	CT.....	YRT/I.....	OL.....	21,705	81	1,530	(59)	0	0	0	0
65676.....	35-0472300....	03/18/1982	Lincoln National Life Insurance Company.....	IN.....	DIS/I.....	OL.....	0	555	434	1,110	0	0	0	0
65676.....	35-0472300....	03/18/1982	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	7,317,901	373,837	355,636	447,146	0	0	0	0
65676.....	35-0472300....	03/09/1998	Lincoln National Life Insurance Company.....	IN.....	DIS/I.....	OL.....	0	160	150	133	0	0	0	0
65676.....	35-0472300....	03/09/1998	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	6,869,244	60,676	54,438	67,410	0	0	0	0
65676.....	35-0472300....	06/01/1998	Lincoln National Life Insurance Company.....	IN.....	DIS/I.....	OL.....	0	3,802	3,355	172	0	0	0	0
65676.....	35-0472300....	06/01/1998	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	12,066,040	126,154	118,354	110,229	0	0	0	0
65676.....	35-0472300....	02/01/1999	Lincoln National Life Insurance Company.....	IN.....	DIS/I.....	OL.....	0	562	532	261	0	0	0	0

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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		
65676.....	35-0472300....	02/01/1999	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	9,162,913	59,258	52,832	45,928	0	0	0	0
65676.....	35-0472300....	04/15/1999	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	OL.....	169,325,890	959,879	899,774	238,512	0	0	0	0
65676.....	35-0472300....	04/15/1999	Lincoln National Life Insurance Company.....	IN.....	DIS/I.....	OL.....	0	84,767	136,042	5,143	0	0	0	0
65676.....	35-0472300....	04/15/1999	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	88,147,878	526,521	544,434	380,152	0	0	0	0
65676.....	35-0472300....	03/01/2000	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	XXXL.....	107,126,379	2,221,035	2,586,680	173,629	0	0	0	0
65676.....	35-0472300....	03/01/2000	Lincoln National Life Insurance Company.....	IN.....	DIS/I.....	OL.....	0	66,674	71,907	5,789	0	0	0	0
65676.....	35-0472300....	03/15/2000	Lincoln National Life Insurance Company.....	IN.....	DIS/I.....	OL.....	0	1,423	1,324	195	0	0	0	0
65676.....	35-0472300....	03/15/2000	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	12,777,892	62,917	85,450	38,024	0	0	0	0
65676.....	35-0472300....	09/01/2000	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	XXXL.....	267,891,074	5,634,379	6,138,793	868,509	0	0	0	0
65676.....	35-0472300....	09/01/2000	Lincoln National Life Insurance Company.....	IN.....	DIS/I.....	OL.....	0	103,379	79,841	9,884	0	0	0	0
65676.....	35-0472300....	09/01/2000	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	3,790,462	18,710	21,550	13,798	0	0	0	0
65676.....	35-0472300....	09/05/2000	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	19,118,831	201,503	190,679	183,471	0	0	0	0
65676.....	35-0472300....	09/30/2000	Lincoln National Life Insurance Company.....	IN.....	DIS/I.....	OL.....	0	1,229	1,075	887	0	0	0	0
65676.....	35-0472300....	09/30/2000	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	19,964,711	98,278	85,848	107,341	0	0	0	0
65676.....	35-0472300....	07/01/2001	Lincoln National Life Insurance Company.....	IN.....	DIS/I.....	OL.....	0	16	19	171	0	0	0	0
65676.....	35-0472300....	07/01/2001	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	789,491	4,368	3,951	2,024	0	0	0	0
65676.....	35-0472300....	07/31/2001	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	XXXL.....	486,017,666	10,417,282	11,336,374	720,352	0	0	0	0
65676.....	35-0472300....	07/31/2001	Lincoln National Life Insurance Company.....	IN.....	DIS/I.....	OL.....	0	147,478	131,109	15,017	0	0	0	0
65676.....	35-0472300....	07/31/2001	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	13,526,440	86,185	76,757	64,525	0	0	0	0
65676.....	35-0472300....	01/01/2002	Lincoln National Life Insurance Company.....	IN.....	DIS/I.....	OL.....	0	601	617	1,020	0	0	0	0
65676.....	35-0472300....	01/01/2002	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	21,763,299	100,077	114,290	69,162	0	0	0	0
65676.....	35-0472300....	07/01/2002	Lincoln National Life Insurance Company.....	IN.....	DIS/I.....	OL.....	0	295	281	396	0	0	0	0
65676.....	35-0472300....	07/01/2002	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	14,837,642	121,220	116,064	79,522	0	0	0	0
65676.....	35-0472300....	01/01/2003	Lincoln National Life Insurance Company.....	IN.....	ADB/I.....	OL.....	0	0	0	0	0	0	0	0
65676.....	35-0472300....	01/01/2003	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	XXXL.....	112,968,438	2,638,189	2,758,137	171,658	0	0	0	0
65676.....	35-0472300....	01/01/2003	Lincoln National Life Insurance Company.....	IN.....	DIS/I.....	OL.....	0	36,576	32,266	3,939	0	0	0	0
65676.....	35-0472300....	01/01/2003	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	11,526,953	64,803	58,223	49,895	0	0	0	0
65676.....	35-0472300....	04/01/2003	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	21,674	40	37	21	0	0	0	0
65676.....	35-0472300....	01/19/2005	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	3,429,377	31,692	30,141	28,700	0	0	0	0
76694.....	23-2044256....	12/31/2009	London Life Insurance Company.....	PA.....	YRT/I.....	OL.....	6,325,290,602	0	0	25,535,184	0	0	0	0
66346.....	58-0828824....	04/01/1984	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	75,691	546	504	702	0	0	0	0
66346.....	58-0828824....	03/01/1998	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	458	421	0	0	0	0	0
66346.....	58-0828824....	03/01/1998	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	3,185,577	6,927	6,099	4,356	0	0	0	0
66346.....	58-0828824....	03/09/1998	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	160	150	133	0	0	0	0
66346.....	58-0828824....	03/09/1998	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	6,869,248	60,676	54,438	67,410	0	0	0	0
66346.....	58-0828824....	06/01/1998	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	3,802	3,355	172	0	0	0	0
66346.....	58-0828824....	06/01/1998	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	12,066,035	126,154	117,573	109,091	0	0	0	0
66346.....	58-0828824....	02/01/1999	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	562	532	261	0	0	0	0

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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		
66346.....	58-0828824....	02/01/1999	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	5,970,491	57,925	51,709	44,824	0	0	0	0
66346.....	58-0828824....	04/15/1999	Munich American Reassurance Company.....	GA.....	CO/I.....	OL.....	169,325,890	959,879	899,774	238,512	0	0	0	0
66346.....	58-0828824....	04/15/1999	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	84,541	135,952	4,960	0	0	0	0
66346.....	58-0828824....	04/15/1999	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	82,585,748	489,463	511,311	340,346	0	0	0	0
66346.....	58-0828824....	03/15/2000	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	1,423	1,324	195	0	0	0	0
66346.....	58-0828824....	03/15/2000	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	12,768,315	62,870	85,386	37,996	0	0	0	0
66346.....	58-0828824....	09/01/2000	Munich American Reassurance Company.....	GA.....	CO/I.....	XXXL.....	263,629,262	5,433,967	5,903,085	851,161	0	0	0	0
66346.....	58-0828824....	09/01/2000	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	99,045	75,807	9,013	0	0	0	0
66346.....	58-0828824....	09/01/2000	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	4,234,370	22,540	27,481	14,623	0	0	0	0
66346.....	58-0828824....	09/30/2000	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	1,672	1,486	1,081	0	0	0	0
66346.....	58-0828824....	09/30/2000	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	25,991,426	135,007	119,823	140,159	0	0	0	0
66346.....	58-0828824....	07/31/2001	Munich American Reassurance Company.....	GA.....	CO/I.....	XXXL.....	972,616,575	20,847,014	22,686,297	1,441,646	0	0	0	0
66346.....	58-0828824....	07/31/2001	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	189,548	166,874	29,599	0	0	0	0
66346.....	58-0828824....	07/31/2001	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	22,855,974	133,695	118,920	103,217	0	0	0	0
66346.....	58-0828824....	01/01/2002	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	864	870	1,475	0	0	0	0
66346.....	58-0828824....	01/01/2002	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	33,604,731	149,606	169,204	106,209	0	0	0	0
66346.....	58-0828824....	07/01/2002	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	468	445	657	0	0	0	0
66346.....	58-0828824....	07/01/2002	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	22,364,564	176,014	168,525	115,252	0	0	0	0
66346.....	58-0828824....	01/01/2003	Munich American Reassurance Company.....	GA.....	CO/I.....	XXXL.....	114,435,102	2,685,483	2,803,585	173,583	0	0	0	0
66346.....	58-0828824....	01/01/2003	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	36,668	32,358	4,124	0	0	0	0
66346.....	58-0828824....	01/01/2003	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	14,234,469	78,948	70,887	61,686	0	0	0	0
66346.....	58-0828824....	04/01/2003	Munich American Reassurance Company.....	GA.....	CO/I.....	XXXL.....	1,831,984,076	42,057,320	43,508,339	2,531,821	0	0	0	0
66346.....	58-0828824....	04/01/2003	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	461,138	160,118	62,988	0	0	0	0
66346.....	58-0828824....	04/01/2003	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	122,205,118	597,031	536,975	467,649	0	0	0	0
66346.....	58-0828824....	04/01/2004	Munich American Reassurance Company.....	GA.....	CO/I.....	XXXL.....	1,709,155,666	40,622,809	41,178,337	2,376,975	0	0	0	0
66346.....	58-0828824....	04/01/2004	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	237,446	180,762	50,303	0	0	0	0
66346.....	58-0828824....	04/01/2004	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	97,651,176	520,104	474,671	448,924	0	0	0	0
66346.....	58-0828824....	11/01/2004	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	0	0	12,584	(640)	0	0	0	0
66346.....	58-0828824....	01/19/2005	Munich American Reassurance Company.....	GA.....	CO/I.....	XXXL.....	913,063,680	20,726,592	21,077,384	1,274,113	0	0	0	0
66346.....	58-0828824....	01/19/2005	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	183,266	153,250	34,531	0	0	0	0
66346.....	58-0828824....	01/19/2005	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	155,050,248	561,566	442,340	408,078	0	0	0	0
66346.....	58-0828824....	07/01/2005	Munich American Reassurance Company.....	GA.....	CO/I.....	XXXL.....	168,635,118	4,260,225	4,272,915	324,124	0	0	0	0
66346.....	58-0828824....	07/01/2005	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	29,271	20,279	7,689	0	0	0	0
66346.....	58-0828824....	07/01/2005	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	80,388,527	317,822	303,688	103,175	0	0	0	0
66346.....	58-0828824....	09/01/2005	Munich American Reassurance Company.....	GA.....	CO/I.....	XXXL.....	223,013,890	5,157,856	5,177,952	419,117	0	0	0	0
66346.....	58-0828824....	09/01/2005	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	39,447	26,981	11,480	0	0	0	0
66346.....	58-0828824....	09/01/2005	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	101,592,552	258,999	252,393	121,392	0	0	0	0
66346.....	58-0828824....	12/01/2005	Munich American Reassurance Company.....	GA.....	CO/I.....	XXXL.....	67,061,627	1,640,823	1,648,687	124,733	0	0	0	0

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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

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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
66346.....	58-0828824....	12/01/2005	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	11,833	8,950	2,933	0	0	0	0
66346.....	58-0828824....	12/01/2005	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	49,706,780	477,147	506,118	61,070	0	0	0	0
66346.....	58-0828824....	01/01/2006	Munich American Reassurance Company.....	GA.....	CO/I.....	XXXL.....	649,004,854	12,454,506	12,078,871	1,013,761	0	0	0	0
66346.....	58-0828824....	01/01/2006	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	142,687	128,244	26,917	0	0	0	0
66346.....	58-0828824....	01/01/2006	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	101,906,596	423,608	380,874	631,245	0	0	0	0
66346.....	58-0828824....	06/04/2007	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	27	167	(1,445)	0	0	0	0
66346.....	58-0828824....	06/04/2007	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	5,688,338	9,456	24,059	(52,548)	0	0	0	0
66346.....	58-0828824....	10/01/2007	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	1,540	1,792	3,944	0	0	0	0
66346.....	58-0828824....	10/01/2007	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	135,142,995	393,912	349,421	567,811	0	0	0	0
66346.....	58-0828824....	10/10/2009	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	84,467	56,942	7,267	0	0	0	0
66346.....	58-0828824....	10/10/2009	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	321,956,443	802,733	707,645	1,197,574	0	0	0	0
66346.....	58-0828824....	04/01/2011	Munich American Reassurance Company.....	GA.....	CO/I.....	XXXL.....	7,443,850,687	123,563,617	110,668,180	10,122,948	0	0	0	0
66346.....	58-0828824....	04/01/2011	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	1,411,926	879,402	251,080	0	0	0	0
66346.....	58-0828824....	01/01/2014	Munich American Reassurance Company.....	GA.....	DIS/I.....	OL.....	0	536	0	6,182	0	0	0	0
66346.....	58-0828824....	01/01/2014	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	59,417,348	82,122	25,089	148,001	0	0	0	0
93572.....	43-1235868....	01/01/1977	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	0	28	0	0	0	0	0
93572.....	43-1235868....	01/01/1977	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	2,465,000	28,586	26,150	29,480	0	0	0	0
93572.....	43-1235868....	01/01/1983	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	161,249	142,582	0	0	0	0	0
93572.....	43-1235868....	01/01/1983	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	400,000	4,168	3,748	4,107	0	0	0	0
93572.....	43-1235868....	02/01/1983	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	28	200	480	0	0	0	0
93572.....	43-1235868....	02/01/1983	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	2,603,115	22,842	31,412	18,123	0	0	0	0
93572.....	43-1235868....	01/01/1984	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	2,326,358	52,134	71,711	49,342	0	0	0	0
93572.....	43-1235868....	06/01/1984	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	6,393,440	266,887	249,493	245,199	0	0	0	0
93572.....	43-1235868....	01/01/1987	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	5,173	5,431	1,893	0	0	0	0
93572.....	43-1235868....	01/01/1987	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	57,557,304	1,044,921	1,075,575	1,144,734	0	0	0	0
93572.....	43-1235868....	05/01/1988	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	84	145	240	0	0	0	0
93572.....	43-1235868....	05/01/1988	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	675,000	5,236	4,730	8,110	0	0	0	0
93572.....	43-1235868....	11/14/1991	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	2	2	0	0	0	0	0
93572.....	43-1235868....	11/14/1991	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	18,111,033	176,968	171,435	278,576	0	0	0	0
93572.....	43-1235868....	01/01/1994	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	128	156	238	0	0	0	0
93572.....	43-1235868....	01/01/1994	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	20,210,986	607,659	565,042	780,837	0	0	0	0
93572.....	43-1235868....	10/01/1995	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	2,480	2,252	1,501	0	0	0	0
93572.....	43-1235868....	10/01/1995	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	44,260,477	559,244	544,031	664,742	0	0	0	0
93572.....	43-1235868....	07/01/1997	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	633	827	1,070	0	0	0	0
93572.....	43-1235868....	07/01/1997	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	26,227,011	284,306	258,625	261,771	0	0	0	0
93572.....	43-1235868....	03/09/1998	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	321	301	266	0	0	0	0
93572.....	43-1235868....	03/09/1998	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	16,058,923	160,493	143,690	175,430	0	0	0	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION

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

43.5

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		
93572.....	43-1235868....	06/01/1998	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	4,277	3,794	343	0	0	0	0
93572.....	43-1235868....	06/01/1998	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	25,487,952	259,002	241,194	223,907	0	0	0	0
93572.....	43-1235868....	02/01/1999	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	622	588	392	0	0	0	0
93572.....	43-1235868....	02/01/1999	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	9,765,228	90,805	80,830	70,221	0	0	0	0
93572.....	43-1235868....	04/15/1999	RGA Reinsurance Company.....	MO.....	CO/I.....	OL.....	169,325,890	959,879	899,774	238,547	0	0	0	0
93572.....	43-1235868....	04/15/1999	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	92,974	151,308	5,231	0	0	0	0
93572.....	43-1235868....	04/15/1999	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	150,899,726	1,022,234	1,038,570	787,062	0	0	0	0
93572.....	43-1235868....	03/15/2000	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	1,423	1,324	292	0	0	0	0
93572.....	43-1235868....	03/15/2000	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	23,757,260	285,643	297,943	131,253	0	0	0	0
93572.....	43-1235868....	09/01/2000	RGA Reinsurance Company.....	MO.....	CO/I.....	XXXL.....	263,329,258	5,433,424	5,903,085	851,286	0	0	0	0
93572.....	43-1235868....	09/01/2000	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	100,551	77,299	9,125	0	0	0	0
93572.....	43-1235868....	09/01/2000	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	4,558,100	27,501	33,050	20,590	0	0	0	0
93572.....	43-1235868....	09/30/2000	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	1,731	1,540	1,106	0	0	0	0
93572.....	43-1235868....	09/30/2000	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	38,680,315	373,400	333,014	348,898	0	0	0	0
93572.....	43-1235868....	07/31/2001	RGA Reinsurance Company.....	MO.....	CO/I.....	XXXL.....	537,704,666	10,888,560	12,138,040	770,196	0	0	0	0
93572.....	43-1235868....	07/31/2001	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	147,840	131,456	15,674	0	0	0	0
93572.....	43-1235868....	07/31/2001	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	39,994,656	204,700	179,682	139,314	0	0	0	0
93572.....	43-1235868....	01/01/2002	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	893	899	1,524	0	0	0	0
93572.....	43-1235868....	01/01/2002	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	55,197,789	566,303	581,425	425,529	0	0	0	0
93572.....	43-1235868....	07/01/2002	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	434	415	578	0	0	0	0
93572.....	43-1235868....	07/01/2002	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	25,929,226	349,185	323,753	218,770	0	0	0	0
93572.....	43-1235868....	01/01/2003	RGA Reinsurance Company.....	MO.....	CO/I.....	XXXL.....	115,393,438	2,778,275	2,899,672	181,793	0	0	0	0
93572.....	43-1235868....	01/01/2003	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	36,689	32,385	4,166	0	0	0	0
93572.....	43-1235868....	01/01/2003	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	19,192,299	110,470	99,044	85,364	0	0	0	0
93572.....	43-1235868....	04/01/2003	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	1,238	1,317	2,077	0	0	0	0
93572.....	43-1235868....	04/01/2003	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	121,670,731	1,019,378	898,131	637,443	0	0	0	0
93572.....	43-1235868....	04/01/2004	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	1,464	1,553	1,213	0	0	0	0
93572.....	43-1235868....	04/01/2004	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	137,964,409	587,162	618,224	584,148	0	0	0	0
93572.....	43-1235868....	01/19/2005	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	2,595	1,947	3,252	0	0	0	0
93572.....	43-1235868....	01/19/2005	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	100,278,917	614,024	513,772	389,111	0	0	0	0
93572.....	43-1235868....	06/04/2007	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	27	167	(1,446)	0	0	0	0
93572.....	43-1235868....	06/04/2007	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	3,076,476	7,725	21,893	(36,157)	0	0	0	0
93572.....	43-1235868....	10/01/2007	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	1,514	1,412	3,886	0	0	0	0
93572.....	43-1235868....	10/01/2007	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	146,151,210	458,990	405,058	692,317	0	0	0	0
93572.....	43-1235868....	07/01/2008	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	5,325,009	20,156	18,585	12,974	0	0	0	0
93572.....	43-1235868....	10/10/2009	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	43,150	30,317	3,644	0	0	0	0
93572.....	43-1235868....	10/10/2009	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	344,386,158	1,246,341	1,085,091	1,949,324	0	0	0	0
93572.....	43-1235868....	01/01/2014	RGA Reinsurance Company.....	MO.....	DIS/I.....	OL.....	0	502	0	2,160	0	0	0	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION

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
93572.....	43-1235868....	01/01/2014	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	38,719,888	71,711	42,758	147,217	0	0	0	0
68713.....	84-0499703....	08/01/1993	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	6	4	0	0	0	0	0
68713.....	84-0499703....	08/01/1993	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	3,428,412	25,970	22,177	43,093	0	0	0	0
68713.....	84-0499703....	01/01/1994	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	101	127	184	0	0	0	0
68713.....	84-0499703....	01/01/1994	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	15,118,376	180,350	193,898	237,265	0	0	0	0
68713.....	84-0499703....	10/01/1995	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	2,480	2,252	1,497	0	0	0	0
68713.....	84-0499703....	10/01/1995	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	36,519,567	540,112	671,665	493,831	0	0	0	0
68713.....	84-0499703....	07/01/1997	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	738	929	1,278	0	0	0	0
68713.....	84-0499703....	07/01/1997	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	22,122,871	427,074	435,413	544,096	0	0	0	0
68713.....	84-0499703....	03/09/1998	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	321	301	265	0	0	0	0
68713.....	84-0499703....	03/09/1998	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	14,243,918	123,638	110,942	137,226	0	0	0	0
68713.....	84-0499703....	06/01/1998	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	4,517	4,027	820	0	0	0	0
68713.....	84-0499703....	06/01/1998	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	26,680,903	272,018	250,099	233,256	0	0	0	0
68713.....	84-0499703....	06/08/1998	Security Life of Denver Insurance Company.....	CO.....	ADB/I.....	OL.....	0	0	392	0	0	0	0	0
68713.....	84-0499703....	06/08/1998	Security Life of Denver Insurance Company.....	CO.....	CO/I.....	OL.....	171,133,510	1,005,109	941,942	273,165	0	0	0	0
68713.....	84-0499703....	06/08/1998	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	36,321	34,549	4,897	0	0	0	0
68713.....	84-0499703....	06/08/1998	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	580,326	1,124	2,241	1,791	0	0	0	0
68713.....	84-0499703....	02/01/1999	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	622	588	391	0	0	0	0
68713.....	84-0499703....	02/01/1999	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	9,019,021	87,187	77,843	67,312	0	0	0	0
68713.....	84-0499703....	04/15/1999	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	28,087	50,139	599	0	0	0	0
68713.....	84-0499703....	04/15/1999	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	122,404,011	755,173	782,425	524,510	0	0	0	0
68713.....	84-0499703....	03/15/2000	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	1,423	1,324	292	0	0	0	0
68713.....	84-0499703....	03/15/2000	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	19,157,260	94,329	128,111	56,882	0	0	0	0
68713.....	84-0499703....	09/01/2000	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	380	342	99	0	0	0	0
68713.....	84-0499703....	09/01/2000	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	6,454,600	32,518	38,987	21,268	0	0	0	0
68713.....	84-0499703....	09/05/2000	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	19,118,780	201,503	190,678	183,066	0	0	0	0
68713.....	84-0499703....	09/30/2000	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	1,952	1,809	850	0	0	0	0
68713.....	84-0499703....	09/30/2000	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	40,390,659	209,878	188,398	232,270	0	0	0	0
68713.....	84-0499703....	10/02/2000	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	730,094	11,313	10,937	10,270	0	0	0	0
68713.....	84-0499703....	07/31/2001	Security Life of Denver Insurance Company.....	CO.....	CO/I.....	XXXL.....	486,310,270	10,423,557	11,343,204	719,194	0	0	0	0
68713.....	84-0499703....	07/31/2001	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	148,169	131,764	16,067	0	0	0	0
68713.....	84-0499703....	07/31/2001	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	24,178,833	170,292	152,525	119,236	0	0	0	0
68713.....	84-0499703....	01/01/2002	Security Life of Denver Insurance Company.....	CO.....	CO/I.....	XXXL.....	25,974,042	1,023,979	989,795	62,945	0	0	0	0
68713.....	84-0499703....	01/01/2002	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	6,968	6,229	3,072	0	0	0	0
68713.....	84-0499703....	01/01/2002	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	41,369,911	209,893	236,607	144,636	0	0	0	0
68713.....	84-0499703....	05/01/2002	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	6,153	6,831	12,016	0	0	0	0
68713.....	84-0499703....	05/01/2002	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	152,012,171	2,362,909	2,286,072	1,307,720	0	0	0	0
68713.....	84-0499703....	07/01/2002	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	501	479	623	0	0	0	0

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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
68713.....	84-0499703....	07/01/2002	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	29,259,637	326,294	309,007	182,932	0	0	0	0
68713.....	84-0499703....	01/01/2003	Security Life of Denver Insurance Company.....	CO.....	CO/I.....	XXXL.....	91,036,063	1,995,930	2,132,180	129,599	0	0	0	0
68713.....	84-0499703....	01/01/2003	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	30,907	27,337	3,119	0	0	0	0
68713.....	84-0499703....	01/01/2003	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	21,863,873	140,710	125,758	113,691	0	0	0	0
68713.....	84-0499703....	04/01/2003	Security Life of Denver Insurance Company.....	CO.....	CO/I.....	XXXL.....	448,117,543	21,335,784	22,550,996	600,092	0	0	0	0
68713.....	84-0499703....	04/01/2003	Security Life of Denver Insurance Company.....	CO.....	CO/I.....	AXXX.....	388,216,411	20,021,349	19,536,541	519,876	0	0	0	0
68713.....	84-0499703....	04/01/2003	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	253,215	159,920	28,348	0	0	0	0
68713.....	84-0499703....	04/01/2003	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	100,940,068	566,617	512,966	427,687	0	0	0	0
68713.....	84-0499703....	04/01/2004	Security Life of Denver Insurance Company.....	CO.....	CO/I.....	XXXL.....	790,280,409	20,297,114	19,958,669	1,015,345	0	0	0	0
68713.....	84-0499703....	04/01/2004	Security Life of Denver Insurance Company.....	CO.....	DIS/I.....	OL.....	0	194,096	142,042	22,920	0	0	0	0
68713.....	84-0499703....	04/01/2004	Security Life of Denver Insurance Company.....	CO.....	YRT/I.....	OL.....	80,553,801	524,618	473,976	348,570	0	0	0	0
82627.....	06-0839705....	11/01/1981	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	1,757,311	18,686	16,820	43,440	0	0	0	0
82627.....	06-0839705....	01/01/1982	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	157	338	60	0	0	0	0
82627.....	06-0839705....	01/01/1982	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	510,000	3,099	3,386	4,529	0	0	0	0
82627.....	06-0839705....	06/06/1983	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	869,475	47,216	102,433	7,435	0	0	0	0
82627.....	06-0839705....	06/01/1984	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	48	180	94	0	0	0	0
82627.....	06-0839705....	06/01/1984	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	4,690,610	93,066	90,043	85,050	0	0	0	0
82627.....	06-0839705....	01/01/1987	Swiss Re Life & Health America, Inc.....	CT.....	ADB/I.....	OL.....	0	0	48	0	0	0	0	0
82627.....	06-0839705....	01/01/1987	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	1,761	1,687	1,453	0	0	0	0
82627.....	06-0839705....	01/01/1987	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	37,316,570	946,712	914,287	1,046,556	0	0	0	0
82627.....	06-0839705....	01/01/1990	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	2,139	1,568	2,481	0	0	0	0
82627.....	06-0839705....	01/01/1990	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	900,000	3,807	3,447	6,118	0	0	0	0
82627.....	06-0839705....	11/14/1991	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	50	36	0	0	0	0	0
82627.....	06-0839705....	11/14/1991	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	19,342,900	344,932	302,655	570,015	0	0	0	0
82627.....	06-0839705....	10/16/1992	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	262,035	252,395	0	0	0	0	0
82627.....	06-0839705....	10/16/1992	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	650,000	8,288	7,495	17,862	0	0	0	0
82627.....	06-0839705....	08/01/1993	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	6	4	0	0	0	0	0
82627.....	06-0839705....	08/01/1993	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	4,491,299	41,770	86,973	59,739	0	0	0	0
82627.....	06-0839705....	01/01/1994	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	372	456	529	0	0	0	0
82627.....	06-0839705....	01/01/1994	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	40,831,043	492,944	499,029	564,456	0	0	0	0
82627.....	06-0839705....	10/01/1995	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	7,622	6,900	4,568	0	0	0	0
82627.....	06-0839705....	10/01/1995	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	98,305,730	1,339,679	1,431,842	1,456,489	0	0	0	0
82627.....	06-0839705....	07/01/1997	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	1,898	2,480	3,211	0	0	0	0
82627.....	06-0839705....	07/01/1997	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	56,363,104	889,496	810,848	954,146	0	0	0	0
82627.....	06-0839705....	03/09/1998	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	642	601	532	0	0	0	0
82627.....	06-0839705....	03/09/1998	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	28,599,812	250,229	224,591	277,782	0	0	0	0
82627.....	06-0839705....	06/01/1998	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	8,554	7,588	687	0	0	0	0
82627.....	06-0839705....	06/01/1998	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	48,801,709	508,783	473,705	440,074	0	0	0	0

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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		
82627.....	06-0839705....	02/01/1999	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	622	588	392	0	0	0	0
82627.....	06-0839705....	02/01/1999	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	9,812,862	153,820	137,428	118,224	0	0	0	0
82627.....	06-0839705....	04/15/1999	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	28,087	50,139	601	0	0	0	0
82627.....	06-0839705....	04/15/1999	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	127,691,823	992,758	1,025,852	602,040	0	0	0	0
82627.....	06-0839705....	03/15/2000	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	1,423	1,324	292	0	0	0	0
82627.....	06-0839705....	03/15/2000	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	19,157,260	94,329	128,111	57,020	0	0	0	0
82627.....	06-0839705....	09/01/2000	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	380	342	77	0	0	0	0
82627.....	06-0839705....	09/01/2000	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	4,408,100	23,464	28,608	15,226	0	0	0	0
82627.....	06-0839705....	09/05/2000	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	19,118,783	201,503	190,678	183,510	0	0	0	0
82627.....	06-0839705....	09/29/2000	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	798,818	55,058	49,913	36,613	0	0	0	0
82627.....	06-0839705....	09/30/2000	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	1,508	1,398	657	0	0	0	0
82627.....	06-0839705....	09/30/2000	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	20,657,670	140,313	127,233	132,903	0	0	0	0
82627.....	06-0839705....	10/02/2000	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	730,094	11,313	10,937	10,295	0	0	0	0
82627.....	06-0839705....	07/31/2001	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	1,538	1,390	1,438	0	0	0	0
82627.....	06-0839705....	07/31/2001	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	20,607,812	174,171	158,305	115,126	0	0	0	0
82627.....	06-0839705....	01/01/2002	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	888	894	1,513	0	0	0	0
82627.....	06-0839705....	01/01/2002	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	39,806,631	346,469	367,518	186,489	0	0	0	0
82627.....	06-0839705....	07/01/2002	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	327	315	364	0	0	0	0
82627.....	06-0839705....	07/01/2002	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	19,494,617	177,013	169,684	115,094	0	0	0	0
82627.....	06-0839705....	01/01/2003	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	271	284	542	0	0	0	0
82627.....	06-0839705....	01/01/2003	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	17,316,638	107,013	95,868	81,579	0	0	0	0
82627.....	06-0839705....	04/01/2003	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	3,000,000	2,832	2,528	2,855	0	0	0	0
82627.....	06-0839705....	01/19/2005	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	3,429,378	31,692	30,141	28,706	0	0	0	0
82627.....	06-0839705....	01/01/2006	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	72,798,634	389,767	366,155	335,453	0	0	0	0
82627.....	06-0839705....	07/01/2008	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	7,415,167	27,576	25,076	20,346	0	0	0	0
82627.....	06-0839705....	01/01/2010	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	111,775,061	104,658	65,715	146,638	0	0	0	0
82627.....	06-0839705....	07/01/2011	Swiss Re Life & Health America, Inc.....	CT.....	CO/I.....	XXXL.....	7,443,850,512	123,555,588	110,686,226	10,123,048	0	0	0	0
82627.....	06-0839705....	07/01/2011	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	1,411,926	992,523	251,133	0	0	0	0
82627.....	06-0839705....	03/19/2013	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	9,695,865	1,883	1,669	2,619	0	0	0	0
82627.....	06-0839705....	01/01/2014	Swiss Re Life & Health America, Inc.....	CT.....	DIS/I.....	OL.....	0	1,088	0	7,368	0	0	0	0
82627.....	06-0839705....	01/01/2014	Swiss Re Life & Health America, Inc.....	CT.....	YRT/I.....	OL.....	66,075,148	90,534	47,833	210,275	0	0	0	0
87572.....	23-2038295....	09/01/2000	Scottish Re U.S. Inc.....	NC.....	DIS/I.....	OL.....	0	823	753	216	0	0	0	0
87572.....	23-2038295....	09/01/2000	Scottish Re U.S. Inc.....	NC.....	YRT/I.....	OL.....	5,493,124	31,638	31,175	25,684	0	0	0	0
87572.....	23-2038295....	09/30/2000	Scottish Re U.S. Inc.....	NC.....	YRT/I.....	OL.....	1,623,083	11,134	9,993	14,469	0	0	0	0
87572.....	23-2038295....	07/31/2001	Scottish Re U.S. Inc.....	NC.....	DIS/I.....	OL.....	0	808	700	423	0	0	0	0
87572.....	23-2038295....	07/31/2001	Scottish Re U.S. Inc.....	NC.....	YRT/I.....	OL.....	4,442,406	35,558	31,909	21,846	0	0	0	0
87572.....	23-2038295....	01/01/2002	Scottish Re U.S. Inc.....	NC.....	DIS/I.....	OL.....	0	269	296	445	0	0	0	0

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Without Life or Disability Contingencies, and Related Benefits Listed by Reinsuring Company as of December 31, Current Year

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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		
87572.....	23-2038295....	01/01/2002	Scottish Re U.S. Inc.....	NC.....	YRT/I.....	OL.....	7,565,863	38,954	45,986	23,894	0	0	0	0
87572.....	23-2038295....	07/01/2002	Scottish Re U.S. Inc.....	NC.....	DIS/I.....	OL.....	0	96	93	107	0	0	0	0
87572.....	23-2038295....	07/01/2002	Scottish Re U.S. Inc.....	NC.....	YRT/I.....	OL.....	5,733,695	52,063	49,907	33,851	0	0	0	0
87572.....	23-2038295....	01/01/2003	Scottish Re U.S. Inc.....	NC.....	DIS/I.....	OL.....	0	69	73	139	0	0	0	0
87572.....	23-2038295....	01/01/2003	Scottish Re U.S. Inc.....	NC.....	YRT/I.....	OL.....	4,435,528	27,261	24,437	20,820	0	0	0	0
87572.....	23-2038295....	01/19/2005	Scottish Re U.S. Inc.....	NC.....	YRT/I.....	OL.....	3,429,371	31,691	30,141	28,706	0	0	0	0
87572.....	23-2038295....	01/01/2006	Scottish Re U.S. Inc.....	NC.....	YRT/I.....	OL.....	36,399,335	194,883	183,078	167,726	0	0	0	0
64688.....	75-6020048....	04/01/2004	SCOR Global Life Americas Reinsurance Company.....	TX.....	YRT/I.....	OL.....	4,448,507	1,450	1,128	6,485	0	0	0	0
64688.....	75-6020048....	01/19/2005	SCOR Global Life Americas Reinsurance Company.....	TX.....	YRT/I.....	OL.....	1,827,474	409	278	3,179	0	0	0	0
64688.....	75-6020048....	01/01/2006	SCOR Global Life Americas Reinsurance Company.....	TX.....	DIS/I.....	OL.....	0	0	0	0	0	0	0	0
64688.....	75-6020048....	01/01/2006	SCOR Global Life Americas Reinsurance Company.....	TX.....	YRT/I.....	OL.....	10,378,029	1,637	720	14,234	0	0	0	0
64688.....	75-6020048....	10/01/2007	SCOR Global Life Americas Reinsurance Company.....	TX.....	DIS/I.....	OL.....	0	1,369	1,402	2,482	0	0	0	0
64688.....	75-6020048....	10/01/2007	SCOR Global Life Americas Reinsurance Company.....	TX.....	YRT/I.....	OL.....	96,035,035	334,812	307,670	407,373	0	0	0	0
64688.....	75-6020048....	10/10/2009	SCOR Global Life Americas Reinsurance Company.....	TX.....	DIS/I.....	OL.....	0	1,473	1,320	3,011	0	0	0	0
64688.....	75-6020048....	10/10/2009	SCOR Global Life Americas Reinsurance Company.....	TX.....	YRT/I.....	OL.....	241,067,604	938,115	835,743	1,487,342	0	0	0	0
64688.....	75-6020048....	01/01/2014	SCOR Global Life Americas Reinsurance Company.....	TX.....	DIS/I.....	OL.....	0	708	0	9,527	0	0	0	0
64688.....	75-6020048....	01/01/2014	SCOR Global Life Americas Reinsurance Company.....	TX.....	YRT/I.....	OL.....	79,362,521	131,141	58,492	243,825	0	0	0	0
86231.....	39-0989781....	01/01/2006	Transamerica Life Insurance Company.....	NC.....	ADB/I.....	OL.....	0	0	0	0	0	0	0	0
86231.....	39-0989781....	01/01/2006	Transamerica Life Insurance Company.....	NC.....	CO/I.....	XXXL.....	1,437,768,200	29,039,090	22,469,670	1,919,688	0	0	0	0
86231.....	39-0989781....	01/01/2006	Transamerica Life Insurance Company.....	NC.....	DIS/I.....	OL.....	0	265,630	228,143	54,733	0	0	0	0
86231.....	39-0989781....	01/01/2006	Transamerica Life Insurance Company.....	NC.....	YRT/I.....	OL.....	143,630,076	857,647	778,554	1,096,410	0	0	0	0
86231.....	39-0989781....	06/04/2007	Transamerica Life Insurance Company.....	NC.....	DIS/I.....	OL.....	0	43	40	86	0	0	0	0
86231.....	39-0989781....	06/04/2007	Transamerica Life Insurance Company.....	NC.....	YRT/I.....	OL.....	4,018,335	10,106	16,022	1,768	0	0	0	0
86231.....	39-0989781....	10/01/2007	Transamerica Life Insurance Company.....	NC.....	DIS/I.....	OL.....	0	1,532	1,570	2,346	0	0	0	0
86231.....	39-0989781....	10/01/2007	Transamerica Life Insurance Company.....	NC.....	YRT/I.....	OL.....	154,127,754	492,386	454,021	700,506	0	0	0	0
80659.....	38-0397420....	04/01/2004	The Canada Life Assurance Company.....	MI.....	CO/I.....	XXXL.....	616,166,249	14,857,704	14,930,937	829,966	0	0	0	0
80659.....	38-0397420....	04/01/2004	The Canada Life Assurance Company.....	MI.....	DIS/I.....	OL.....	0	192,249	140,344	17,925	0	0	0	0
80659.....	38-0397420....	04/01/2004	The Canada Life Assurance Company.....	MI.....	YRT/I.....	OL.....	8,478,692	18,077	14,715	27,897	0	0	0	0
80659.....	38-0397420....	01/19/2005	The Canada Life Assurance Company.....	MI.....	CO/I.....	XXXL.....	450,369,988	10,132,629	10,018,464	587,619	0	0	0	0
80659.....	38-0397420....	01/19/2005	The Canada Life Assurance Company.....	MI.....	DIS/I.....	OL.....	0	143,360	107,278	13,769	0	0	0	0
80659.....	38-0397420....	01/19/2005	The Canada Life Assurance Company.....	MI.....	YRT/I.....	OL.....	5,119,801	9,800	8,256	12,807	0	0	0	0
80659.....	38-0397420....	07/01/2005	The Canada Life Assurance Company.....	MI.....	CO/I.....	XXXL.....	169,913,888	5,026,480	5,069,694	349,315	0	0	0	0
80659.....	38-0397420....	07/01/2005	The Canada Life Assurance Company.....	MI.....	DIS/I.....	OL.....	0	38,819	26,071	5,395	0	0	0	0
80659.....	38-0397420....	09/01/2005	The Canada Life Assurance Company.....	MI.....	CO/I.....	XXXL.....	226,208,326	5,076,745	4,992,042	334,420	0	0	0	0
80659.....	38-0397420....	09/01/2005	The Canada Life Assurance Company.....	MI.....	DIS/I.....	OL.....	0	58,371	40,456	7,629	0	0	0	0
80659.....	38-0397420....	01/01/2014	The Canada Life Assurance Company.....	MI.....	DIS/I.....	OL.....	0	449	0	4,220	0	0	0	0
80659.....	38-0397420....	01/01/2014	The Canada Life Assurance Company.....	MI.....	YRT/I.....	OL.....	31,612,909	40,974	16,587	81,533	0	0	0	0
80675.....	38-0397420....	08/01/1982	The Canada Life Assurance Company.....	MI.....	COMB/I.....	OL.....	497,401	8,720	7,941	9,871	0	0	0	0

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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		
80675.....	38-0397420....	09/10/1987	The Canada Life Assurance Company.....	MI.....	YRT/I.....	OL.....	100,661	1,580	1,392	2,898	0	0	0	0
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						45,646,492,092	695,434,774	668,883,528	112,564,526	0	0	0	0
1099999.	Total - General Account - Authorized - Non-Affiliates.....						45,646,492,092	695,434,774	668,883,528	112,564,526	0	0	0	0
1199999.	Total - General Account - Authorized.....						47,772,823,857	1,489,865,551	1,356,131,293	200,127,421	0	0	0	0
General Account - Unauthorized - Affiliates - U.S. - Captive														
15855.....	47-4249160....	12/31/2015	Camargo Re Inc.....	OH.....	CO/I.....	XXXL.....	12,576,572,868	20,372,685	0	16,798,353	0	0	0	0
15855.....	47-4249160....	12/31/2015	Camargo Re Inc.....	OH.....	DIS/I.....	OL.....	0	604,530	0	308,547	0	0	0	0
15363.....	80-0955278....	12/31/2013	Kenwood Re Inc.....	VT.....	CO/I.....	XXXL.....	56,684,712,277	408,057,796	333,825,232	80,351,084	0	0	0	0
15363.....	80-0955278....	12/31/2013	Kenwood Re Inc.....	VT.....	DIS/I.....	OL.....	0	5,951,917	3,836,078	1,984,405	0	0	0	0
13575.....	26-3791519....	12/31/2008	Montgomery Re.....	VT.....	CO/I.....	XXXL.....	0	0	0	(56,040)	0	0	0	0
13575.....	26-3791519....	06/30/2009	Montgomery Re.....	VT.....	CO/I.....	XXXL.....	6,430,253,771	25,623,502	43,968,972	2,310,015	0	0	0	0
13575.....	26-3791519....	06/30/2009	Montgomery Re.....	VT.....	DIS/I.....	OL.....	0	802,875	846,171	167,571	0	0	0	0
13575.....	26-3791519....	05/01/2011	Montgomery Re.....	VT.....	CO/I.....	XXXL.....	2,500,000	8,835	6,342	40,843	0	0	0	0
13575.....	26-3791519....	05/01/2011	Montgomery Re.....	VT.....	CO/I.....	AXXX.....	497,445,573	155,411,448	138,845,805	8,126,845	0	0	0	0
13575.....	26-3791519....	05/01/2011	Montgomery Re.....	VT.....	DIS/I.....	OL.....	0	313,462	204,256	0	0	0	0	0
13575.....	26-3791519....	07/01/2012	Montgomery Re.....	VT.....	CO/I.....	XXXL.....	13,301,329,676	117,618,752	115,026,521	20,781,617	0	0	0	0
13575.....	26-3791519....	07/01/2012	Montgomery Re.....	VT.....	DIS/I.....	OL.....	0	1,793,477	1,281,151	501,437	0	0	0	0
1288888.	Total - General Account - Unauthorized - Affiliates - U.S. - Captive.....						89,492,814,165	736,559,279	637,840,528	131,314,677	0	0	0	0
1499999.	Total - General Account - Unauthorized - Affiliates - U.S. - Total.....						89,492,814,165	736,559,279	637,840,528	131,314,677	0	0	0	0
1899999.	Total - General Account - Unauthorized - Affiliates.....						89,492,814,165	736,559,279	637,840,528	131,314,677	0	0	0	0
General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates														
0.....	AA-3190770...	01/01/2006	Ace Tempest Life Reinsurance.....	BMU.....	DIS/I.....	OL.....	0	389	528	820	0	0	0	0
0.....	AA-3190770...	01/01/2006	Ace Tempest Life Reinsurance.....	BMU.....	YRT/I.....	OL.....	46,814,557	201,617	178,383	228,425	0	0	0	0
2099999.	Total - General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates.....						46,814,557	202,006	178,911	229,245	0	0	0	0
2199999.	Total - General Account - Unauthorized - Non-Affiliates.....						46,814,557	202,006	178,911	229,245	0	0	0	0
2299999.	Total - General Account - Unauthorized.....						89,539,628,722	736,761,285	638,019,439	131,543,922	0	0	0	0
3499999.	Total - General Account - Authorized, Unauthorized and Certified.....						137,312,452,579	2,226,626,836	1,994,150,732	331,671,343	0	0	0	0
6999999.	Total U.S.....						137,265,638,022	2,226,424,830	1,993,971,821	331,442,098	0	0	0	0
7099999.	Total Non-U.S.....						46,814,557	202,006	178,911	229,245	0	0	0	0
9999999.	Total.....						137,312,452,579	2,226,626,836	1,994,150,732	331,671,343	0	0	0	0

43.10

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													
39845.....	48-0921045....	..09/01/1967	Employer's Reinsurance Corporation.....	MO.....	CO/I.....	LTDI.....	12,232	2,505	64,704	0	0	0	0
86258.....	13-2572994....	..01/01/1999	General e Life Corporation.....	CT.....	CO/I.....	LTDI.....	470,281	215,931	1,268,296	0	0	0	0
66346.....	58-0828824....	..01/01/1999	Munich American Reassurance Company	GA.....	CO/I.....	LTDI.....	4,758,092	2,413,074	3,716,724	0	0	0	0
82627.....	06-0839705....	..02/01/1981	Swiss Re Life & Health America, Inc.....	CT.....	CO/I.....	LTDI.....	5,217,007	2,672,919	90,874,746	0	0	0	0
67598.....	04-1768571....	..11/01/1988	Paul Revere Life Ins Co.....	MA.....	CO/I.....	LTDI.....	475,635	277,302	13,205,923	0	0	0	0
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						10,933,247	5,581,731	109,130,393	0	0	0	0
1099999.	Total - General Account - Authorized - Non-Affiliates.....						10,933,247	5,581,731	109,130,393	0	0	0	0
1199999.	Total - General Account - Authorized.....						10,933,247	5,581,731	109,130,393	0	0	0	0
3499999.	Total - General Account - Authorized, Unauthorized and Certified.....						10,933,247	5,581,731	109,130,393	0	0	0	0
6999999.	Total - U.S.....						10,933,247	5,581,731	109,130,393	0	0	0	0
9999999.	Total.....						10,933,247	5,581,731	109,130,393	0	0	0	0

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total (Cols. 5 + 6 + 7)	Letters of Credit	Issuing or Confirming Bank Reference Number (a)	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9 + 11 + 12 + 13 + 14 But Not in Excess of Col. 8
General Account - Life and Annuity - Affiliates - U.S. - Captive														
15855.....	47-4249160.	..12/31/2015	Camargo Re Inc.....	20,372,685	0	0	20,372,685	0	0.....	13,943,717	0	12,392,439	4,543,053	20,372,685
15855.....	47-4249160.	..12/31/2015	Camargo Re Inc.....	604,530	0	0	604,530	0	0.....	1,056,283	0	0	134,809	604,530
15363.....	80-0955278.	..12/31/2013	Kenwood Re Inc.....	408,057,796	11,687,078	0	419,744,874	0	0.....	132,697,141	0	283,657,610	7,063,767	419,744,874
15363.....	80-0955278.	..12/31/2013	Kenwood Re Inc.....	5,951,917	170,467	0	6,122,384	0	0.....	6,348,884	0	0	103,032	6,122,384
13575.....	26-3791519.	..06/30/2009	Montgomery Re.....	25,623,502	222,357	0	25,845,859	0	0.....	23,644,096	0	8,053,892	325,969	25,845,859
13575.....	26-3791519.	..06/30/2009	Montgomery Re.....	802,875	6,967	0	809,842	0	0.....	1,080,460	0	0	10,214	809,842
13575.....	26-3791519.	..05/01/2011	Montgomery Re.....	8,835	77	0	8,912	0	0.....	8,152	0	2,777	112	8,912
13575.....	26-3791519.	..05/01/2011	Montgomery Re.....	155,411,448	1,348,640	0	156,760,088	0	0.....	143,405,969	0	48,848,400	1,977,064	156,760,088
13575.....	26-3791519.	..05/01/2011	Montgomery Re.....	313,462	2,720	0	316,182	0	0.....	421,838	0	0	3,988	316,182
13575.....	26-3791519.	..07/01/2012	Montgomery Re.....	117,618,752	1,020,680	0	118,639,432	0	0.....	108,532,746	0	36,969,528	1,496,285	118,639,432
13575.....	26-3791519.	..07/01/2012	Montgomery Re.....	1,793,477	15,564	0	1,809,041	0	0.....	2,413,550	0	0	22,816	1,809,041
0199999.	Total - General Account - Life and Annuity - Affiliates - U.S. - Captive.....			736,559,279	14,474,550	0	751,033,829	0	XXX.....	433,552,836	0	389,924,647	15,681,109	751,033,829
0399999.	Total - General Account - Life and Annuity - Affiliates - U.S. - Total.....			736,559,279	14,474,550	0	751,033,829	0	XXX.....	433,552,836	0	389,924,647	15,681,109	751,033,829
0799999.	Total - General Account - Life and Annuity - Affiliates.....			736,559,279	14,474,550	0	751,033,829	0	XXX.....	433,552,836	0	389,924,647	15,681,109	751,033,829
General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates														
0.....	AA-3190770.	..01/01/2006	Ace Tempest Life Reinsurance.....	389	0	0	389	389	0.....	0	0	0	0	389
0.....	AA-3190770.	..01/01/2006	Ace Tempest Life Reinsurance.....	201,617	600,000	0	801,617	814,611	0.....	0	0	0	32,804	801,617
0999999.	Total - General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates.....			202,006	600,000	0	802,006	815,000	XXX.....	0	0	0	32,804	802,006
1099999.	Total - General Account - Life and Annuity - Non-Affiliates.....			202,006	600,000	0	802,006	815,000	XXX.....	0	0	0	32,804	802,006
1199999.	Total - General Account - Life and Annuity.....			736,761,285	15,074,550	0	751,835,835	815,000	XXX.....	433,552,836	0	389,924,647	15,713,913	751,835,835
2399999.	Total - General Account.....			736,761,285	15,074,550	0	751,835,835	815,000	XXX.....	433,552,836	0	389,924,647	15,713,913	751,835,835
3599999.	Total - U.S.....			736,559,279	14,474,550	0	751,033,829	0	XXX.....	433,552,836	0	389,924,647	15,681,109	751,033,829
3699999.	Total - Non-U.S.....			202,006	600,000	0	802,006	815,000	XXX.....	0	0	0	32,804	802,006
9999999.	Total.....			736,761,285	15,074,550	0	751,835,835	815,000	XXX.....	433,552,836	0	389,924,647	15,713,913	751,835,835

(a)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
0001.....	2.....	121000248.....	Wells Fargo.....	815,000

SCHEDULE S - PART 5

Provision for Reinsurance Ceded to Certified Reinsurers as of December 31, Current Year (000 Omitted)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	Collateral						23	24	25	26	
NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Domi- ciliary Juris- diction	Certi- fied Rein- surer Rating (1 thru 6)	Effective Date of Certified Reinsurer Rating	Percent Collateral Required for Full Credit (0% - 100%)	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total Recoverable Reserve Credit Taken (Cols. 9 + 10 + 11)	Miscellaneous Balances (Credit)	Net Obligation Subject to Collateral (Col. 12 - 13)	Dollar Amount of Collateral Required for Full Credit (Col. 14 x Col. 8)	16	17	18	19	20	21	22	Percent of Collateral Provided for Net Obligation Subject to Collateral (Col. 22 / Col. 14)	Percent Credit Allowed on Net Obligation Subject to Collateral (Col. 23 / Col. 8, not to Exceed 100%)	Amount of Credit Allowed for Net Obligation Subject to Collateral (Col. 14 x Col. 24)	Liability for Reinsurance with Certified Reinsurers Due to Collateral Deficiency (Col. 14 - Col. 25)
															Multiple Beneficiary Trust	Letters of Credit	Issuing or Confirming Bank Reference Number (a)	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Total Collateral Provided (Cols. 16 + 17 + 19 + 20 + 21)				

NONE

OHIO NATIONAL LIFE ASSURANCE CORPORATION
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.....	342,605	345,715	303,873	323,959	255,677
2. Commissions and reinsurance expense allowances.....	38,830	56,641	63,585	50,686	108,257
3. Contract claims.....	197,739	186,279	160,974	160,380	160,901
4. Surrender benefits and withdrawals for life contracts.....	0	0	0	0	0
5. Dividends to policyholders.....	0	0	0	0	0
6. Reserve adjustments on reinsurance ceded.....	0	0	0	0	0
7. Increase in aggregate reserves for life and accident and health contracts.....	0	0	0	0	504,780
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected.....	0	0	0	0	0
9. Aggregate reserves for life and accident and health contracts.....	0	0	0	0	1,344,288
10. Liability for deposit-type contracts.....	0	0	0	0	0
11. Contract claims unpaid.....	30,188	20,340	14,394	16,773	25,702
12. Amounts recoverable on reinsurance.....	8,153	10,879	7,791	8,961	12,686
13. Experience rating refunds due or unpaid.....	0	0	0	0	0
14. Policyholders' dividends (not included in Line 10).....	0	0	0	0	0
15. Commissions and reinsurance expense allowances due.....	0	0	0	0	0
16. Unauthorized reinsurance offset.....	0	0	0	0	0
17. Offset for reinsurance with certified reinsurers.....	0	0	0	0	XXX
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
18. Funds deposited by and withheld from (F).....	0	0	0	0	0
19. Letters of credit (L).....	815	195	40,185	0	145
20. Trust agreements (T).....	433,553	437,958	379,911	0	380,126
21. Other (O).....	389,925	334,566	173,904	0	0
D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22. Multiple beneficiary trust.....	0	0	0	0	XXX
23. Funds deposited by and withheld from (F).....	0	0	0	0	XXX
24. Letters of credit (L).....	0	0	0	0	XXX
25. Trust agreements (T).....	0	0	0	0	XXX
26. Other (O).....	0	0	0	0	XXX

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1	2	3
	As Reported (Net of Ceded)	Restatement Adjustments	Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	3,129,267,750	0	3,129,267,750
2. Reinsurance (Line 16).....	15,155,494	0	15,155,494
3. Premiums and considerations (Line 15).....	132,970,455	0	132,970,455
4. Net credit for ceded reinsurance.....	XXX	2,371,526,518	2,371,526,518
5. All other admitted assets (balance).....	162,356,220	0	162,356,220
6. Total assets excluding Separate Accounts (Line 26).....	3,439,749,919	2,371,526,518	5,811,276,437
7. Separate Account Assets (Line 27).....	248,777,027	0	248,777,027
8. Total assets (Line 28).....	3,688,526,946	2,371,526,518	6,060,053,464
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2).....	2,987,562,158	2,341,338,957	5,328,901,115
10. Liability for deposit-type contracts (Line 3).....	4,500,569	0	4,500,569
11. Claim reserves (Line 4).....	9,275,315	30,187,561	39,462,876
12. Policyholder dividends/reserves (Lines 5 through 7).....	0	0	0
13. Premium & annuity considerations received in advance (Line 8).....	662,971	0	662,971
14. Other contract liabilities (Line 9).....	9,095,137	0	9,095,137
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount).....	0	0	0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount).....	0	0	0
17. Reinsurance with certified reinsurers (Line 24.02 inset amount).....	0	0	0
18. Funds held under reinsurance treaties with certified reinsurers (Line 24.03 inset amount).....	0	0	0
19. All other liabilities (balance).....	147,146,151	0	147,146,151
20. Total liabilities excluding Separate Accounts (Line 26).....	3,158,242,301	2,371,526,518	5,529,768,819
21. Separate Account liabilities (Line 27).....	248,777,027	0	248,777,027
22. Total liabilities (Line 28).....	3,407,019,328	2,371,526,518	5,778,545,846
23. Capital & surplus (Line 38).....	281,507,615	XXX	281,507,615
24. Total liabilities, capital & surplus (Line 39).....	3,688,526,943	2,371,526,518	6,060,053,461
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves.....	2,341,338,957		
26. Claim reserves.....	30,187,561		
27. Policyholder dividends/reserves.....	0		
28. Premium & annuity considerations received in advance.....	0		
29. Liability for deposit-type contracts.....	0		
30. Other contract liabilities.....	0		
31. Reinsurance ceded assets.....	0		
32. Other ceded reinsurance recoverables.....	0		
33. Total ceded reinsurance recoverables.....	2,371,526,518		
34. Premiums and considerations.....	0		
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.....	0		
41. Total net credit for ceded reinsurance.....	2,371,526,518		

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
States, Etc.							
							6 Totals
1.	Alabama.....	AL	6,358,627	240	348,733	0	0
2.	Alaska.....	AK	103,177	0	1,649	0	0
3.	Arizona.....	AZ	5,874,668	330	201,227	0	0
4.	Arkansas.....	AR	8,955,772	0	127,933	0	0
5.	California.....	CA	55,771,580	0	1,320,306	0	1,255,522
6.	Colorado.....	CO	12,415,903	0	1,361,852	0	0
7.	Connecticut.....	CT	8,337,013	0	216,042	0	0
8.	Delaware.....	DE	5,827,290	0	34,614	0	0
9.	District of Columbia.....	DC	786,495	0	54,142	0	0
10.	Florida.....	FL	26,144,928	0	977,742	0	0
11.	Georgia.....	GA	19,715,078	0	415,229	0	200,156
12.	Hawaii.....	HI	115,833	0	6,931	0	0
13.	Idaho.....	ID	3,594,741	0	231,217	0	0
14.	Illinois.....	IL	19,399,126	0	504,933	0	0
15.	Indiana.....	IN	8,278,580	0	255,122	0	0
16.	Iowa.....	IA	5,904,446	0	166,424	0	110,000
17.	Kansas.....	KS	7,169,191	17,086	315,429	0	0
18.	Kentucky.....	KY	4,516,867	0	282,083	0	0
19.	Louisiana.....	LA	4,462,590	0	240,188	0	0
20.	Maine.....	ME	7,877,340	0	4,806	0	0
21.	Maryland.....	MD	8,341,265	5,939	482,939	0	0
22.	Massachusetts.....	MA	12,680,163	0	221,504	0	0
23.	Michigan.....	MI	19,210,742	0	1,075,837	0	0
24.	Minnesota.....	MN	11,982,515	0	258,375	0	0
25.	Mississippi.....	MS	2,422,262	0	187,141	0	0
26.	Missouri.....	MO	16,498,031	340	259,237	0	0
27.	Montana.....	MT	7,577,781	0	80,639	0	0
28.	Nebraska.....	NE	4,822,933	0	134,258	0	0
29.	Nevada.....	NV	1,875,152	0	56,538	0	0
30.	New Hampshire.....	NH	2,377,180	0	86,606	0	0
31.	New Jersey.....	NJ	17,431,369	400	449,620	0	0
32.	New Mexico.....	NM	1,109,073	0	36,128	0	0
33.	New York.....	NY	905,735	0	45,249	0	0
34.	North Carolina.....	NC	12,589,083	5,580	470,885	0	0
35.	North Dakota.....	ND	1,043,176	0	49,259	0	0
36.	Ohio.....	OH	39,583,970	0	1,605,387	0	1,117,687
37.	Oklahoma.....	OK	7,352,015	0	264,962	0	0
38.	Oregon.....	OR	6,112,272	0	267,502	0	0
39.	Pennsylvania.....	PA	19,009,585	57,155	1,057,399	0	0
40.	Rhode Island.....	RI	1,303,492	0	40,256	0	0
41.	South Carolina.....	SC	9,228,107	0	101,089	0	0
42.	South Dakota.....	SD	552,186	0	27,583	0	0
43.	Tennessee.....	TN	22,450,907	4,000	582,379	0	0
44.	Texas.....	TX	54,003,523	113	1,277,570	0	503,782
45.	Utah.....	UT	5,327,390	0	169,393	0	0
46.	Vermont.....	VT	537,404	0	9,719	0	0
47.	Virginia.....	VA	30,578,843	1,260	340,084	0	212,590
48.	Washington.....	WA	17,188,298	0	392,362	0	0
49.	West Virginia.....	WV	1,083,629	5,400	257,339	0	0
50.	Wisconsin.....	WI	6,435,681	0	446,264	0	0
51.	Wyoming.....	WY	4,229,280	0	26,057	0	0
52.	American Samoa.....	AS	0	0	0	0	0
53.	Guam.....	GU	0	0	0	0	0
54.	Puerto Rico.....	PR	4,527,234	0	947,777	0	0
55.	US Virgin Islands.....	VI	15,444	0	0	0	0
56.	Northern Mariana Islands.....	MP	0	0	0	0	0
57.	Canada.....	CAN	7,868	0	0	0	0
58.	Aggregate Other Alien.....	OT	0	0	0	0	0
59.	Totals.....		562,002,833	97,843	18,773,939	0	3,399,737
							584,274,352

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														
0704.....	Ohio National Mutual Holdings, Inc.	0.....	31-1614095..	0.....	0.....		Ohio National Mutual Holdings, Inc.....	OH.....	UIP.....		Ownership, Board of Directors, Management	0.000		0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	31-1614097..	0.....	0.....		Ohio National Financial Sevices, Inc.....	OH.....	UIP.....	Ohio National Mutual Holdings, Inc.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	98-0602966..	0.....	0.....		Sycamore Re, Ltd.....	CYM.....	IA.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	46-3873878..	0.....	0.....		Ohio National Foreign Holdings, LLC.....	OH.....	NIA.....	Sycamore Re LTD.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....		0.....	0.....		Ohio National International Holdings Cooperatief U.A.	NLD.....	NIA.....	Ohio National Foreign Holdings, LLC.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....		0.....	0.....		ON Netherlands Holdings B.V.....	NLD.....	NIA.....	Ohio National International Holdings Cooperatief U.A.	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	31-1702660..	0.....	0.....		ON Global Holdings, SMLLC.....	OH.....	NIA.....	ON Netherlands Holdings B.V.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	0.....	0.....	0.....		Ohio National Sudamerica S.A.....	CHL.....	NIA.....	ON Global Holding, SMLLC.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	0.....	0.....	0.....		Ohio National Seguros de Vida S.A.....	CHL.....	NIA.....	Ohio National Sudamerica S.A.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....

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)	*
0704.....	Ohio National Mutual Holdings, Inc.	0.....	0.....	0.....	0.....		Ohio National Seguros de Vida S.A.....	PER.....	IA.....	ON Netherlands Holdings B.V.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	0.....	0.....	0.....		ONSV do Brasil Participações Ltda.....	BRA.....	NIA.....	ON Netherlands Holdings B.V.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	0.....	0.....	0.....		O.N. International do Brasil Participações Ltda.....	BRA.....	NIA.....	ONSV do Brasil Participações Ltda.	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	06-1187459..	0.....	0.....		Fiduciary Capital Management, Inc.....	CT.....	NIA.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	67172...	31-0397080..	0.....	0.....		The Ohio National Life Insurance Company.....	OH.....	UDP.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	89206...	31-0962495..	0.....	0.....		Ohio National Life Assurance Coporation.....	OH.....	RE.....	The Ohio National Life Insurance Company.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	85472...	13-2740556..	0.....	0.....		National Security Life and Annuity Company.....	NY.....	IA.....	The Ohio National Life Insurance Company.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	13575...	26-3791519..	0.....	0.....		Montgomery Re, Inc.....	VT.....	IA.....	The Ohio National Life Insurance Company.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	15363...	80-0955278..	0.....	0.....		Kenwood Re, Inc.....	VT.....	IA.....	The Ohio National Life Insurance Company.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....

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)	*
0704.....	Ohio National Mutual Holdings, Inc.	15855..	47-4249160..	0.....	0.....		Camargo Re Captive, Inc.....	OH.....	IA.....	The Ohio National Life Insurance Company.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	31-1454693..	0.....	0.....		Ohio National Investments, Inc.....	OH.....	NIA.....	The Ohio National Life Insurance Company.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	31-1454699..	0.....	0.....		Ohio National Equities, Inc.....	OH.....	NIA.....	The Ohio National Life Insurance Company.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	31-0742113..	0.....	0.....		The O.N. Equity Sales Company.....	OH.....	NIA.....	The Ohio National Life Insurance Company.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	32-0071428..	0.....	0.....		Ohio National Insurance Agency, Inc.....	OH.....	NIA.....	The O.N. Equity Sales Company.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	31-0784369..	0.....	0.....		O.N. Investment Management Company.....	OH.....	NIA.....	The O.N. Equity Sales Company.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	63-1202147..	0.....	0.....		Ohio National Insurance Agency of Alabama, Inc...	AL.....	NIA.....	The O.N. Equity Sales Company.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	31-1684349..	0.....	0.....		ON Flight, Inc.....	OH.....	NIA.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	26-4812790..	0.....	0.....		Financial Way Realty, Inc.....	OH.....	NIA.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....

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)	*
0704.....	Ohio National Mutual Holdings, Inc.	0.....	03-0374453..	0.....	0.....	.....	Suffolk Capital Management, LLC.....	NY.....	NIA.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	84.698	Ohio National Mutual Holdings, Inc.....	0.....
0704.....	Ohio National Mutual Holdings, Inc.	0.....	46-5464819..	0.....	0.....	.....	ON Tech, LLC.....	DE.....	NIA.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	...100.000	Ohio National Mutual Holdings, Inc.....	0.....

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.....	31-1614095.....	Ohio National Mutual Holdings, Inc.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	31-1614097.....	Ohio National Financial Seviles, Inc.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	98-0602966.....	Sycamore Re, Ltd.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	46-3873878.....	Ohio National Foreign Holdings, LLC.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	00-0000000.....	Ohio National International Holdings Cooperatief U.A.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	00-0000000.....	ON Netherlands Holdings B.V.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	31-1702660.....	ON Global Holdings, SMLLC.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	00-0000000.....	Ohio National Sudamerica S.A.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	00-0000000.....	Ohio National Seguros de Vida S.A.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	00-0000000.....	Ohio National Seguros de Vida S.A.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	00-0000000.....	ONSV do Brasil Participações Ltda.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	00-0000000.....	O.N. International do Brasil Participações Ltda.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	06-1187459.....	Fiduciary Capital Management, Inc.....	0	0	0	0	0	0	.....	.....0	0	0
67172.....	31-0397080.....	The Ohio National Life Insurance Company.....	29,000,000	0	0	0	66,248,000	(33,566,386)	.....	.....0	61,681,614	(794,652,868)
89206.....	31-0962495.....	Ohio National Life Assurance Corporation.....	(29,000,000)	0	0	0	(66,252,042)	95,593,956	.....	.....0	341,914	1,545,686,697
85472.....	13-2740556.....	National Security Life and Annuity Co.....	0	0	0	0	0	0	.....	.....0	0	0
13575.....	26-3791519.....	Montgomery Re, Inc.....	0	0	0	0	0	(15,351,028)	.....	.....0	(15,351,028)	(304,139,356)
15363.....	80-0955278.....	Kenwood Re, Inc.....	0	0	0	0	0	(38,377,188)	.....	.....0	(38,377,188)	(425,917,258)
15855.....	47-4249160.....	Camargo Re Captive, Inc.....	0	0	0	0	0	(8,299,354)	.....	.....0	(8,299,354)	(20,977,215)
00000.....	31-1454693.....	Ohio National Investments, Inc.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	31-1454699.....	Ohio National Equities, Inc.....	0	0	0	0	1,602	0	.....	.....0	1,602	0
00000.....	31-0742113.....	The O.N. Equity Sales Company.....	0	0	0	0	2,440	0	.....	.....0	2,440	0
00000.....	32-0071428.....	Ohio National Insurance Agency, Inc.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	31-0784369.....	O.N. Investment Management Company.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	63-1202147.....	Ohio National Insurance Agency of Alabama, Inc.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	31-1684349.....	ON Flight, Inc.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	26-4812790.....	Financial Way Reality, Inc.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	03-0374493.....	Suffolk Capital Management, LLC.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	46-5464819.....	ONTech, LLC.....	0	0	0	0	0	0	.....	.....0	0	0
9999999.....	Control Totals.....	.....	.....0	0	0	0	0	0	XXX	0	0	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION

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?	YES
2.	Will the confidential Risk-Based Capital Report be filed with the NAIC by March 1?	YES
3.	Will the confidential Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4.	Will an actuarial opinion be filed with this statement by March 1?	YES
APRIL FILING		
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
7.	Will the Adjustment Form (if required) be filed with state of domicile and the NAIC by April 1?	YES
8.	Will the Supplemental Investment Risk Interrogatories be filed by April 1?	YES
JUNE FILING		
9.	Will an audited financial report be filed by June 1?	YES
10.	Will Accountants Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
AUGUST FILING		
11.	Will Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile by August 1?	YES

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?	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?	YES
17.	Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	YES
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?	YES
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?	YES
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?	YES
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?	YES
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?	YES
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?	YES
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?	YES
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?	YES
AUGUST FILING		
51.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

OHIO NATIONAL LIFE ASSURANCE CORPORATION

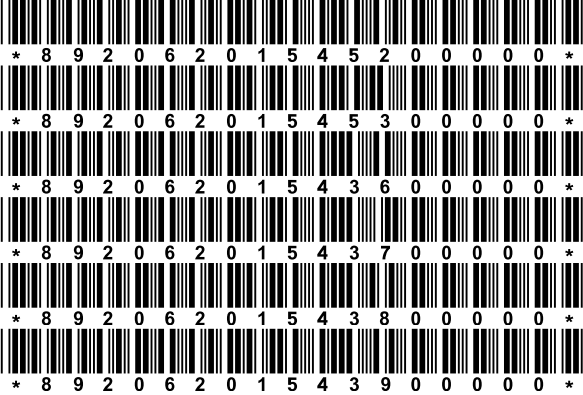
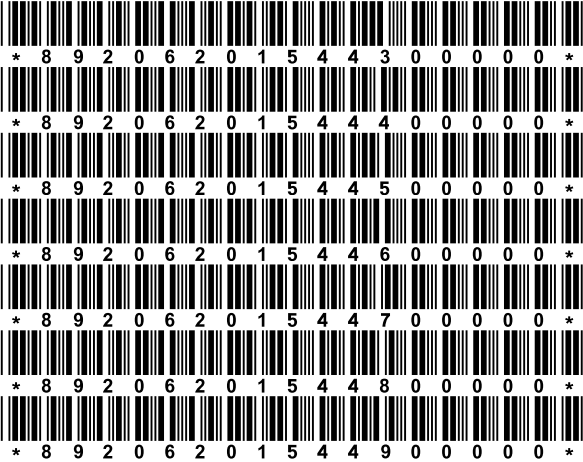
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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EXPLANATIONS:

BAR CODE:

1.
2.
3.
4.
5.
6.
7.
8.
9.
10.
11.
12. The data for this supplement is not required to be filed.
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.
17.
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.
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26.
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.
34. The data for this supplement is not required to be filed.



OHIO NATIONAL LIFE ASSURANCE CORPORATION

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.

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



42.

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

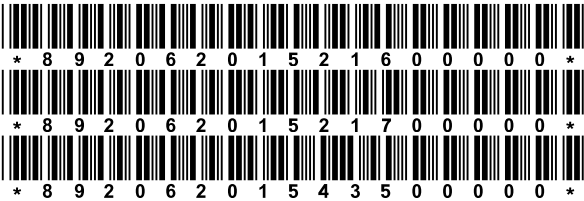


44.

45.

46.

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.

51.

OHIO NATIONAL LIFE ASSURANCE CORPORATION
Overflow Page for Write-Ins

Additional Write-ins for Summary of Operations:

		1	2
		Current Year	Prior Year
08.304	Loss on Fixed Assets.....	(6,742,912)	0
08.397	Summary of remaining write-ins for Line 8.3.....	(6,742,912)	0

Additional Write-ins for Exhibit 2:

	Insurance				5	6
	1	Accident and Health		4		
		2	3			
09.304. Regional General Agent Development	35,561	0	3,669	0	0	39,230
09.397. Summary of remaining write-ins for Line 9.3.....	35,561	0	3,669	0	0	39,230

Additional Write-ins for Analysis of Operations:

	1	2	Ordinary			6	Group		Accident and Health			12
			3	4	5		7	8	9	10	11	
	Total	Industrial Life	Life Insurance	Individual Annuities	Supplementary Contracts	Credit Life (Group and Individual)	Life Insurance(a)	Annuities	Group	Credit (Group and Individual)	Other	Aggregate of All Other Lines of Business
08.304. Disposal of Fixed Assets.....	(6,742,912)	0	(6,742,912)	0	0	0	0	0	0	0	0	0
08.397. Summary of remaining write-ins for Line 8.3.....	(6,742,912)	0	(6,742,912)	0	0	0	0	0	0	0	0	0



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

Of The.....OHIO NATIONAL LIFE ASSURANCE CORPORATION

Address (City, State, Zip Code).....Cincinnati, OH 45242

NAIC Group Code.....0704

NAIC Company Code.....89206

Employer's ID Number.....31-0962495

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.....	0	0	0	0	0
2. 2011.....	0	0	0	0	0
3. 2012.....	XXX	0	0	0	0
4. 2013.....	XXX	XXX	0	0	0
5. 2014.....	XXX	XXX	XXX	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. Prior.....	3,177	2,699	2,339	6,336	8,610
2. 2011.....	68	225	303	407	283
3. 2012.....	XXX	75	209	423	244
4. 2013.....	XXX	XXX	77	600	397
5. 2014.....	XXX	XXX	XXX	473	396
6. 2015.....	XXX	XXX	XXX	XXX	146

Section C - Credit Accident and Health

1. Prior.....	0	0	0	0	0
2. 2011.....	0	0	0	0	0
3. 2012.....	XXX	0	0	0	0
4. 2013.....	XXX	XXX	0	0	0
5. 2014.....	XXX	XXX	XXX	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION
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.....	0	0	0	0	0
2. 2011.....	0	0	0	0	0
3. 2012.....	XXX	0	0	0	0
4. 2013.....	XXX	XXX	0	0	0
5. 2014.....	XXX	XXX	XXX	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. Prior.....	0	0	0	0	0
2. 2011.....	0	0	0	0	0
3. 2012.....	XXX	402	0	0	0
4. 2013.....	XXX	XXX	158	0	0
5. 2014.....	XXX	XXX	XXX	265	0
6. 2015.....	XXX	XXX	XXX	XXX	351

Section C - Credit Accident and Health

1. Prior.....	0	0	0	0	0
2. 2011.....	0	0	0	0	0
3. 2012.....	XXX	0	0	0	0
4. 2013.....	XXX	XXX	0	0	0
5. 2014.....	XXX	XXX	XXX	0	0
6. 2015.....	XXX	XXX	XXX	XXX	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION
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.....	0	0	0	XXX	XXX
2. 2012.....	XXX	0	0	0	XXX
3. 2013.....	XXX	XXX	0	0	0
4. 2014.....	XXX	XXX	XXX	0	0
5. 2015.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. 2011.....	1,672	1,167	1,218	XXX	XXX
2. 2012.....	XXX	1,932	1,071	2,193	XXX
3. 2013.....	XXX	XXX	1,885	3,158	2,600
4. 2014.....	XXX	XXX	XXX	4,482	2,473
5. 2015.....	XXX	XXX	XXX	XXX	7,356

Section C - Credit Accident and Health

1. 2011.....	0	0	0	XXX	XXX
2. 2012.....	XXX	0	0	0	XXX
3. 2013.....	XXX	XXX	0	0	0
4. 2014.....	XXX	XXX	XXX	0	0
5. 2015.....	XXX	XXX	XXX	XXX	0

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.....	0	0	0	0	0
2. 2012.....	XXX	0	0	0	0
3. 2013.....	XXX	XXX	0	0	0
4. 2014.....	XXX	XXX	XXX	0	0
5. 2015.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. 2011.....	1,672	1,167	1,218	2,932	2,220
2. 2012.....	XXX	1,932	1,071	2,193	1,641
3. 2013.....	XXX	XXX	1,885	3,158	2,600
4. 2014.....	XXX	XXX	XXX	4,482	2,473
5. 2015.....	XXX	XXX	XXX	XXX	7,356

Section C - Credit Accident and Health

1. 2011.....	0	0	0	0	0
2. 2012.....	XXX	0	0	0	0
3. 2013.....	XXX	XXX	0	0	0
4. 2014.....	XXX	XXX	XXX	0	0
5. 2015.....	XXX	XXX	XXX	XXX	0

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.....		0
2. Ordinary life.....	Standard Factor and Other.....	8,708
3. Individual annuity.....		0
4. Supplementary contracts.....		0
5. Credit life.....		0
6. Group life.....		0
7. Group annuities.....		0
8. Group accident and health.....		0
9. Credit accident and health.....		0
10. Other accident and health.....	Standard Factor and Other.....	69,409
11. Total.....		78,117

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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