



ANNUAL STATEMENT
For the Year Ended December 31, 2018
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 OH

State of Domicile or Port of Entry OH

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

Rocky Coppola #	Senior Vice President & Chief Financial Officer	Paul Gerard	Senior Vice President & Chief Investment Officer
Kristal Elaine Hambrick	Executive Vice President & Chief Risk Officer	Dennis Lee Schoff	Senior Vice President & General Counsel, Assistant Secretary, Chief Compliance Officer
Barbara Ann Turner	Executive Vice President & Chief Administrative Officer		

DIRECTORS OR TRUSTEES

Gary Thomas Huffman	Barbara Ann Turner
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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

(Printed Name)
President, Chairman & Chief Executive Officer

(Title)

(Signature)
Therese Susan McDonough

(Printed Name)
Secretary

(Title)

(Signature)
Doris Lee Paul

(Printed Name)
Treasurer

(Title)

Subscribed and sworn to before me
This _____ day of February 2019

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

Lucas A. Compton, Notary Public
December 2, 2023

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.....	27,737	0	0	0	27,737
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).....	27,737	0	0	0	27,737
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.....	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.....	250,000	0	0	0	250,000
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 through 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).....	2,967	3,020	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).....	2,967	3,020	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	2,967	3,020	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 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.....	231,694	0	0	0	231,694
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).....	231,694	0	0	0	231,694
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.....	92,203	0	0	0	92,203
12. Surrender values and withdrawals for life contracts.....	425,954	0	0	0	425,954
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.....	618,157	0	0	0	618,157

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 through 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.....	65	44,242,500	0	(a).....0	0	0	0	0	65	44,242,500
21. Issued during year.....	36	21,794,000	0	0	0	0	0	0	36	21,794,000
22. Other changes to in force (Net).....	11	7,792,500	0	0	0	0	0	0	11	7,792,500
23. In force December 31 of current year.....	112	73,829,000	0	(a).....0	0	0	0	0	112	73,829,000

(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).....	19,556	19,904	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).....	19,556	19,904	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	19,556	19,904	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.....	5,207,417	0	0	0	5,207,417
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).....	5,207,657	0	0	0	5,207,657
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.....	2,694,487	0	0	0	2,694,487
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	90,443	0	0	0	90,443
12. Surrender values and withdrawals for life contracts.....	681,807	0	0	0	681,807
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.....	3,466,737	0	0	0	3,466,737

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 through 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	1,832,936	0	0	0	0	0	0	5	1,832,936
17. Incurred during current year.....	10	3,254,335	0	0	0	0	0	0	10	3,254,335
Settled during current year:										
18.1 By payment in full.....	11	3,179,335	0	0	0	0	0	0	11	3,179,335
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	11	3,179,335	0	0	0	0	0	0	11	3,179,335
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	3,179,335	0	0	0	0	0	0	11	3,179,335
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	4	1,907,936	0	0	0	0	0	0	4	1,907,936
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,545	2,142,760,198	0	(a).....0	0	0	0	0	3,545	2,142,760,198
21. Issued during year.....	185	146,342,223	0	0	0	0	0	0	185	146,342,223
22. Other changes to in force (Net).....	(113)	(102,371,964)	0	0	0	0	0	0	(113)	(102,371,964)
23. In force December 31 of current year.....	3,617	2,186,730,457	0	(a).....0	0	0	0	0	3,617	2,186,730,457

(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).....	490,607	499,318	0	439,211	461,538
25.2 Guaranteed renewable (b).....	2,350	2,392	0	0	0
25.3 Non-renewable for stated reasons only (b).....	7,667	7,804	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).....	500,624	509,514	0	439,211	461,538
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	500,624	509,514	0	439,211	461,538

(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 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.....	3,169,691	0	0	0	3,169,691
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	22,603	XXX	0	XXX	22,603
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	3,192,294	0	0	0	3,192,294
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.....	2,669,016	0	0	0	2,669,016
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	78,000	0	0	0	78,000
12. Surrender values and withdrawals for life contracts.....	606,386	0	0	0	606,386
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.....	3,353,402	0	0	0	3,353,402

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 through 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.....	13	3,392,341	0	0	0	0	0	0	13	3,392,341
Settled during current year:										
18.1 By payment in full.....	12	3,296,452	0	0	0	0	0	0	12	3,296,452
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	12	3,296,452	0	0	0	0	0	0	12	3,296,452
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.....	12	3,296,452	0	0	0	0	0	0	12	3,296,452
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	95,889	0	0	0	0	0	0	1	95,889
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	2,666	1,471,622,652	0	(a).....0	0	0	0	0	2,666	1,471,622,652
21. Issued during year.....	108	95,821,955	0	0	0	0	0	0	108	95,821,955
22. Other changes to in force (Net).....	(101)	(80,186,112)	0	0	0	0	0	0	(101)	(80,186,112)
23. In force December 31 of current year.....	2,673	1,487,258,495	0	(a).....0	0	0	0	0	2,673	1,487,258,495

(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).....	178,959	182,137	0	58,944	58,944
25.2 Guaranteed renewable (b).....	3,451	3,512	0	0	0
25.3 Non-renewable for stated reasons only (b).....	1,160	1,181	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).....	183,570	186,830	0	58,944	58,944
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	183,570	186,830	0	58,944	58,944

(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 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

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 through 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 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.....	6,533,740	0	0	0	6,533,740
2. Annuity considerations.....	160	0	0	0	160
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).....	6,533,900	0	0	0	6,533,900
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.....	7,450,000	0	0	0	7,450,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	567	0	0	0	567
12. Surrender values and withdrawals for life contracts.....	1,219,627	0	0	0	1,219,627
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.....	8,670,194	0	0	0	8,670,194
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 through 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	7,150,000	0	0	0	0	0	0	11	7,150,000
Settled during current year:										
18.1 By payment in full.....	11	7,150,000	0	0	0	0	0	0	11	7,150,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	11	7,150,000	0	0	0	0	0	0	11	7,150,000
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.....	11	7,150,000	0	0	0	0	0	0	11	7,150,000
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.....	4,181	2,891,934,938	0	(a).....0	0	0	0	0	4,181	2,891,934,938
21. Issued during year.....	258	221,007,470	0	0	0	0	0	0	258	221,007,470
22. Other changes to in force (Net).....	(11)	(132,499,362)	0	0	0	0	0	0	(11)	(132,499,362)
23. In force December 31 of current year.....	4,428	2,980,443,046	0	(a).....0	0	0	0	0	4,428	2,980,443,046

(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).....	443,451	451,325	0	8,465	0
25.2 Guaranteed renewable (b).....	6,318	6,430	0	0	0
25.3 Non-renewable for stated reasons only (b).....	1,515	1,542	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).....	451,284	459,297	0	8,465	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	451,284	459,297	0	8,465	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 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.....	42,484,709	0	0	0	42,484,709
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).....	42,484,709	0	0	0	42,484,709
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.....	31,724,188	0	0	0	31,724,188
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	36,685	0	0	0	36,685
12. Surrender values and withdrawals for life contracts.....	8,119,839	0	0	0	8,119,839
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.....	39,880,712	0	0	0	39,880,712

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 through 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.....	14	634,554	0	0	0	0	0	0	14	634,554
17. Incurred during current year.....	56	32,233,929	0	0	0	0	0	0	56	32,233,929
Settled during current year:										
18.1 By payment in full.....	53	28,715,043	0	0	0	0	0	0	53	28,715,043
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	53	28,715,043	0	0	0	0	0	0	53	28,715,043
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	28,715,043	0	0	0	0	0	0	53	28,715,043
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	17	4,153,440	0	0	0	0	0	0	17	4,153,440
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	24,509	19,091,311,832	0	(a).....0	0	0	0	0	24,509	19,091,311,832
21. Issued during year.....	1,375	1,129,001,538	0	0	0	0	0	0	1,375	1,129,001,538
22. Other changes to in force (Net).....	(1,554)	(1,196,464,478)	0	0	0	0	0	0	(1,554)	(1,196,464,478)
23. In force December 31 of current year.....	24,330	19,023,848,892	0	(a).....0	0	0	0	0	24,330	19,023,848,892

(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).....	996,532	1,014,227	0	5,550,086	5,630,123
25.2 Guaranteed renewable (b).....	4,869	4,955	0	0	0
25.3 Non-renewable for stated reasons only (b).....	13,730	13,974	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).....	1,015,131	1,033,156	0	5,550,086	5,630,123
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,015,131	1,033,156	0	5,550,086	5,630,123

(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 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.....	6,617	0	0	0	6,617
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).....	6,617	0	0	0	6,617
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 through 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.....	7	5,950,000	0	(a).....0	0	0	0	0	7	5,950,000
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	1	(690,000)	0	0	0	0	0	0	1	(690,000)
23. In force December 31 of current year.....	8	5,260,000	0	(a).....0	0	0	0	0	8	5,260,000

(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.

NONE

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.....	11,041,529	0	0	0	11,041,529
2. Annuity considerations.....	28	0	0	0	28
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).....	11,041,557	0	0	0	11,041,557
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.....	2,700,000	0	0	0	2,700,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	2,273	0	0	0	2,273
12. Surrender values and withdrawals for life contracts.....	1,643,272	0	0	0	1,643,272
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.....	4,345,545	0	0	0	4,345,545

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 through 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	2,242,663	0	0	0	0	0	0	6	2,242,663
17. Incurred during current year.....	6	2,800,000	0	0	0	0	0	0	6	2,800,000
Settled during current year:										
18.1 By payment in full.....	8	3,450,000	0	0	0	0	0	0	8	3,450,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	8	3,450,000	0	0	0	0	0	0	8	3,450,000
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.....	8	3,450,000	0	0	0	0	0	0	8	3,450,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	4	1,592,663	0	0	0	0	0	0	4	1,592,663
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	7,176	4,681,179,068	0	(a).....0	0	0	0	0	7,176	4,681,179,068
21. Issued during year.....	462	426,329,754	0	0	0	0	0	0	462	426,329,754
22. Other changes to in force (Net).....	(390)	(355,541,068)	0	0	0	0	0	0	(390)	(355,541,068)
23. In force December 31 of current year.....	7,248	4,751,967,754	0	(a).....0	0	0	0	0	7,248	4,751,967,754

(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).....	1,260,145	1,282,521	0	2,124,345	2,197,964
25.2 Guaranteed renewable (b).....	20,964	21,336	0	0	0
25.3 Non-renewable for stated reasons only (b).....	12,012	12,226	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).....	1,293,121	1,316,083	0	2,124,345	2,197,964
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,293,121	1,316,083	0	2,124,345	2,197,964

(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.....	6,508,900	0	0	0	6,508,900
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).....	6,508,900	0	0	0	6,508,900
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.....	1,409,189	0	0	0	1,409,189
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	1,575	0	0	0	1,575
12. Surrender values and withdrawals for life contracts.....	830,990	0	0	0	830,990
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.....	2,241,754	0	0	0	2,241,754
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 through 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	974,887	0	0	0	0	0	0	1	974,887
17. Incurred during current year.....	10	1,834,026	0	0	0	0	0	0	10	1,834,026
Settled during current year:										
18.1 By payment in full.....	9	1,734,026	0	0	0	0	0	0	9	1,734,026
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	9	1,734,026	0	0	0	0	0	0	9	1,734,026
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	1,734,026	0	0	0	0	0	0	9	1,734,026
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	1,074,887	0	0	0	0	0	0	2	1,074,887
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,283	2,641,259,482	0	(a).....0	0	0	0	0	4,283	2,641,259,482
21. Issued during year.....	210	186,346,021	0	0	0	0	0	0	210	186,346,021
22. Other changes to in force (Net).....	(275)	(187,485,342)	0	0	0	0	0	0	(275)	(187,485,342)
23. In force December 31 of current year.....	4,218	2,640,120,161	0	(a).....0	0	0	0	0	4,218	2,640,120,161

(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).....	348,323	354,508	0	49,005	81,017
25.2 Guaranteed renewable (b).....	18,367	18,693	0	6,600	6,600
25.3 Non-renewable for stated reasons only (b).....	4,337	4,414	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).....	371,027	377,615	0	55,605	87,617
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	371,027	377,615	0	55,605	87,617

(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 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.....	711,040	0	0	0	711,040
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).....	711,040	0	0	0	711,040
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.....	1,176	0	0	0	1,176
12. Surrender values and withdrawals for life contracts.....	115,839	0	0	0	115,839
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.....	117,015	0	0	0	117,015
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 through 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	500,000	0	0	0	0	0	0	1	500,000
Settled during current year:										
18.1 By payment in full.....	1	500,000	0	0	0	0	0	0	1	500,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1	500,000	0	0	0	0	0	0	1	500,000
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	500,000	0	0	0	0	0	0	1	500,000
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.....	361	433,131,824	0	(a).....0	0	0	0	0	361	433,131,824
21. Issued during year.....	25	29,563,894	0	0	0	0	0	0	25	29,563,894
22. Other changes to in force (Net).....	(12)	(12,684,835)	0	0	0	0	0	0	(12)	(12,684,835)
23. In force December 31 of current year.....	374	450,010,883	0	(a).....0	0	0	0	0	374	450,010,883

(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).....	102,175	103,989	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	644	656	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).....	102,819	104,645	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	102,819	104,645	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 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.....	746,252	0	0	0	746,252
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).....	746,252	0	0	0	746,252
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.....	8,029	0	0	0	8,029
12. Surrender values and withdrawals for life contracts.....	27,321	0	0	0	27,321
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.....	35,350	0	0	0	35,350

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 through 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.....	4	250,780	0	0	0	0	0	0	4	250,780
Settled during current year:										
18.1 By payment in full.....	4	250,780	0	0	0	0	0	0	4	250,780
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	4	250,780	0	0	0	0	0	0	4	250,780
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	250,780	0	0	0	0	0	0	4	250,780
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.....	627	344,960,971	0	(a).....0	0	0	0	0	627	344,960,971
21. Issued during year.....	35	31,863,393	0	0	0	0	0	0	35	31,863,393
22. Other changes to in force (Net).....	(8)	(13,107,203)	0	0	0	0	0	0	(8)	(13,107,203)
23. In force December 31 of current year.....	654	363,717,161	0	(a).....0	0	0	0	0	654	363,717,161

(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).....	56,123	57,120	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).....	56,123	57,120	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	56,123	57,120	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.....	29,939,046	0	0	0	29,939,046
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).....	29,939,046	0	0	0	29,939,046
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.....	12,411,155	0	0	0	12,411,155
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	159,764	0	0	0	159,764
12. Surrender values and withdrawals for life contracts.....	4,398,598	0	0	0	4,398,598
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.....	16,969,517	0	0	0	16,969,517

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 through 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	9,899,986	0	0	0	0	0	0	7	9,899,986
17. Incurred during current year.....	40	12,678,542	0	0	0	0	0	0	40	12,678,542
Settled during current year:										
18.1 By payment in full.....	36	11,462,512	0	0	0	0	0	0	36	11,462,512
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	36	11,462,512	0	0	0	0	0	0	36	11,462,512
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.....	36	11,462,512	0	0	0	0	0	0	36	11,462,512
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	11	11,116,016	0	0	0	0	0	0	11	11,116,016
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	17,173	11,064,538,207	0	(a).....0	0	0	0	0	17,173	11,064,538,207
21. Issued during year.....	1,552	1,213,054,322	0	0	0	0	0	0	1,552	1,213,054,322
22. Other changes to in force (Net).....	(492)	(487,734,162)	0	0	0	0	0	0	(492)	(487,734,162)
23. In force December 31 of current year.....	18,233	11,789,858,367	0	(a).....0	0	0	0	0	18,233	11,789,858,367

(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).....	2,657,277	2,704,461	0	1,683,330	1,685,136
25.2 Guaranteed renewable (b).....	22,134	22,527	0	0	0
25.3 Non-renewable for stated reasons only (b).....	35,691	36,325	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).....	2,715,102	2,763,313	0	1,683,330	1,685,136
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	2,715,102	2,763,313	0	1,683,330	1,685,136

(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.....	11,758,119	0	0	0	11,758,119
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).....	11,758,119	0	0	0	11,758,119
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.....	10,586,293	0	0	0	10,586,293
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	115,222	0	0	0	115,222
12. Surrender values and withdrawals for life contracts.....	1,790,449	0	0	0	1,790,449
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.....	12,491,964	0	0	0	12,491,964

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 through 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	2,776,844	0	0	0	0	0	0	5	2,776,844
17. Incurred during current year.....	24	12,287,970	0	0	0	0	0	0	24	12,287,970
Settled during current year:										
18.1 By payment in full.....	25	14,235,073	0	0	0	0	0	0	25	14,235,073
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	25	14,235,073	0	0	0	0	0	0	25	14,235,073
18.4 Reduction by compromise.....	1	700,000	0	0	0	0	0	0	1	700,000
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	26	14,935,073	0	0	0	0	0	0	26	14,935,073
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	129,741	0	0	0	0	0	0	3	129,741
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	9,013	5,536,746,597	0	(a).....0	0	0	0	0	9,013	5,536,746,597
21. Issued during year.....	389	298,308,888	0	0	0	0	0	0	389	298,308,888
22. Other changes to in force (Net).....	(435)	(384,282,772)	0	0	0	0	0	0	(435)	(384,282,772)
23. In force December 31 of current year.....	8,967	5,450,772,713	0	(a).....0	0	0	0	0	8,967	5,450,772,713

(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).....	615,902	626,838	0	488,737	486,966
25.2 Guaranteed renewable (b).....	18,402	18,729	0	0	0
25.3 Non-renewable for stated reasons only (b).....	26,604	27,077	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).....	660,908	672,644	0	488,737	486,966
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	660,908	672,644	0	488,737	486,966

(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.....	394,434,480	0	0	0	394,434,480
2. Annuity considerations.....	93,924	0	0	0	93,924
3. Deposit-type contract funds.....	2,282,452	XXX	0	XXX	2,282,452
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	396,810,856	0	0	0	396,810,856
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.....	308,456,378	0	0	0	308,456,378
10. Matured endowments.....	13,551	0	0	0	13,551
11. Annuity benefits.....	3,142,503	0	0	0	3,142,503
12. Surrender values and withdrawals for life contracts.....	122,805,681	0	0	0	122,805,681
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.....	434,418,113	0	0	0	434,418,113

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 through 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.....	171	47,171,753	0	0	0	0	0	0	171	47,171,753
17. Incurred during current year.....	858	309,022,686	0	0	0	0	0	0	858	309,022,686
Settled during current year:										
18.1 By payment in full.....	824	281,442,568	0	0	0	0	0	0	824	281,442,568
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	824	281,442,568	0	0	0	0	0	0	824	281,442,568
18.4 Reduction by compromise.....	4	1,335,000	0	0	0	0	0	0	4	1,335,000
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	828	282,777,568	0	0	0	0	0	0	828	282,777,568
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	201	73,416,871	0	0	0	0	0	0	201	73,416,871
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	272,328	163,696,092,731	0	(a).....0	0	0	0	0	272,328	163,696,092,731
21. Issued during year.....	15,408	12,319,719,770	0	0	0	0	0	0	15,408	12,319,719,770
22. Other changes to in force (Net).....	(15,570)	(10,364,630,341)	0	0	0	0	0	0	(15,570)	(10,364,630,341)
23. In force December 31 of current year.....	272,166	165,651,182,160	0	(a).....0	0	0	0	0	272,166	165,651,182,160

(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).....	26,067,271	26,530,142	0	22,695,311	23,248,302
25.2 Guaranteed renewable (b).....	636,903	648,208	0	206,279	229,966
25.3 Non-renewable for stated reasons only (b).....	486,908	495,556	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).....	27,191,082	27,673,906	0	22,901,590	23,478,268
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	27,191,082	27,673,906	0	22,901,590	23,478,268

(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.....	73,992	0	0	0	73,992
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).....	73,992	0	0	0	73,992
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 through 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 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.....	148,045	0	0	0	148,045
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).....	148,045	0	0	0	148,045
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.....	23,788	0	0	0	23,788
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.....	23,788	0	0	0	23,788

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 through 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.....	84	58,995,000	0	(a).....0	0	0	0	0	84	58,995,000
21. Issued during year.....	5	6,700,000	0	0	0	0	0	0	5	6,700,000
22. Other changes to in force (Net).....	23	36,245,000	0	0	0	0	0	0	23	36,245,000
23. In force December 31 of current year.....	112	101,940,000	0	(a).....0	0	0	0	0	112	101,940,000

(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).....	12,978	13,208	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).....	12,978	13,208	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	12,978	13,208	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.....	4,835,763	0	0	0	4,835,763
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	200,000	XXX	0	XXX	200,000
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	5,035,763	0	0	0	5,035,763
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.....	9,659,232	0	0	0	9,659,232
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	2,719	0	0	0	2,719
12. Surrender values and withdrawals for life contracts.....	1,478,462	0	0	0	1,478,462
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.....	11,140,413	0	0	0	11,140,413
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 through 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	579,588	0	0	0	0	0	0	11	579,588
17. Incurred during current year.....	32	9,131,133	0	0	0	0	0	0	32	9,131,133
Settled during current year:										
18.1 By payment in full.....	32	8,714,866	0	0	0	0	0	0	32	8,714,866
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	32	8,714,866	0	0	0	0	0	0	32	8,714,866
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	8,714,866	0	0	0	0	0	0	32	8,714,866
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	11	995,855	0	0	0	0	0	0	11	995,855
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,900	1,240,510,239	0	(a).....0	0	0	0	0	3,900	1,240,510,239
21. Issued during year.....	114	59,853,733	0	0	0	0	0	0	114	59,853,733
22. Other changes to in force (Net).....	(454)	(110,780,076)	0	0	0	0	0	0	(454)	(110,780,076)
23. In force December 31 of current year.....	3,560	1,189,583,896	0	(a).....0	0	0	0	0	3,560	1,189,583,896

(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).....	161,644	164,515	0	27,862	27,862
25.2 Guaranteed renewable (b).....	34,658	35,273	0	1,960	2,123
25.3 Non-renewable for stated reasons only (b).....	1,281	1,304	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).....	197,583	201,092	0	29,822	29,985
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	197,583	201,092	0	29,822	29,985

(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.....	3,468,422	0	0	0	3,468,422
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).....	3,468,822	0	0	0	3,468,822
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.....	3,066,693	0	0	0	3,066,693
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	1,340,905	0	0	0	1,340,905
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.....	4,407,598	0	0	0	4,407,598

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 through 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	687,765	0	0	0	0	0	0	1	687,765
17. Incurred during current year.....	13	3,205,070	0	0	0	0	0	0	13	3,205,070
Settled during current year:										
18.1 By payment in full.....	12	3,705,070	0	0	0	0	0	0	12	3,705,070
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	12	3,705,070	0	0	0	0	0	0	12	3,705,070
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.....	12	3,705,070	0	0	0	0	0	0	12	3,705,070
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	187,765	0	0	0	0	0	0	2	187,765
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,220	1,381,917,943	0	(a).....0	0	0	0	0	3,220	1,381,917,943
21. Issued during year.....	116	73,560,747	0	0	0	0	0	0	116	73,560,747
22. Other changes to in force (Net).....	(304)	(112,213,549)	0	0	0	0	0	0	(304)	(112,213,549)
23. In force December 31 of current year.....	3,032	1,343,265,141	0	(a).....0	0	0	0	0	3,032	1,343,265,141

(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).....	240,946	245,225	0	98,321	98,454
25.2 Guaranteed renewable (b).....	19,396	19,740	0	0	0
25.3 Non-renewable for stated reasons only (b).....	10,761	10,952	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).....	271,103	275,917	0	98,321	98,454
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	271,103	275,917	0	98,321	98,454

(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.....	13,236,004	0	0	0	13,236,004
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).....	13,236,004	0	0	0	13,236,004
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.....	2,467,257	0	0	0	2,467,257
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	84,017	0	0	0	84,017
12. Surrender values and withdrawals for life contracts.....	2,896,452	0	0	0	2,896,452
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.....	5,447,726	0	0	0	5,447,726
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 through 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	1,062,464	0	0	0	0	0	0	3	1,062,464
17. Incurred during current year.....	13	2,456,820	0	0	0	0	0	0	13	2,456,820
Settled during current year:										
18.1 By payment in full.....	13	3,186,781	0	0	0	0	0	0	13	3,186,781
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	13	3,186,781	0	0	0	0	0	0	13	3,186,781
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	3,186,781	0	0	0	0	0	0	13	3,186,781
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	332,503	0	0	0	0	0	0	3	332,503
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	8,886	5,274,576,295	0	(a).....0	0	0	0	0	8,886	5,274,576,295
21. Issued during year.....	477	412,458,490	0	0	0	0	0	0	477	412,458,490
22. Other changes to in force (Net).....	(566)	(351,464,353)	0	0	0	0	0	0	(566)	(351,464,353)
23. In force December 31 of current year.....	8,797	5,335,570,432	0	(a).....0	0	0	0	0	8,797	5,335,570,432

(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).....	840,103	855,021	0	34,800	35,716
25.2 Guaranteed renewable (b).....	15,136	15,405	0	0	0
25.3 Non-renewable for stated reasons only (b).....	16,109	16,395	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).....	871,348	886,821	0	34,800	35,716
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	871,348	886,821	0	34,800	35,716

(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.....	6,947,382	0	0	0	6,947,382
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	5,015	XXX	0	XXX	5,015
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	6,952,397	0	0	0	6,952,397
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.....	6,654,515	0	0	0	6,654,515
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	160,353	0	0	0	160,353
12. Surrender values and withdrawals for life contracts.....	8,456,146	0	0	0	8,456,146
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.....	15,271,014	0	0	0	15,271,014
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 through 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	947,102	0	0	0	0	0	0	8	947,102
17. Incurred during current year.....	13	5,256,407	0	0	0	0	0	0	13	5,256,407
Settled during current year:										
18.1 By payment in full.....	12	2,371,922	0	0	0	0	0	0	12	2,371,922
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	12	2,371,922	0	0	0	0	0	0	12	2,371,922
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.....	12	2,371,922	0	0	0	0	0	0	12	2,371,922
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	9	3,831,587	0	0	0	0	0	0	9	3,831,587
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,932	2,448,733,600	0	(a).....0	0	0	0	0	4,932	2,448,733,600
21. Issued during year.....	142	103,856,399	0	0	0	0	0	0	142	103,856,399
22. Other changes to in force (Net).....	(258)	(150,899,893)	0	0	0	0	0	0	(258)	(150,899,893)
23. In force December 31 of current year.....	4,816	2,401,690,106	0	(a).....0	0	0	0	0	4,816	2,401,690,106

(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).....	381,627	388,404	0	500,819	501,812
25.2 Guaranteed renewable (b).....	10,008	10,185	0	0	0
25.3 Non-renewable for stated reasons only (b).....	2,801	2,851	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).....	394,436	401,440	0	500,819	501,812
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	394,436	401,440	0	500,819	501,812

(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.....	6,221,068	0	0	0	6,221,068
2. Annuity considerations.....	16,003	0	0	0	16,003
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).....	6,237,071	0	0	0	6,237,071
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.....	7,673,233	0	0	0	7,673,233
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	23,636	0	0	0	23,636
12. Surrender values and withdrawals for life contracts.....	3,251,839	0	0	0	3,251,839
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.....	10,948,708	0	0	0	10,948,708
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 through 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.....	26	9,157,886	0	0	0	0	0	0	26	9,157,886
Settled during current year:										
18.1 By payment in full.....	23	8,464,515	0	0	0	0	0	0	23	8,464,515
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	23	8,464,515	0	0	0	0	0	0	23	8,464,515
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.....	23	8,464,515	0	0	0	0	0	0	23	8,464,515
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	693,371	0	0	0	0	0	0	3	693,371
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,859	2,625,657,794	0	(a).....0	0	0	0	0	4,859	2,625,657,794
21. Issued during year.....	240	169,852,347	0	0	0	0	0	0	240	169,852,347
22. Other changes to in force (Net).....	(341)	(181,116,116)	0	0	0	0	0	0	(341)	(181,116,116)
23. In force December 31 of current year.....	4,758	2,614,394,025	0	(a).....0	0	0	0	0	4,758	2,614,394,025

(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).....	385,407	392,251	0	379,865	378,531
25.2 Guaranteed renewable (b).....	26,075	26,538	0	6,000	6,000
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).....	411,482	418,789	0	385,865	384,531
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	411,482	418,789	0	385,865	384,531

(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.....	4,902,625	0	0	0	4,902,625
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).....	4,902,625	0	0	0	4,902,625
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.....	4,331,898	0	0	0	4,331,898
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	404	0	0	0	404
12. Surrender values and withdrawals for life contracts.....	380,132	0	0	0	380,132
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.....	4,712,434	0	0	0	4,712,434

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 through 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	37,035	0	0	0	0	0	0	1	37,035
17. Incurred during current year.....	20	4,829,553	0	0	0	0	0	0	20	4,829,553
Settled during current year:										
18.1 By payment in full.....	18	3,729,522	0	0	0	0	0	0	18	3,729,522
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	18	3,729,522	0	0	0	0	0	0	18	3,729,522
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.....	18	3,729,522	0	0	0	0	0	0	18	3,729,522
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	1,137,066	0	0	0	0	0	0	3	1,137,066
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,578	1,915,959,685	0	(a).....0	0	0	0	0	3,578	1,915,959,685
21. Issued during year.....	252	205,766,471	0	0	0	0	0	0	252	205,766,471
22. Other changes to in force (Net).....	(178)	(140,269,387)	0	0	0	0	0	0	(178)	(140,269,387)
23. In force December 31 of current year.....	3,652	1,981,456,769	0	(a).....0	0	0	0	0	3,652	1,981,456,769

(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).....	348,196	354,379	0	322,445	320,112
25.2 Guaranteed renewable (b).....	7,829	7,968	0	0	0
25.3 Non-renewable for stated reasons only (b).....	2,907	2,959	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).....	358,932	365,306	0	322,445	320,112
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	358,932	365,306	0	322,445	320,112

(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.....	4,325,937	0	0	0	4,325,937
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).....	4,325,937	0	0	0	4,325,937
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.....	4,740,000	0	0	0	4,740,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	7,291	0	0	0	7,291
12. Surrender values and withdrawals for life contracts.....	682,686	0	0	0	682,686
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.....	5,429,977	0	0	0	5,429,977

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 through 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	125,166	0	0	0	0	0	0	1	125,166
17. Incurred during current year.....	8	4,740,000	0	0	0	0	0	0	8	4,740,000
Settled during current year:										
18.1 By payment in full.....	5	740,000	0	0	0	0	0	0	5	740,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	5	740,000	0	0	0	0	0	0	5	740,000
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	740,000	0	0	0	0	0	0	5	740,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	4	4,125,166	0	0	0	0	0	0	4	4,125,166
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,019	2,107,499,286	0	(a).....0	0	0	0	0	3,019	2,107,499,286
21. Issued during year.....	291	259,611,234	0	0	0	0	0	0	291	259,611,234
22. Other changes to in force (Net).....	(194)	(123,934,768)	0	0	0	0	0	0	(194)	(123,934,768)
23. In force December 31 of current year.....	3,116	2,243,175,752	0	(a).....0	0	0	0	0	3,116	2,243,175,752

(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).....	445,397	453,306	0	197,733	177,280
25.2 Guaranteed renewable (b).....	7,402	7,534	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).....	452,799	460,840	0	197,733	177,280
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	452,799	460,840	0	197,733	177,280

(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.....	8,834,336	0	0	0	8,834,336
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	241,899	XXX	0	XXX	241,899
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	9,076,235	0	0	0	9,076,235
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.....	4,940,453	0	0	0	4,940,453
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	66,248	0	0	0	66,248
12. Surrender values and withdrawals for life contracts.....	1,965,888	0	0	0	1,965,888
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.....	6,972,589	0	0	0	6,972,589

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 through 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	98,439	0	0	0	0	0	0	1	98,439
17. Incurred during current year.....	13	4,919,760	0	0	0	0	0	0	13	4,919,760
Settled during current year:										
18.1 By payment in full.....	11	4,055,554	0	0	0	0	0	0	11	4,055,554
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	11	4,055,554	0	0	0	0	0	0	11	4,055,554
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	4,055,554	0	0	0	0	0	0	11	4,055,554
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	962,645	0	0	0	0	0	0	3	962,645
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	6,247	4,183,470,274	0	(a).....0	0	0	0	0	6,247	4,183,470,274
21. Issued during year.....	340	232,821,573	0	0	0	0	0	0	340	232,821,573
22. Other changes to in force (Net).....	(301)	(252,424,735)	0	0	0	0	0	0	(301)	(252,424,735)
23. In force December 31 of current year.....	6,286	4,163,867,112	0	(a).....0	0	0	0	0	6,286	4,163,867,112

(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).....	381,642	388,419	0	84,000	90,000
25.2 Guaranteed renewable (b).....	30,826	31,373	0	6,747	6,160
25.3 Non-renewable for stated reasons only (b).....	436	444	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).....	412,904	420,236	0	90,747	96,160
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	412,904	420,236	0	90,747	96,160

(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.....	8,573,707	0	0	0	8,573,707
2. Annuity considerations.....	2,110	0	0	0	2,110
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).....	8,575,817	0	0	0	8,575,817
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.....	5,487,217	0	0	0	5,487,217
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	128,818	0	0	0	128,818
12. Surrender values and withdrawals for life contracts.....	1,408,923	0	0	0	1,408,923
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.....	7,024,958	0	0	0	7,024,958
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 through 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	2,027,796	0	0	0	0	0	0	3	2,027,796
17. Incurred during current year.....	19	5,439,220	0	0	0	0	0	0	19	5,439,220
Settled during current year:										
18.1 By payment in full.....	21	6,988,985	0	0	0	0	0	0	21	6,988,985
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	21	6,988,985	0	0	0	0	0	0	21	6,988,985
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	6,988,985	0	0	0	0	0	0	21	6,988,985
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	478,031	0	0	0	0	0	0	1	478,031
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	6,365	4,432,232,154	0	(a).....0	0	0	0	0	6,365	4,432,232,154
21. Issued during year.....	276	204,794,490	0	0	0	0	0	0	276	204,794,490
22. Other changes to in force (Net).....	(499)	(342,411,465)	0	0	0	0	0	0	(499)	(342,411,465)
23. In force December 31 of current year.....	6,142	4,294,615,179	0	(a).....0	0	0	0	0	6,142	4,294,615,179

(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).....	720,481	733,275	0	387,867	507,142
25.2 Guaranteed renewable (b).....	21,971	22,361	0	0	0
25.3 Non-renewable for stated reasons only (b).....	7,082	7,208	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).....	749,534	762,844	0	387,867	507,142
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	749,534	762,844	0	387,867	507,142

(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.....	1,060,636	0	0	0	1,060,636
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).....	1,060,636	0	0	0	1,060,636
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.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	182,207	0	0	0	182,207
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.....	282,207	0	0	0	282,207

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 through 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.....	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	100,000	0	0	0	0	0	0	1	100,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,181	616,650,825	0	(a).....0	0	0	0	0	1,181	616,650,825
21. Issued during year.....	32	24,329,897	0	0	0	0	0	0	32	24,329,897
22. Other changes to in force (Net).....	(50)	(35,262,223)	0	0	0	0	0	0	(50)	(35,262,223)
23. In force December 31 of current year.....	1,163	605,718,499	0	(a).....0	0	0	0	0	1,163	605,718,499

(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).....	30,446	30,987	0	17,077	17,077
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).....	30,446	30,987	0	17,077	17,077
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	30,446	30,987	0	17,077	17,077

(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.....	13,035,426	0	0	0	13,035,426
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).....	13,035,426	0	0	0	13,035,426
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.....	6,411,919	0	0	0	6,411,919
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	62,341	0	0	0	62,341
12. Surrender values and withdrawals for life contracts.....	6,058,096	0	0	0	6,058,096
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.....	12,532,356	0	0	0	12,532,356
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 through 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	1,775,367	0	0	0	0	0	0	11	1,775,367
17. Incurred during current year.....	27	7,405,213	0	0	0	0	0	0	27	7,405,213
Settled during current year:										
18.1 By payment in full.....	28	5,955,213	0	0	0	0	0	0	28	5,955,213
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	28	5,955,213	0	0	0	0	0	0	28	5,955,213
18.4 Reduction by compromise.....	1	35,000	0	0	0	0	0	0	1	35,000
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	29	5,990,213	0	0	0	0	0	0	29	5,990,213
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	9	3,190,367	0	0	0	0	0	0	9	3,190,367
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	9,594	5,007,183,461	0	(a).....0	0	0	0	0	9,594	5,007,183,461
21. Issued during year.....	634	476,358,266	0	0	0	0	0	0	634	476,358,266
22. Other changes to in force (Net).....	(770)	(341,519,552)	0	0	0	0	0	0	(770)	(341,519,552)
23. In force December 31 of current year.....	9,458	5,142,022,175	0	(a).....0	0	0	0	0	9,458	5,142,022,175

(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).....	1,149,211	1,169,617	0	1,021,772	1,006,760
25.2 Guaranteed renewable (b).....	31,616	32,177	0	12,941	23,741
25.3 Non-renewable for stated reasons only (b).....	3,424	3,484	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).....	1,184,251	1,205,278	0	1,034,713	1,030,501
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,184,251	1,205,278	0	1,034,713	1,030,501

(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.....	6,543,645	0	0	0	6,543,645
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	50,827	XXX	0	XXX	50,827
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	6,594,472	0	0	0	6,594,472
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.....	5,740,347	0	0	0	5,740,347
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	31,786	0	0	0	31,786
12. Surrender values and withdrawals for life contracts.....	2,513,486	0	0	0	2,513,486
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.....	8,285,619	0	0	0	8,285,619

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 through 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	260,500	0	0	0	0	0	0	2	260,500
17. Incurred during current year.....	11	3,060,000	0	0	0	0	0	0	11	3,060,000
Settled during current year:										
18.1 By payment in full.....	13	3,320,500	0	0	0	0	0	0	13	3,320,500
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	13	3,320,500	0	0	0	0	0	0	13	3,320,500
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	3,320,500	0	0	0	0	0	0	13	3,320,500
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.....	4,763	2,570,091,566	0	(a).....0	0	0	0	0	4,763	2,570,091,566
21. Issued during year.....	183	116,186,156	0	0	0	0	0	0	183	116,186,156
22. Other changes to in force (Net).....	(234)	(171,768,554)	0	0	0	0	0	0	(234)	(171,768,554)
23. In force December 31 of current year.....	4,712	2,514,509,168	0	(a).....0	0	0	0	0	4,712	2,514,509,168

(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).....	378,628	385,351	0	165,563	167,096
25.2 Guaranteed renewable (b).....	20,989	21,362	0	35,980	44,838
25.3 Non-renewable for stated reasons only (b).....	3,115	3,170	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).....	402,732	409,883	0	201,543	211,934
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	402,732	409,883	0	201,543	211,934

(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.....	7,111,762	0	0	0	7,111,762
2. Annuity considerations.....	340	0	0	0	340
3. Deposit-type contract funds.....	34,507	XXX	0	XXX	34,507
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	7,146,609	0	0	0	7,146,609
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.....	3,327,680	0	0	0	3,327,680
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	144,942	0	0	0	144,942
12. Surrender values and withdrawals for life contracts.....	10,638,893	0	0	0	10,638,893
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.....	14,111,515	0	0	0	14,111,515
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 through 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.....	16	4,708,520	0	0	0	0	0	0	16	4,708,520
Settled during current year:										
18.1 By payment in full.....	13	2,163,520	0	0	0	0	0	0	13	2,163,520
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	13	2,163,520	0	0	0	0	0	0	13	2,163,520
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	2,163,520	0	0	0	0	0	0	13	2,163,520
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	2,545,000	0	0	0	0	0	0	3	2,545,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,729	2,220,289,155	0	(a).....0	0	0	0	0	4,729	2,220,289,155
21. Issued during year.....	244	151,295,859	0	0	0	0	0	0	244	151,295,859
22. Other changes to in force (Net).....	(81)	(97,815,648)	0	0	0	0	0	0	(81)	(97,815,648)
23. In force December 31 of current year.....	4,892	2,273,769,366	0	(a).....0	0	0	0	0	4,892	2,273,769,366

(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).....	423,487	431,006	0	522,465	516,327
25.2 Guaranteed renewable (b).....	14,111	14,361	0	988	0
25.3 Non-renewable for stated reasons only (b).....	7,959	8,100	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).....	445,557	453,467	0	523,453	516,327
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	445,557	453,467	0	523,453	516,327

(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

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 through 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 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.....	2,589,613	0	0	0	2,589,613
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).....	2,589,613	0	0	0	2,589,613
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.....	2,908,000	0	0	0	2,908,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	15,731	0	0	0	15,731
12. Surrender values and withdrawals for life contracts.....	821,419	0	0	0	821,419
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.....	3,745,150	0	0	0	3,745,150

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 through 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	131,905	0	0	0	0	0	0	2	131,905
17. Incurred during current year.....	7	2,948,000	0	0	0	0	0	0	7	2,948,000
Settled during current year:										
18.1 By payment in full.....	6	1,048,000	0	0	0	0	0	0	6	1,048,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	6	1,048,000	0	0	0	0	0	0	6	1,048,000
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	1,048,000	0	0	0	0	0	0	6	1,048,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	2,031,905	0	0	0	0	0	0	3	2,031,905
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,403	876,105,738	0	(a).....0	0	0	0	0	1,403	876,105,738
21. Issued during year.....	80	64,774,011	0	0	0	0	0	0	80	64,774,011
22. Other changes to in force (Net).....	(32)	(57,311,149)	0	0	0	0	0	0	(32)	(57,311,149)
23. In force December 31 of current year.....	1,451	883,568,600	0	(a).....0	0	0	0	0	1,451	883,568,600

(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).....	184,489	187,765	0	239,350	239,759
25.2 Guaranteed renewable (b).....	3,746	3,812	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).....	188,235	191,577	0	239,350	239,759
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	188,235	191,577	0	239,350	239,759

(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.....	2,674,302	0	0	0	2,674,302
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).....	2,674,302	0	0	0	2,674,302
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.....	14,212	0	0	0	14,212
12. Surrender values and withdrawals for life contracts.....	119,266	0	0	0	119,266
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.....	333,478	0	0	0	333,478
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 through 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.....	5	954,496	0	0	0	0	0	0	5	954,496
Settled during current year:										
18.1 By payment in full.....	5	954,496	0	0	0	0	0	0	5	954,496
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	5	954,496	0	0	0	0	0	0	5	954,496
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	954,496	0	0	0	0	0	0	5	954,496
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.....	2,144	1,087,093,438	0	(a).....0	0	0	0	0	2,144	1,087,093,438
21. Issued during year.....	61	32,855,000	0	0	0	0	0	0	61	32,855,000
22. Other changes to in force (Net).....	(121)	(56,553,763)	0	0	0	0	0	0	(121)	(56,553,763)
23. In force December 31 of current year.....	2,084	1,063,394,675	0	(a).....0	0	0	0	0	2,084	1,063,394,675

(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).....	90,003	91,601	0	37,232	37,232
25.2 Guaranteed renewable (b).....	6,257	6,368	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).....	96,260	97,969	0	37,232	37,232
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	96,260	97,969	0	37,232	37,232

(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.....	11,660,269	0	0	0	11,660,269
2. Annuity considerations.....	9,205	0	0	0	9,205
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).....	11,669,474	0	0	0	11,669,474
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.....	29,572,408	0	0	0	29,572,408
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	143,912	0	0	0	143,912
12. Surrender values and withdrawals for life contracts.....	2,071,994	0	0	0	2,071,994
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.....	31,788,314	0	0	0	31,788,314
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 through 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	2,339,805	0	0	0	0	0	0	7	2,339,805
17. Incurred during current year.....	31	25,444,348	0	0	0	0	0	0	31	25,444,348
Settled during current year:										
18.1 By payment in full.....	31	26,019,575	0	0	0	0	0	0	31	26,019,575
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	31	26,019,575	0	0	0	0	0	0	31	26,019,575
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.....	31	26,019,575	0	0	0	0	0	0	31	26,019,575
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	7	1,764,578	0	0	0	0	0	0	7	1,764,578
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	7,124	4,609,751,385	0	(a).....0	0	0	0	0	7,124	4,609,751,385
21. Issued during year.....	446	369,249,578	0	0	0	0	0	0	446	369,249,578
22. Other changes to in force (Net).....	266	(31,331,302)	0	0	0	0	0	0	266	(31,331,302)
23. In force December 31 of current year.....	7,836	4,947,669,661	0	(a).....0	0	0	0	0	7,836	4,947,669,661

(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).....	868,356	883,775	0	928,897	707,309
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	5,797	5,900	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).....	874,153	889,675	0	928,897	707,309
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	874,153	889,675	0	928,897	707,309

(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.....	1,165,864	0	0	0	1,165,864
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).....	1,165,864	0	0	0	1,165,864
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.....	335,000	0	0	0	335,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	23,309	0	0	0	23,309
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.....	358,309	0	0	0	358,309

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 through 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	95,690	0	0	0	0	0	0	1	95,690
17. Incurred during current year.....	4	335,000	0	0	0	0	0	0	4	335,000
Settled during current year:										
18.1 By payment in full.....	3	300,000	0	0	0	0	0	0	3	300,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	3	300,000	0	0	0	0	0	0	3	300,000
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.....	3	300,000	0	0	0	0	0	0	3	300,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	130,690	0	0	0	0	0	0	2	130,690
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,083	508,784,699	0	(a).....0	0	0	0	0	1,083	508,784,699
21. Issued during year.....	29	17,375,000	0	0	0	0	0	0	29	17,375,000
22. Other changes to in force (Net).....	(111)	(52,653,402)	0	0	0	0	0	0	(111)	(52,653,402)
23. In force December 31 of current year.....	1,001	473,506,297	0	(a).....0	0	0	0	0	1,001	473,506,297

(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).....	60,282	61,352	0	0	0
25.2 Guaranteed renewable (b).....	6,080	6,188	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).....	66,362	67,540	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	66,362	67,540	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 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.....	4,459,367	0	0	0	4,459,367
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).....	4,459,367	0	0	0	4,459,367
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.....	2,459,604	0	0	0	2,459,604
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	7,239	0	0	0	7,239
12. Surrender values and withdrawals for life contracts.....	2,314,895	0	0	0	2,314,895
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.....	4,781,738	0	0	0	4,781,738
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 through 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	1,050,479	0	0	0	0	0	0	5	1,050,479
17. Incurred during current year.....	23	2,465,518	0	0	0	0	0	0	23	2,465,518
Settled during current year:										
18.1 By payment in full.....	23	2,887,534	0	0	0	0	0	0	23	2,887,534
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	23	2,887,534	0	0	0	0	0	0	23	2,887,534
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.....	23	2,887,534	0	0	0	0	0	0	23	2,887,534
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	5	628,463	0	0	0	0	0	0	5	628,463
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,977	1,316,595,665	0	(a).....0	0	0	0	0	3,977	1,316,595,665
21. Issued during year.....	102	64,765,305	0	0	0	0	0	0	102	64,765,305
22. Other changes to in force (Net).....	(446)	(170,729,068)	0	0	0	0	0	0	(446)	(170,729,068)
23. In force December 31 of current year.....	3,633	1,210,631,902	0	(a).....0	0	0	0	0	3,633	1,210,631,902

(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).....	114,499	116,532	0	58,756	59,007
25.2 Guaranteed renewable (b).....	13,126	13,360	0	0	0
25.3 Non-renewable for stated reasons only (b).....	9,816	9,990	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).....	137,441	139,882	0	58,756	59,007
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	137,441	139,882	0	58,756	59,007

(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 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.....	2,326,547	0	0	0	2,326,547
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).....	2,326,547	0	0	0	2,326,547
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.....	150,000	0	0	0	150,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	118,375	0	0	0	118,375
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.....	268,375	0	0	0	268,375
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 through 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	650,000	0	0	0	0	0	0	2	650,000
Settled during current year:										
18.1 By payment in full.....	2	650,000	0	0	0	0	0	0	2	650,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	2	650,000	0	0	0	0	0	0	2	650,000
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	650,000	0	0	0	0	0	0	2	650,000
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.....	1,847	1,119,558,848	0	(a).....0	0	0	0	0	1,847	1,119,558,848
21. Issued during year.....	107	87,958,263	0	0	0	0	0	0	107	87,958,263
22. Other changes to in force (Net).....	(66)	(55,447,320)	0	0	0	0	0	0	(66)	(55,447,320)
23. In force December 31 of current year.....	1,888	1,152,069,791	0	(a).....0	0	0	0	0	1,888	1,152,069,791

(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).....	154,556	157,301	0	0	0
25.2 Guaranteed renewable (b).....	6,550	6,666	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).....	161,106	163,967	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	161,106	163,967	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.....	9,931,428	0	0	0	9,931,428
2. Annuity considerations.....	266	0	0	0	266
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).....	9,931,694	0	0	0	9,931,694
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.....	7,970,027	0	0	0	7,970,027
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	191,760	0	0	0	191,760
12. Surrender values and withdrawals for life contracts.....	2,952,324	0	0	0	2,952,324
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.....	11,114,111	0	0	0	11,114,111
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 through 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	2,867,569	0	0	0	0	0	0	2	2,867,569
17. Incurred during current year.....	11	7,746,724	0	0	0	0	0	0	11	7,746,724
Settled during current year:										
18.1 By payment in full.....	11	8,737,659	0	0	0	0	0	0	11	8,737,659
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	11	8,737,659	0	0	0	0	0	0	11	8,737,659
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	8,737,659	0	0	0	0	0	0	11	8,737,659
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	1,876,634	0	0	0	0	0	0	2	1,876,634
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	6,211	4,346,276,026	0	(a).....0	0	0	0	0	6,211	4,346,276,026
21. Issued during year.....	490	438,278,384	0	0	0	0	0	0	490	438,278,384
22. Other changes to in force (Net).....	(271)	(185,859,793)	0	0	0	0	0	0	(271)	(185,859,793)
23. In force December 31 of current year.....	6,430	4,598,694,617	0	(a).....0	0	0	0	0	6,430	4,598,694,617

(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).....	798,921	813,106	0	767,148	833,452
25.2 Guaranteed renewable (b).....	0	0	0	36,000	36,000
25.3 Non-renewable for stated reasons only (b).....	40,983	41,710	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).....	839,904	854,816	0	803,148	869,452
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	839,904	854,816	0	803,148	869,452

(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 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.....	1,134,042	0	0	0	1,134,042
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).....	1,134,042	0	0	0	1,134,042
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.....	150,000	0	0	0	150,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	94,689	0	0	0	94,689
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.....	244,689	0	0	0	244,689

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 through 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.....	571	302,066,241	0	(a).....0	0	0	0	0	571	302,066,241
21. Issued during year.....	26	14,600,000	0	0	0	0	0	0	26	14,600,000
22. Other changes to in force (Net).....	31	9,719,361	0	0	0	0	0	0	31	9,719,361
23. In force December 31 of current year.....	628	326,385,602	0	(a).....0	0	0	0	0	628	326,385,602

(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).....	55,509	56,494	0	127,347	127,347
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).....	55,509	56,494	0	127,347	127,347
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	55,509	56,494	0	127,347	127,347

(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.....	1,660,023	0	0	0	1,660,023
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).....	1,660,023	0	0	0	1,660,023
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.....	1,550,000	0	0	0	1,550,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	10,109	0	0	0	10,109
12. Surrender values and withdrawals for life contracts.....	145,637	0	0	0	145,637
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.....	1,705,746	0	0	0	1,705,746
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 through 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.....	3	950,000	0	0	0	0	0	0	3	950,000
Settled during current year:										
18.1 By payment in full.....	3	950,000	0	0	0	0	0	0	3	950,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	3	950,000	0	0	0	0	0	0	3	950,000
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.....	3	950,000	0	0	0	0	0	0	3	950,000
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.....	1,039	757,245,243	0	(a).....0	0	0	0	0	1,039	757,245,243
21. Issued during year.....	61	51,489,398	0	0	0	0	0	0	61	51,489,398
22. Other changes to in force (Net).....	31	4,628,775	0	0	0	0	0	0	31	4,628,775
23. In force December 31 of current year.....	1,131	813,363,416	0	(a).....0	0	0	0	0	1,131	813,363,416

(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).....	121,010	123,158	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).....	121,010	123,158	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	121,010	123,158	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 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.....	870,588	0	0	0	870,588
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).....	870,588	0	0	0	870,588
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.....	35,000	0	0	0	35,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	12,805	0	0	0	12,805
12. Surrender values and withdrawals for life contracts.....	300,547	0	0	0	300,547
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.....	348,352	0	0	0	348,352

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 through 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	10,000	0	0	0	0	0	0	1	10,000
Settled during current year:										
18.1 By payment in full.....	1	10,000	0	0	0	0	0	0	1	10,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1	10,000	0	0	0	0	0	0	1	10,000
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	10,000	0	0	0	0	0	0	1	10,000
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.....	412	401,708,918	0	(a).....0	0	0	0	0	412	401,708,918
21. Issued during year.....	9	18,535,000	0	0	0	0	0	0	9	18,535,000
22. Other changes to in force (Net).....	99	22,395,234	0	0	0	0	0	0	99	22,395,234
23. In force December 31 of current year.....	520	442,639,152	0	(a).....0	0	0	0	0	520	442,639,152

(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).....	60,438	61,511	0	0	0
25.2 Guaranteed renewable (b).....	254	259	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).....	60,692	61,770	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	60,692	61,770	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 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.....	30,229,990	0	0	0	30,229,990
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	1,727,601	XXX	0	XXX	1,727,601
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	31,957,591	0	0	0	31,957,591
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.....	37,214,493	0	0	0	37,214,493
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	467,240	0	0	0	467,240
12. Surrender values and withdrawals for life contracts.....	15,347,895	0	0	0	15,347,895
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.....	53,029,628	0	0	0	53,029,628
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 through 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.....	37	3,602,772	0	0	0	0	0	0	37	3,602,772
17. Incurred during current year.....	120	41,492,124	0	0	0	0	0	0	120	41,492,124
Settled during current year:										
18.1 By payment in full.....	112	40,979,431	0	0	0	0	0	0	112	40,979,431
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	112	40,979,431	0	0	0	0	0	0	112	40,979,431
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.....	112	40,979,431	0	0	0	0	0	0	112	40,979,431
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	45	4,115,465	0	0	0	0	0	0	45	4,115,465
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	22,698	11,076,666,507	0	(a).....0	0	0	0	0	22,698	11,076,666,507
21. Issued during year.....	1,146	740,470,422	0	0	0	0	0	0	1,146	740,470,422
22. Other changes to in force (Net).....	(2,512)	(1,268,219,049)	0	0	0	0	0	0	(2,512)	(1,268,219,049)
23. In force December 31 of current year.....	21,332	10,548,917,880	0	(a).....0	0	0	0	0	21,332	10,548,917,880

(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).....	1,796,910	1,828,818	0	972,152	946,966
25.2 Guaranteed renewable (b).....	43,895	44,675	0	0	0
25.3 Non-renewable for stated reasons only (b).....	49,402	50,279	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).....	1,890,207	1,923,772	0	972,152	946,966
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,890,207	1,923,772	0	972,152	946,966

(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.....	5,218,714	0	0	0	5,218,714
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).....	5,218,714	0	0	0	5,218,714
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.....	2,580,000	0	0	0	2,580,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	482,015	0	0	0	482,015
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.....	3,062,015	0	0	0	3,062,015

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 through 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	3,997,848	0	0	0	0	0	0	2	3,997,848
17. Incurred during current year.....	13	2,352,017	0	0	0	0	0	0	13	2,352,017
Settled during current year:										
18.1 By payment in full.....	9	952,017	0	0	0	0	0	0	9	952,017
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	9	952,017	0	0	0	0	0	0	9	952,017
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	952,017	0	0	0	0	0	0	9	952,017
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	6	5,397,848	0	0	0	0	0	0	6	5,397,848
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,676	1,970,732,685	0	(a).....0	0	0	0	0	3,676	1,970,732,685
21. Issued during year.....	170	120,742,890	0	0	0	0	0	0	170	120,742,890
22. Other changes to in force (Net).....	(187)	(108,705,850)	0	0	0	0	0	0	(187)	(108,705,850)
23. In force December 31 of current year.....	3,659	1,982,769,725	0	(a).....0	0	0	0	0	3,659	1,982,769,725

(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).....	449,489	457,471	0	36,000	36,000
25.2 Guaranteed renewable (b).....	4,829	4,914	0	0	0
25.3 Non-renewable for stated reasons only (b).....	6,602	6,719	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).....	460,920	469,104	0	36,000	36,000
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	460,920	469,104	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.....	6,015,776	0	0	0	6,015,776
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).....	6,015,776	0	0	0	6,015,776
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.....	1,175,000	0	0	0	1,175,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	3,290,242	0	0	0	3,290,242
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.....	4,465,242	0	0	0	4,465,242
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 through 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	442,109	0	0	0	0	0	0	1	442,109
17. Incurred during current year.....	8	1,175,000	0	0	0	0	0	0	8	1,175,000
Settled during current year:										
18.1 By payment in full.....	8	1,175,000	0	0	0	0	0	0	8	1,175,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	8	1,175,000	0	0	0	0	0	0	8	1,175,000
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.....	8	1,175,000	0	0	0	0	0	0	8	1,175,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	442,109	0	0	0	0	0	0	1	442,109
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,366	2,586,439,320	0	(a).....0	0	0	0	0	4,366	2,586,439,320
21. Issued during year.....	256	183,033,570	0	0	0	0	0	0	256	183,033,570
22. Other changes to in force (Net).....	(263)	(178,768,248)	0	0	0	0	0	0	(263)	(178,768,248)
23. In force December 31 of current year.....	4,359	2,590,704,642	0	(a).....0	0	0	0	0	4,359	2,590,704,642

(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).....	339,564	345,594	0	221,619	265,532
25.2 Guaranteed renewable (b).....	14,919	15,184	0	0	0
25.3 Non-renewable for stated reasons only (b).....	20,577	20,942	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).....	375,060	381,720	0	221,619	265,532
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	375,060	381,720	0	221,619	265,532

(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.....	27,737	0	0	0	27,737
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).....	27,737	0	0	0	27,737
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.....	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.....	250,000	0	0	0	250,000
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 through 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).....	2,967	3,020	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).....	2,967	3,020	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	2,967	3,020	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 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.....	14,743,857	0	0	0	14,743,857
2. Annuity considerations.....	64,877	0	0	0	64,877
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).....	14,808,734	0	0	0	14,808,734
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.....	9,310,518	0	0	0	9,310,518
10. Matured endowments.....	13,551	0	0	0	13,551
11. Annuity benefits.....	656,407	0	0	0	656,407
12. Surrender values and withdrawals for life contracts.....	2,165,887	0	0	0	2,165,887
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.....	12,146,363	0	0	0	12,146,363
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 through 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	737,185	0	0	0	0	0	0	5	737,185
17. Incurred during current year.....	85	8,147,712	0	0	0	0	0	0	85	8,147,712
Settled during current year:										
18.1 By payment in full.....	89	8,784,897	0	0	0	0	0	0	89	8,784,897
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	89	8,784,897	0	0	0	0	0	0	89	8,784,897
18.4 Reduction by compromise.....	1	100,000	0	0	0	0	0	0	1	100,000
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	90	8,884,897	0	0	0	0	0	0	90	8,884,897
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.....	14,320	6,768,552,311	0	(a).....0	0	0	0	0	14,320	6,768,552,311
21. Issued during year.....	676	558,525,988	0	0	0	0	0	0	676	558,525,988
22. Other changes to in force (Net).....	(1,027)	(447,751,462)	0	0	0	0	0	0	(1,027)	(447,751,462)
23. In force December 31 of current year.....	13,969	6,879,326,837	0	(a).....0	0	0	0	0	13,969	6,879,326,837

(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).....	1,398,814	1,423,652	0	292,413	288,938
25.2 Guaranteed renewable (b).....	97,686	99,421	0	66,388	68,263
25.3 Non-renewable for stated reasons only (b).....	22,922	23,329	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).....	1,519,422	1,546,402	0	358,801	357,201
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,519,422	1,546,402	0	358,801	357,201

(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.....	3,636,259	0	0	0	3,636,259
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).....	3,636,259	0	0	0	3,636,259
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.....	1,079,794	0	0	0	1,079,794
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.....	1,079,794	0	0	0	1,079,794

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 through 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.....	1,036	1,084,551,420	0	(a).....0	0	0	0	0	1,036	1,084,551,420
21. Issued during year.....	26	13,625,000	0	0	0	0	0	0	26	13,625,000
22. Other changes to in force (Net).....	(92)	(128,908,487)	0	0	0	0	0	0	(92)	(128,908,487)
23. In force December 31 of current year.....	970	969,267,933	0	(a).....0	0	0	0	0	970	969,267,933

(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).....	1,054,882	1,073,613	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	37,845	38,517	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).....	1,092,727	1,112,130	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,092,727	1,112,130	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 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.....	2,740,175	0	0	0	2,740,175
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).....	2,740,175	0	0	0	2,740,175
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.....	377,220	0	0	0	377,220
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.....	377,220	0	0	0	377,220

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 through 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	251,740	0	0	0	0	0	0	1	251,740
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	251,740	0	0	0	0	0	0	1	251,740
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,303	706,772,496	0	(a).....0	0	0	0	0	1,303	706,772,496
21. Issued during year.....	81	47,949,169	0	0	0	0	0	0	81	47,949,169
22. Other changes to in force (Net).....	(74)	(42,705,827)	0	0	0	0	0	0	(74)	(42,705,827)
23. In force December 31 of current year.....	1,310	712,015,838	0	(a).....0	0	0	0	0	1,310	712,015,838

(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).....	76,872	78,237	0	0	0
25.2 Guaranteed renewable (b).....	2,500	2,544	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).....	79,372	80,781	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	79,372	80,781	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.....	4,149,071	0	0	0	4,149,071
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).....	4,149,071	0	0	0	4,149,071
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.....	5,035,347	0	0	0	5,035,347
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	11,222	0	0	0	11,222
12. Surrender values and withdrawals for life contracts.....	628,852	0	0	0	628,852
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.....	5,675,421	0	0	0	5,675,421
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 through 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	1,713,180	0	0	0	0	0	0	3	1,713,180
17. Incurred during current year.....	10	2,275,000	0	0	0	0	0	0	10	2,275,000
Settled during current year:										
18.1 By payment in full.....	11	2,907,825	0	0	0	0	0	0	11	2,907,825
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	11	2,907,825	0	0	0	0	0	0	11	2,907,825
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	2,907,825	0	0	0	0	0	0	11	2,907,825
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	1,080,355	0	0	0	0	0	0	2	1,080,355
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,262	1,726,077,503	0	(a).....0	0	0	0	0	3,262	1,726,077,503
21. Issued during year.....	178	164,383,558	0	0	0	0	0	0	178	164,383,558
22. Other changes to in force (Net).....	16	(31,157,531)	0	0	0	0	0	0	16	(31,157,531)
23. In force December 31 of current year.....	3,456	1,859,303,530	0	(a).....0	0	0	0	0	3,456	1,859,303,530

(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).....	220,770	224,691	0	84,807	82,960
25.2 Guaranteed renewable (b).....	9,061	9,221	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).....	229,831	233,912	0	84,807	82,960
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	229,831	233,912	0	84,807	82,960

(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.....	496,189	0	0	0	496,189
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).....	496,189	0	0	0	496,189
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.....	225,000	0	0	0	225,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	605,234	0	0	0	605,234
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.....	830,234	0	0	0	830,234

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 through 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	25,000	0	0	0	0	0	0	1	25,000
Settled during current year:										
18.1 By payment in full.....	1	25,000	0	0	0	0	0	0	1	25,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1	25,000	0	0	0	0	0	0	1	25,000
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	25,000	0	0	0	0	0	0	1	25,000
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.....	432	216,667,518	0	(a).....0	0	0	0	0	432	216,667,518
21. Issued during year.....	23	22,525,000	0	0	0	0	0	0	23	22,525,000
22. Other changes to in force (Net).....	6	(987,996)	0	0	0	0	0	0	6	(987,996)
23. In force December 31 of current year.....	461	238,204,522	0	(a).....0	0	0	0	0	461	238,204,522

(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).....	94,527	96,205	0	0	0
25.2 Guaranteed renewable (b).....	372	378	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).....	94,899	96,583	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	94,899	96,583	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.....	15,002,069	0	0	0	15,002,069
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).....	15,002,069	0	0	0	15,002,069
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.....	15,343,315	0	0	0	15,343,315
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	223,975	0	0	0	223,975
12. Surrender values and withdrawals for life contracts.....	9,732,690	0	0	0	9,732,690
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.....	25,299,980	0	0	0	25,299,980

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 through 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	15,392,520	0	0	0	0	0	0	28	15,392,520
Settled during current year:										
18.1 By payment in full.....	27	14,917,109	0	0	0	0	0	0	27	14,917,109
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	27	14,917,109	0	0	0	0	0	0	27	14,917,109
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	14,917,109	0	0	0	0	0	0	27	14,917,109
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	475,411	0	0	0	0	0	0	1	475,411
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	8,414	5,277,899,720	0	(a).....0	0	0	0	0	8,414	5,277,899,720
21. Issued during year.....	379	353,242,109	0	0	0	0	0	0	379	353,242,109
22. Other changes to in force (Net).....	(664)	(508,957,957)	0	0	0	0	0	0	(664)	(508,957,957)
23. In force December 31 of current year.....	8,129	5,122,183,872	0	(a).....0	0	0	0	0	8,129	5,122,183,872

(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).....	869,867	885,313	0	235,960	247,016
25.2 Guaranteed renewable (b).....	9,003	9,163	0	0	0
25.3 Non-renewable for stated reasons only (b).....	69,304	70,535	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).....	948,174	965,011	0	235,960	247,016
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	948,174	965,011	0	235,960	247,016

(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.....	33,163,650	0	0	0	33,163,650
2. Annuity considerations.....	85	0	0	0	85
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).....	33,163,735	0	0	0	33,163,735
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.....	31,850,728	0	0	0	31,850,728
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	5,989	0	0	0	5,989
12. Surrender values and withdrawals for life contracts.....	9,733,527	0	0	0	9,733,527
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.....	41,590,244	0	0	0	41,590,244

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 through 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	1,858,743	0	0	0	0	0	0	11	1,858,743
17. Incurred during current year.....	59	34,501,726	0	0	0	0	0	0	59	34,501,726
Settled during current year:										
18.1 By payment in full.....	55	22,058,197	0	0	0	0	0	0	55	22,058,197
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	55	22,058,197	0	0	0	0	0	0	55	22,058,197
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.....	56	22,558,197	0	0	0	0	0	0	56	22,558,197
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	14	13,802,272	0	0	0	0	0	0	14	13,802,272
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	19,998	13,332,656,925	0	(a).....0	0	0	0	0	19,998	13,332,656,925
21. Issued during year.....	1,505	1,399,715,335	0	0	0	0	0	0	1,505	1,399,715,335
22. Other changes to in force (Net).....	(990)	(725,562,186)	0	0	0	0	0	0	(990)	(725,562,186)
23. In force December 31 of current year.....	20,513	14,006,810,074	0	(a).....0	0	0	0	0	20,513	14,006,810,074

(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).....	2,097,881	2,135,133	0	2,060,776	2,063,448
25.2 Guaranteed renewable (b).....	5,755	5,857	0	0	0
25.3 Non-renewable for stated reasons only (b).....	36,871	37,526	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).....	2,140,507	2,178,516	0	2,060,776	2,063,448
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	2,140,507	2,178,516	0	2,060,776	2,063,448

(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.....	6,713,378	0	0	0	6,713,378
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).....	6,713,378	0	0	0	6,713,378
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.....	3,483,967	0	0	0	3,483,967
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	190,283	0	0	0	190,283
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.....	3,674,250	0	0	0	3,674,250

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 through 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	192,073	0	0	0	0	0	0	2	192,073
17. Incurred during current year.....	5	1,683,967	0	0	0	0	0	0	5	1,683,967
Settled during current year:										
18.1 By payment in full.....	6	1,783,967	0	0	0	0	0	0	6	1,783,967
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	6	1,783,967	0	0	0	0	0	0	6	1,783,967
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	1,783,967	0	0	0	0	0	0	6	1,783,967
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	92,073	0	0	0	0	0	0	1	92,073
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	6,124	4,450,573,619	0	(a).....0	0	0	0	0	6,124	4,450,573,619
21. Issued during year.....	457	356,696,001	0	0	0	0	0	0	457	356,696,001
22. Other changes to in force (Net).....	(265)	(214,606,418)	0	0	0	0	0	0	(265)	(214,606,418)
23. In force December 31 of current year.....	6,316	4,592,663,202	0	(a).....0	0	0	0	0	6,316	4,592,663,202

(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).....	346,373	352,523	0	34,000	391,190
25.2 Guaranteed renewable (b).....	10,918	11,112	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).....	357,291	363,635	0	34,000	391,190
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	357,291	363,635	0	34,000	391,190

(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.....	9,668,774	0	0	0	9,668,774
2. Annuity considerations.....	210	0	0	0	210
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).....	9,668,984	0	0	0	9,668,984
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.....	11,754,726	0	0	0	11,754,726
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	17,471	0	0	0	17,471
12. Surrender values and withdrawals for life contracts.....	5,257,851	0	0	0	5,257,851
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.....	17,030,048	0	0	0	17,030,048

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 through 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	303,131	0	0	0	0	0	0	1	303,131
17. Incurred during current year.....	27	12,095,307	0	0	0	0	0	0	27	12,095,307
Settled during current year:										
18.1 By payment in full.....	24	11,482,884	0	0	0	0	0	0	24	11,482,884
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	24	11,482,884	0	0	0	0	0	0	24	11,482,884
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.....	24	11,482,884	0	0	0	0	0	0	24	11,482,884
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	4	915,554	0	0	0	0	0	0	4	915,554
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	7,306	4,626,369,229	0	(a).....0	0	0	0	0	7,306	4,626,369,229
21. Issued during year.....	459	346,103,848	0	0	0	0	0	0	459	346,103,848
22. Other changes to in force (Net).....	(382)	(292,602,688)	0	0	0	0	0	0	(382)	(292,602,688)
23. In force December 31 of current year.....	7,383	4,679,870,389	0	(a).....0	0	0	0	0	7,383	4,679,870,389

(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).....	423,555	431,076	0	819,119	864,022
25.2 Guaranteed renewable (b).....	5,780	5,883	0	0	0
25.3 Non-renewable for stated reasons only (b).....	6,416	6,530	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).....	435,751	443,489	0	819,119	864,022
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	435,751	443,489	0	819,119	864,022

(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 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.....	20,380	0	0	0	20,380
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).....	20,380	0	0	0	20,380
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 through 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.....	10	4,635,254	0	(a).....0	0	0	0	0	10	4,635,254
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	2	(125,000)	0	0	0	0	0	0	2	(125,000)
23. In force December 31 of current year.....	12	4,510,254	0	(a).....0	0	0	0	0	12	4,510,254

(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.....	562,802	0	0	0	562,802
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).....	562,802	0	0	0	562,802
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.....	814,815	0	0	0	814,815
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	777	0	0	0	777
12. Surrender values and withdrawals for life contracts.....	8,466	0	0	0	8,466
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.....	824,058	0	0	0	824,058

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 through 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	459,986	0	0	0	0	0	0	1	459,986
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	459,986	0	0	0	0	0	0	1	459,986
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1	459,986	0	0	0	0	0	0	1	459,986
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	459,986	0	0	0	0	0	0	1	459,986
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.....	552	288,273,718	0	(a).....0	0	0	0	0	552	288,273,718
21. Issued during year.....	37	18,287,165	0	0	0	0	0	0	37	18,287,165
22. Other changes to in force (Net).....	(28)	(11,093,984)	0	0	0	0	0	0	(28)	(11,093,984)
23. In force December 31 of current year.....	561	295,466,899	0	(a).....0	0	0	0	0	561	295,466,899

(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).....	12,269	12,487	0	0	0
25.2 Guaranteed renewable (b).....	3,772	3,839	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).....	16,041	16,326	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	16,041	16,326	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.....	7,938,250	0	0	0	7,938,250
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).....	7,938,250	0	0	0	7,938,250
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.....	2,843,224	0	0	0	2,843,224
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	1,897,235	0	0	0	1,897,235
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.....	4,740,459	0	0	0	4,740,459

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 through 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	2,158,888	0	0	0	0	0	0	11	2,158,888
Settled during current year:										
18.1 By payment in full.....	9	1,658,888	0	0	0	0	0	0	9	1,658,888
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	9	1,658,888	0	0	0	0	0	0	9	1,658,888
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	1,658,888	0	0	0	0	0	0	9	1,658,888
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	500,000	0	0	0	0	0	0	2	500,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	6,209	3,934,140,487	0	(a).....0	0	0	0	0	6,209	3,934,140,487
21. Issued during year.....	262	260,320,666	0	0	0	0	0	0	262	260,320,666
22. Other changes to in force (Net).....	(225)	(136,270,189)	0	0	0	0	0	0	(225)	(136,270,189)
23. In force December 31 of current year.....	6,246	4,058,190,964	0	(a).....0	0	0	0	0	6,246	4,058,190,964

(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).....	462,226	470,434	0	934,151	934,927
25.2 Guaranteed renewable (b).....	21,661	22,045	0	15,900	15,900
25.3 Non-renewable for stated reasons only (b).....	17,744	18,059	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).....	501,631	510,538	0	950,051	950,827
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	501,631	510,538	0	950,051	950,827

(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.....	5,853,318	0	0	0	5,853,318
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).....	5,853,318	0	0	0	5,853,318
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.....	1,815,000	0	0	0	1,815,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	31,568	0	0	0	31,568
12. Surrender values and withdrawals for life contracts.....	1,340,856	0	0	0	1,340,856
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.....	3,187,424	0	0	0	3,187,424
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 through 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.....	9	574,273	0	0	0	0	0	0	9	574,273
17. Incurred during current year.....	9	2,342,400	0	0	0	0	0	0	9	2,342,400
Settled during current year:										
18.1 By payment in full.....	8	2,245,000	0	0	0	0	0	0	8	2,245,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	8	2,245,000	0	0	0	0	0	0	8	2,245,000
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.....	8	2,245,000	0	0	0	0	0	0	8	2,245,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	10	671,673	0	0	0	0	0	0	10	671,673
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	5,872	3,079,314,514	0	(a).....0	0	0	0	0	5,872	3,079,314,514
21. Issued during year.....	279	221,157,490	0	0	0	0	0	0	279	221,157,490
22. Other changes to in force (Net).....	(521)	(292,618,907)	0	0	0	0	0	0	(521)	(292,618,907)
23. In force December 31 of current year.....	5,630	3,007,853,097	0	(a).....0	0	0	0	0	5,630	3,007,853,097

(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).....	575,844	586,069	0	87,500	83,488
25.2 Guaranteed renewable (b).....	31,163	31,717	0	16,775	20,341
25.3 Non-renewable for stated reasons only (b).....	2,496	2,540	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).....	609,503	620,326	0	104,275	103,829
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	609,503	620,326	0	104,275	103,829

(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.....	1,228,001	0	0	0	1,228,001
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).....	1,228,001	0	0	0	1,228,001
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.....	2,835,434	0	0	0	2,835,434
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	25,142	0	0	0	25,142
12. Surrender values and withdrawals for life contracts.....	210,618	0	0	0	210,618
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.....	3,071,194	0	0	0	3,071,194

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 through 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.....	7	2,835,434	0	0	0	0	0	0	7	2,835,434
Settled during current year:										
18.1 By payment in full.....	7	2,835,434	0	0	0	0	0	0	7	2,835,434
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	7	2,835,434	0	0	0	0	0	0	7	2,835,434
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	2,835,434	0	0	0	0	0	0	7	2,835,434
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.....	1,100	392,930,491	0	(a).....0	0	0	0	0	1,100	392,930,491
21. Issued during year.....	34	20,095,000	0	0	0	0	0	0	34	20,095,000
22. Other changes to in force (Net).....	(92)	(46,777,124)	0	0	0	0	0	0	(92)	(46,777,124)
23. In force December 31 of current year.....	1,042	366,248,367	0	(a).....0	0	0	0	0	1,042	366,248,367

(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).....	241,217	245,500	0	595,372	593,852
25.2 Guaranteed renewable (b).....	2,188	2,226	0	0	0
25.3 Non-renewable for stated reasons only (b).....	898	914	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).....	244,303	248,640	0	595,372	593,852
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	244,303	248,640	0	595,372	593,852

(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.....	896,543	0	0	0	896,543
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).....	896,543	0	0	0	896,543
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.....	8,452	0	0	0	8,452
12. Surrender values and withdrawals for life contracts.....	356,576	0	0	0	356,576
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.....	615,028	0	0	0	615,028
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 through 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	250,000	0	0	0	0	0	0	1	250,000
Settled during current year:										
18.1 By payment in full.....	1	250,000	0	0	0	0	0	0	1	250,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1	250,000	0	0	0	0	0	0	1	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.....	1	250,000	0	0	0	0	0	0	1	250,000
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.....	876	414,247,267	0	(a).....0	0	0	0	0	876	414,247,267
21. Issued during year.....	48	36,087,500	0	0	0	0	0	0	48	36,087,500
22. Other changes to in force (Net).....	(66)	(34,778,894)	0	0	0	0	0	0	(66)	(34,778,894)
23. In force December 31 of current year.....	858	415,555,873	0	(a).....0	0	0	0	0	858	415,555,873

(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).....	25,938	26,399	0	0	0
25.2 Guaranteed renewable (b).....	516	525	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).....	26,454	26,924	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	26,454	26,924	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.....	6,299,139
2. Current year's realized pre-tax capital gains/(losses) of \$.....129,621 transferred into the reserve net of taxes of \$.....27,220.....	102,401
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).....	6,401,539
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4).....	1,574,583
6. Reserve as of December 31, current year (Line 4 minus Line 5).....	4,826,957

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. 2018.....	1,357,841	216,742	0	1,574,583
2. 2019.....	1,107,200	130,739	0	1,237,939
3. 2020.....	884,715	40,409	0	925,124
4. 2021.....	725,939	9,578	0	735,517
5. 2022.....	613,956	(22,678)	0	591,278
6. 2023.....	492,579	(56,622)	0	435,957
7. 2024.....	365,225	(66,481)	0	298,744
8. 2025.....	277,414	(53,429)	0	223,985
9. 2026.....	201,390	(39,355)	0	162,035
10. 2027.....	121,173	(24,677)	0	96,496
11. 2028.....	60,180	(8,961)	0	51,219
12. 2029.....	27,022	(1,339)	0	25,683
13. 2030.....	6,029	(1,432)	0	4,597
14. 2031.....	(7,719)	(1,492)	0	(9,211)
15. 2032.....	(9,295)	(1,519)	0	(10,814)
16. 2033.....	(3,188)	(1,630)	0	(4,818)
17. 2034.....	3,475	(1,712)	0	1,763
18. 2035.....	8,373	(1,907)	0	6,466
19. 2036.....	11,988	(2,152)	0	9,835
20. 2037.....	14,273	(2,355)	0	11,918
21. 2038.....	13,632	(2,559)	0	11,074
22. 2039.....	10,899	(2,355)	0	8,543
23. 2040.....	8,146	(1,838)	0	6,309
24. 2041.....	5,360	(1,177)	0	4,182
25. 2042.....	1,885	(551)	0	1,334
26. 2043.....	331	59	0	390
27. 2044.....	189	386	0	575
28. 2045.....	93	307	0	401
29. 2046.....	33	221	0	254
30. 2047.....	0	134	0	134
31. 2048 and Later.....	0	47	0	47
32. Total (Lines 1 to 31).....	6,299,139	102,401	0	6,401,539

OHIO NATIONAL LIFE ASSURANCE CORPORATION
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.....	20,431,819	2,758,303	23,190,122	54,752	(0)	54,752	23,244,874
2. Realized capital gains/(losses) net of taxes - General Account.....	169,661	0	169,661	0	0	0	169,661
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.....	(270,464)	0	(270,464)	(1,372)	0	(1,372)	(271,836)
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.....	3,804,263	484,003	4,288,266	0	0	0	4,288,266
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7).....	24,135,279	3,242,306	27,377,585	53,380	(0)	53,380	27,430,965
9. Maximum reserve.....	18,782,619	2,817,394	21,600,013	54,609	0	54,609	21,654,622
10. Reserve objective.....	12,896,369	2,167,150	15,063,518	34,287	0	34,287	15,097,805
11. 20% of (Line 10 minus Line 8).....	(2,247,782)	(215,031)	(2,462,813)	(3,819)	0	(3,819)	(2,466,632)
12. Balance before transfers (Lines 8 + 11).....	21,887,497	3,027,275	24,914,772	49,561	(0)	49,561	24,964,333
13. Transfers.....	(3,104,877)	3,104,877	0	0	0	0	0
14. Voluntary contribution.....	0	0	0	0	0	0	0
15. Adjustment down to maximum/up to zero.....	0	(3,314,758)	(3,314,758)	0	0	0	(3,314,758)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15).....	18,782,620	2,817,394	21,600,014	49,561	(0)	49,561	21,649,575

OHIO NATIONAL LIFE ASSURANCE CORPORATION
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.....	95,421,467	...XXX...	...XXX...	95,421,467	...0.0000	...0	...0.0000	...0	...0.0000	...0
2	1	Highest quality.....	1,681,544,918	...XXX...	...XXX...	1,681,544,918	...0.0004	...672,618	...0.0023	...3,867,553	...0.0030	...5,044,635
3	2	High quality.....	1,090,824,948	...XXX...	...XXX...	1,090,824,948	...0.0019	...2,072,567	...0.0058	...6,326,785	...0.0090	...9,817,425
4	3	Medium quality.....	63,575,242	...XXX...	...XXX...	63,575,242	...0.0093	...591,250	...0.0230	...1,462,231	...0.0340	...2,161,558
5	4	Low quality.....	18,225,435	...XXX...	...XXX...	18,225,435	...0.0213	...388,202	...0.0530	...965,948	...0.0750	...1,366,908
6	5	Lower quality.....	1,319,716	...XXX...	...XXX...	1,319,716	...0.0432	...57,012	...0.1100	...145,169	...0.1700	...224,352
7	6	In or near default.....	98,840	...XXX...	...XXX...	98,840	...0.0000	...0	...0.2000	...19,768	...0.2000	...19,768
8		Total unrated multi-class securities acquired by conversion.....	0	...XXX...	...XXX...	0	...XXX...	...0	...XXX...	...0	...XXX...	...0
9		Total long-term bonds (sum of Lines 1 through 8).....	2,951,010,566	...XXX...	...XXX...	2,951,010,566	...XXX...	...3,781,649	...XXX...	...12,787,453	...XXX...	...18,634,645
		PREFERRED STOCKS										
10	1	Highest quality.....	0	...XXX...	...XXX...	0	...0.0004	...0	...0.0023	...0	...0.0030	...0
11	2	High quality.....	4,120,000	...XXX...	...XXX...	4,120,000	...0.0019	...7,828	...0.0058	...23,896	...0.0090	...37,080
12	3	Medium quality.....	0	...XXX...	...XXX...	0	...0.0093	...0	...0.0230	...0	...0.0340	...0
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).....	4,120,000	...XXX...	...XXX...	4,120,000	...XXX...	...7,828	...XXX...	...23,896	...XXX...	...37,080
		SHORT-TERM BONDS										
18		Exempt obligations.....	0	...XXX...	...XXX...	0	...0.0000	...0	...0.0000	...0	...0.0000	...0
19	1	Highest quality.....	36,841,615	...XXX...	...XXX...	36,841,615	...0.0004	...14,737	...0.0023	...84,736	...0.0030	...110,525
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 through 24).....	36,841,615	...XXX...	...XXX...	36,841,615	...XXX...	...14,737	...XXX...	...84,736	...XXX...	...110,525
		DERIVATIVE INSTRUMENTS										
26		Exchange traded.....	-	...XXX...	...XXX...	0	...0.0004	...0	...0.0023	...0	...0.0030	...0
27	1	Highest quality.....	123,238	...XXX...	...XXX...	123,238	...0.0004	...49	...0.0023	...283	...0.0030	...370
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.....	123,238	...XXX...	...XXX...	123,238	...XXX...	...49	...XXX...	...283	...XXX...	...370
34		Total (Lines 9 + 17 + 25 + 33).....	2,992,095,419	...XXX...	...XXX...	2,992,095,419	...XXX...	...3,804,263	...XXX...	...12,896,369	...XXX...	...18,782,619

OHIO NATIONAL LIFE ASSURANCE CORPORATION
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)
		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.....	989,887	0	XXX	989,887	0.0013	1,287	0.0030	2,970	0.0040	3,960
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.....	366,329,168	0	XXX	366,329,168	0.0010	366,329	0.0050	1,831,646	0.0065	2,381,140
44		Commercial mortgages-all other - CM2 - high quality.....	33,253,422	0	XXX	33,253,422	0.0035	116,387	0.0100	332,534	0.0130	432,294
45		Commercial mortgages-all other - CM3 - medium quality.....	0	0	XXX	0	0.0060	0	0.0175	0	0.0225	0
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).....	400,572,477	0	XXX	400,572,477	XXX	484,003	XXX	2,167,150	XXX	2,817,394
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).....	400,572,477	0	XXX	400,572,477	XXX	484,003	XXX	2,167,150	XXX	2,817,394

OHIO NATIONAL LIFE ASSURANCE CORPORATION

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.....	2,082	.XXX.	XXX	2,082	0.0000	0	(a).....0.2000	.416	(a).....0.2000	.416
2		Unaffiliated private.....	0	.XXX.	XXX	0	0.0000	0	0.1600	0	0.1600	0
3		Federal Home Loan Bank.....	6,774,100	.XXX.	XXX	6,774,100	0.0000	0	0.0050	33,871	0.0080	54,193
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).....	6,776,182	0	0	6,776,182	XXX	0	XXX	34,287	XXX	54,609
		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 - Equity
NONE

Asset Valuation Reserve - Equity
NONE

Asset Valuation Reserve - Replications (Synthetic) Assets
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

6452920.....	9584.....	PR.....	2015.....	500,000	0	0	Policy lapsed prior to death due to non payment of premiums.
0199999. Death Claims - Ordinary.....				500,000	0	0	XXX.....
0599999. Subtotal - Disposed Death Claims.....				500,000	0	0	XXX.....
2699999. Subtotal - Claims Disposed of During Current Year.....				500,000	0	0	XXX.....

CLAIMS RESISTED DURING CURRENT YEAR

Death Claims - Ordinary

6830848.....	6036.....	PA.....	2009.....	100,000	289	100,000	Claim resisted due to suicide within the first 2 policy years. Refund of premium paid.
C6042516.....	12248.....	MI.....	2017.....	35,000	0	35,000	Policy lapsed prior to death due to non payment of premiums.
7233600.....	12658.....	TX.....	2018.....	500,000	194	500,000	Claim resisted due to suicide within the first 2 policy years. Refund of premium paid.
7203152.....	12498.....	GA.....	2018.....	700,000	7,760	700,000	Claim resisted due to suicide within the first 2 policy years. Refund of premium paid.
2799999. Death Claims - Ordinary.....				1,335,000	8,243	1,335,000	XXX.....
3199999. Subtotal - Resisted Death Claims.....				1,335,000	8,243	1,335,000	XXX.....
5299999. Subtotal - Claims Resisted of During Current Year.....				1,335,000	8,243	1,335,000	XXX.....
5399999. Totals.....				1,835,000	8,243	1,335,000	XXX.....

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

	Total		Group Accident and Health		Credit A&H (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.....	15,313,155	XXX	0	XXX	0	XXX	0	XXX	14,387,893	XXX	741,712	XXX	183,550	XXX	0	XXX	0	XXX
2. Premiums earned.....	15,004,865	XXX	0	XXX	0	XXX	0	XXX	14,068,634	XXX	750,343	XXX	185,888	XXX	0	XXX	0	XXX
3. Incurred claims.....	10,028,358	66.8	0	0.0	0	0.0	0	0.0	9,804,658	69.7	270,194	36.0	(46,494)	(25.0)	0	0.0	0	0.0
4. Cost containment expenses.....	236,684	1.6	0	0.0	0	0.0	0	0.0	232,716	1.7	3,651	0.5	317	0.2	0	0.0	0	0.0
5. Incurred claims and cost containment expenses (Lines 3 and 4).....	10,265,042	68.4	0	0.0	0	0.0	0	0.0	10,037,374	71.3	273,845	36.5	(46,177)	(24.8)	0	0.0	0	0.0
6. Increase in contract reserves.....	(228,349)	(1.5)	0	0.0	0	0.0	0	0.0	49,912	0.4	(294,704)	(39.3)	16,443	8.8	0	0.0	0	0.0
7. Commissions (a).....	2,833,606	18.9	0	0.0	0	0.0	0	0.0	2,772,697	19.7	70,315	9.4	(9,406)	(5.1)	0	0.0	0	0.0
8. Other general insurance expenses.....	13,265,287	88.4	0	0.0	0	0.0	0	0.0	12,712,105	90.4	323,973	43.2	229,209	123.3	0	0.0	0	0.0
9. Taxes, licenses and fees.....	1,453,001	9.7	0	0.0	0	0.0	0	0.0	1,392,409	9.9	35,486	4.7	25,106	13.5	0	0.0	0	0.0
10. Total other expenses incurred.....	17,551,894	117.0	0	0.0	0	0.0	0	0.0	16,877,211	120.0	429,774	57.3	244,909	131.8	0	0.0	0	0.0
11. Aggregate write-ins for deductions.....	2,312,859	15.4	0	0.0	0	0.0	0	0.0	1,920,767	13.7	392,092	52.3	0	0.0	0	0.0	0	0.0
12. Gain from underwriting before dividends or refunds.....	(14,896,581)	(99.3)	0	0.0	0	0.0	0	0.0	(14,816,630)	(105.3)	(50,664)	(6.8)	(29,287)	(15.8)	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.....	(14,896,581)	(99.3)	0	0.0	0	0.0	0	0.0	(14,816,630)	(105.3)	(50,664)	(6.8)	(29,287)	(15.8)	0	0.0	0	0.0
DETAILS OF WRITE-INS																		
1101. Surrenders / ROP Benefits.....	2,312,859	15.4	0	0.0	0	0.0	0	0.0	1,920,767	13.7	392,092	52.3	0	0.0	0	0.0	0	0.0
1102.	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	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 through 1103 plus 1198) (Line 11 above).	2,312,859	15.4	0	0.0	0	0.0	0	0.0	1,920,767	13.7	392,092	52.3	0	0.0	0	0.0	0	0.0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (continued)

	1 Total	2 Group Accident and Health	3 Credit A&H (Group and Individual)	4 Collectively Renewable	Other Individual Contracts				
					5 Non-Cancelable	6 Guaranteed Renewable	7 Non-Renewable for Stated Reasons Only	8 Other Accident Only	9 All Other
PART 2 - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums.....	(1,386,743)	0	0	0	(1,459,557)	117,786	(44,972)	0	0
2. Advance premiums.....	161,616	0	0	0	159,952	935	729	0	0
3. Reserve for rate credits.....	0	0	0	0	0	0	0	0	0
4. Total premium reserves, current year.....	(1,225,127)	0	0	0	(1,299,605)	118,721	(44,243)	0	0
5. Total premium reserves, prior year.....	(1,533,416)	0	0	0	(1,618,864)	127,353	(41,905)	0	0
6. Increase in total premium reserves.....	308,289	0	0	0	319,259	(8,632)	(2,338)	0	0
B. Contract Reserves:									
1. Additional reserves (a).....	21,410,575	0	0	0	18,339,512	2,823,264	247,799	0	0
2. Reserve for future contingent benefits.....	0	0	0	0	0	0	0	0	0
3. Total contract reserves, current year.....	21,410,575	0	0	0	18,339,512	2,823,264	247,799	0	0
4. Total contract reserves, prior year.....	21,638,924	0	0	0	18,289,600	3,117,968	231,356	0	0
5. Increase in contract reserves.....	(228,349)	0	0	0	49,912	(294,704)	16,443	0	0
C. Claim Reserves and Liabilities:									
1. Total current year.....	65,157,215	0	0	0	64,064,819	1,005,229	87,167	0	0
2. Total prior year.....	65,538,278	0	0	0	64,358,266	1,045,537	134,475	0	0
3. Increase.....	(381,063)	0	0	0	(293,447)	(40,308)	(47,308)	0	0

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

1. Claims Paid During the Year:									
1.1 On claims incurred prior to current year.....	10,238,623	0	0	0	9,953,355	284,454	814	0	0
1.2 On claims incurred during current year.....	170,798	0	0	0	144,750	26,048	0	0	0
2. Claim Reserves and Liabilities, December 31, current year:									
2.1 On claims incurred prior to current year.....	59,236,971	0	0	0	58,574,990	657,574	4,407	0	0
2.2 On claims incurred during current year.....	5,920,244	0	0	0	5,489,829	347,655	82,760	0	0
3. Test:									
3.1 Lines 1.1 and 2.1.....	69,475,594	0	0	0	68,528,345	942,028	5,221	0	0
3.2 Claim reserves and liabilities, December 31, prior year.....	65,538,278	0	0	0	64,358,266	1,045,537	134,475	0	0
3.3 Line 3.1 minus Line 3.2.....	3,937,316	0	0	0	4,170,079	(103,509)	(129,254)	0	0

PART 4 - REINSURANCE

A. Reinsurance Assumed:									
1. Premiums written.....	372,044	0	0	0	330,175	40,912	957	0	0
2. Premiums earned.....	379,424	0	0	0	336,507	41,960	957	0	0
3. Incurred claims.....	1,183,489	0	0	0	1,128,375	55,114	0	0	0
4. Commissions.....	26,964	0	0	0	19,761	7,156	47	0	0
B. Reinsurance Ceded:									
1. Premiums written.....	13,753,601	0	0	0	13,440,381	0	313,220	0	0
2. Premiums earned.....	13,339,996	0	0	0	13,015,322	1,408	323,266	0	0
3. Incurred claims.....	15,161,785	0	0	0	15,385,659	16,078	(239,952)	0	0
4. Commissions.....	4,181,453	0	0	0	4,103,714	0	77,739	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	24,006,654	24,006,654
2. Beginning claim reserves and liabilities.....	0	0	156,726,351	156,726,351
3. Ending claim reserves and liabilities.....	0	0	156,801,481	156,801,481
4. Claims paid.....	0	0	23,931,524	23,931,524
B. Assumed Reinsurance:				
5. Incurred claims.....	0	0	1,183,489	1,183,489
6. Beginning claim reserves and liabilities.....	0	0	5,824,116	5,824,116
7. Ending claim reserves and liabilities.....	0	0	5,841,542	5,841,542
8. Claims paid.....	0	0	1,166,063	1,166,063
C. Ceded Reinsurance:				
9. Incurred claims.....	0	0	15,161,785	15,161,785
10. Beginning claim reserves and liabilities.....	0	0	100,608,535	100,608,535
11. Ending claim reserves and liabilities.....	0	0	100,919,342	100,919,342
12. Claims paid.....	0	0	14,850,978	14,850,978
D. Net:				
13. Incurred claims.....	0	0	10,028,358	10,028,358
14. Beginning claim reserves and liabilities.....	0	0	61,941,932	61,941,932
15. Ending claim reserves and liabilities.....	0	0	61,723,681	61,723,681
16. Claims paid.....	0	0	10,246,609	10,246,609
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred claims and cost containment expenses.....	0	0	10,265,042	10,265,042
18. Beginning reserves and liabilities.....	0	0	61,945,650	61,945,650
19. Ending reserves and liabilities.....	0	0	61,730,211	61,730,211
20. Paid claims and cost containment expenses.....	0	0	10,480,481	10,480,481

OHIO NATIONAL LIFE ASSURANCE CORPORATION
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	13
NAIC Company Code	ID Number	Effective Date	Name of Reinsured	Domiciliary Jurisdiction	Type of Reinsurance Assumed	Type of Business 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

OHIO NATIONAL LIFE ASSURANCE CORPORATION
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	13
NAIC Company Code	ID Number	Effective Date	Name of Reinsured	Domiciliary Jurisdiction	Type of Reinsurance Assumed	Type of Business 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 Insurance Corporation.....	NE.....	QA/I.....	LTDI.....	116,957	16,894	2,243,686	20,853	0	0
64017.....	75-0300900....	11/23/1987	Jefferson National Life Insurance Company.....	TX.....	QA/I.....	LTDI.....	170,489	30,294	3,538,068	46,736	0	0
57320.....	47-0339250....	09/09/1990	Woodmen of the World.....	NE.....	QA/I.....	LTDI.....	86,676	6,601	1,423,180	9,542	0	0
0899999.	Total - Non-Affiliates - U.S. Non-Affiliates.....						374,122	53,789	7,204,934	77,131	0	0
1099999.	Total - Non-Affiliates.....						374,122	53,789	7,204,934	77,131	0	0
1199999.	Total - U.S.....						374,122	53,789	7,204,934	77,131	0	0
9999999.	Total.....						374,122	53,789	7,204,934	77,131	0	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE S - PART 2

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
Life and Annuity - Affiliates - U.S. - Captive						
13575.....	26-3791519.....	06/30/2009	Montgomery Re.....	VT.....	0	749,326
13575.....	26-3791519.....	05/01/2011	Montgomery Re.....	VT.....	0	969,706
15363.....	80-0955278.....	12/31/2013	Kenwood Re.....	VT.....	0	6,963,932
15855.....	47-4249160.....	12/31/2018	Camargo Re.....	OH.....	0	5,826,581
0199999.	Total - Life and Annuity Affiliates - U.S. - Captive.....				0	14,509,545
Life and Annuity - Affiliates - U.S. - Other						
67172.....	31-0397080.....	10/01/2009	The Ohio National Life Insurance Comp.....	OH.....	0	85,263
67172.....	31-0397080.....	09/01/2014	The Ohio National Life Insurance Comp.....	OH.....	0	385,836
0299999.	Total - Life and Annuity Affiliates - U.S. - Other.....				0	471,099
0399999.	Total - Life and Annuity Affiliates - U.S. - Total.....				0	14,980,644
0799999.	Total - Life and Annuity Affiliates.....				0	14,980,644
Life and Annuity - Non-Affiliates - U.S. Non-Affiliates						
90611.....	41-1366075.....	07/31/2001	Allianz Life Insurance Co. of North Amer.....	MN.....	132,883	58,505
90611.....	41-1366075.....	02/01/1999	Allianz Life Insurance Co. of North Amer.....	MN.....	0	10,396
90611.....	41-1366075.....	04/15/1999	Allianz Life Insurance Co. of North Amer.....	MN.....	48,481	0
80659.....	38-0397420.....	04/01/2004	US Business of Canada Life Assurance Company.....	MI.....	0	180,000
80659.....	38-0397420.....	09/01/2005	US Business of Canada Life Assurance Company.....	MI.....	0	90,000
80659.....	38-0397420.....	11/01/2016	US Business of Canada Life Assurance Company.....	MI.....	0	34,620
86258.....	13-2572994.....	04/01/2004	General Re Life Corp.....	CT.....	0	125,770
86258.....	13-2572994.....	01/01/2006	General Re Life Corp.....	CT.....	0	200,000
88340.....	59-2859797.....	09/01/2005	Hannover Life Reassurance Comp of America.....	FL.....	0	112,500
88340.....	59-2859797.....	01/01/2006	Hannover Life Reassurance Comp of America.....	FL.....	166,037	641,250
88340.....	59-2859797.....	01/01/2010	Hannover Life Reassurance Comp of America.....	FL.....	19,173	132,766
88340.....	59-2859797.....	11/01/2016	Hannover Life Reassurance Comp of America.....	FL.....	0	34,620
65676.....	35-0472300.....	07/31/2001	The Lincoln National Life Insurance Comp.....	IN.....	0	22,491
65676.....	35-0472300.....	01/01/2003	The Lincoln National Life Insurance Comp.....	IN.....	89,854	0
65676.....	35-0472300.....	02/01/1999	The Lincoln National Life Insurance Comp.....	IN.....	0	10,404
65676.....	35-0472300.....	09/05/2000	The Lincoln National Life Insurance Comp.....	IN.....	0	17,144
65676.....	35-0472300.....	06/01/1998	The Lincoln National Life Insurance Comp.....	IN.....	0	177,110
66346.....	58-0828824.....	02/01/1999	Munich American Reassurance Company.....	GA.....	0	10,396
66346.....	58-0828824.....	04/15/1999	Munich American Reassurance Company.....	GA.....	156,445	0
66346.....	58-0828824.....	07/31/2001	Munich American Reassurance Company.....	GA.....	300,060	45,008
66346.....	58-0828824.....	01/01/2003	Munich American Reassurance Company.....	GA.....	89,854	0
66346.....	58-0828824.....	04/01/2003	Munich American Reassurance Company.....	GA.....	1,485,993	738,000
66346.....	58-0828824.....	01/19/2005	Munich American Reassurance Company.....	GA.....	0	251,541
66346.....	58-0828824.....	01/01/2006	Munich American Reassurance Company.....	GA.....	278,537	641,250
66346.....	58-0828824.....	06/03/2007	Munich American Reassurance Company.....	GA.....	662,500	875,000
66346.....	58-0828824.....	10/10/2009	Munich American Reassurance Company.....	GA.....	163,084	2,387,273
93572.....	43-1235868.....	01/01/1987	RGA Reinsurance Company.....	MO.....	80,696	322,038
93572.....	43-1235868.....	10/01/1995	RGA Reinsurance Company.....	MO.....	64,146	277,886
93572.....	43-1235868.....	07/01/1997	RGA Reinsurance Company.....	MO.....	0	2,859
93572.....	43-1235868.....	06/01/1998	RGA Reinsurance Company.....	MO.....	0	354,220
93572.....	43-1235868.....	02/01/1999	RGA Reinsurance Company.....	MO.....	0	15,598
93572.....	43-1235868.....	04/15/1999	RGA Reinsurance Company.....	MO.....	72,739	0
93572.....	43-1235868.....	07/31/2001	RGA Reinsurance Company.....	MO.....	1,390,902	22,491
93572.....	43-1235868.....	01/01/2003	RGA Reinsurance Company.....	MO.....	89,854	0
93572.....	43-1235868.....	04/01/2003	RGA Reinsurance Company.....	MO.....	1,000,000	0
93572.....	43-1235868.....	01/19/2005	RGA Reinsurance Company.....	MO.....	0	720,712
93572.....	43-1235868.....	10/10/2009	RGA Reinsurance Company.....	MO.....	792,455	2,210,163
68713.....	84-0499703.....	07/31/2001	Security Life of Denver Insurance Co.....	CO.....	0	22,505
68713.....	84-0499703.....	01/01/2003	Security Life of Denver Insurance Co.....	CO.....	89,854	0
68713.....	84-0499703.....	04/01/2003	Security Life of Denver Insurance Co.....	CO.....	64,543	36,000
68713.....	84-0499703.....	10/01/1995	Security Life of Denver Insurance Co.....	CO.....	0	277,886
68713.....	84-0499703.....	07/01/1997	Security Life of Denver Insurance Co.....	CO.....	0	2,859
68713.....	84-0499703.....	02/01/1999	Security Life of Denver Insurance Co.....	CO.....	0	15,598
68713.....	84-0499703.....	03/31/2003	Security Life of Denver Insurance Co.....	CO.....	0	850,574
68713.....	84-0499703.....	06/01/1998	Security Life of Denver Insurance Co.....	CO.....	0	354,220
82627.....	06-0839705.....	10/01/1995	Swiss Re Life & Health America, Inc.....	MO.....	0	555,772
82627.....	06-0839705.....	07/01/1997	Swiss Re Life & Health America, Inc.....	MO.....	0	5,718
82627.....	06-0839705.....	06/01/1998	Swiss Re Life & Health America, Inc.....	MO.....	0	354,220
82627.....	06-0839705.....	07/01/2011	Swiss Re Life & Health America, Inc.....	MO.....	362,500	875,000
82627.....	06-0839705.....	11/14/1991	Swiss Re Life & Health America, Inc.....	MO.....	99,212	0
82627.....	06-0839705.....	10/01/1995	Swiss Re Life & Health America, Inc.....	MO.....	0	277,886
82627.....	06-0839705.....	07/01/1997	Swiss Re Life & Health America, Inc.....	MO.....	0	2,859
82627.....	06-0839705.....	02/01/1999	Swiss Re Life & Health America, Inc.....	MO.....	0	15,598
82627.....	06-0839705.....	09/05/2000	Swiss Re Life & Health America, Inc.....	MO.....	0	17,145
82627.....	06-0839705.....	09/29/2000	Swiss Re Life & Health America, Inc.....	MO.....	0	86,032
82627.....	06-0839705.....	01/01/2010	Swiss Re Life & Health America, Inc.....	MO.....	19,173	132,766
82627.....	06-0839705.....	06/01/1998	Swiss Re Life & Health America, Inc.....	MO.....	0	354,220
87572.....	23-2038295.....	01/19/2005	Scottish Re USA Inc.....	DE.....	8,447	0
86231.....	39-0989781.....	01/01/2006	Transamerica Life Insurance Company.....	IA.....	199,245	769,500

OHIO NATIONAL LIFE ASSURANCE CORPORATION
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
64688.....	75-6020048....	10/10/2009	SCOR Global Life Amer Reinsurance Co.....	DE.....	326,167	7,677,755
0899999.	Total - Life and Annuity Non-Affiliates - U.S. Non-Affiliates.....				8,252,834	23,406,124
1099999.	Total - Life and Annuity Non-Affiliates.....				8,252,834	23,406,124
1199999.	Total - Life and Annuity.....				8,252,834	38,386,768
Accident and Health - Non-Affiliates - U.S. Non-Affiliates						
39845.....	48-0921045....	09/01/1967	Westport Ins. Corp.....	MO.....	9,042	359
86258.....	13-2572994....	01/01/1999	General Re Life Corporation.....	CT.....	29,786	38,525
66346.....	58-0828824....	01/01/1999	Munich American Reassurance Company.....	GA.....	109,034	240,756
82627.....	06-0839705....	02/01/1981	Swiss Re Life & Health America, Inc.....	MO.....	2,998,221	781,875
67598.....	04-1768571....	11/01/1988	Paul Revere Life Insurance Company.....	MA.....	287,452	60,479
1999999.	Total - Accident and Health Non-Affiliates - U.S. Non-Affiliates.....				3,433,535	1,121,995
2199999.	Total - Accident and Health Non-Affiliates.....				3,433,535	1,121,995
2299999.	Total - Accident and Health.....				3,433,535	1,121,995
2399999.	Total U.S.....				11,686,369	39,508,763
9999999.	Total.....				11,686,369	39,508,763

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		
General Account - Authorized - Affiliates - U.S. - Captive														
15855.....	47-4249160....	12/31/2018	Camargo Re Inc.....	OH.....	CO/I.....	XXXL.....	46,146,322,605	171,479,781	112,724,239	55,073,779	0	0	0	0
15855.....	47-4249160....	12/31/2018	Camargo Re Inc.....	OH.....	CO/I.....	DIS.....	0	5,495,649	3,254,819	2,071,395	0	0	0	0
0199999.	Total - General Account - Authorized - Affiliates - U.S. - Captive.....						46,146,322,605	176,975,430	115,979,058	57,145,174	0	0	0	0
General Account - Authorized - Affiliates - U.S. - Other														
67172.....	31-0397080....	10/04/2006	Ohio National Life Insurance Company.....	OH.....	CO/I.....	OL.....	298,842,355	161,263,410	156,216,880	0	0	0	0	0
67172.....	31-0397080....	10/01/2009	Ohio National Life Insurance Company.....	OH.....	CO/I.....	OL.....	1,320,925,733	505,393,054	509,268,207	0	0	0	0	0
67172.....	31-0397080....	09/01/2014	Ohio National Life Insurance Company.....	OH.....	CO/I.....	OL.....	690,159,979	251,750,896	248,879,638	0	0	0	0	0
0299999.	Total - General Account - Authorized - Affiliates - U.S. - Other.....						2,309,928,067	918,407,360	914,364,725	0	0	0	0	0
0399999.	Total - General Account - Authorized - Affiliates - U.S. - Total.....						48,456,250,672	1,095,382,790	1,030,343,783	57,145,174	0	0	0	0
0799999.	Total - General Account - Authorized - Affiliates.....						48,456,250,672	1,095,382,790	1,030,343,783	57,145,174	0	0	0	0
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates														
90611.....	41-1366075....	11/01/1983	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	424,248	21,591	18,046	25,948	0	0	0	0
90611.....	41-1366075....	01/01/1987	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	2,705,720	65,857	66,172	77,508	0	0	0	0
90611.....	41-1366075....	01/01/1987	Allianz Life Insurance Co. of North America.....	MN.....	CO/I.....	DIS.....	0	0	37	74	0	0	0	0
90611.....	41-1366075....	06/01/1988	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	525,000	5,140	5,921	7,755	0	0	0	0
90611.....	41-1366075....	02/01/1999	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	5,194,146	53,301	45,604	33,207	0	0	0	0
90611.....	41-1366075....	02/01/1999	Allianz Life Insurance Co. of North America.....	MN.....	CO/I.....	DIS.....	0	331	342	104	0	0	0	0
90611.....	41-1366075....	04/15/1999	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	74,640,233	653,268	600,594	451,700	0	0	0	0
90611.....	41-1366075....	04/15/1999	Allianz Life Insurance Co. of North America.....	MN.....	CO/I.....	DIS.....	0	161,398	101,034	3,943	0	0	0	0
90611.....	41-1366075....	04/15/1999	Allianz Life Insurance Co. of North America.....	MN.....	CO/I.....	OL.....	152,620,094	1,111,192	1,059,360	209,507	0	0	0	0
90611.....	41-1366075....	03/15/2000	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	10,292,612	63,747	65,231	37,408	0	0	0	0
90611.....	41-1366075....	03/15/2000	Allianz Life Insurance Co. of North America.....	MN.....	CO/I.....	DIS.....	0	1,672	1,509	100	0	0	0	0
90611.....	41-1366075....	09/01/2000	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	1,385,093	9,032	8,312	4,983	0	0	0	0
90611.....	41-1366075....	09/01/2000	Allianz Life Insurance Co. of North America.....	MN.....	CO/I.....	DIS.....	0	285	239	63	0	0	0	0
90611.....	41-1366075....	09/30/2000	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	12,322,972	110,564	42,513	86,256	0	0	0	0
90611.....	41-1366075....	09/30/2000	Allianz Life Insurance Co. of North America.....	MN.....	CO/I.....	DIS.....	0	0	456	302	0	0	0	0
90611.....	41-1366075....	07/31/2001	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	16,899,683	130,598	114,317	77,102	0	0	0	0
90611.....	41-1366075....	07/31/2001	Allianz Life Insurance Co. of North America.....	MN.....	CO/I.....	DIS.....	0	144,606	136,886	8,890	0	0	0	0
90611.....	41-1366075....	07/31/2001	Allianz Life Insurance Co. of North America.....	MN.....	CO/I.....	XXXL.....	320,224,779	6,967,228	8,177,034	(2,479)	0	0	0	0
90611.....	41-1366075....	01/01/2002	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	21,477,387	147,545	67,667	105,514	0	0	0	0
90611.....	41-1366075....	01/01/2002	Allianz Life Insurance Co. of North America.....	MN.....	CO/I.....	DIS.....	0	0	122	1,069	0	0	0	0
90611.....	41-1366075....	07/01/2002	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	14,321,395	152,181	120,541	99,230	0	0	0	0
90611.....	41-1366075....	07/01/2002	Allianz Life Insurance Co. of North America.....	MN.....	CO/I.....	DIS.....	0	0	251	149	0	0	0	0
90611.....	41-1366075....	01/01/2003	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	12,175,671	109,309	9,329	77,994	0	0	0	0
90611.....	41-1366075....	01/01/2003	Allianz Life Insurance Co. of North America.....	MN.....	CO/I.....	DIS.....	0	15,885	45,912	2,341	0	0	0	0
90611.....	41-1366075....	01/01/2003	Allianz Life Insurance Co. of North America.....	MN.....	CO/I.....	XXXL.....	75,453,330	1,900,691	2,211,903	112,054	0	0	0	0
90611.....	41-1366075....	04/01/2003	Allianz Life Insurance Co. of North America.....	MN.....	YRT/I.....	OL.....	91,518,879	797,543	609,481	577,229	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

43.1

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
90611.....	41-1366075....	04/01/2003	Allianz Life Insurance Co. of North America.....	MN.....	CO/l.....	DIS.....	0	315,995	368,575	24,795	0	0	0	0
90611.....	41-1366075....	04/01/2003	Allianz Life Insurance Co. of North America.....	MN.....	CO/l.....	XXXL.....	527,016,524	12,933,758	14,506,544	1,648,221	0	0	0	0
62413.....	36-0947200....	01/01/1987	Wilcac Life Ins Company.....	IL.....	YRT/l.....	OL.....	100,514	11,215	10,112	15,143	0	0	0	0
86258.....	13-2572994....	07/01/1982	General Re Life Corporation.....	CT.....	YRT/l.....	OL.....	42,961	1,969	8,699	(5,955)	0	0	0	0
86258.....	13-2572994....	01/01/1987	General Re Life Corporation.....	CT.....	YRT/l.....	OL.....	585,327	33,472	77,951	14,806	0	0	0	0
86258.....	13-2572994....	01/01/1987	General Re Life Corporation.....	CT.....	CO/l.....	DIS.....	0	0	303	26	0	0	0	0
86258.....	13-2572994....	10/01/1988	General Re Life Corporation.....	CT.....	YRT/l.....	OL.....	21,422	123	92	206	0	0	0	0
86258.....	13-2572994....	04/01/2004	General Re Life Corporation.....	CT.....	YRT/l.....	OL.....	45,245,485	395,644	308,073	274,291	0	0	0	0
86258.....	13-2572994....	04/01/2004	General Re Life Corporation.....	CT.....	CO/l.....	DIS.....	0	246	1,639	1,052	0	0	0	0
86258.....	13-2572994....	01/19/2005	General Re Life Corporation.....	CT.....	YRT/l.....	OL.....	53,300,810	404,723	287,454	226,522	0	0	0	0
86258.....	13-2572994....	01/19/2005	General Re Life Corporation.....	CT.....	CO/l.....	DIS.....	0	4,662	1,544	1,741	0	0	0	0
86258.....	13-2572994....	12/01/2005	General Re Life Corporation.....	CT.....	YRT/l.....	OL.....	21,687,517	103,821	97,185	45,758	0	0	0	0
86258.....	13-2572994....	12/01/2005	General Re Life Corporation.....	CT.....	CO/l.....	DIS.....	0	6,199	5,751	250	0	0	0	0
86258.....	13-2572994....	01/01/2006	General Re Life Corporation.....	CT.....	YRT/l.....	OL.....	284,514,674	1,474,229	1,152,882	873,694	0	0	0	0
86258.....	13-2572994....	01/01/2006	General Re Life Corporation.....	CT.....	CO/l.....	DIS.....	0	70,982	64,803	6,159	0	0	0	0
97071.....	13-3126819....	06/04/2007	Scor Global Life USA Reins Co.....	DE.....	YRT/l.....	OL.....	8,916,534	22,627	17,547	17,916	0	0	0	0
97071.....	13-3126819....	06/04/2007	Scor Global Life USA Reins Co.....	DE.....	CO/l.....	DIS.....	0	0	125	6	0	0	0	0
97071.....	13-3126819....	10/01/2007	Scor Global Life USA Reins Co.....	DE.....	YRT/l.....	OL.....	13,073,311	38,602	9,689	53,840	0	0	0	0
97071.....	13-3126819....	10/01/2007	Scor Global Life USA Reins Co.....	DE.....	CO/l.....	DIS.....	0	414	3	392	0	0	0	0
97071.....	13-3126819....	10/10/2009	Scor Global Life USA Reins Co.....	DE.....	YRT/l.....	OL.....	252,123,620	1,438,259	1,040,009	1,614,962	0	0	0	0
97071.....	13-3126819....	10/10/2009	Scor Global Life USA Reins Co.....	DE.....	CO/l.....	DIS.....	0	79,322	53,024	2,806	0	0	0	0
97071.....	13-3126819....	01/01/2017	Scor Global Life USA Reins Co.....	DE.....	YRT/l.....	OL.....	99,678,841	135,045	0	178,351	0	0	0	0
97071.....	13-3126819....	01/01/2017	Scor Global Life USA Reins Co.....	DE.....	CO/l.....	DIS.....	0	244	0	21,362	0	0	0	0
88340.....	59-2859797....	01/19/2005	Hannover Life Reassurance Company Of America.....	FL.....	YRT/l.....	OL.....	2,310,438	6,379	5,601	12,084	0	0	0	0
88340.....	59-2859797....	01/19/2005	Hannover Life Reassurance Company Of America.....	FL.....	CO/l.....	DIS.....	0	0	22	47	0	0	0	0
88340.....	59-2859797....	09/01/2005	Hannover Life Reassurance Company Of America.....	FL.....	CO/l.....	DIS.....	0	92,034	48,940	5,466	0	0	0	0
88340.....	59-2859797....	09/01/2005	Hannover Life Reassurance Company Of America.....	FL.....	CO/l.....	XXXL.....	184,159,266	3,859,073	4,076,824	240,044	0	0	0	0
88340.....	59-2859797....	12/01/2005	Hannover Life Reassurance Company Of America.....	FL.....	CO/l.....	DIS.....	0	19,945	18,826	1,470	0	0	0	0
88340.....	59-2859797....	12/01/2005	Hannover Life Reassurance Company Of America.....	FL.....	CO/l.....	XXXL.....	66,675,673	1,432,917	1,517,290	85,359	0	0	0	0
88340.....	59-2859797....	01/01/2006	Hannover Life Reassurance Company Of America.....	FL.....	YRT/l.....	OL.....	12,128,561	26,814	20,437	46,693	0	0	0	0
88340.....	59-2859797....	01/01/2006	Hannover Life Reassurance Company Of America.....	FL.....	CO/l.....	DIS.....	0	366,377	330,699	37,638	0	0	0	0
88340.....	59-2859797....	01/01/2006	Hannover Life Reassurance Company Of America.....	FL.....	CO/l.....	XXXL.....	1,051,922,280	23,337,003	23,772,905	1,370,740	0	0	0	0
88340.....	59-2859797....	01/01/2010	Hannover Life Reassurance Company Of America.....	FL.....	YRT/l.....	OL.....	156,560,868	257,644	246,603	295,717	0	0	0	0
88340.....	59-2859797....	01/01/2014	Hannover Life Reassurance Company Of America.....	FL.....	YRT/l.....	OL.....	22,320,980	111,653	55,587	77,059	0	0	0	0
88340.....	59-2859797....	01/01/2014	Hannover Life Reassurance Company Of America.....	FL.....	CO/l.....	DIS.....	0	0	256	360	0	0	0	0
88340.....	59-2859797....	11/01/2016	Hannover Life Reassurance Company Of America.....	FL.....	YRT/l.....	OL.....	19,944,474	62,791	14,904	25,779	0	0	0	0
88340.....	59-2859797....	01/01/2017	Hannover Life Reassurance Company Of America.....	FL.....	YRT/l.....	OL.....	19,715,300	46,321	4,122	49,001	0	0	0	0
88340.....	59-2859797....	01/01/2017	Hannover Life Reassurance Company Of America.....	FL.....	CO/l.....	DIS.....	0	244	0	1,807	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

43.2

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
65676.....	35-0472300....	03/18/1982	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	5,004,567	403,372	340,977	402,672	0	0	0	0
65676.....	35-0472300....	03/18/1982	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	DIS.....	0	0	815	1,960	0	0	0	0
65676.....	35-0472300....	03/09/1998	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	5,388,366	82,492	64,838	33,841	0	0	0	0
65676.....	35-0472300....	03/09/1998	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	DIS.....	0	0	172	(36)	0	0	0	0
65676.....	35-0472300....	06/01/1998	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	7,331,073	109,210	124,915	86,032	0	0	0	0
65676.....	35-0472300....	06/01/1998	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	DIS.....	0	854	4,667	223	0	0	0	0
65676.....	35-0472300....	08/01/1998	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	62,500	1,590	1,421	1,968	0	0	0	0
65676.....	35-0472300....	02/01/1999	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	8,340,356	59,053	47,433	34,929	0	0	0	0
65676.....	35-0472300....	02/01/1999	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	DIS.....	0	331	342	104	0	0	0	0
65676.....	35-0472300....	04/15/1999	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	81,923,823	687,191	634,948	492,881	0	0	0	0
65676.....	35-0472300....	04/15/1999	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	DIS.....	0	161,441	101,341	4,150	0	0	0	0
65676.....	35-0472300....	04/15/1999	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	OL.....	152,620,101	1,111,192	1,059,360	209,507	0	0	0	0
65676.....	35-0472300....	03/01/2000	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	DIS.....	0	68,572	66,841	4,830	0	0	0	0
65676.....	35-0472300....	03/01/2000	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	XXXL.....	96,416,379	1,207,313	1,687,297	151,144	0	0	0	0
65676.....	35-0472300....	03/15/2000	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	10,300,332	63,795	65,280	37,436	0	0	0	0
65676.....	35-0472300....	03/15/2000	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	DIS.....	0	1,672	1,509	100	0	0	0	0
65676.....	35-0472300....	09/01/2000	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	2,236,315	13,070	11,999	9,951	0	0	0	0
65676.....	35-0472300....	09/01/2000	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	DIS.....	0	93,857	84,017	5,412	0	0	0	0
65676.....	35-0472300....	09/01/2000	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	XXXL.....	195,707,607	3,351,553	4,209,437	298,411	0	0	0	0
65676.....	35-0472300....	09/05/2000	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	17,757,008	236,005	220,846	141,146	0	0	0	0
65676.....	35-0472300....	09/30/2000	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	21,272,168	145,918	76,249	129,233	0	0	0	0
65676.....	35-0472300....	09/30/2000	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	DIS.....	0	0	896	1,150	0	0	0	0
65676.....	35-0472300....	07/01/2001	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	318,881	2,629	2,494	1,204	0	0	0	0
65676.....	35-0472300....	07/31/2001	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	13,805,303	112,172	102,901	66,031	0	0	0	0
65676.....	35-0472300....	07/31/2001	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	DIS.....	0	143,441	135,802	8,826	0	0	0	0
65676.....	35-0472300....	07/31/2001	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	XXXL.....	314,885,207	6,882,913	8,084,139	(8,445)	0	0	0	0
65676.....	35-0472300....	01/01/2002	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	21,659,175	149,697	68,600	106,846	0	0	0	0
65676.....	35-0472300....	01/01/2002	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	DIS.....	0	0	122	1,070	0	0	0	0
65676.....	35-0472300....	07/01/2002	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	14,329,315	152,302	120,639	99,304	0	0	0	0
65676.....	35-0472300....	07/01/2002	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	DIS.....	0	0	251	149	0	0	0	0
65676.....	35-0472300....	01/01/2003	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	11,646,918	104,510	8,442	70,329	0	0	0	0
65676.....	35-0472300....	01/01/2003	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	DIS.....	0	15,885	45,899	2,313	0	0	0	0
65676.....	35-0472300....	01/01/2003	Lincoln National Life Insurance Company.....	IN.....	CO/I.....	XXXL.....	75,453,330	1,900,691	2,211,903	112,054	0	0	0	0
65676.....	35-0472300....	01/19/2005	Lincoln National Life Insurance Company.....	IN.....	YRT/I.....	OL.....	3,105,620	37,894	34,208	22,475	0	0	0	0
76694.....	23-2044256....	12/31/2009	London Life Insurance Company.....	PA.....	YRT/I.....	OL.....	5,320,328,377	0	0	31,265,291	0	0	0	0
66346.....	58-0828824....	04/01/1984	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	76,228	732	652	895	0	0	0	0
66346.....	58-0828824....	03/01/1998	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	2,247,474	8,068	8,113	5,278	0	0	0	0
66346.....	58-0828824....	03/01/1998	Munich American Reassurance Company.....	GA.....	CO/I.....	DIS.....	0	0	543	0	0	0	0	0

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Reinsurance Ceded Life Insurance, Annuities, Deposit Funds and Other Liabilities
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43.3

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....	03/09/1998	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	5,388,374	82,492	64,838	33,329	0	0	0	0
66346.....	58-0828824....	03/09/1998	Munich American Reassurance Company.....	GA.....	CO/I.....	DIS.....	0	0	172	(36)	0	0	0	0
66346.....	58-0828824....	06/01/1998	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	7,331,069	109,210	124,915	84,731	0	0	0	0
66346.....	58-0828824....	06/01/1998	Munich American Reassurance Company.....	GA.....	CO/I.....	DIS.....	0	854	4,667	223	0	0	0	0
66346.....	58-0828824....	08/01/1998	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	62,500	1,590	1,421	1,938	0	0	0	0
66346.....	58-0828824....	02/01/1999	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	5,194,151	53,301	45,604	32,705	0	0	0	0
66346.....	58-0828824....	02/01/1999	Munich American Reassurance Company.....	GA.....	CO/I.....	DIS.....	0	331	342	104	0	0	0	0
66346.....	58-0828824....	04/15/1999	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	75,320,807	629,297	579,990	430,001	0	0	0	0
66346.....	58-0828824....	04/15/1999	Munich American Reassurance Company.....	GA.....	CO/I.....	DIS.....	0	161,398	101,034	3,943	0	0	0	0
66346.....	58-0828824....	04/15/1999	Munich American Reassurance Company.....	GA.....	CO/I.....	OL.....	152,620,101	1,111,192	1,059,592	205,914	0	0	0	0
66346.....	58-0828824....	03/15/2000	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	10,292,612	63,747	65,231	36,843	0	0	0	0
66346.....	58-0828824....	03/15/2000	Munich American Reassurance Company.....	GA.....	CO/I.....	DIS.....	0	1,672	1,509	100	0	0	0	0
66346.....	58-0828824....	09/01/2000	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	1,996,343	13,017	11,981	7,073	0	0	0	0
66346.....	58-0828824....	09/01/2000	Munich American Reassurance Company.....	GA.....	CO/I.....	DIS.....	0	88,938	79,103	4,966	0	0	0	0
66346.....	58-0828824....	09/01/2000	Munich American Reassurance Company.....	GA.....	CO/I.....	XXXL.....	191,775,796	3,260,690	4,083,504	285,140	0	0	0	0
66346.....	58-0828824....	09/30/2000	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	26,806,324	195,044	94,774	166,228	0	0	0	0
66346.....	58-0828824....	09/30/2000	Munich American Reassurance Company.....	GA.....	CO/I.....	DIS.....	0	0	1,099	1,289	0	0	0	0
66346.....	58-0828824....	07/31/2001	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	24,183,133	179,348	160,130	118,151	0	0	0	0
66346.....	58-0828824....	07/31/2001	Munich American Reassurance Company.....	GA.....	CO/I.....	DIS.....	0	193,335	181,192	16,911	0	0	0	0
66346.....	58-0828824....	07/31/2001	Munich American Reassurance Company.....	GA.....	CO/I.....	XXXL.....	630,147,078	13,774,054	16,177,941	(16,608)	0	0	0	0
66346.....	58-0828824....	01/01/2002	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	35,041,833	228,638	109,780	167,601	0	0	0	0
66346.....	58-0828824....	01/01/2002	Munich American Reassurance Company.....	GA.....	CO/I.....	DIS.....	0	0	196	1,571	0	0	0	0
66346.....	58-0828824....	07/01/2002	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	22,468,981	223,144	175,738	144,730	0	0	0	0
66346.....	58-0828824....	07/01/2002	Munich American Reassurance Company.....	GA.....	CO/I.....	DIS.....	0	0	375	242	0	0	0	0
66346.....	58-0828824....	01/01/2003	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	13,715,601	126,427	9,096	83,151	0	0	0	0
66346.....	58-0828824....	01/01/2003	Munich American Reassurance Company.....	GA.....	CO/I.....	DIS.....	0	15,885	45,940	2,428	0	0	0	0
66346.....	58-0828824....	01/01/2003	Munich American Reassurance Company.....	GA.....	CO/I.....	XXXL.....	76,253,329	1,924,779	2,236,834	111,303	0	0	0	0
66346.....	58-0828824....	04/01/2003	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	133,373,904	917,342	655,816	688,517	0	0	0	0
66346.....	58-0828824....	04/01/2003	Munich American Reassurance Company.....	GA.....	CO/I.....	DIS.....	0	293,494	588,940	62,996	0	0	0	0
66346.....	58-0828824....	04/01/2003	Munich American Reassurance Company.....	GA.....	CO/I.....	XXXL.....	1,375,461,339	31,393,415	35,913,696	5,070,597	0	0	0	0
66346.....	58-0828824....	04/01/2004	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	92,618,453	846,593	594,203	628,191	0	0	0	0
66346.....	58-0828824....	04/01/2004	Munich American Reassurance Company.....	GA.....	CO/I.....	DIS.....	0	300,625	281,351	43,615	0	0	0	0
66346.....	58-0828824....	04/01/2004	Munich American Reassurance Company.....	GA.....	CO/I.....	XXXL.....	1,563,468,319	33,064,911	36,523,628	2,082,337	0	0	0	0
66346.....	58-0828824....	01/19/2005	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	134,673,027	871,068	633,612	500,490	0	0	0	0
66346.....	58-0828824....	01/19/2005	Munich American Reassurance Company.....	GA.....	CO/I.....	DIS.....	0	409,776	354,757	28,220	0	0	0	0
66346.....	58-0828824....	01/19/2005	Munich American Reassurance Company.....	GA.....	CO/I.....	XXXL.....	835,144,267	17,888,898	19,327,392	1,128,712	0	0	0	0
66346.....	58-0828824....	07/01/2005	Munich American Reassurance Company.....	GA.....	YRT/I.....	OL.....	66,763,527	295,794	283,652	143,584	0	0	0	0
66346.....	58-0828824....	07/01/2005	Munich American Reassurance Company.....	GA.....	CO/I.....	DIS.....	0	37,343	33,855	6,242	0	0	0	0

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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....	07/01/2005	Munich American Reassurance Company.....	GA.....	CO/l.....	XXXL.....	149,366,398	3,301,338	3,743,572	286,731	0	0	0	0
66346.....	58-0828824....	09/01/2005	Munich American Reassurance Company.....	GA.....	YRT/l.....	OL.....	94,521,251	316,835	294,964	157,203	0	0	0	0
66346.....	58-0828824....	09/01/2005	Munich American Reassurance Company.....	GA.....	CO/l.....	DIS.....	0	129,852	39,835	9,262	0	0	0	0
66346.....	58-0828824....	09/01/2005	Munich American Reassurance Company.....	GA.....	CO/l.....	XXXL.....	205,659,942	4,299,225	4,697,696	362,391	0	0	0	0
66346.....	58-0828824....	12/01/2005	Munich American Reassurance Company.....	GA.....	YRT/l.....	OL.....	47,387,033	490,094	493,797	87,107	0	0	0	0
66346.....	58-0828824....	12/01/2005	Munich American Reassurance Company.....	GA.....	CO/l.....	DIS.....	0	16,228	15,157	2,320	0	0	0	0
66346.....	58-0828824....	12/01/2005	Munich American Reassurance Company.....	GA.....	CO/l.....	XXXL.....	63,868,877	1,380,013	1,525,767	116,557	0	0	0	0
66346.....	58-0828824....	01/01/2006	Munich American Reassurance Company.....	GA.....	YRT/l.....	OL.....	100,690,150	895,869	559,011	835,254	0	0	0	0
66346.....	58-0828824....	01/01/2006	Munich American Reassurance Company.....	GA.....	CO/l.....	DIS.....	0	200,776	181,749	22,503	0	0	0	0
66346.....	58-0828824....	01/01/2006	Munich American Reassurance Company.....	GA.....	CO/l.....	XXXL.....	590,045,606	11,886,643	12,451,186	885,249	0	0	0	0
66346.....	58-0828824....	06/04/2007	Munich American Reassurance Company.....	GA.....	YRT/l.....	OL.....	1,512,500	6,299	7,332	2,626	0	0	0	0
66346.....	58-0828824....	10/01/2007	Munich American Reassurance Company.....	GA.....	YRT/l.....	OL.....	139,440,252	820,823	472,199	742,699	0	0	0	0
66346.....	58-0828824....	10/01/2007	Munich American Reassurance Company.....	GA.....	CO/l.....	DIS.....	0	414	1,224	2,632	0	0	0	0
66346.....	58-0828824....	10/10/2009	Munich American Reassurance Company.....	GA.....	YRT/l.....	OL.....	295,259,004	1,527,076	1,049,369	1,666,264	0	0	0	0
66346.....	58-0828824....	10/10/2009	Munich American Reassurance Company.....	GA.....	CO/l.....	DIS.....	0	135,457	105,758	4,976	0	0	0	0
66346.....	58-0828824....	04/01/2011	Munich American Reassurance Company.....	GA.....	CO/l.....	DIS.....	0	1,582,859	1,444,727	224,733	0	0	0	0
66346.....	58-0828824....	04/01/2011	Munich American Reassurance Company.....	GA.....	CO/l.....	XXXL.....	6,940,076,238	145,833,210	141,584,036	9,079,176	0	0	0	0
66346.....	58-0828824....	01/01/2014	Munich American Reassurance Company.....	GA.....	YRT/l.....	OL.....	63,973,571	187,720	124,785	144,774	0	0	0	0
66346.....	58-0828824....	01/01/2014	Munich American Reassurance Company.....	GA.....	CO/l.....	DIS.....	0	0	1,276	1,636	0	0	0	0
66346.....	58-0828824....	01/01/2017	Munich American Reassurance Company.....	GA.....	YRT/l.....	OL.....	52,240,243	68,266	19,428	100,526	0	0	0	0
66346.....	58-0828824....	01/01/2017	Munich American Reassurance Company.....	GA.....	CO/l.....	DIS.....	0	244	0	11,070	0	0	0	0
93572.....	43-1235868....	01/01/1977	RGA Reinsurance Company.....	MO.....	YRT/l.....	OL.....	2,065,000	33,911	31,391	33,429	0	0	0	0
93572.....	43-1235868....	01/01/1983	RGA Reinsurance Company.....	MO.....	YRT/l.....	OL.....	400,000	5,644	5,121	5,395	0	0	0	0
93572.....	43-1235868....	01/01/1983	RGA Reinsurance Company.....	MO.....	CO/l.....	DIS.....	0	180,616	174,348	0	0	0	0	0
93572.....	43-1235868....	02/01/1983	RGA Reinsurance Company.....	MO.....	YRT/l.....	OL.....	2,464,786	58,644	22,515	5,541	0	0	0	0
93572.....	43-1235868....	02/01/1983	RGA Reinsurance Company.....	MO.....	CO/l.....	DIS.....	0	0	348	835	0	0	0	0
93572.....	43-1235868....	01/01/1984	RGA Reinsurance Company.....	MO.....	YRT/l.....	OL.....	758,904	13,817	18,889	10,653	0	0	0	0
93572.....	43-1235868....	06/01/1984	RGA Reinsurance Company.....	MO.....	YRT/l.....	OL.....	5,145,042	231,961	293,545	270,694	0	0	0	0
93572.....	43-1235868....	01/01/1987	RGA Reinsurance Company.....	MO.....	YRT/l.....	OL.....	41,681,851	1,014,409	984,172	1,062,524	0	0	0	0
93572.....	43-1235868....	01/01/1987	RGA Reinsurance Company.....	MO.....	CO/l.....	DIS.....	0	0	3,869	1,224	0	0	0	0
93572.....	43-1235868....	05/01/1988	RGA Reinsurance Company.....	MO.....	YRT/l.....	OL.....	675,000	7,177	6,477	10,752	0	0	0	0
93572.....	43-1235868....	05/01/1988	RGA Reinsurance Company.....	MO.....	CO/l.....	DIS.....	0	33	60	144	0	0	0	0
93572.....	43-1235868....	11/14/1991	RGA Reinsurance Company.....	MO.....	YRT/l.....	OL.....	9,139,421	67,956	221,816	2,792	0	0	0	0
93572.....	43-1235868....	11/14/1991	RGA Reinsurance Company.....	MO.....	CO/l.....	DIS.....	0	0	3	0	0	0	0	0
93572.....	43-1235868....	01/01/1994	RGA Reinsurance Company.....	MO.....	YRT/l.....	OL.....	12,537,942	314,725	311,097	87,296	0	0	0	0
93572.....	43-1235868....	01/01/1994	RGA Reinsurance Company.....	MO.....	CO/l.....	DIS.....	0	0	144	223	0	0	0	0
93572.....	43-1235868....	10/01/1995	RGA Reinsurance Company.....	MO.....	YRT/l.....	OL.....	26,740,457	449,403	620,615	208,589	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
93572.....	43-1235868....	10/01/1995	RGA Reinsurance Company.....	MO.....	CO/I.....	DIS.....	0	18,831	2,621	85	0	0	0	0
93572.....	43-1235868....	07/01/1997	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	21,991,859	360,185	289,640	243,448	0	0	0	0
93572.....	43-1235868....	07/01/1997	RGA Reinsurance Company.....	MO.....	CO/I.....	DIS.....	0	207	584	714	0	0	0	0
93572.....	43-1235868....	03/09/1998	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	13,108,145	231,357	179,177	139,852	0	0	0	0
93572.....	43-1235868....	03/09/1998	RGA Reinsurance Company.....	MO.....	CO/I.....	DIS.....	0	0	344	(73)	0	0	0	0
93572.....	43-1235868....	06/01/1998	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	15,614,849	220,267	251,488	170,651	0	0	0	0
93572.....	43-1235868....	06/01/1998	RGA Reinsurance Company.....	MO.....	CO/I.....	DIS.....	0	854	5,220	446	0	0	0	0
93572.....	43-1235868....	08/01/1998	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	125,000	3,179	2,841	3,935	0	0	0	0
93572.....	43-1235868....	02/01/1999	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	8,604,148	86,949	74,092	55,412	0	0	0	0
93572.....	43-1235868....	02/01/1999	RGA Reinsurance Company.....	MO.....	CO/I.....	DIS.....	0	331	362	156	0	0	0	0
93572.....	43-1235868....	04/15/1999	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	138,448,375	1,359,717	1,223,855	1,022,310	0	0	0	0
93572.....	43-1235868....	04/15/1999	RGA Reinsurance Company.....	MO.....	CO/I.....	DIS.....	0	190,041	112,379	4,199	0	0	0	0
93572.....	43-1235868....	04/15/1999	RGA Reinsurance Company.....	MO.....	CO/I.....	OL.....	152,620,101	1,111,192	1,059,360	209,509	0	0	0	0
93572.....	43-1235868....	03/15/2000	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	20,042,777	371,047	342,597	155,964	0	0	0	0
93572.....	43-1235868....	03/15/2000	RGA Reinsurance Company.....	MO.....	CO/I.....	DIS.....	0	1,672	1,509	149	0	0	0	0
93572.....	43-1235868....	09/01/2000	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	2,078,250	13,551	12,472	7,477	0	0	0	0
93572.....	43-1235868....	09/01/2000	RGA Reinsurance Company.....	MO.....	CO/I.....	DIS.....	0	90,120	80,514	5,077	0	0	0	0
93572.....	43-1235868....	09/01/2000	RGA Reinsurance Company.....	MO.....	CO/I.....	XXXL.....	191,775,791	3,260,690	4,083,503	290,118	0	0	0	0
93572.....	43-1235868....	09/30/2000	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	37,393,834	542,175	434,377	445,128	0	0	0	0
93572.....	43-1235868....	09/30/2000	RGA Reinsurance Company.....	MO.....	CO/I.....	DIS.....	0	0	1,123	1,300	0	0	0	0
93572.....	43-1235868....	07/31/2001	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	37,416,119	230,053	252,478	134,370	0	0	0	0
93572.....	43-1235868....	07/31/2001	RGA Reinsurance Company.....	MO.....	CO/I.....	DIS.....	0	143,441	136,160	9,260	0	0	0	0
93572.....	43-1235868....	07/31/2001	RGA Reinsurance Company.....	MO.....	CO/I.....	XXXL.....	326,785,207	7,015,122	8,304,160	(197,549)	0	0	0	0
93572.....	43-1235868....	01/01/2002	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	52,795,657	813,384	638,955	653,128	0	0	0	0
93572.....	43-1235868....	01/01/2002	RGA Reinsurance Company.....	MO.....	CO/I.....	DIS.....	0	0	164	1,577	0	0	0	0
93572.....	43-1235868....	07/01/2002	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	24,453,735	456,625	385,226	312,066	0	0	0	0
93572.....	43-1235868....	07/01/2002	RGA Reinsurance Company.....	MO.....	CO/I.....	DIS.....	0	0	396	266	0	0	0	0
93572.....	43-1235868....	01/01/2003	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	18,376,947	176,831	13,963	116,180	0	0	0	0
93572.....	43-1235868....	01/01/2003	RGA Reinsurance Company.....	MO.....	CO/I.....	DIS.....	0	15,885	45,923	2,459	0	0	0	0
93572.....	43-1235868....	01/01/2003	RGA Reinsurance Company.....	MO.....	CO/I.....	XXXL.....	77,078,330	2,014,348	2,341,631	118,831	0	0	0	0
93572.....	43-1235868....	04/01/2003	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	102,314,854	1,386,759	1,206,113	839,564	0	0	0	0
93572.....	43-1235868....	04/01/2003	RGA Reinsurance Company.....	MO.....	CO/I.....	DIS.....	0	60,901	932	1,617	0	0	0	0
93572.....	43-1235868....	04/01/2004	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	117,173,075	952,127	626,456	579,949	0	0	0	0
93572.....	43-1235868....	04/01/2004	RGA Reinsurance Company.....	MO.....	CO/I.....	DIS.....	0	246	1,639	1,052	0	0	0	0
93572.....	43-1235868....	01/19/2005	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	74,776,805	636,976	506,669	372,432	0	0	0	0
93572.....	43-1235868....	01/19/2005	RGA Reinsurance Company.....	MO.....	CO/I.....	DIS.....	0	4,662	1,540	1,731	0	0	0	0
93572.....	43-1235868....	06/04/2007	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	5,174,473	9,169	8,969	6,108	0	0	0	0
93572.....	43-1235868....	10/01/2007	RGA Reinsurance Company.....	MO.....	YRT/I.....	OL.....	164,686,196	1,174,627	591,297	924,110	0	0	0	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION

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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
93572.....	43-1235868....	10/01/2007	RGA Reinsurance Company.....	MO.....	CO/l.....	DIS.....	0	414	1,193	2,502	0	0	0	0
93572.....	43-1235868....	07/01/2008	RGA Reinsurance Company.....	MO.....	YRT/l.....	OL.....	4,713,864	24,055	25,786	15,432	0	0	0	0
93572.....	43-1235868....	10/10/2009	RGA Reinsurance Company.....	MO.....	YRT/l.....	OL.....	308,263,107	2,035,440	1,484,164	2,028,267	0	0	0	0
93572.....	43-1235868....	10/10/2009	RGA Reinsurance Company.....	MO.....	CO/l.....	DIS.....	0	79,322	53,669	4,190	0	0	0	0
93572.....	43-1235868....	01/01/2014	RGA Reinsurance Company.....	MO.....	YRT/l.....	OL.....	48,549,583	242,090	120,710	200,835	0	0	0	0
93572.....	43-1235868....	01/01/2014	RGA Reinsurance Company.....	MO.....	CO/l.....	DIS.....	0	0	556	1,513	0	0	0	0
93572.....	43-1235868....	01/01/2017	RGA Reinsurance Company.....	MO.....	YRT/l.....	OL.....	42,696,284	64,673	20,802	124,824	0	0	0	0
93572.....	43-1235868....	01/01/2017	RGA Reinsurance Company.....	MO.....	CO/l.....	DIS.....	0	244	0	5,035	0	0	0	0
64688.....	75-6020048....	04/01/2004	SCOR Global Life Americas Reinsurance Company.....	DE.....	YRT/l.....	OL.....	3,853,331	37,970	1,853	10,561	0	0	0	0
64688.....	75-6020048....	01/19/2005	SCOR Global Life Americas Reinsurance Company.....	DE.....	YRT/l.....	OL.....	1,275,618	3,590	335	2,220	0	0	0	0
64688.....	75-6020048....	01/01/2006	SCOR Global Life Americas Reinsurance Company.....	DE.....	YRT/l.....	OL.....	9,699,209	38,506	2,122	33,083	0	0	0	0
64688.....	75-6020048....	10/01/2007	SCOR Global Life Americas Reinsurance Company.....	DE.....	YRT/l.....	OL.....	80,608,693	668,642	393,002	503,132	0	0	0	0
64688.....	75-6020048....	10/01/2007	SCOR Global Life Americas Reinsurance Company.....	DE.....	CO/l.....	DIS.....	0	0	1,026	1,841	0	0	0	0
64688.....	75-6020048....	10/10/2009	SCOR Global Life Americas Reinsurance Company.....	DE.....	YRT/l.....	OL.....	214,770,060	1,693,073	1,168,599	1,886,795	0	0	0	0
64688.....	75-6020048....	10/10/2009	SCOR Global Life Americas Reinsurance Company.....	DE.....	CO/l.....	DIS.....	0	23,159	1,319	2,165	0	0	0	0
64688.....	75-6020048....	01/01/2014	SCOR Global Life Americas Reinsurance Company.....	DE.....	YRT/l.....	OL.....	70,686,498	287,610	172,315	246,042	0	0	0	0
64688.....	75-6020048....	01/01/2014	SCOR Global Life Americas Reinsurance Company.....	DE.....	CO/l.....	DIS.....	0	0	1,535	2,158	0	0	0	0
64688.....	75-6020048....	01/01/2017	SCOR Global Life Americas Reinsurance Company.....	DE.....	YRT/l.....	OL.....	0	0	28,942	0	0	0	0	0
87572.....	23-2038295....	01/01/2002	Scottish Re U.S. Inc.....	DE.....	YRT/l.....	OL.....	0	0	1,468	0	0	0	0	0
87572.....	23-2038295....	01/19/2005	Scottish Re U.S. Inc.....	DE.....	YRT/l.....	OL.....	3,105,612	37,894	34,208	22,475	0	0	0	0
87572.....	23-2038295....	01/01/2006	Scottish Re U.S. Inc.....	DE.....	YRT/l.....	OL.....	33,687,654	236,103	227,185	187,748	0	0	0	0
68713.....	84-0499703....	08/01/1993	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	3,258,450	41,759	25,615	44,387	0	0	0	0
68713.....	84-0499703....	08/01/1993	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	0	12	0	0	0	0	0
68713.....	84-0499703....	01/01/1994	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	8,642,607	179,053	156,071	222,025	0	0	0	0
68713.....	84-0499703....	01/01/1994	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	0	128	223	0	0	0	0
68713.....	84-0499703....	10/01/1995	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	28,932,664	609,332	551,922	528,162	0	0	0	0
68713.....	84-0499703....	10/01/1995	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	18,831	2,621	85	0	0	0	0
68713.....	84-0499703....	07/01/1997	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	17,588,124	783,617	447,688	802,385	0	0	0	0
68713.....	84-0499703....	07/01/1997	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	207	584	714	0	0	0	0
68713.....	84-0499703....	03/09/1998	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	10,776,723	164,984	129,677	68,579	0	0	0	0
68713.....	84-0499703....	03/09/1998	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	0	344	(73)	0	0	0	0
68713.....	84-0499703....	06/01/1998	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	16,820,560	233,354	265,503	250,931	0	0	0	0
68713.....	84-0499703....	06/01/1998	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	19,456	5,278	563	0	0	0	0
68713.....	84-0499703....	06/08/1998	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	3,704,117	29,583	23,430	41,587	0	0	0	0
68713.....	84-0499703....	06/08/1998	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	24,800	36,968	11,749	0	0	0	0
68713.....	84-0499703....	06/08/1998	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	OL.....	100,558,387	737,523	1,111,612	1,212,149	0	0	0	0
68713.....	84-0499703....	08/01/1998	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	205,000	4,089	3,621	5,109	0	0	0	0
68713.....	84-0499703....	02/01/1999	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	7,843,592	80,275	68,741	50,717	0	0	0	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION

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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
68713.....	84-0499703....	02/01/1999	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	331	362	156	0	0	0	0
68713.....	84-0499703....	04/15/1999	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	107,413,728	953,915	893,025	743,985	0	0	0	0
68713.....	84-0499703....	04/15/1999	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	88,763	36,676	488	0	0	0	0
68713.....	84-0499703....	03/15/2000	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	15,442,777	95,645	97,872	56,870	0	0	0	0
68713.....	84-0499703....	03/15/2000	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	1,672	1,509	149	0	0	0	0
68713.....	84-0499703....	09/01/2000	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	3,439,500	20,417	18,755	11,979	0	0	0	0
68713.....	84-0499703....	09/01/2000	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	285	239	123	0	0	0	0
68713.....	84-0499703....	09/05/2000	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	0	0	220,845	5,256	0	0	0	0
68713.....	84-0499703....	09/30/2000	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	37,418,444	313,219	150,104	320,471	0	0	0	0
68713.....	84-0499703....	09/30/2000	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	0	884	587	0	0	0	0
68713.....	84-0499703....	10/02/2000	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	0	0	11,862	(1,266)	0	0	0	0
68713.....	84-0499703....	07/31/2001	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	21,370,847	208,431	192,268	144,059	0	0	0	0
68713.....	84-0499703....	07/31/2001	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	143,470	136,502	9,648	0	0	0	0
68713.....	84-0499703....	07/31/2001	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	XXXL.....	315,074,780	6,887,057	8,089,006	(8,563)	0	0	0	0
68713.....	84-0499703....	01/01/2002	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	38,095,505	323,798	144,958	223,895	0	0	0	0
68713.....	84-0499703....	01/01/2002	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	7,148	6,794	2,816	0	0	0	0
68713.....	84-0499703....	01/01/2002	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	XXXL.....	23,300,095	926,103	985,711	59,023	0	0	0	0
68713.....	84-0499703....	05/01/2002	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	115,767,075	2,165,293	2,130,799	1,463,436	0	0	0	0
68713.....	84-0499703....	05/01/2002	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	30,392	4,900	8,737	0	0	0	0
68713.....	84-0499703....	07/01/2002	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	26,807,565	421,890	343,072	284,009	0	0	0	0
68713.....	84-0499703....	07/01/2002	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	0	464	244	0	0	0	0
68713.....	84-0499703....	01/01/2003	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	20,690,000	272,208	62,084	168,351	0	0	0	0
68713.....	84-0499703....	01/01/2003	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	8,737	39,351	1,710	0	0	0	0
68713.....	84-0499703....	01/01/2003	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	XXXL.....	55,153,235	1,337,318	1,606,130	75,230	0	0	0	0
68713.....	84-0499703....	04/01/2003	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	91,336,647	803,443	605,133	671,261	0	0	0	0
68713.....	84-0499703....	04/01/2003	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	293,494	300,312	25,749	0	0	0	0
68713.....	84-0499703....	04/01/2003	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	AXXX.....	129,687,389	11,724,915	11,871,063	248,673	0	0	0	0
68713.....	84-0499703....	04/01/2003	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	XXXL.....	721,759,828	18,010,549	19,421,645	1,383,961	0	0	0	0
68713.....	84-0499703....	04/01/2004	Security Life of Denver Insurance Company.....	CO.....	YRT/l.....	OL.....	69,486,506	794,410	591,498	591,047	0	0	0	0
68713.....	84-0499703....	04/01/2004	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	DIS.....	0	243,871	229,110	20,577	0	0	0	0
68713.....	84-0499703....	04/01/2004	Security Life of Denver Insurance Company.....	CO.....	CO/l.....	XXXL.....	731,847,978	18,330,020	19,823,412	934,598	0	0	0	0
82627.....	06-0839705....	11/01/1981	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	170,427	779	706	5,781	0	0	0	0
82627.....	06-0839705....	01/01/1982	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	460,000	2,934	2,716	4,863	0	0	0	0
82627.....	06-0839705....	01/01/1982	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	194	179	173	0	0	0	0
82627.....	06-0839705....	06/06/1983	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	810,911	2,991	49,435	66,383	0	0	0	0
82627.....	06-0839705....	06/01/1984	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	2,067,783	62,581	62,870	47,815	0	0	0	0
82627.....	06-0839705....	06/01/1984	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	16,807	7	63	0	0	0	0
82627.....	06-0839705....	01/01/1987	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	25,165,501	636,690	560,465	579,167	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

43.8

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
82627.....	06-0839705....	01/01/1987	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	0	1,844	1,225	0	0	0	0
82627.....	06-0839705....	01/01/1990	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	900,000	5,067	4,607	7,625	0	0	0	0
82627.....	06-0839705....	01/01/1990	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	2,491	2,447	4,268	0	0	0	0
82627.....	06-0839705....	11/14/1991	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	10,095,054	128,056	244,682	175,611	0	0	0	0
82627.....	06-0839705....	11/14/1991	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	0	95	0	0	0	0	0
82627.....	06-0839705....	10/16/1992	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	650,000	11,148	10,105	23,920	0	0	0	0
82627.....	06-0839705....	10/16/1992	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	144	281,716	0	0	0	0	0
82627.....	06-0839705....	08/01/1993	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	4,104,003	49,845	34,189	60,123	0	0	0	0
82627.....	06-0839705....	08/01/1993	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	0	12	0	0	0	0	0
82627.....	06-0839705....	01/01/1994	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	30,984,505	588,878	495,710	572,660	0	0	0	0
82627.....	06-0839705....	01/01/1994	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	0	469	670	0	0	0	0
82627.....	06-0839705....	10/01/1995	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	69,250,396	1,336,198	1,296,163	778,240	0	0	0	0
82627.....	06-0839705....	10/01/1995	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	56,744	8,089	352	0	0	0	0
82627.....	06-0839705....	07/01/1997	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	41,601,168	812,731	781,986	391,703	0	0	0	0
82627.....	06-0839705....	07/01/1997	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	622	1,752	2,141	0	0	0	0
82627.....	06-0839705....	03/09/1998	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	22,691,179	340,591	268,724	146,262	0	0	0	0
82627.....	06-0839705....	03/09/1998	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	0	688	(145)	0	0	0	0
82627.....	06-0839705....	06/01/1998	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	29,604,400	440,887	505,171	343,323	0	0	0	0
82627.....	06-0839705....	06/01/1998	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	1,708	10,441	893	0	0	0	0
82627.....	06-0839705....	08/01/1998	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	250,000	6,359	5,683	7,870	0	0	0	0
82627.....	06-0839705....	02/01/1999	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	7,793,175	79,971	68,423	49,823	0	0	0	0
82627.....	06-0839705....	02/01/1999	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	331	362	156	0	0	0	0
82627.....	06-0839705....	04/15/1999	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	113,708,960	1,328,297	1,215,448	670,456	0	0	0	0
82627.....	06-0839705....	04/15/1999	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	88,763	36,676	488	0	0	0	0
82627.....	06-0839705....	03/15/2000	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	15,442,777	95,645	97,872	56,127	0	0	0	0
82627.....	06-0839705....	03/15/2000	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	1,672	1,509	149	0	0	0	0
82627.....	06-0839705....	09/01/2000	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	2,078,250	13,551	12,472	7,476	0	0	0	0
82627.....	06-0839705....	09/01/2000	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	285	239	95	0	0	0	0
82627.....	06-0839705....	09/05/2000	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	17,756,951	236,004	220,845	141,146	0	0	0	0
82627.....	06-0839705....	09/29/2000	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	475,135	66,383	59,889	43,035	0	0	0	0
82627.....	06-0839705....	09/30/2000	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	18,314,952	166,053	63,753	130,207	0	0	0	0
82627.....	06-0839705....	09/30/2000	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	0	683	451	0	0	0	0
82627.....	06-0839705....	10/02/2000	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	649,807	12,257	11,862	7,542	0	0	0	0
82627.....	06-0839705....	07/31/2001	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	14,861,821	152,896	195,246	40,710	0	0	0	0
82627.....	06-0839705....	07/31/2001	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	847	1,812	1,304	0	0	0	0
82627.....	06-0839705....	01/01/2002	Swiss Re Life & Health America, Inc.....	MO.....	YRT/l.....	OL.....	26,936,965	201,201	106,479	39,580	0	0	0	0
82627.....	06-0839705....	01/01/2002	Swiss Re Life & Health America, Inc.....	MO.....	CO/l.....	DIS.....	0	0	128	1,522	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

43.9

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
82627.....	06-0839705....	07/01/2002	Swiss Re Life & Health America, Inc.....	MO.....	YRT/I.....	OL.....	16,320,774	213,113	170,702	133,583	0	0	0	0
82627.....	06-0839705....	07/01/2002	Swiss Re Life & Health America, Inc.....	MO.....	CO/I.....	DIS.....	0	0	339	151	0	0	0	0
82627.....	06-0839705....	01/01/2003	Swiss Re Life & Health America, Inc.....	MO.....	YRT/I.....	OL.....	14,646,598	164,521	2,876	103,384	0	0	0	0
82627.....	06-0839705....	01/01/2003	Swiss Re Life & Health America, Inc.....	MO.....	CO/I.....	DIS.....	0	0	58	350	0	0	0	0
82627.....	06-0839705....	04/01/2003	Swiss Re Life & Health America, Inc.....	MO.....	YRT/I.....	OL.....	3,000,000	0	3,537	4,267	0	0	0	0
82627.....	06-0839705....	01/19/2005	Swiss Re Life & Health America, Inc.....	MO.....	YRT/I.....	OL.....	3,105,621	37,894	34,208	22,475	0	0	0	0
82627.....	06-0839705....	01/01/2006	Swiss Re Life & Health America, Inc.....	MO.....	YRT/I.....	OL.....	67,375,297	472,207	454,370	375,496	0	0	0	0
82627.....	06-0839705....	07/01/2008	Swiss Re Life & Health America, Inc.....	MO.....	YRT/I.....	OL.....	6,629,751	35,383	36,129	24,933	0	0	0	0
82627.....	06-0839705....	01/01/2010	Swiss Re Life & Health America, Inc.....	MO.....	YRT/I.....	OL.....	156,626,869	257,543	246,552	242,522	0	0	0	0
82627.....	06-0839705....	07/01/2011	Swiss Re Life & Health America, Inc.....	MO.....	CO/I.....	DIS.....	0	1,582,859	1,444,727	224,752	0	0	0	0
82627.....	06-0839705....	07/01/2011	Swiss Re Life & Health America, Inc.....	MO.....	CO/I.....	XXXL.....	6,940,076,052	145,833,206	141,584,032	9,237,622	0	0	0	0
82627.....	06-0839705....	03/19/2013	Swiss Re Life & Health America, Inc.....	MO.....	YRT/I.....	OL.....	9,690,011	2,435	2,262	3,083	0	0	0	0
82627.....	06-0839705....	01/01/2014	Swiss Re Life & Health America, Inc.....	MO.....	YRT/I.....	OL.....	86,558,622	394,393	181,668	313,071	0	0	0	0
82627.....	06-0839705....	01/01/2014	Swiss Re Life & Health America, Inc.....	MO.....	CO/I.....	DIS.....	0	0	2,018	2,551	0	0	0	0
82627.....	06-0839705....	01/01/2017	Swiss Re Life & Health America, Inc.....	MO.....	YRT/I.....	OL.....	87,167,359	164,913	39,105	183,428	0	0	0	0
82627.....	06-0839705....	01/01/2017	Swiss Re Life & Health America, Inc.....	MO.....	CO/I.....	DIS.....	0	244	0	10,859	0	0	0	0
86231.....	39-0989781....	01/01/2006	Transamerica Life Insurance Company.....	IA.....	YRT/I.....	OL.....	133,358,863	1,264,496	1,199,360	1,478,016	0	0	0	0
86231.....	39-0989781....	01/01/2006	Transamerica Life Insurance Company.....	IA.....	CO/I.....	DIS.....	0	372,174	336,605	47,493	0	0	0	0
86231.....	39-0989781....	01/01/2006	Transamerica Life Insurance Company.....	IA.....	CO/I.....	XXXL.....	1,335,982,826	29,369,507	29,955,460	1,742,147	0	0	0	0
86231.....	39-0989781....	06/04/2007	Transamerica Life Insurance Company.....	IA.....	YRT/I.....	OL.....	3,170,954	11,149	11,950	5,602	0	0	0	0
86231.....	39-0989781....	06/04/2007	Transamerica Life Insurance Company.....	IA.....	CO/I.....	DIS.....	0	0	48	100	0	0	0	0
86231.....	39-0989781....	10/01/2007	Transamerica Life Insurance Company.....	IA.....	YRT/I.....	OL.....	166,287,371	1,083,920	614,530	997,776	0	0	0	0
86231.....	39-0989781....	10/01/2007	Transamerica Life Insurance Company.....	IA.....	CO/I.....	DIS.....	0	414	1,178	2,534	0	0	0	0
80659.....	38-0397420....	08/01/1982	US Business of Canada Life Assurance Co.....	MI.....	YRT/I.....	OL.....	496,908	11,591	10,430	13,014	0	0	0	0
80659.....	38-0397420....	09/10/1987	US Business of Canada Life Assurance Co.....	MI.....	YRT/I.....	OL.....	110,178	4,514	2,091	4,134	0	0	0	0
80659.....	38-0397420....	04/01/2004	US Business of Canada Life Assurance Co.....	MI.....	YRT/I.....	OL.....	12,620,096	45,279	26,701	58,227	0	0	0	0
80659.....	38-0397420....	04/01/2004	US Business of Canada Life Assurance Co.....	MI.....	CO/I.....	DIS.....	0	243,768	227,340	15,762	0	0	0	0
80659.....	38-0397420....	04/01/2004	US Business of Canada Life Assurance Co.....	MI.....	CO/I.....	XXXL.....	566,886,305	12,594,549	13,699,304	744,662	0	0	0	0
80659.....	38-0397420....	01/19/2005	US Business of Canada Life Assurance Co.....	MI.....	YRT/I.....	OL.....	7,472,217	15,251	11,502	19,491	0	0	0	0
80659.....	38-0397420....	01/19/2005	US Business of Canada Life Assurance Co.....	MI.....	CO/I.....	DIS.....	0	247,671	217,861	11,124	0	0	0	0
80659.....	38-0397420....	01/19/2005	US Business of Canada Life Assurance Co.....	MI.....	CO/I.....	XXXL.....	423,433,053	9,586,268	9,964,410	550,210	0	0	0	0
80659.....	38-0397420....	07/01/2005	US Business of Canada Life Assurance Co.....	MI.....	CO/I.....	DIS.....	0	42,251	38,972	3,809	0	0	0	0
80659.....	38-0397420....	07/01/2005	US Business of Canada Life Assurance Co.....	MI.....	CO/I.....	XXXL.....	157,456,293	4,898,822	5,053,448	252,583	0	0	0	0
80659.....	38-0397420....	09/01/2005	US Business of Canada Life Assurance Co.....	MI.....	CO/I.....	DIS.....	0	99,853	62,718	5,770	0	0	0	0
80659.....	38-0397420....	09/01/2005	US Business of Canada Life Assurance Co.....	MI.....	CO/I.....	XXXL.....	209,163,812	4,542,118	4,926,861	308,241	0	0	0	0
80659.....	38-0397420....	01/01/2014	US Business of Canada Life Assurance Co.....	MI.....	YRT/I.....	OL.....	49,594,607	194,572	72,455	139,378	0	0	0	0
80659.....	38-0397420....	01/01/2014	US Business of Canada Life Assurance Co.....	MI.....	CO/I.....	DIS.....	0	0	768	1,079	0	0	0	0
80659.....	38-0397420....	11/01/2016	US Business of Canada Life Assurance Co.....	MI.....	YRT/I.....	OL.....	19,999,569	62,968	14,941	23,219	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		
80659.....	38-0397420....	01/01/2017	US Business of Canada Life Assurance Co.....	MI.....	YRT/I.....	OL.....	40,083,531	43,624	19,692	81,148	0	0	0	0
80659.....	38-0397420....	01/01/2017	US Business of Canada Life Assurance Co.....	MI.....	CO/I.....	DIS.....	0	244	0	5,494	0	0	0	0
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						40,483,497,201	677,840,582	688,582,854	116,222,645	0	0	0	0
1099999.	Total - General Account - Authorized - Non-Affiliates.....						40,483,497,201	677,840,582	688,582,854	116,222,645	0	0	0	0
1199999.	Total - General Account - Authorized.....						88,939,747,873	1,773,223,372	1,718,926,637	173,367,819	0	0	0	0
General Account - Unauthorized - Affiliates - U.S. - Captive														
15363.....	80-0955278....	12/31/2013	Kenwood Re Inc.....	VT.....	CO/I.....	XXXL.....	50,503,891,629	547,587,277	517,451,549	67,452,120	0	0	0	0
15363.....	80-0955278....	12/31/2013	Kenwood Re Inc.....	VT.....	CO/I.....	DIS.....	0	8,788,162	7,776,811	1,702,929	0	0	0	0
13575.....	26-3791519....	06/30/2009	Montgomery Re.....	VT.....	CO/I.....	XXXL.....	366,281,535	2,074,880	9,351,728	1,081,723	0	0	0	0
13575.....	26-3791519....	06/30/2009	Montgomery Re.....	VT.....	CO/I.....	DIS.....	0	20,721	748,450	54,321	0	0	0	0
13575.....	26-3791519....	05/01/2011	Montgomery Re.....	VT.....	CO/I.....	XXXL.....	0	0	5,075	0	0	0	0	0
13575.....	26-3791519....	05/01/2011	Montgomery Re.....	VT.....	CO/I.....	AXXX.....	444,765,472	178,511,657	169,751,560	6,002,597	0	0	0	0
13575.....	26-3791519....	05/01/2011	Montgomery Re.....	VT.....	CO/I.....	DIS.....	0	0	425,864	0	0	0	0	0
13575.....	26-3791519....	07/01/2012	Montgomery Re.....	VT.....	CO/I.....	XXXL.....	9,148,973,288	119,823,955	119,258,793	11,282,142	0	0	0	0
13575.....	26-3791519....	07/01/2012	Montgomery Re.....	VT.....	CO/I.....	DIS.....	0	1,112,075	1,531,509	202,967	0	0	0	0
1288888.	Total - General Account - Unauthorized - Affiliates - U.S. - Captive.....						60,463,911,924	857,918,727	826,301,339	87,778,799	0	0	0	0
1499999.	Total - General Account - Unauthorized - Affiliates - U.S. - Total.....						60,463,911,924	857,918,727	826,301,339	87,778,799	0	0	0	0
1899999.	Total - General Account - Unauthorized - Affiliates.....						60,463,911,924	857,918,727	826,301,339	87,778,799	0	0	0	0
General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates														
00000.....	AA-3190770...	01/01/2006	Chubb Tempest Reinsurance LTD.....	BMU.....	YRT/I.....	OL.....	46,200,215	356,143	262,189	300,009	0	0	0	0
00000.....	AA-3190770...	01/01/2006	Chubb Tempest Reinsurance LTD.....	BMU.....	CO/I.....	DIS.....	0	61	486	944	0	0	0	0
2099999.	Total - General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates.....						46,200,215	356,204	262,675	300,953	0	0	0	0
2199999.	Total - General Account - Unauthorized - Non-Affiliates.....						46,200,215	356,204	262,675	300,953	0	0	0	0
2299999.	Total - General Account - Unauthorized.....						60,510,112,139	858,274,931	826,564,014	88,079,752	0	0	0	0
3499999.	Total - General Account - Authorized, Unauthorized and Certified.....						149,449,860,012	2,631,498,303	2,545,490,651	261,447,571	0	0	0	0
6999999.	Total U.S.....						149,403,659,797	2,631,142,099	2,545,227,976	261,146,618	0	0	0	0
7099999.	Total Non-U.S.....						46,200,215	356,204	262,675	300,953	0	0	0	0
9999999.	Total.....						149,449,860,012	2,631,498,303	2,545,490,651	261,447,571	0	0	0	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION

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	Westport Ins. Corp.....	MO.....	QA/I.....	LTDI.....	6,910	0	30,887	0	0	0	0
86258.....	13-2572994....	.01/01/1999	General Re Life Corporation.....	CT.....	QA/I.....	LTDI.....	2,667,807	1,583,116	2,373,141	0	0	0	0
66346.....	58-0828824....	.01/01/1999	Munich American Reassurance Company.....	GA.....	QA/I.....	LTDI.....	6,469,233	3,355,543	9,459,781	0	0	0	0
82627.....	06-0839705....	.02/01/1981	Swiss Re Life & Health America, Inc.....	MO.....	QA/I.....	LTDI.....	4,158,211	2,040,217	83,689,448	0	0	0	0
67598.....	04-1768571....	.11/01/1988	Paul Revere Life Ins Co.....	MA.....	QA/I.....	LTDI.....	451,440	189,127	11,362,090	0	0	0	0
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						13,753,601	7,168,003	106,915,347	0	0	0	0
1099999.	Total - General Account - Authorized - Non-Affiliates.....						13,753,601	7,168,003	106,915,347	0	0	0	0
1199999.	Total - General Account - Authorized.....						13,753,601	7,168,003	106,915,347	0	0	0	0
3499999.	Total - General Account - Authorized, Unauthorized and Certified.....						13,753,601	7,168,003	106,915,347	0	0	0	0
6999999.	Total - U.S.....						13,753,601	7,168,003	106,915,347	0	0	0	0
9999999.	Total.....						13,753,601	7,168,003	106,915,347	0	0	0	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION

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														
15363.....	80-0955278.	.12/31/2013	Kenwood Re Inc.....	547,587,277	6,963,932	0	554,551,209	0	0.....	207,717,182	0	352,578,573	5,969,268	554,551,209
15363.....	80-0955278.	.12/31/2013	Kenwood Re Inc.....	8,788,162	0	0	8,788,162	0	0.....	9,360,876	0	0	0	8,788,162
13575.....	26-3791519.	.06/30/2009	Montgomery Re.....	2,074,880	749,326	0	2,824,206	0	0.....	1,950,141	0	1,022,683	15,454	2,824,206
13575.....	26-3791519.	.06/30/2009	Montgomery Re.....	20,721	0	0	20,721	0	0.....	38,404	0	0	0	20,721
13575.....	26-3791519.	.05/01/2011	Montgomery Re.....	178,511,657	969,706	0	179,481,363	0	0.....	167,779,785	0	87,986,187	1,329,602	179,481,363
13575.....	26-3791519.	.07/01/2012	Montgomery Re.....	119,823,955	0	0	119,823,955	0	0.....	112,620,269	0	59,059,764	892,481	119,823,955
13575.....	26-3791519.	.07/01/2012	Montgomery Re.....	1,112,075	0	0	1,112,075	0	0.....	2,061,118	0	0	0	1,112,075
0199999.	Total - General Account - Life and Annuity - Affiliates - U.S. - Captive.....			857,918,727	8,682,964	0	866,601,691	0	XXX.....	501,527,775	0	500,647,207	8,206,805	866,601,691
0399999.	Total - General Account - Life and Annuity - Affiliates - U.S. - Total.....			857,918,727	8,682,964	0	866,601,691	0	XXX.....	501,527,775	0	500,647,207	8,206,805	866,601,691
0799999.	Total - General Account - Life and Annuity - Affiliates.....			857,918,727	8,682,964	0	866,601,691	0	XXX.....	501,527,775	0	500,647,207	8,206,805	866,601,691
General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates														
00000.....	AA-3190770	.01/01/2006	Chubb Tempest Reinsurance LTD.....	356,143	0	0	356,143	356,939	001.....	0	0	0	33,549	356,143
00000.....	AA-3190770	.01/01/2006	Chubb Tempest Reinsurance LTD.....	61	0	0	61	61	001.....	0	0	0	0	61
0999999.	Total - General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates.....			356,204	0	0	356,204	357,000	XXX.....	0	0	0	33,549	356,204
1099999.	Total - General Account - Life and Annuity - Non-Affiliates.....			356,204	0	0	356,204	357,000	XXX.....	0	0	0	33,549	356,204
1199999.	Total - General Account - Life and Annuity.....			858,274,931	8,682,964	0	866,957,895	357,000	XXX.....	501,527,775	0	500,647,207	8,240,353	866,957,895
2399999.	Total - General Account.....			858,274,931	8,682,964	0	866,957,895	357,000	XXX.....	501,527,775	0	500,647,207	8,240,353	866,957,895
3599999.	Total - U.S.....			857,918,727	8,682,964	0	866,601,691	0	XXX.....	501,527,775	0	500,647,207	8,206,805	866,601,691
3699999.	Total - Non-U.S.....			356,204	0	0	356,204	357,000	XXX.....	0	0	0	33,549	356,204
9999999.	Total.....			858,274,931	8,682,964	0	866,957,895	357,000	XXX.....	501,527,775	0	500,647,207	8,240,353	866,957,895

SCHEDULE S - PART 5

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	2	3	4	5
		2018	2017	2016	2015	2014
A.	OPERATIONS ITEMS					
1.	Premiums and annuity considerations for life and accident and health contracts.....	275,201	281,952	352,829	342,605	345,715
2.	Commissions and reinsurance expense allowances.....	30,383	37,530	39,956	38,830	56,641
3.	Contract claims.....	258,364	210,299	195,567	197,739	186,279
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.....	86,456	106,074	0	0	0
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.....	2,745,582	2,659,125	0	0	0
10.	Liability for deposit-type contracts.....	0	0	0	0	0
11.	Contract claims unpaid.....	39,509	19,060	22,213	30,188	20,340
12.	Amounts recoverable on reinsurance.....	11,686	9,708	6,436	8,153	10,879
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	0
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).....	357	356	240	815	195
20.	Trust agreements (T).....	501,528	497,505	464,858	433,553	437,958
21.	Other (O).....	500,647	471,325	430,353	389,925	334,566
D.	REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22.	Multiple beneficiary trust.....	0	0	0	0	0
23.	Funds deposited by and withheld from (F).....	0	0	0	0	0
24.	Letters of credit (L).....	0	0	0	0	0
25.	Trust agreements (T).....	0	0	0	0	0
26.	Other (O).....	0	0	0	0	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	3,561,619,046	0	3,561,619,046
2. Reinsurance (Line 16).....	11,686,369	0	11,686,369
3. Premiums and considerations (Line 15).....	145,748,484	0	145,748,484
4. Net credit for ceded reinsurance.....	XXX	2,785,090,420	2,785,090,420
5. All other admitted assets (balance).....	101,794,823	0	101,794,823
6. Total assets excluding Separate Accounts (Line 26).....	3,820,848,722	2,785,090,420	6,605,939,142
7. Separate Account assets (Line 27).....	233,458,871	0	233,458,871
8. Total assets (Line 28).....	4,054,307,593	2,785,090,420	6,839,398,013
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2).....	3,253,840,032	2,745,581,657	5,999,421,689
10. Liability for deposit-type contracts (Line 3).....	104,271,417	0	104,271,417
11. Claim reserves (Line 4).....	15,832,636	39,508,763	55,341,399
12. Policyholder dividends/reserves (Lines 5 through 7).....	0	0	0
13. Premium & annuity considerations received in advance (Line 8).....	489,013	0	489,013
14. Other contract liabilities (Line 9).....	26,006,750	0	26,006,750
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).....	129,982,214	0	129,982,214
20. Total liabilities excluding Separate Accounts (Line 26).....	3,530,422,062	2,785,090,420	6,315,512,482
21. Separate Account liabilities (Line 27).....	233,458,871	0	233,458,871
22. Total liabilities (Line 28).....	3,763,880,933	2,785,090,420	6,548,971,353
23. Capital & surplus (Line 38).....	290,426,659	XXX	290,426,659
24. Total liabilities, capital & surplus (Line 39).....	4,054,307,592	2,785,090,420	6,839,398,012
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves.....	2,745,581,657		
26. Claim reserves.....	39,508,763		
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.....	2,785,090,420		
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.....	2,785,090,420		

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE T - PART 2
INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN
Allocated by States and Territories

States, Etc.			Direct Business Only				Totals	
			1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)		5 Deposit-Type Contracts
1.	Alabama.....	AL	5,207,417	240	500,624	.0	.0	5,708,281
2.	Alaska.....	AK	231,694	.0	19,556	.0	.0	251,250
3.	Arizona.....	AZ	6,533,740	160	451,284	.0	.0	6,985,184
4.	Arkansas.....	AR	3,169,691	.0	183,570	.0	22,603	3,375,864
5.	California.....	CA	42,484,709	.0	1,015,131	.0	.0	43,499,840
6.	Colorado.....	CO	11,041,529	28	1,293,122	.0	.0	12,334,679
7.	Connecticut.....	CT	6,508,900	.0	371,027	.0	.0	6,879,927
8.	Delaware.....	DE	746,252	.0	56,123	.0	.0	802,375
9.	District of Columbia.....	DC	711,040	.0	102,819	.0	.0	813,859
10.	Florida.....	FL	29,939,046	.0	2,715,102	.0	.0	32,654,148
11.	Georgia.....	GA	11,758,119	.0	660,908	.0	.0	12,419,027
12.	Hawaii.....	HI	148,045	.0	12,978	.0	.0	161,023
13.	Idaho.....	ID	3,468,422	400	271,103	.0	.0	3,739,925
14.	Illinois.....	IL	13,236,004	.0	871,348	.0	.0	14,107,352
15.	Indiana.....	IN	6,947,382	.0	394,436	.0	5,015	7,346,833
16.	Iowa.....	IA	4,835,763	.0	197,584	.0	200,000	5,233,347
17.	Kansas.....	KS	6,221,068	16,003	411,483	.0	.0	6,648,554
18.	Kentucky.....	KY	4,902,625	.0	358,933	.0	.0	5,261,558
19.	Louisiana.....	LA	4,325,937	.0	452,799	.0	.0	4,778,736
20.	Maine.....	ME	1,060,636	.0	30,446	.0	.0	1,091,082
21.	Maryland.....	MD	8,573,707	2,110	749,535	.0	.0	9,325,352
22.	Massachusetts.....	MA	8,834,336	.0	412,903	.0	241,899	9,489,138
23.	Michigan.....	MI	13,035,426	.0	1,184,250	.0	.0	14,219,676
24.	Minnesota.....	MN	6,543,645	.0	402,732	.0	50,827	6,997,204
25.	Mississippi.....	MS	2,589,613	.0	188,235	.0	.0	2,777,848
26.	Missouri.....	MO	7,111,762	340	445,557	.0	34,507	7,592,166
27.	Montana.....	MT	2,674,302	.0	96,260	.0	.0	2,770,562
28.	Nebraska.....	NE	4,459,367	.0	137,441	.0	.0	4,596,808
29.	Nevada.....	NV	1,660,023	.0	121,010	.0	.0	1,781,033
30.	New Hampshire.....	NH	2,326,547	.0	161,106	.0	.0	2,487,653
31.	New Jersey.....	NJ	9,931,428	266	839,903	.0	.0	10,771,597
32.	New Mexico.....	NM	1,134,042	.0	55,509	.0	.0	1,189,551
33.	New York.....	NY	870,588	.0	60,692	.0	.0	931,280
34.	North Carolina.....	NC	11,660,269	9,205	874,153	.0	.0	12,543,627
35.	North Dakota.....	ND	1,165,864	.0	66,362	.0	.0	1,232,226
36.	Ohio.....	OH	30,229,990	.0	1,890,207	.0	1,727,601	33,847,798
37.	Oklahoma.....	OK	5,218,714	.0	460,920	.0	.0	5,679,634
38.	Oregon.....	OR	6,015,776	.0	375,060	.0	.0	6,390,836
39.	Pennsylvania.....	PA	14,743,857	64,877	1,519,422	.0	.0	16,328,156
40.	Rhode Island.....	RI	2,740,175	.0	79,372	.0	.0	2,819,547
41.	South Carolina.....	SC	4,149,071	.0	229,831	.0	.0	4,378,902
42.	South Dakota.....	SD	496,189	.0	94,898	.0	.0	591,087
43.	Tennessee.....	TN	15,002,069	.0	948,174	.0	.0	15,950,243
44.	Texas.....	TX	33,163,650	85	2,140,507	.0	.0	35,304,242
45.	Utah.....	UT	6,713,378	.0	357,291	.0	.0	7,070,669
46.	Vermont.....	VT	562,802	.0	16,041	.0	.0	578,843
47.	Virginia.....	VA	9,668,774	210	435,752	.0	.0	10,104,736
48.	Washington.....	WA	7,938,250	.0	501,631	.0	.0	8,439,881
49.	West Virginia.....	WV	1,228,001	.0	244,302	.0	.0	1,472,303
50.	Wisconsin.....	WI	5,853,318	.0	609,503	.0	.0	6,462,821
51.	Wyoming.....	WY	896,543	.0	26,454	.0	.0	922,997
52.	American Samoa.....	AS	.0	.0	.0	.0	.0	.0
53.	Guam.....	GU	73,992	.0	.0	.0	.0	73,992
54.	Puerto Rico.....	PR	3,636,259	.0	1,092,727	.0	.0	4,728,986
55.	US Virgin Islands.....	VI	20,380	.0	.0	.0	.0	20,380
56.	Northern Mariana Islands.....	MP	.0	.0	.0	.0	.0	.0
57.	Canada.....	CAN	6,617	.0	.0	.0	.0	6,617
58.	Aggregate Other Alien.....	OT	27,737	.0	2,967	.0	.0	30,704
59.	Totals.....		394,434,480	93,924	27,191,083	.0	2,282,452	424,001,939

OHIO NATIONAL LIFE ASSURANCE CORPORATION

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	16
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)	Is an SCA Filing Required? (Y/N)	*
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		N.....	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.....	N.....	0.....
0704	Ohio National Mutual Holdings, Inc.	0.....	AA-0056843.	0	0		Sycamore Re, Ltd.....	CYM.....	IA.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.....	N.....	0.....
0704	Ohio National Mutual Holdings, Inc.	0.....	46-3873878..	0	0		Ohio National Foreign Holdings, LLC.....	DE.....	NIA.....	Sycamore Re LTD.....	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.....	N.....	0.....
0704	Ohio National Mutual Holdings, Inc.	0.....	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.....	N.....	0.....
0704	Ohio National Mutual Holdings, Inc.	0.....	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.....	N.....	0.....
0704	Ohio National Mutual Holdings, Inc.	0.....	31-1702660..	0	0		ON Global Holdings, SMLLC.....	DE.....	NIA.....	ON Netherlands Holdings B.V.....	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.....	N.....	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.....	N.....	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.....	N.....	0.....

OHIO NATIONAL LIFE ASSURANCE CORPORATION

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	16
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)	Is an SCA Filing Required? (Y/N)	*
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.....	N.....	0.....
0704	Ohio National Mutual Holdings, Inc.	0.....	0.....	0	0		O.N. International do Brasil Participações Ltda..	BRA.....	NIA.....	ON Netherlands Holdings B.V.....	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.....	N.....	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.....	N.....	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.....	N.....	0.....
0704	Ohio National Mutual Holdings, Inc.	0.....	82-2868171..	0	0		Princeton Captive Re, Inc.....	OH.....	NIA.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.....	N.....	0.....
0704	Ohio National Mutual Holdings, Inc.	89206...	31-0962495..	0	0		Ohio National Life Assurance Corporation.....	OH.....	RE.....	The Ohio National Life Insurance Company....	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.....	N.....	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.....	N.....	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.....	N.....	0.....

OHIO NATIONAL LIFE ASSURANCE CORPORATION

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	16
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)	Is an SCA Filing Required? (Y/N)	*
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.....	N.....	0.....
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.....	N.....	0.....
0704	Ohio National Mutual Holdings, Inc.	16481...	83-2532656..	0	0		Sunrise Captive Re, LLC.....	OH.....	IA.....	The Ohio National Life Insurance Company....	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.....	N.....	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.....	N.....	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.....	Y.....	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.....	Y.....	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.....	N.....	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.....	N.....	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.....	N.....	0.....

OHIO NATIONAL LIFE ASSURANCE CORPORATION

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	16
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)	Is an SCA Filing Required? (Y/N)	*
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.....	N.....	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.....	N.....	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.....	N.....	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 Services, Inc.....	0	0	0	0	0	0	.....	.....0	0	0
67172.....	31-0397080.....	The Ohio National Life Insurance Company.....	27,000,000	0	0	0	59,927,460	(30,276,092)	.....	.....0	56,651,368	(918,878,459)
89206.....	31-0962495.....	Ohio National Life Assurance Corporation.....	(27,000,000)	0	0	0	(59,930,000)	90,648,466	.....	.....0	3,718,466	1,968,282,161
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.....	06-1187459.....	Fiduciary Capital Management, 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
85472.....	13-2740556.....	National Security Life and Annuity Co.....	0	0	0	0	0	0	.....	.....0	0	0
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	1,591	0	.....	.....0	1,591	0
00000.....	31-0742113.....	The O.N. Equity Sales Company.....	0	0	0	0	949	0	.....	.....0	949	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.....	AA-0056843.....	Sycamore Re, Ltd.....	0	0	0	0	0	0	.....	.....0	0	0
13575.....	26-3791519.....	Montgomery Re, Inc.....	0	0	0	0	0	(6,425,837)	.....	.....0	(6,425,837)	(303,262,320)
00000.....	26-4812790.....	Financial Way Reality, Inc.....	0	0	0	0	0	0	.....	.....0	0	0
15363.....	80-0955278.....	Kenwood Re, Inc.....	0	0	0	0	0	(27,848,835)	.....	.....0	(27,848,835)	(563,339,371)
15855.....	47-4249160.....	Camargo Re Captive, Inc.....	0	0	0	0	0	(26,097,702)	.....	.....0	(26,097,702)	(182,802,011)
16481.....	83-2532656.....	Sunrise Captive Re, LLC.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	46-3873878.....	O. N. 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.....	00-0000000.....	Ohio National Seguros de Vida S.A.....	0	0	0	0	0	0	.....	.....0	0	0
00000.....	46-5464819.....	ONTech, LLC.....	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.....	82-2868171.....	Princeton Captive Re, Inc.....	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 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 Adjustments to the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit (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 regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	YES

The following supplemental reports are required to be filed as part of your statement filing **if your company is engaged in the type of business covered by the supplement. 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?	NO
27.	Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	NO
28.	Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?	NO
29.	Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
30.	Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
31.	Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
32.	Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
33.	Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?	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 partner 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 VM-20 Reserves Supplement be filed with the state of domicile and the NAIC by March 1?	YES
APRIL FILING		
41.	Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by the Valuation Manual be filed with the state of domicile by April 1?	YES
42.	Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?	NO
43.	Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?	YES
44.	Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
45.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
46.	Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1?	YES
47.	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
48.	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
49.	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
50.	Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?	NO
51.	Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
52.	Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1?	NO

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.

AUGUST FILING

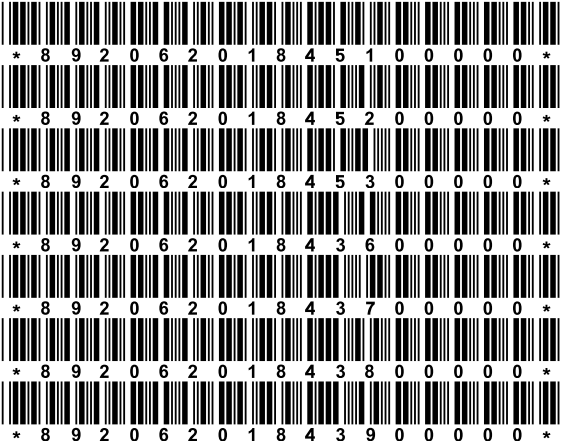
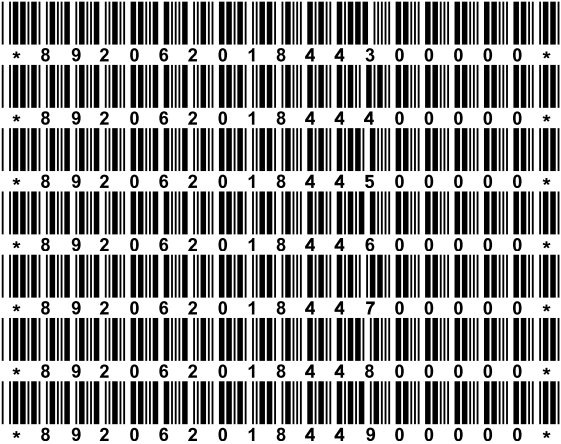
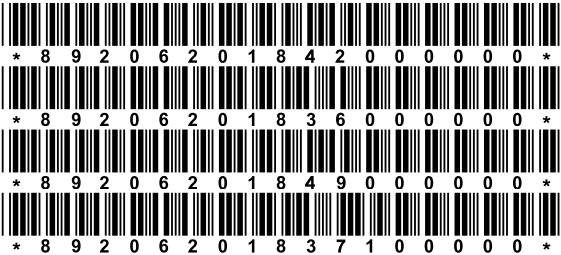
53. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?

YES

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.
25.
26. The data for this supplement is not required to be filed.
27. The data for this supplement is not required to be filed.
28. The data for this supplement is not required to be filed.
29. The data for this supplement is not required to be filed.
30. The data for this supplement is not required to be filed.
31. The data for this supplement is not required to be filed.
32. The data for this supplement is not required to be filed.
33.
34. The data for this supplement is not required to be filed.

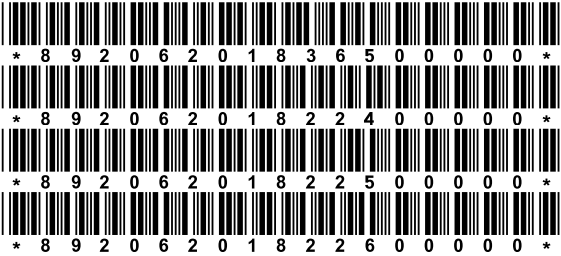


OHIO NATIONAL LIFE ASSURANCE CORPORATION
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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.

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



43.

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



45.

46.

47.

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



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



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



51.

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



53.

**Overflow Page
NONE**

**Overflow Page
NONE**

* 8 9 2 0 6 2 0 1 8 4 5 6 0 0 1 0 0 *

For the Year Ended December, 31, 2018

(To Be Filed by March 1)

NAIC Company Code: 89206

456.1

NONE

[illegible]

OHIO NATIONAL LIFE ASSURANCE CORPORATION
VM-20 RESERVES SUPPLEMENT - PART 2

Reserves for Policies Not Based on VM-20 as a Result of the Three Year Transition Period
For the Year Ended December 31, 2018
(To Be filed by March 1)
(\$000 Omitted Except for Number of Policies)

Three Transition Period						
	Prior Year		Current Year			
	1 Gross Reserve	2 Net Reserve	3 Gross Reserve	4 Net Reserve	5 Number of Policies	6 Face Amount
1. Life Insurance Reserves						
1.1 Term Life.....	18,051	14,814	47,781	42,258	28,033	22,987,022
1.2 Universal Life with Secondary Guarantee.....	3,387	3,125	19,673	18,916	2,968	1,318,874
1.3 Non-participating Whole Life.....	0	0	0	0	0	0
1.4 Participating Whole Life.....	0	0	0	0	0	0
1.5 Universal Life without Secondary Guarantee.....	33,293	33,272	41,485	41,464	190	93,291
1.6 Variable Universal Life.....	-	-	464	463	36	14,300
1.7 Variable Life.....	0	0	0	0	0	0
1.8 Indexed Life.....	0	0	0	0	0	0
1.9 Aggregate write-ins for other products.....	0	0	0	0	0	0
2. Total Life Insurance Reserves (Sum of Lines 1.1 through 1.9).....	54,731	51,211	109,403	103,101	31,227	24,413,487
DETAILS OF WRITE-INS						
1.901	0	0	0	0	0	0
1.902	0	0	0	0	0	0
1.903	0	0	0	0	0	0
1.998 Summary of remaining write-ins for Line 1.9 from overflow page.....	0	0	0	0	0	0
1.999 Totals (Lines 1.901 through 1.903 plus 1.998) (Line 1.9 above).....	0	0	0	0	0	0

VM-20 RESERVES SUPPLEMENT - PART 3

Life PBR Exemption
For the Year Ended December 31, 2018
(To be Filed by March 1)

Life PBR Exemption as Defined in the NAIC Adopted Valuation Manual (VM)

1. Has the company filed and been granted a Life PBR Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile?

Yes [] No []
2. If the response to Question 1 is "Yes", then check the source of the granted "Life PBR Exemption" definition. (Check either 2.1, 2.2 or 2.3)

2.1 NAIC Adopted VM []

2.2 State Statute SVL [] Complete items "a" and "b", as appropriate.

a. Is the criteria in the State Statute (SVL) different from the NAIC adopted VM?

Yes [] No []

b. If the answer to "a" above is yes, provide the criteria the state has used to grant the Life PBR Exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):

NONE
- 2.3 State Regulation [] Complete items "a" and "b", as appropriate.

a. Is the criteria in the State Regulation different from the NAIC adopted VM?

Yes [] No []

b. If the answer to "a" above is yes, provide the criteria the state has used to grant the Life PBR Exemption (e.g., Group/Legal Entity criteria) and the minimum reserve requirements that are required by the state of domicile (if the minimum reserve requirements are the same as the Adopted VM, write SAME AS NAIC VM):

VM-20 RESERVES SUPPLEMENT - PART 4

Other Exclusions from Life PBR
For the Year Ended December 31, 2018
(To be Filed by March 1)

1. Has the company filed and been granted a Single State Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile?

Yes [] No []

If the answer to question 1 is "Yes" please discuss any business not covered under the Single Exemption.

NONE
2. If the answer to question 1 is "Yes", does the company have risks for policies issued outside its state of domicile?

Yes [] No []

If the answer to question 2 is "Yes" please discuss the risks for policies issued outside the state of domicile, how those risks came to be a responsibility of the company, and why the company would still be considered a Single State Company with such risks.
3. Is all of the company's individual life insurance business excluded from the requirements of VM-20 pursuant to Section II.B of the Valuation Manual?

Yes [] No []



SCHEDULE O SUPPLEMENT
For the year ended December 31, 2018
(To Be Filled In)

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	2	3	4	5
	2014	2015	2016	2017	2018 (a)
1. Prior.....	0	0	0	0	0
2. 2014.....	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. Prior.....	7,766	9,534	9,216	9,000	8,421
2. 2014.....	473	396	323	287	171
3. 2015.....	XXX	146	637	596	546
4. 2016.....	XXX	XXX	160	482	468
5. 2017.....	XXX	XXX	XXX	86	632
6. 2018.....	XXX	XXX	XXX	XXX	171

Section C - Credit Accident and Health

1. Prior.....	0	0	0	0	0
2. 2014.....	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0

(a) See the Annual Audited Financial Reports 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 2014	2 2015	3 2016	4 2017	5 2018
1. Prior.....	0	0	0	0	0
2. 2014.....	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0
6. 2018.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. Prior.....	0	0	0	0	0
2. 2014.....	265	0	0	0	0
3. 2015.....	XXX	351	0	0	0
4. 2016.....	XXX	XXX	145	0	0
5. 2017.....	XXX	XXX	XXX	136	0
6. 2018.....	XXX	XXX	XXX	XXX	237

Section C - Credit Accident and Health

1. Prior.....	0	0	0	0	0
2. 2014.....	0	0	0	0	0
3. 2015.....	XXX	0	0	0	0
4. 2016.....	XXX	XXX	0	0	0
5. 2017.....	XXX	XXX	XXX	0	0
6. 2018.....	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 2014	2 2015	3 2016	4 2017	5 2018
1. 2014.....	0	0	0	XXX	XXX
2. 2015.....	XXX	0	0	0	XXX
3. 2016.....	XXX	XXX	0	0	0
4. 2017.....	XXX	XXX	XXX	0	0
5. 2018.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. 2014.....	4,482	2,473	1,574	XXX	XXX
2. 2015.....	XXX	7,356	6,726	6,051	XXX
3. 2016.....	XXX	XXX	6,037	3,250	2,824
4. 2017.....	XXX	XXX	XXX	5,005	3,338
5. 2018.....	XXX	XXX	XXX	XXX	6,091

Section C - Credit Accident and Health

1. 2014.....	0	0	0	XXX	XXX
2. 2015.....	XXX	0	0	0	XXX
3. 2016.....	XXX	XXX	0	0	0
4. 2017.....	XXX	XXX	XXX	0	0
5. 2018.....	XXX	XXX	XXX	XXX	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION
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 Liabilities Reserve Outstanding at End of Year				
	1 2014	2 2015	3 2016	4 2017	5 2018
1. 2014.....	0	0	0	0	0
2. 2015.....	XXX	0	0	0	0
3. 2016.....	XXX	XXX	0	0	0
4. 2017.....	XXX	XXX	XXX	0	0
5. 2018.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. 2014.....	4,482	2,473	1,574	1,368	1,131
2. 2015.....	XXX	7,356	6,726	6,051	5,483
3. 2016.....	XXX	XXX	6,037	3,250	2,824
4. 2017.....	XXX	XXX	XXX	5,005	3,338
5. 2018.....	XXX	XXX	XXX	XXX	6,091

Section C - Credit Accident and Health

1. 2014.....	0	0	0	0	0
2. 2015.....	XXX	0	0	0	0
3. 2016.....	XXX	XXX	0	0	0
4. 2017.....	XXX	XXX	XXX	0	0
5. 2018.....	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.....	14,972
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.....	65,157
11. Total.....		80,129

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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