



ANNUAL STATEMENT
For the Year Ended December 31, 2019
of the Condition and Affairs of the
OHIO NATIONAL LIFE INSURANCE COMPANY

NAIC Group Code.....0704, 0704
(Current Period) (Prior Period)

NAIC Company Code..... 67172

Employer's ID Number..... 31-0397080

Organized under the Laws of OH

State of Domicile or Port of Entry OH

Country of Domicile US

Licensed as Business Type: Life, Accident & Health

Incorporated/Organized..... September 9, 1909

Commenced Business..... October 10, 1910

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)

513-794-6100-6015
(Area Code) (Telephone Number) (Extension)

amber_roberts@ohionational.com
(E-Mail Address)

513-794-4622
(Fax Number)

OFFICERS

Name	Title	Name	Title
Barbara Ann Turner	President & Chief Operating Officer	Therese Susan McDonough	Secretary
Doris Lee Paul	Treasurer	Kush Vijay Kotecha	Senior Vice President & Chief Corporate Actuary
OTHER			
Gary Thomas Huffman	Chairman & Chief Executive Officer	Rocky Coppola	Senior Vice President & Chief Financial Officer
Anthony Gerard Esposito	Senior Vice President & Chief Human Resources 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

DIRECTORS OR TRUSTEES

Jack Elliott Brown	Victoria Buyniski Gluckman	John Weber Hayden	Gary Thomas Huffman
James Francis Orr	John Russell Phillips	John Michael Schlotman	James Charles Votruba
Gary Edward Wendlandt			

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) Barbara Ann Turner	(Signature) Therese Susan McDonough	(Signature) Doris Lee Paul
(Printed Name) President & Chief Operating Officer	(Printed Name) Secretary	(Printed Name) Treasurer
(Title)	(Title)	(Title)

Subscribed and sworn to before me
This _____ day of February 2020

a. Is this an original filing?
b. If no

Yes [X] No []
1. State the amendment number
2. Date filed
3. Number of pages attached

Lucas A. Compton, Notary Public
December 23, 2023

OHIO NATIONAL LIFE INSURANCE COMPANY



DIRECT BUSINESS IN Other Alien # 1 DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	147,824	0	0	0	147,824
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).....	147,824	0	0	0	147,824
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	38	0	0	0	38
6.2 Applied to pay renewal premiums.....	1,190	0	0	0	1,190
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	40,019	0	0	0	40,019
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	41,247	0	0	0	41,247
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).....	41,247	0	0	0	41,247
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	0	0	0	0	0
10. Matured endowments.....	4,623	0	0	0	4,623
11. Annuity benefits.....	146,000	0	1,286	0	147,286
12. Surrender values and withdrawals for life contracts.....	13,119	0	0	0	13,119
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.....	163,742	0	1,286	0	165,028

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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).....	40	10,549,520	0	0	0	0	0	0	40	10,549,520
23. In force December 31 of current year.....	40	10,549,520	0	(a).....0	0	0	0	0	40	10,549,520

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	18,032	18,045	3,769	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).....	18,032	18,045	3,769	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	18,032	18,045	3,769	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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF ALASKA DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	306,495	0	0	0	306,495
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	962	XXX	0	XXX	962
4. Other considerations.....	0	0	31,127	0	31,127
5. Totals (Sum of Lines 1 to 4).....	307,457	0	31,127	0	338,583
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	1,008	0	0	0	1,008
6.2 Applied to pay renewal premiums.....	7,224	0	0	0	7,224
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	43,436	0	0	0	43,436
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	51,669	0	0	0	51,669
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).....	51,669	0	0	0	51,669
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	0	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	192,310	0	67,190	0	259,500
12. Surrender values and withdrawals for life contracts.....	405,906	0	3,222	0	409,127
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.....	598,216	0	70,412	0	668,627

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	57	6,464,336	0	(a).....0	0	0	0	0	57	6,464,336
21. Issued during year.....	6	3,774,603	0	0	0	0	0	0	6	3,774,603
22. Other changes to in force (Net).....	0	2,872,201	0	0	0	0	0	0	0	2,872,201
23. In force December 31 of current year.....	63	13,111,140	0	(a).....0	0	0	0	0	63	13,111,140

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	7,421	7,426	1,831	45,080	45,080
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).....	7,421	7,426	1,831	45,080	45,080
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	7,421	7,426	1,831	45,080	45,080

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF ALABAMA DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	9,343,916	.....0	.....0	.....0	9,343,916
2. Annuity considerations.....	406,993	.....0	.....0	.....0	406,993
3. Deposit-type contract funds.....	2,378	XXX.....	.....0	XXX.....	2,378
4. Other considerations.....	.....0	.....0	2,118,230	.....0	2,118,230
5. Totals (Sum of Lines 1 to 4).....	9,753,287	.....0	2,118,230	.....0	11,871,516
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	11,343	.....0	.....0	.....0	11,343
6.2 Applied to pay renewal premiums.....	74,798	.....0	.....0	.....0	74,798
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,602,521	.....0	.....0	.....0	1,602,521
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,688,663	.....0	.....0	.....0	1,688,663
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).....	1,688,663	.....0	.....0	.....0	1,688,663
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	2,593,067	.....0	.....0	.....0	2,593,067
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	6,110,329	.....0	25,034	.....0	6,135,362
12. Surrender values and withdrawals for life contracts.....	13,985,713	.....0	3,111,803	.....0	17,097,515
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.....	22,689,108	.....0	3,136,836	.....0	25,825,945

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	1	88,789	.....0	.....0	.....0	.....0	.....0	.....0	1	88,789
17. Incurred during current year.....	13	2,123,912	.....0	.....0	.....0	.....0	.....0	.....0	13	2,123,912
Settled during current year:										
18.1 By payment in full.....	14	2,212,701	.....0	.....0	.....0	.....0	.....0	.....0	14	2,212,701
18.2 By payment on compromised claims.....	0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	0	.....0
18.3 Totals paid.....	14	2,212,701	.....0	.....0	.....0	.....0	.....0	.....0	14	2,212,701
18.4 Reduction by compromise.....	0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	0	.....0
18.5 Amount rejected.....	0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	0	.....0
18.6 Total settlements.....	14	2,212,701	.....0	.....0	.....0	.....0	.....0	.....0	14	2,212,701
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.....	1,572	439,745,546	.....0	(a).....0	.....0	10,000	.....0	.....0	1,572	439,755,546
21. Issued during year.....	77	22,388,115	.....0	.....0	.....0	.....0	.....0	.....0	77	22,388,115
22. Other changes to in force (Net).....	(84)	(28,523,099)	.....0	.....0	.....0	.....0	.....0	.....0	(84)	(28,523,099)
23. In force December 31 of current year.....	1,565	433,610,562	.....0	(a).....0	.....0	10,000	.....0	.....0	1,565	433,620,562

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	142,189	142,292	29,813	131,883	136,671
25.2 Guaranteed renewable (b).....	9,751	9,758	.....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).....	151,939	152,050	29,813	131,883	136,671
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	151,939	152,050	29,813	131,883	136,671

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	5,103,745	.....0	.....0	.....0	5,103,745
2. Annuity considerations.....	134,397	.....0	.....0	.....0	134,397
3. Deposit-type contract funds.....	31,171	XXX.....0	.....0	XXX.....0	31,171
4. Other considerations.....	.....0	.....0	610,617	.....0	610,617
5. Totals (Sum of Lines 1 to 4).....	5,269,313	.....0	610,617	.....0	5,879,930
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	5,651	.....0	.....0	.....0	5,651
6.2 Applied to pay renewal premiums.....	81,070	.....0	.....0	.....0	81,070
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	673,707	.....0	.....0	.....0	673,707
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	760,428	.....0	.....0	.....0	760,428
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).....	760,428	.....0	.....0	.....0	760,428
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	105,001	.....0	.....0	.....0	105,001
10. Matured endowments.....	3,759	.....0	.....0	.....0	3,759
11. Annuity benefits.....	6,703,986	.....0	140,800	.....0	6,844,785
12. Surrender values and withdrawals for life contracts.....	12,216,852	.....0	206,181	.....0	12,423,033
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.....	19,029,598	.....0	346,980	.....0	19,376,578

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	.....14	269,216	.....0	.....0	.....0	.....0	.....0	.....0	.....14	269,216
Settled during current year:										
18.1 By payment in full.....	.....14	269,216	.....0	.....0	.....0	.....0	.....0	.....0	.....14	269,216
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....14	269,216	.....0	.....0	.....0	.....0	.....0	.....0	.....14	269,216
18.4 Reduction by compromise.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.5 Amount rejected.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.6 Total settlements.....	.....14	269,216	.....0	.....0	.....0	.....0	.....0	.....0	.....14	269,216
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.....	.....902	247,128,710	.....0	(a).....0	.....0	.....0	.....0	.....0	.....902	247,128,710
21. Issued during year.....	.....41	21,823,417	.....0	.....0	.....0	.....0	.....0	.....0	.....41	21,823,417
22. Other changes to in force (Net).....	.....(55)	(12,825,272)	.....0	.....0	.....0	.....0	.....0	.....0	.....(55)	(12,825,272)
23. In force December 31 of current year.....	.....888	256,126,855	.....0	(a).....0	.....0	.....0	.....0	.....0	.....888	256,126,855

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	54,881	54,921	13,217	.....0	.....0
25.2 Guaranteed renewable (b).....	5,049	5,053	.....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).....	59,931	59,974	13,217	.....0	.....0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	59,931	59,974	13,217	.....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 INSURANCE COMPANY



DIRECT BUSINESS IN AMERICAN SAMOA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

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/REFUNDS TO MEMBERS					
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
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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	13,396,034	.....0	.....0	.....0	13,396,034
2. Annuity considerations.....	(274,415)	.....0	.....0	.....0	(274,415)
3. Deposit-type contract funds.....	14,327	XXX.....	.....0	XXX.....	14,327
4. Other considerations.....	.....0	.....0	843,196	.....0	843,196
5. Totals (Sum of Lines 1 to 4).....	13,135,947	.....0	843,196	.....0	13,979,143
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	54,694	.....0	.....0	.....0	54,694
6.2 Applied to pay renewal premiums.....	110,282	.....0	.....0	.....0	110,282
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,617,122	.....0	.....0	.....0	1,617,122
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,782,098	.....0	.....0	.....0	1,782,098
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).....	1,782,098	.....0	.....0	.....0	1,782,098
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	738,211	.....0	.....0	.....0	738,211
10. Matured endowments.....	17,143	.....0	.....0	.....0	17,143
11. Annuity benefits.....	15,946,538	.....0	812,826	.....0	16,759,364
12. Surrender values and withdrawals for life contracts.....	40,472,624	.....0	8,844,456	.....0	49,317,081
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.....	57,174,516	.....0	9,657,283	.....0	66,831,799

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	2	4,436	.....0	.....0	.....0	.....0	.....0	.....0	2	4,436
17. Incurred during current year.....	1	270,142	.....0	.....0	.....0	.....0	.....0	.....0	1	270,142
Settled during current year:										
18.1 By payment in full.....	3	274,578	.....0	.....0	.....0	.....0	.....0	.....0	3	274,578
18.2 By payment on compromised claims.....	0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	0	.....0
18.3 Totals paid.....	3	274,578	.....0	.....0	.....0	.....0	.....0	.....0	3	274,578
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	274,578	.....0	.....0	.....0	.....0	.....0	.....0	3	274,578
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.....	1,348	453,080,977	.....0	(a).....0	.....0	.....0	.....0	.....0	1,348	453,080,977
21. Issued during year.....	98	54,351,711	.....0	.....0	.....0	.....0	.....0	.....0	98	54,351,711
22. Other changes to in force (Net).....	(60)	(14,247,207)	.....0	.....0	.....0	.....0	.....0	.....0	(60)	(14,247,207)
23. In force December 31 of current year.....	1,386	493,185,481	.....0	(a).....0	.....0	.....0	.....0	.....0	1,386	493,185,481

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	73,370	73,423	13,920	92,000	96,500
25.2 Guaranteed renewable (b).....	15,884	15,896	.....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).....	89,254	89,319	13,920	92,000	96,500
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	89,254	89,319	13,920	92,000	96,500

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF CALIFORNIA DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	47,421,868	.....0	.....0	.....0	47,421,868
2. Annuity considerations.....	3,968,345	.....0	.....0	.....0	3,968,345
3. Deposit-type contract funds.....	1,732,868	XXX.....0	.....0	XXX.....0	1,732,868
4. Other considerations.....	.....0	.....0	7,597,447	.....0	7,597,447
5. Totals (Sum of Lines 1 to 4).....	53,123,081	.....0	7,597,447	.....0	60,720,527
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	101,531	.....0	.....0	.....0	101,531
6.2 Applied to pay renewal premiums.....	248,914	.....0	.....0	.....0	248,914
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	6,799,153	.....0	.....0	.....0	6,799,153
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	7,149,598	.....0	.....0	.....0	7,149,598
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).....	7,149,598	.....0	.....0	.....0	7,149,598
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,088,502	.....0	.....0	.....0	1,088,502
10. Matured endowments.....	8,558	.....0	.....0	.....0	8,558
11. Annuity benefits.....	50,421,763	.....0	541,513	.....0	50,963,276
12. Surrender values and withdrawals for life contracts.....	160,850,838	.....0	31,988,394	.....0	192,839,232
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.....	212,369,661	.....0	32,529,907	.....0	244,899,569

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	16	1,924,247	.....0	.....0	.....0	.....0	.....0	.....0	16	1,924,247
17. Incurred during current year.....	29	536,569	.....0	.....0	.....0	.....0	.....0	.....0	29	536,569
Settled during current year:										
18.1 By payment in full.....	31	1,331,932	.....0	.....0	.....0	.....0	.....0	.....0	31	1,331,932
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	31	1,331,932	.....0	.....0	.....0	.....0	.....0	.....0	31	1,331,932
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	1,331,932	.....0	.....0	.....0	.....0	.....0	.....0	31	1,331,932
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	14	1,128,884	.....0	.....0	.....0	.....0	.....0	.....0	14	1,128,884
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	5,274	1,813,466,344	.....0	(a).....0	.....0	1,000	.....0	.....0	5,274	1,813,467,344
21. Issued during year.....	606	232,897,288	.....0	.....0	.....0	.....0	.....0	.....0	606	232,897,288
22. Other changes to in force (Net).....	(273)	(91,166,546)	.....0	.....0	.....0	.....0	.....0	.....0	(273)	(91,166,546)
23. In force December 31 of current year.....	5,607	1,955,197,086	.....0	(a).....0	.....0	1,000	.....0	.....0	5,607	1,955,198,086

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	615,637	616,084	121,857	370,255	385,678
25.2 Guaranteed renewable (b).....	81,206	81,265	.....0	149,714	132,094
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).....	696,843	697,349	121,857	519,969	517,772
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	696,843	697,349	121,857	519,969	517,772

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF CANADA DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	51,920	0	0	0	51,920
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	100	XXX	0	XXX	100
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	52,020	0	0	0	52,020
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	103	0	0	0	103
6.2 Applied to pay renewal premiums.....	128	0	0	0	128
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	10,923	0	0	0	10,923
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	11,154	0	0	0	11,154
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).....	11,154	0	0	0	11,154
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	0	0	0	0	0
10. Matured endowments.....	2,902	0	0	0	2,902
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	7,627	0	0	0	7,627
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.....	10,529	0	0	0	10,529

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	22	5,836,191	0	(a).....0	0	0	0	0	22	5,836,191
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	5	(733,058)	0	0	0	0	0	0	5	(733,058)
23. In force December 31 of current year.....	27	5,103,133	0	(a).....0	0	0	0	0	27	5,103,133

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	510	510	84	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).....	510	510	84	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	510	510	84	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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF COLORADO DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	37,265,950	.....0	.....0	.....0	37,265,950
2. Annuity considerations.....	1,689,118	.....0	.....0	.....0	1,689,118
3. Deposit-type contract funds.....	508,289	XXX.....	.....0	XXX.....	508,289
4. Other considerations.....	.....0	.....0	512,270	.....0	512,270
5. Totals (Sum of Lines 1 to 4).....	39,463,358	.....0	512,270	.....0	39,975,628
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	46,343	.....0	.....0	.....0	46,343
6.2 Applied to pay renewal premiums.....	246,965	.....0	.....0	.....0	246,965
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	5,910,516	.....0	.....0	.....0	5,910,516
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	6,203,825	.....0	.....0	.....0	6,203,825
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).....	6,203,825	.....0	.....0	.....0	6,203,825
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	542,737	.....0	.....0	.....0	542,737
10. Matured endowments.....	7,591	.....0	.....0	.....0	7,591
11. Annuity benefits.....	12,385,676	.....0	42,794	.....0	12,428,470
12. Surrender values and withdrawals for life contracts.....	30,661,922	.....0	4,006,247	.....0	34,668,169
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.....	43,597,925	.....0	4,049,041	.....0	47,646,967

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	.....18	203,392	.....0	.....0	.....0	.....0	.....0	.....0	.....18	203,392
Settled during current year:										
18.1 By payment in full.....	.....18	203,392	.....0	.....0	.....0	.....0	.....0	.....0	.....18	203,392
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....18	203,392	.....0	.....0	.....0	.....0	.....0	.....0	.....18	203,392
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	203,392	.....0	.....0	.....0	.....0	.....0	.....0	.....18	203,392
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.....	2,478	1,152,162,424	.....0	(a).....0	.....0	.....0	.....0	.....0	2,478	1,152,162,424
21. Issued during year.....	190	113,567,319	.....0	.....0	.....0	.....0	.....0	.....0	190	113,567,319
22. Other changes to in force (Net).....	(156)	(49,482,890)	.....0	.....0	.....0	.....0	.....0	.....0	(156)	(49,482,890)
23. In force December 31 of current year.....	2,512	1,216,246,853	.....0	(a).....0	.....0	.....0	.....0	.....0	2,512	1,216,246,853

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	218,125	218,283	53,632	319,960	323,513
25.2 Guaranteed renewable (b).....	106,394	106,471	.....0	72,190	73,151
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).....	324,518	324,754	53,632	392,149	396,664
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	324,518	324,754	53,632	392,149	396,664

(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 INSURANCE COMPANY



* 6 7 1 7 2 2 0 1 9 4 3 0 0 7 1 0 0 *

DIRECT BUSINESS IN THE STATE OF CONNECTICUT DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,777,744	.....0	.....0	.....0	4,777,744
2. Annuity considerations.....	602,740	.....0	.....0	.....0	602,740
3. Deposit-type contract funds.....	1,217	....XXX.....	.....0	....XXX.....	1,217
4. Other considerations.....	.....0	.....0	1,260,213	.....0	1,260,213
5. Totals (Sum of Lines 1 to 4).....	5,381,701	.....0	1,260,213	.....0	6,641,914
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	4,385	.....0	.....0	.....0	4,385
6.2 Applied to pay renewal premiums.....	23,114	.....0	.....0	.....0	23,114
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	647,022	.....0	.....0	.....0	647,022
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	674,521	.....0	.....0	.....0	674,521
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).....	674,521	.....0	.....0	.....0	674,521
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	392,616	.....0	.....0	.....0	392,616
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	10,630,743	.....0	2,273,786	.....0	12,904,528
12. Surrender values and withdrawals for life contracts.....	25,195,584	.....0	4,609,182	.....0	29,804,765
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.....	36,218,942	.....0	6,882,967	.....0	43,101,910

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	.....2	24,115	.....0	.....0	.....0	.....0	.....0	.....0	.....2	24,115
17. Incurred during current year.....	.....3	375,000	.....0	.....0	.....0	.....0	.....0	.....0	.....3	375,000
Settled during current year:										
18.1 By payment in full.....	.....2	364,347	.....0	.....0	.....0	.....0	.....0	.....0	.....2	364,347
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....2	364,347	.....0	.....0	.....0	.....0	.....0	.....0	.....2	364,347
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	364,347	.....0	.....0	.....0	.....0	.....0	.....0	.....2	364,347
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.....3	34,768	.....0	.....0	.....0	.....0	.....0	.....0	.....3	34,768
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	.....658	170,069,131	.....0	(a).....0	.....0	.....0	.....0	.....0	.....658	170,069,131
21. Issued during year.....	.....56	18,017,991	.....0	.....0	.....0	.....0	.....0	.....0	.....56	18,017,991
22. Other changes to in force (Net).....	.....(29)	(10,122,936)	.....0	.....0	.....0	.....0	.....0	.....0	.....(29)	(10,122,936)
23. In force December 31 of current year.....	.....685	177,964,186	.....0	(a).....0	.....0	.....0	.....0	.....0	.....685	177,964,186

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	142,673	142,776	25,144	72,000	71,869
25.2 Guaranteed renewable (b).....	9,241	9,248	.....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).....	151,913	152,024	25,144	72,000	71,869
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	151,913	152,024	25,144	72,000	71,869

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	783,901	.....0	.....0	.....0	783,901
2. Annuity considerations.....	3,612	.....0	.....0	.....0	3,612
3. Deposit-type contract funds.....	11	XXX.....	.....0	XXX.....	11
4. Other considerations.....	.....0	.....0	329,544	.....0	329,544
5. Totals (Sum of Lines 1 to 4).....	787,524	.....0	329,544	.....0	1,117,068
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	388	.....0	.....0	.....0	388
6.2 Applied to pay renewal premiums.....	12,554	.....0	.....0	.....0	12,554
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	157,059	.....0	.....0	.....0	157,059
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	170,001	.....0	.....0	.....0	170,001
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).....	170,001	.....0	.....0	.....0	170,001
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	63,470	.....0	.....0	.....0	63,470
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	2,857,247	.....0	.....0	.....0	2,857,247
12. Surrender values and withdrawals for life contracts.....	2,369,634	.....0	142,017	.....0	2,511,652
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.....	5,290,351	.....0	142,017	.....0	5,432,368

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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	50,000	.....0	.....0	.....0	.....0	.....0	.....0	.....1	50,000
Settled during current year:										
18.1 By payment in full.....	.....1	50,000	.....0	.....0	.....0	.....0	.....0	.....0	.....1	50,000
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....1	50,000	.....0	.....0	.....0	.....0	.....0	.....0	.....1	50,000
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	50,000	.....0	.....0	.....0	.....0	.....0	.....0	.....1	50,000
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.....	.....117	38,596,242	.....0	(a).....0	.....0	.....0	.....0	.....0	.....117	38,596,242
21. Issued during year.....	.....18	7,450,426	.....0	.....0	.....0	.....0	.....0	.....0	.....18	7,450,426
22. Other changes to in force (Net).....	.....(14)	(4,759,850)	.....0	.....0	.....0	.....0	.....0	.....0	.....(14)	(4,759,850)
23. In force December 31 of current year.....	.....121	41,286,818	.....0	(a).....0	.....0	.....0	.....0	.....0	.....121	41,286,818

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (b).....	.....0	.....0	.....0	.....0	.....0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	.....0	.....0	.....0	.....0	.....0
Other Individual Policies:					
25.1 Non-cancelable (b).....	6,724	6,729	1,282	.....0	.....0
25.2 Guaranteed renewable (b).....	831	831	.....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).....	7,555	7,560	1,282	.....0	.....0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	7,555	7,560	1,282	.....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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF DELAWARE DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,612,583	.....0	.....0	.....0	2,612,583
2. Annuity considerations.....	339,785	.....0	.....0	.....0	339,785
3. Deposit-type contract funds.....	236	XXX.....0	.....0	XXX.....0	236
4. Other considerations.....	.....0	.....0	343,060	.....0	343,060
5. Totals (Sum of Lines 1 to 4).....	2,952,604	.....0	343,060	.....0	3,295,664
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	3,372	.....0	.....0	.....0	3,372
6.2 Applied to pay renewal premiums.....	3,896	.....0	.....0	.....0	3,896
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	331,981	.....0	.....0	.....0	331,981
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	339,249	.....0	.....0	.....0	339,249
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).....	339,249	.....0	.....0	.....0	339,249
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	.....0	.....0	.....0	.....0	.....0
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	3,988,716	.....0	4,058	.....0	3,992,774
12. Surrender values and withdrawals for life contracts.....	9,024,354	.....0	1,036,029	.....0	10,060,382
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.....	13,013,070	.....0	1,040,086	.....0	14,053,156

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	225	68,478,405	.....0	(a).....0	.....0	.....0	.....0	.....0	225	68,478,405
21. Issued during year.....	20	7,170,139	.....0	.....0	.....0	.....0	.....0	.....0	20	7,170,139
22. Other changes to in force (Net).....	(5)	(4,184,225)	.....0	.....0	.....0	.....0	.....0	.....0	(5)	(4,184,225)
23. In force December 31 of current year.....	240	71,464,319	.....0	(a).....0	.....0	.....0	.....0	.....0	240	71,464,319

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (b).....	.....0	.....0	.....0	.....0	.....0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	.....0	.....0	.....0	.....0	.....0
Other Individual Policies:					
25.1 Non-cancelable (b).....	37,363	37,390	7,060	149,600	151,227
25.2 Guaranteed renewable (b).....	.....0	.....0	.....0	57,000	57,000
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).....	37,363	37,390	7,060	206,600	208,227
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	37,363	37,390	7,060	206,600	208,227

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	54,013,746	.....0	.....0	.....0	54,013,746
2. Annuity considerations.....	6,055,662	.....0	.....0	.....0	6,055,662
3. Deposit-type contract funds.....	1,393,261	....XXX.....	.....0	....XXX.....	1,393,261
4. Other considerations.....	.....0	.....0	4,891,561	.....0	4,891,561
5. Totals (Sum of Lines 1 to 4).....	61,462,668	.....0	4,891,561	.....0	66,354,229
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	159,508	.....0	.....0	.....0	159,508
6.2 Applied to pay renewal premiums.....	519,202	.....0	.....0	.....0	519,202
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	8,088,957	.....0	.....0	.....0	8,088,957
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	8,767,667	.....0	.....0	.....0	8,767,667
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).....	8,767,667	.....0	.....0	.....0	8,767,667
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	3,786,829	.....0	.....0	.....0	3,786,829
10. Matured endowments.....	7,141	.....0	.....0	.....0	7,141
11. Annuity benefits.....	87,156,164	.....0	1,002,287	.....0	88,158,451
12. Surrender values and withdrawals for life contracts.....	207,651,532	.....0	13,997,961	.....0	221,649,494
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.....	298,601,667	.....0	15,000,248	.....0	313,601,915

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	.....0	.....(388,288)	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....(388,288)
17. Incurred during current year.....	.....18	.....1,646,797	.....0	.....0	.....0	.....0	.....0	.....0	.....18	.....1,646,797
Settled during current year:										
18.1 By payment in full.....	.....18	.....1,258,509	.....0	.....0	.....0	.....0	.....0	.....0	.....18	.....1,258,509
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....18	.....1,258,509	.....0	.....0	.....0	.....0	.....0	.....0	.....18	.....1,258,509
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	.....1,258,509	.....0	.....0	.....0	.....0	.....0	.....0	.....18	.....1,258,509
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	.....5,348	.....1,929,977,155	.....0	(a).....0	.....0	.....0	.....0	.....0	.....5,348	.....1,929,977,155
21. Issued during year.....	.....628	.....283,117,307	.....0	.....0	.....0	.....0	.....0	.....0	.....628	.....283,117,307
22. Other changes to in force (Net).....	.....(350)	.....(64,085,948)	.....0	.....0	.....0	.....0	.....0	.....0	.....(350)	.....(64,085,948)
23. In force December 31 of current year.....	.....5,626	.....2,149,008,514	.....0	(a).....0	.....0	.....0	.....0	.....0	.....5,626	.....2,149,008,514

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	371,084	371,353	95,575	430,269	437,975
25.2 Guaranteed renewable (b).....	25,975	25,993	.....0	17,748	5,059
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).....	397,058	397,346	95,575	448,017	443,035
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	397,058	397,346	95,575	448,017	443,035

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	9,891,776	.....0	.....0	.....0	9,891,776
2. Annuity considerations.....	1,434,782	.....0	.....0	.....0	1,434,782
3. Deposit-type contract funds.....	8,892	XXX.....0	.....0	XXX.....0	8,892
4. Other considerations.....	.....0	.....0	1,945,147	.....0	1,945,147
5. Totals (Sum of Lines 1 to 4).....	11,335,450	.....0	1,945,147	.....0	13,280,597
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	13,134	.....0	.....0	.....0	13,134
6.2 Applied to pay renewal premiums.....	86,023	.....0	.....0	.....0	86,023
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,523,386	.....0	.....0	.....0	1,523,386
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,622,543	.....0	.....0	.....0	1,622,543
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).....	1,622,543	.....0	.....0	.....0	1,622,543
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	476,249	.....0	.....0	.....0	476,249
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	16,133,414	.....0	77,118	.....0	16,210,532
12. Surrender values and withdrawals for life contracts.....	40,016,334	.....0	4,635,972	.....0	44,652,306
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.....	56,625,997	.....0	4,713,090	.....0	61,339,088

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	.....2	131,379	.....0	.....0	.....0	.....0	.....0	.....0	.....2	131,379
17. Incurred during current year.....	.....11	248,450	.....0	.....0	.....0	.....0	.....0	.....0	.....11	248,450
Settled during current year:										
18.1 By payment in full.....	.....12	349,431	.....0	.....0	.....0	.....0	.....0	.....0	.....12	349,431
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....12	349,431	.....0	.....0	.....0	.....0	.....0	.....0	.....12	349,431
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.....	.....12	349,431	.....0	.....0	.....0	.....0	.....0	.....0	.....12	349,431
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.....1	30,398	.....0	.....0	.....0	.....0	.....0	.....0	.....1	30,398
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,800	383,989,928	.....0	(a).....0	.....0	352,200	.....0	.....0	1,800	384,342,128
21. Issued during year.....	.....98	37,795,818	.....0	.....0	.....0	.....0	.....0	.....0	.....98	37,795,818
22. Other changes to in force (Net).....	.....(87)	(16,530,066)	.....0	.....0	.....0	(25,000)	.....0	.....0	.....(87)	(16,555,066)
23. In force December 31 of current year.....	1,811	405,255,680	.....0	(a).....0	.....0	327,200	.....0	.....0	1,811	405,582,880

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (b).....	.....0	.....0	.....0	.....0	.....0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	.....0	.....0	.....0	.....0	.....0
Other Individual Policies:					
25.1 Non-cancelable (b).....	159,912	160,028	30,945	48,282	47,122
25.2 Guaranteed renewable (b).....	9,565	9,572	.....0	.....0	.....0
25.3 Non-renewable for stated reasons only (b).....	.....0	.....0	.....0	.....0	.....0
25.4 Other accident only.....	.....0	.....0	.....0	.....0	.....0
25.5 All other (b).....	.....0	.....0	.....0	.....0	.....0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	169,477	169,600	30,945	48,282	47,122
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	169,477	169,600	30,945	48,282	47,122

(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 INSURANCE COMPANY



DIRECT BUSINESS IN GRAND TOTAL DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	657,127,625	.....0	.....0	.....0	.....657,127,625
2. Annuity considerations.....	67,532,596	.....0	.....0	.....0	.....67,532,596
3. Deposit-type contract funds.....	44,312,897	.....XXX	.....75,000,000	.....XXX	.....119,312,897
4. Other considerations.....	.....0	.....0	107,851,991	.....0	.....107,851,991
5. Totals (Sum of Lines 1 to 4).....	768,973,118	.....0	182,851,991	.....0	.....951,825,109
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	1,479,556	.....0	.....0	.....0	.....1,479,556
6.2 Applied to pay renewal premiums.....	5,801,076	.....0	.....0	.....0	.....5,801,076
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	106,087,778	.....0	.....0	.....0	.....106,087,778
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	113,368,410	.....0	.....0	.....0	.....113,368,410
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).....	113,368,410	.....0	.....0	.....0	.....113,368,410
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	61,538,486	.....0	130,450	.....0	.....61,668,936
10. Matured endowments.....	251,501	.....0	.....0	.....0	.....251,501
11. Annuity benefits.....	806,047,570	.....0	16,078,535	.....0	.....822,126,104
12. Surrender values and withdrawals for life contracts.....	2,233,747,505	.....0	408,570,388	.....0	.....2,642,317,892
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.....	3,101,585,061	.....0	424,779,372	.....0	.....3,526,364,434

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	164	8,144,157	.....0	.....0	2	28,950	.....0	.....0	166	8,173,107
17. Incurred during current year.....	1,270	45,428,786	.....0	.....0	.....0	.....0	.....0	.....0	1,270	45,428,786
Settled during current year:										
18.1 By payment in full.....	1,395	46,774,781	.....0	.....0	.....0	.....0	.....0	.....0	1,395	46,774,781
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	1,395	46,774,781	.....0	.....0	.....0	.....0	.....0	.....0	1,395	46,774,781
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.....	1,395	46,774,781	.....0	.....0	.....0	.....0	.....0	.....0	1,395	46,774,781
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	39	6,798,163	.....0	.....0	2	28,950	.....0	.....0	41	6,827,113
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	99,824	24,964,722,851	.....0	(a).....0	.....0	5,527,588	.....0	.....0	99,824	24,970,250,439
21. Issued during year.....	6,278	2,686,283,229	.....0	.....0	.....0	.....0	.....0	.....0	6,278	2,686,283,229
22. Other changes to in force (Net).....	(5,097)	(1,130,408,906)	.....0	.....0	.....0	(697,934)	.....0	.....0	(5,097)	(1,131,106,840)
23. In force December 31 of current year.....	101,005	26,520,597,174	.....0	(a).....0	.....0	4,829,654	.....0	.....0	101,005	26,525,426,828

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	9,915,563	9,922,751	2,023,872	4,946,203	4,713,334
25.2 Guaranteed renewable (b).....	943,393	944,077	132	528,067	491,681
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).....	10,858,956	10,866,828	2,024,005	5,474,270	5,205,015
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	10,858,956	10,866,828	2,024,005	5,474,270	5,205,015

(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 INSURANCE COMPANY



DIRECT BUSINESS IN GUAM DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

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/REFUNDS TO MEMBERS					
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
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 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF HAWAII DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	162,405	0	0	0	162,405
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	227	XXX	0	XXX	227
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	162,632	0	0	0	162,632
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	240	0	0	0	240
6.2 Applied to pay renewal premiums.....	13,341	0	0	0	13,341
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	66,865	0	0	0	66,865
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	80,447	0	0	0	80,447
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).....	80,447	0	0	0	80,447
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	5,000	0	0	0	5,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	298,173	0	(5,148)	0	293,025
12. Surrender values and withdrawals for life contracts.....	2,063,578	0	0	0	2,063,578
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.....	2,366,750	0	(5,148)	0	2,361,603

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	55	10,431,307	0	(a).....0	0	0	0	0	55	10,431,307
21. Issued during year.....	43	5,168,987	0	0	0	0	0	0	43	5,168,987
22. Other changes to in force (Net).....	(3)	(718,778)	0	0	0	0	0	0	(3)	(718,778)
23. In force December 31 of current year.....	95	14,881,516	0	(a).....0	0	0	0	0	95	14,881,516

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	2,553	2,555	655	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).....	2,553	2,555	655	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	2,553	2,555	655	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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF IOWA DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	7,415,156	.....0	.....0	.....0	7,415,156
2. Annuity considerations.....	2,001,462	.....0	.....0	.....0	2,001,462
3. Deposit-type contract funds.....	128,172	....XXX.....	.....0	....XXX.....	128,172
4. Other considerations.....	.....0	.....0	1,485,115	.....0	1,485,115
5. Totals (Sum of Lines 1 to 4).....	9,544,790	.....0	1,485,115	.....0	11,029,905
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	19,489	.....0	.....0	.....0	19,489
6.2 Applied to pay renewal premiums.....	135,938	.....0	.....0	.....0	135,938
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,059,054	.....0	.....0	.....0	1,059,054
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,214,482	.....0	.....0	.....0	1,214,482
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).....	1,214,482	.....0	.....0	.....0	1,214,482
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,227,342	.....0	3,000	.....0	1,230,342
10. Matured endowments.....	27,994	.....0	.....0	.....0	27,994
11. Annuity benefits.....	7,869,974	.....0	89,475	.....0	7,959,449
12. Surrender values and withdrawals for life contracts.....	20,275,362	.....0	11,563,847	.....0	31,839,209
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.....0	.....0	.....0	.....0	.....0
14. All other benefits, except accident and health.....	.....0	.....0	.....0	.....0	.....0
15. Totals.....	29,400,672	.....0	11,656,322	.....0	41,056,993

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	.....74	.....648,631	.....0	.....0	.....0	.....0	.....0	.....0	.....74	.....648,631
Settled during current year:										
18.1 By payment in full.....	.....74	.....648,631	.....0	.....0	.....0	.....0	.....0	.....0	.....74	.....648,631
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....74	.....648,631	.....0	.....0	.....0	.....0	.....0	.....0	.....74	.....648,631
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.....	.....74	.....648,631	.....0	.....0	.....0	.....0	.....0	.....0	.....74	.....648,631
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.....	.....2,697	.....300,963,605	.....0	(a).....0	.....0	.....0	.....0	.....0	.....2,697	.....300,963,605
21. Issued during year.....	.....73	.....25,754,424	.....0	.....0	.....0	.....0	.....0	.....0	.....73	.....25,754,424
22. Other changes to in force (Net).....	.....(130)	.....(11,146,123)	.....0	.....0	.....0	.....0	.....0	.....0	.....(130)	.....(11,146,123)
23. In force December 31 of current year.....	.....2,640	.....315,571,906	.....0	(a).....0	.....0	.....0	.....0	.....0	.....2,640	.....315,571,906

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	100,524	100,597	19,743	82,920	82,743
25.2 Guaranteed renewable (b).....	18,567	18,580	.....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).....	119,091	119,177	19,743	82,920	82,743
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	119,091	119,177	19,743	82,920	82,743

(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 INSURANCE COMPANY



* 6 7 1 7 2 2 0 1 9 4 3 0 1 3 1 0 0 *

DIRECT BUSINESS IN THE STATE OF IDAHO DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,448,599	.....0	.....0	.....0	.....2,448,599
2. Annuity considerations.....	628,673	.....0	.....0	.....0	.....628,673
3. Deposit-type contract funds.....	27,306	....XXX.....	.....0	....XXX.....	.....27,306
4. Other considerations.....	.....0	.....0	.....452,632	.....0	.....452,632
5. Totals (Sum of Lines 1 to 4).....	3,104,578	.....0	.....452,632	.....0	.....3,557,210
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	5,199	.....0	.....0	.....0	.....5,199
6.2 Applied to pay renewal premiums.....	31,323	.....0	.....0	.....0	.....31,323
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	278,909	.....0	.....0	.....0	.....278,909
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	315,431	.....0	.....0	.....0	.....315,431
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).....	315,431	.....0	.....0	.....0	.....315,431
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	191,370	.....0	.....0	.....0	.....191,370
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	5,128,882	.....0	.....62,805	.....0	.....5,191,687
12. Surrender values and withdrawals for life contracts.....	14,224,171	.....0	2,774,545	.....0	16,998,716
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.....	19,544,423	.....0	2,837,350	.....0	22,381,773

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	.....14	.....113,882	.....0	.....0	.....0	.....0	.....0	.....0	.....14	.....113,882
Settled during current year:										
18.1 By payment in full.....	.....14	.....113,882	.....0	.....0	.....0	.....0	.....0	.....0	.....14	.....113,882
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....14	.....113,882	.....0	.....0	.....0	.....0	.....0	.....0	.....14	.....113,882
18.4 Reduction by compromise.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.5 Amount rejected.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.6 Total settlements.....	.....14	.....113,882	.....0	.....0	.....0	.....0	.....0	.....0	.....14	.....113,882
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.....	.....767	.....114,474,070	.....0	(a).....0	.....0	.....26,500	.....0	.....0	.....767	.....114,500,570
21. Issued during year.....	.....20	.....13,380,216	.....0	.....0	.....0	.....0	.....0	.....0	.....20	.....13,380,216
22. Other changes to in force (Net).....	.....(39)	.....(16,718,805)	.....0	.....0	.....0	.....0	.....0	.....0	.....(39)	.....(16,718,805)
23. In force December 31 of current year.....	.....748	.....111,135,481	.....0	(a).....0	.....0	.....26,500	.....0	.....0	.....748	.....111,161,981

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (b).....	.....0	.....0	.....0	.....0	.....0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	.....0	.....0	.....0	.....0	.....0
Other Individual Policies:					
25.1 Non-cancelable (b).....	78,496	78,553	18,513	310,603	307,919
25.2 Guaranteed renewable (b).....	19,724	19,738	.....0	12,000	12,033
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).....	98,220	98,291	18,513	322,603	319,953
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	98,220	98,291	18,513	322,603	319,953

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	35,509,536	.....0	.....0	.....0	35,509,536
2. Annuity considerations.....	4,860,805	.....0	.....0	.....0	4,860,805
3. Deposit-type contract funds.....	2,287,745	.....XXX	.....0	.....XXX	2,287,745
4. Other considerations.....	.....0	.....0	3,159,722	.....0	3,159,722
5. Totals (Sum of Lines 1 to 4).....	42,658,086	.....0	3,159,722	.....0	45,817,808
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	90,859	.....0	.....0	.....0	90,859
6.2 Applied to pay renewal premiums.....	341,112	.....0	.....0	.....0	341,112
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	8,479,253	.....0	.....0	.....0	8,479,253
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	8,911,224	.....0	.....0	.....0	8,911,224
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).....	8,911,224	.....0	.....0	.....0	8,911,224
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,843,262	.....0	.....0	.....0	1,843,262
10. Matured endowments.....	16,498	.....0	.....0	.....0	16,498
11. Annuity benefits.....	30,205,584	.....0	100,200	.....0	30,305,784
12. Surrender values and withdrawals for life contracts.....	97,594,657	.....0	19,132,460	.....0	116,727,117
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.....	129,660,001	.....0	19,232,660	.....0	148,892,661

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	25	3,726,283	.....0	.....0	.....0	.....0	.....0	.....0	25	3,726,283
17. Incurred during current year.....	115	2,770,348	.....0	.....0	.....0	.....0	.....0	.....0	115	2,770,348
Settled during current year:										
18.1 By payment in full.....	140	6,496,631	.....0	.....0	.....0	.....0	.....0	.....0	140	6,496,631
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	140	6,496,631	.....0	.....0	.....0	.....0	.....0	.....0	140	6,496,631
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.....	140	6,496,631	.....0	.....0	.....0	.....0	.....0	.....0	140	6,496,631
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.....	6,291	1,383,036,031	.....0	(a).....0	.....0	100,000	.....0	.....0	6,291	1,383,136,031
21. Issued during year.....	284	90,027,469	.....0	.....0	.....0	.....0	.....0	.....0	284	90,027,469
22. Other changes to in force (Net).....	(359)	(62,210,947)	.....0	.....0	.....0	.....0	.....0	.....0	(359)	(62,210,947)
23. In force December 31 of current year.....	6,216	1,410,852,553	.....0	(a).....0	.....0	100,000	.....0	.....0	6,216	1,410,952,553

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	625,130	625,583	124,424	295,057	295,653
25.2 Guaranteed renewable (b).....	42,081	42,111	.....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).....	667,210	667,694	124,424	295,057	295,653
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	667,210	667,694	124,424	295,057	295,653

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

OHIO NATIONAL LIFE INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF INDIANA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	11,638,052	.....0	.....0	.....0	11,638,052
2. Annuity considerations.....	(138,137)	.....0	.....0	.....0	(138,137)
3. Deposit-type contract funds.....	47,100	XXX.....	.....0	XXX.....	47,100
4. Other considerations.....	.....0	.....0	3,265,354	.....0	3,265,354
5. Totals (Sum of Lines 1 to 4).....	11,547,016	.....0	3,265,354	.....0	14,812,369
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	64,374	.....0	.....0	.....0	64,374
6.2 Applied to pay renewal premiums.....	107,680	.....0	.....0	.....0	107,680
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	2,145,863	.....0	.....0	.....0	2,145,863
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	2,317,917	.....0	.....0	.....0	2,317,917
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).....	2,317,917	.....0	.....0	.....0	2,317,917
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	7,989,686	.....0	.....0	.....0	7,989,686
10. Matured endowments.....	5,340	.....0	.....0	.....0	5,340
11. Annuity benefits.....	11,815,501	.....0	424,006	.....0	12,239,507
12. Surrender values and withdrawals for life contracts.....	34,054,285	.....0	9,655,146	.....0	43,709,431
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.....	53,864,812	.....0	10,079,152	.....0	63,943,964

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	.....33	5,340,149	.....0	.....0	.....0	.....0	.....0	.....0	.....33	5,340,149
Settled during current year:										
18.1 By payment in full.....	.....33	5,340,149	.....0	.....0	.....0	.....0	.....0	.....0	.....33	5,340,149
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....33	5,340,149	.....0	.....0	.....0	.....0	.....0	.....0	.....33	5,340,149
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.....	.....33	5,340,149	.....0	.....0	.....0	.....0	.....0	.....0	.....33	5,340,149
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.....	1,961	370,544,872	.....0	(a).....0	.....0	926,200	.....0	.....0	1,961	371,471,072
21. Issued during year.....	.....94	33,118,853	.....0	.....0	.....0	.....0	.....0	.....0	.....94	33,118,853
22. Other changes to in force (Net).....	.....(82)	(16,020,034)	.....0	.....0	.....0	(191,200)	.....0	.....0	.....(82)	(16,211,234)
23. In force December 31 of current year.....	1,973	387,643,691	.....0	(a).....0	.....0	735,000	.....0	.....0	1,973	388,378,691

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (b).....	.....0	.....0	.....0	.....0	.....0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	.....0	.....0	.....0	.....0	.....0
Other Individual Policies:					
25.1 Non-cancelable (b).....	123,076	123,165	23,844	174,903	175,670
25.2 Guaranteed renewable (b).....	11,019	11,027	.....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).....	134,095	134,192	23,844	174,903	175,670
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	134,095	134,192	23,844	174,903	175,670

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF KANSAS DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	16,122,911	.....0	.....0	.....0	16,122,911
2. Annuity considerations.....	1,994,969	.....0	.....0	.....0	1,994,969
3. Deposit-type contract funds.....	714,837	XXX.....	.....0	XXX.....	714,837
4. Other considerations.....	.....0	.....0	649,802	.....0	649,802
5. Totals (Sum of Lines 1 to 4).....	18,832,718	.....0	649,802	.....0	19,482,520
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	22,568	.....0	.....0	.....0	22,568
6.2 Applied to pay renewal premiums.....	171,537	.....0	.....0	.....0	171,537
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	3,137,847	.....0	.....0	.....0	3,137,847
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	3,331,952	.....0	.....0	.....0	3,331,952
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).....	3,331,952	.....0	.....0	.....0	3,331,952
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	2,726,287	.....0	.....0	.....0	2,726,287
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	14,362,208	.....0	23,921	.....0	14,386,129
12. Surrender values and withdrawals for life contracts.....	43,862,641	.....0	3,609,547	.....0	47,472,188
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.....	60,951,137	.....0	3,633,468	.....0	64,584,604

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	.....14	1,735,097	.....0	.....0	.....0	.....0	.....0	.....0	.....14	1,735,097
Settled during current year:										
18.1 By payment in full.....	.....12	1,032,639	.....0	.....0	.....0	.....0	.....0	.....0	.....12	1,032,639
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....12	1,032,639	.....0	.....0	.....0	.....0	.....0	.....0	.....12	1,032,639
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	1,032,639	.....0	.....0	.....0	.....0	.....0	.....0	.....12	1,032,639
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.....2	702,458	.....0	.....0	.....0	.....0	.....0	.....0	.....2	702,458
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	2,134	525,622,457	.....0	(a).....0	.....0	.....0	.....0	.....0	2,134	525,622,457
21. Issued during year.....	158	73,871,043	.....0	.....0	.....0	.....0	.....0	.....0	158	73,871,043
22. Other changes to in force (Net).....	(86)	(14,694,958)	.....0	.....0	.....0	.....0	.....0	.....0	(86)	(14,694,958)
23. In force December 31 of current year.....	2,206	584,798,542	.....0	(a).....0	.....0	.....0	.....0	.....0	2,206	584,798,542

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	249,628	249,809	48,636	.....0	(9,158)
25.2 Guaranteed renewable (b).....	33,566	33,590	.....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).....	283,194	283,399	48,636	.....0	(9,158)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	283,194	283,399	48,636	.....0	(9,158)

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF KENTUCKY DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	5,167,294	.....0	.....0	.....0	5,167,294
2. Annuity considerations.....	336,128	.....0	.....0	.....0	336,128
3. Deposit-type contract funds.....	79,671	XXX.....0	.....0	XXX.....0	79,671
4. Other considerations.....	.....0	.....0	2,167,035	.....0	2,167,035
5. Totals (Sum of Lines 1 to 4).....	5,583,094	.....0	2,167,035	.....0	7,750,129
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	11,342	.....0	.....0	.....0	11,342
6.2 Applied to pay renewal premiums.....	71,780	.....0	.....0	.....0	71,780
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	680,172	.....0	.....0	.....0	680,172
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	763,294	.....0	.....0	.....0	763,294
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).....	763,294	.....0	.....0	.....0	763,294
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	657,519	.....0	.....0	.....0	657,519
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	11,082,185	.....0	923,547	.....0	12,005,732
12. Surrender values and withdrawals for life contracts.....	24,784,147	.....0	8,450,352	.....0	33,234,499
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.....	36,523,850	.....0	9,373,899	.....0	45,897,750

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	4	44,578	.....0	.....0	.....0	6,300	.....0	.....0	4	50,878
17. Incurred during current year.....	28	452,349	.....0	.....0	.....0	.....0	.....0	.....0	28	452,349
Settled during current year:										
18.1 By payment in full.....	32	496,927	.....0	.....0	.....0	.....0	.....0	.....0	32	496,927
18.2 By payment on compromised claims.....	0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	0	.....0
18.3 Totals paid.....	32	496,927	.....0	.....0	.....0	.....0	.....0	.....0	32	496,927
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	496,927	.....0	.....0	.....0	.....0	.....0	.....0	32	496,927
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	.....0	.....0	.....0	.....0	6,300	.....0	.....0	0	6,300
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,474	198,269,507	.....0	(a).....0	.....0	351,775	.....0	.....0	1,474	198,621,282
21. Issued during year.....	55	28,593,936	.....0	.....0	.....0	.....0	.....0	.....0	55	28,593,936
22. Other changes to in force (Net).....	(99)	(11,469,819)	.....0	.....0	.....0	(78,500)	.....0	.....0	(99)	(11,548,319)
23. In force December 31 of current year.....	1,430	215,393,624	.....0	(a).....0	.....0	273,275	.....0	.....0	1,430	215,666,899

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	93,596	93,664	20,911	71,079	71,364
25.2 Guaranteed renewable (b).....	8,475	8,481	.....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).....	102,071	102,145	20,911	71,079	71,364
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	102,071	102,145	20,911	71,079	71,364

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF LOUISIANA DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	16,824,031	.....0	.....0	.....0	16,824,031
2. Annuity considerations.....	(36,603)	.....0	.....0	.....0	(36,603)
3. Deposit-type contract funds.....	2,528,727	XXX.....0	.....0	XXX.....0	2,528,727
4. Other considerations.....	.....0	.....0	1,509,669	.....0	1,509,669
5. Totals (Sum of Lines 1 to 4).....	19,316,156	.....0	1,509,669	.....0	20,825,825
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	13,923	.....0	.....0	.....0	13,923
6.2 Applied to pay renewal premiums.....	18,365	.....0	.....0	.....0	18,365
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	3,408,584	.....0	.....0	.....0	3,408,584
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	3,440,873	.....0	.....0	.....0	3,440,873
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).....	3,440,873	.....0	.....0	.....0	3,440,873
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	658,130	.....0	.....0	.....0	658,130
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	4,213,503	.....0	13,969	.....0	4,227,471
12. Surrender values and withdrawals for life contracts.....	22,352,441	.....0	3,111,402	.....0	25,463,843
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.....	27,224,073	.....0	3,125,371	.....0	30,349,444

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
17. Incurred during current year.....	.....6	590,000	.....0	.....0	.....0	.....0	.....0	.....0	.....6	590,000
Settled during current year:										
18.1 By payment in full.....	.....4	580,637	.....0	.....0	.....0	.....0	.....0	.....0	.....4	580,637
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....4	580,637	.....0	.....0	.....0	.....0	.....0	.....0	.....4	580,637
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	580,637	.....0	.....0	.....0	.....0	.....0	.....0	.....4	580,637
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.....2	9,363	.....0	.....0	.....0	.....0	.....0	.....0	.....2	9,363
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,644	707,482,469	.....0	(a).....0	.....0	.....0	.....0	.....0	1,644	707,482,469
21. Issued during year.....	126	49,740,636	.....0	.....0	.....0	.....0	.....0	.....0	126	49,740,636
22. Other changes to in force (Net).....	(98)	(26,702,034)	.....0	.....0	.....0	.....0	.....0	.....0	(98)	(26,702,034)
23. In force December 31 of current year.....	1,672	730,521,071	.....0	(a).....0	.....0	.....0	.....0	.....0	1,672	730,521,071

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	36,458	36,484	9,427	.....0	.....0
25.2 Guaranteed renewable (b).....	6,260	6,265	.....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).....	42,718	42,749	9,427	.....0	.....0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	42,718	42,749	9,427	.....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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF MASSACHUSETTS DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	12,428,129	.....0	.....0	.....0	12,428,129
2. Annuity considerations.....	798,311	.....0	.....0	.....0	798,311
3. Deposit-type contract funds.....	9,539,659	XXX.....0	.....0	XXX.....0	9,539,659
4. Other considerations.....	.....0	.....0	2,988,863	.....0	2,988,863
5. Totals (Sum of Lines 1 to 4).....	22,766,098	.....0	2,988,863	.....0	25,754,961
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	9,593	.....0	.....0	.....0	9,593
6.2 Applied to pay renewal premiums.....	63,197	.....0	.....0	.....0	63,197
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,891,224	.....0	.....0	.....0	1,891,224
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,964,013	.....0	.....0	.....0	1,964,013
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).....	1,964,013	.....0	.....0	.....0	1,964,013
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	121,458	.....0	.....0	.....0	121,458
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	14,364,059	.....0	106,944	.....0	14,471,003
12. Surrender values and withdrawals for life contracts.....	53,453,856	.....0	3,868,461	.....0	57,322,317
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.....	67,939,373	.....0	3,975,405	.....0	71,914,778

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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	1,312,895	.....0	.....0	.....0	.....0	.....0	.....0	.....4	1,312,895
Settled during current year:										
18.1 By payment in full.....	.....2	111,509	.....0	.....0	.....0	.....0	.....0	.....0	.....2	111,509
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....2	111,509	.....0	.....0	.....0	.....0	.....0	.....0	.....2	111,509
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	111,509	.....0	.....0	.....0	.....0	.....0	.....0	.....2	111,509
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.....2	1,201,386	.....0	.....0	.....0	.....0	.....0	.....0	.....2	1,201,386
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,241	402,131,148	.....0	(a).....0	.....0	.....0	.....0	.....0	1,241	402,131,148
21. Issued during year.....	.....87	34,086,174	.....0	.....0	.....0	.....0	.....0	.....0	.....87	34,086,174
22. Other changes to in force (Net).....	.....(80)	(22,165,474)	.....0	.....0	.....0	.....0	.....0	.....0	.....(80)	(22,165,474)
23. In force December 31 of current year.....	1,248	414,051,848	.....0	(a).....0	.....0	.....0	.....0	.....0	1,248	414,051,848

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	342,717	342,965	68,197	60,259	75,467
25.2 Guaranteed renewable (b).....	17,451	17,463	.....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).....	360,167	360,428	68,197	60,259	75,467
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	360,167	360,428	68,197	60,259	75,467

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	9,517,881	.....0	.....0	.....0	9,517,881
2. Annuity considerations.....	5,688,452	.....0	.....0	.....0	5,688,452
3. Deposit-type contract funds.....	8,199	XXX.....	.....0	XXX.....	8,199
4. Other considerations.....	.....0	.....0	827,404	.....0	827,404
5. Totals (Sum of Lines 1 to 4).....	15,214,532	.....0	827,404	.....0	16,041,937
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	8,962	.....0	.....0	.....0	8,962
6.2 Applied to pay renewal premiums.....	109,175	.....0	.....0	.....0	109,175
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,518,144	.....0	.....0	.....0	1,518,144
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,636,282	.....0	.....0	.....0	1,636,282
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).....	1,636,282	.....0	.....0	.....0	1,636,282
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	58,820	.....0	.....0	.....0	58,820
10. Matured endowments.....	1,000	.....0	.....0	.....0	1,000
11. Annuity benefits.....	43,000,882	.....0	15,856	.....0	43,016,738
12. Surrender values and withdrawals for life contracts.....	131,752,815	.....0	1,538,790	.....0	133,291,605
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.....	174,813,517	.....0	1,554,646	.....0	176,368,163

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	2	9,817	.....0	.....0	.....0	.....0	.....0	.....0	2	9,817
17. Incurred during current year.....	4	18,500	.....0	.....0	.....0	.....0	.....0	.....0	4	18,500
Settled during current year:										
18.1 By payment in full.....	3	17,139	.....0	.....0	.....0	.....0	.....0	.....0	3	17,139
18.2 By payment on compromised claims.....	0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	0	.....0
18.3 Totals paid.....	3	17,139	.....0	.....0	.....0	.....0	.....0	.....0	3	17,139
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	17,139	.....0	.....0	.....0	.....0	.....0	.....0	3	17,139
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	11,178	.....0	.....0	.....0	.....0	.....0	.....0	3	11,178
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,498	409,825,297	.....0	(a).....0	.....0	.....0	.....0	.....0	1,498	409,825,297
21. Issued during year.....	106	32,528,384	.....0	.....0	.....0	.....0	.....0	.....0	106	32,528,384
22. Other changes to in force (Net).....	(91)	(30,121,864)	.....0	.....0	.....0	.....0	.....0	.....0	(91)	(30,121,864)
23. In force December 31 of current year.....	1,513	412,231,817	.....0	(a).....0	.....0	.....0	.....0	.....0	1,513	412,231,817

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	177,453	177,582	35,158	225,178	236,680
25.2 Guaranteed renewable (b).....	29,450	29,472	.....0	64,680	64,860
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).....	206,903	207,053	35,158	289,858	301,540
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	206,903	207,053	35,158	289,858	301,540

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

OHIO NATIONAL LIFE INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF MAINE DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	691,971	.....0	.....0	.....0	.....691,971
2. Annuity considerations.....	(357,565)	.....0	.....0	.....0	.....(357,565)
3. Deposit-type contract funds.....	293	.....XXX	.....0	.....XXX	.....293
4. Other considerations.....	.....0	.....0	818,720	.....0	.....818,720
5. Totals (Sum of Lines 1 to 4).....	334,699	.....0	818,720	.....0	.....1,153,419
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	1,430	.....0	.....0	.....0	.....1,430
6.2 Applied to pay renewal premiums.....	2,391	.....0	.....0	.....0	.....2,391
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	125,214	.....0	.....0	.....0	.....125,214
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	129,035	.....0	.....0	.....0	.....129,035
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).....	129,035	.....0	.....0	.....0	.....129,035
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	.....0	.....0	.....0	.....0	.....0
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	2,177,710	.....0	13,213	.....0	.....2,190,923
12. Surrender values and withdrawals for life contracts.....	3,377,407	.....0	1,431,894	.....0	.....4,809,301
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.....	5,555,117	.....0	1,445,107	.....0	.....7,000,224

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	.....109	28,399,293	.....0	(a).....0	.....0	.....0	.....0	.....0	.....109	28,399,293
21. Issued during year.....	.....8	2,603,585	.....0	.....0	.....0	.....0	.....0	.....0	.....8	2,603,585
22. Other changes to in force (Net).....	.....1	516,036	.....0	.....0	.....0	.....0	.....0	.....0	.....1	516,036
23. In force December 31 of current year.....	.....118	31,518,914	.....0	(a).....0	.....0	.....0	.....0	.....0	.....118	31,518,914

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	21,499	21,515	4,213	.....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).....	21,499	21,515	4,213	.....0	.....0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	21,499	21,515	4,213	.....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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF MICHIGAN DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	38,237,986	.....0	.....0	.....0	38,237,986
2. Annuity considerations.....	3,051,952	.....0	.....0	.....0	3,051,952
3. Deposit-type contract funds.....	2,266,752	XXX.....0	.....0	XXX.....0	2,266,752
4. Other considerations.....	.....0	.....0	3,912,170	.....0	3,912,170
5. Totals (Sum of Lines 1 to 4).....	43,556,690	.....0	3,912,170	.....0	47,468,861
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	88,023	.....0	.....0	.....0	88,023
6.2 Applied to pay renewal premiums.....	194,070	.....0	.....0	.....0	194,070
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	6,275,270	.....0	.....0	.....0	6,275,270
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	6,557,363	.....0	.....0	.....0	6,557,363
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).....	6,557,363	.....0	.....0	.....0	6,557,363
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	7,636,057	.....0	31,200	.....0	7,667,257
10. Matured endowments.....	14,680	.....0	.....0	.....0	14,680
11. Annuity benefits.....	37,250,090	.....0	193,316	.....0	37,443,406
12. Surrender values and withdrawals for life contracts.....	129,022,151	.....0	14,467,545	.....0	143,489,696
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.....	173,922,978	.....0	14,692,061	.....0	188,615,039

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	.....0	.....0	.....0	.....0	.....0	.....650	.....0	.....0	.....0	.....650
17. Incurred during current year.....	.....103	6,250,761	.....0	.....0	.....0	.....0	.....0	.....0	.....103	6,250,761
Settled during current year:										
18.1 By payment in full.....	.....103	6,250,761	.....0	.....0	.....0	.....0	.....0	.....0	.....103	6,250,761
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....103	6,250,761	.....0	.....0	.....0	.....0	.....0	.....0	.....103	6,250,761
18.4 Reduction by compromise.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.5 Amount rejected.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.6 Total settlements.....	.....103	6,250,761	.....0	.....0	.....0	.....0	.....0	.....0	.....103	6,250,761
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.....0	.....0	.....0	.....0	.....0	.....650	.....0	.....0	.....0	.....650
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	5,245	1,296,303,032	.....0	(a).....0	.....0	294,000	.....0	.....0	5,245	1,296,597,032
21. Issued during year.....	293	165,138,510	.....0	.....0	.....0	.....0	.....0	.....0	293	165,138,510
22. Other changes to in force (Net).....	(280)	(73,532,256)	.....0	.....0	.....0	(15,000)	.....0	.....0	(280)	(73,547,256)
23. In force December 31 of current year.....	5,258	1,387,909,286	.....0	(a).....0	.....0	279,000	.....0	.....0	5,258	1,388,188,286

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	306,449	306,671	73,726	251,728	253,686
25.2 Guaranteed renewable (b).....	43,730	43,762	.....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).....	350,179	350,433	73,726	251,728	253,686
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	350,179	350,433	73,726	251,728	253,686

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF MINNESOTA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	9,213,306	.....0	.....0	.....0	9,213,306
2. Annuity considerations.....	1,806,428	.....0	.....0	.....0	1,806,428
3. Deposit-type contract funds.....	10,814	....XXX.....	.....0	....XXX.....	10,814
4. Other considerations.....	.....0	.....0	1,566,918	.....0	1,566,918
5. Totals (Sum of Lines 1 to 4).....	11,030,548	.....0	1,566,918	.....0	12,597,465
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	22,172	.....0	.....0	.....0	22,172
6.2 Applied to pay renewal premiums.....	109,493	.....0	.....0	.....0	109,493
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,815,228	.....0	.....0	.....0	1,815,228
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,946,893	.....0	.....0	.....0	1,946,893
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).....	1,946,893	.....0	.....0	.....0	1,946,893
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	316,903	.....0	.....0	.....0	316,903
10. Matured endowments.....	12,189	.....0	.....0	.....0	12,189
11. Annuity benefits.....	12,703,662	.....0	8,515	.....0	12,712,177
12. Surrender values and withdrawals for life contracts.....	39,240,332	.....0	4,694,507	.....0	43,934,839
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.....	52,273,086	.....0	4,703,022	.....0	56,976,109

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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	178,492	.....0	.....0	.....0	.....0	.....0	.....0	.....28	178,492
Settled during current year:										
18.1 By payment in full.....	.....28	178,492	.....0	.....0	.....0	.....0	.....0	.....0	.....28	178,492
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....28	178,492	.....0	.....0	.....0	.....0	.....0	.....0	.....28	178,492
18.4 Reduction by compromise.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.5 Amount rejected.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.6 Total settlements.....	.....28	178,492	.....0	.....0	.....0	.....0	.....0	.....0	.....28	178,492
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.....	2,157	414,623,407	.....0	(a).....0	.....0	.....0	.....0	.....0	2,157	414,623,407
21. Issued during year.....	94	33,963,311	.....0	.....0	.....0	.....0	.....0	.....0	94	33,963,311
22. Other changes to in force (Net).....	(113)	(24,483,225)	.....0	.....0	.....0	.....0	.....0	.....0	(113)	(24,483,225)
23. In force December 31 of current year.....	2,138	424,103,493	.....0	(a).....0	.....0	.....0	.....0	.....0	2,138	424,103,493

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	126,559	126,651	24,599	.....0	.....0
25.2 Guaranteed renewable (b).....	28,396	28,417	.....0	21,600	21,660
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).....	154,955	155,068	24,599	21,600	21,660
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	154,955	155,068	24,599	21,600	21,660

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF MISSOURI DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	10,240,459	.....0	.....0	.....0	10,240,459
2. Annuity considerations.....	1,441,341	.....0	.....0	.....0	1,441,341
3. Deposit-type contract funds.....	15,500	XXX.....	.....0	XXX.....	15,500
4. Other considerations.....	.....0	.....0	925,160	.....0	925,160
5. Totals (Sum of Lines 1 to 4).....	11,697,300	.....0	925,160	.....0	12,622,460
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	43,658	.....0	.....0	.....0	43,658
6.2 Applied to pay renewal premiums.....	74,436	.....0	.....0	.....0	74,436
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,713,652	.....0	.....0	.....0	1,713,652
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,831,746	.....0	.....0	.....0	1,831,746
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).....	1,831,746	.....0	.....0	.....0	1,831,746
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,715,298	.....0	.....0	.....0	1,715,298
10. Matured endowments.....	13,755	.....0	.....0	.....0	13,755
11. Annuity benefits.....	21,162,229	.....0	140,905	.....0	21,303,134
12. Surrender values and withdrawals for life contracts.....	48,650,167	.....0	1,392,711	.....0	50,042,878
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.....	71,541,449	.....0	1,533,615	.....0	73,075,064

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	22	253,272	.....0	.....0	.....0	.....0	.....0	.....0	22	253,272
17. Incurred during current year.....	74	726,565	.....0	.....0	.....0	.....0	.....0	.....0	74	726,565
Settled during current year:										
18.1 By payment in full.....	96	979,837	.....0	.....0	.....0	.....0	.....0	.....0	96	979,837
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	96	979,837	.....0	.....0	.....0	.....0	.....0	.....0	96	979,837
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.....	96	979,837	.....0	.....0	.....0	.....0	.....0	.....0	96	979,837
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.....	2,579	360,423,867	.....0	(a).....0	.....0	.....0	.....0	.....0	2,579	360,423,867
21. Issued during year.....	144	50,810,736	.....0	.....0	.....0	.....0	.....0	.....0	144	50,810,736
22. Other changes to in force (Net).....	(133)	(31,530,906)	.....0	.....0	.....0	.....0	.....0	.....0	(133)	(31,530,906)
23. In force December 31 of current year.....	2,590	379,703,697	.....0	(a).....0	.....0	.....0	.....0	.....0	2,590	379,703,697

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	112,374	112,455	22,389	184,000	189,167
25.2 Guaranteed renewable (b).....	11,420	11,428	.....0	21,306	21,383
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).....	123,794	123,884	22,389	205,306	210,550
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	123,794	123,884	22,389	205,306	210,550

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF NORTHERN MARIANA ISLANDS DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

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/REFUNDS TO MEMBERS					
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
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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,978,144	.....0	.....0	.....0	2,978,144
2. Annuity considerations.....	204,546	.....0	.....0	.....0	204,546
3. Deposit-type contract funds.....	208,994	XXX.....0	.....0	XXX.....0	208,994
4. Other considerations.....	.....0	.....0	212,417	.....0	212,417
5. Totals (Sum of Lines 1 to 4).....	3,391,685	.....0	212,417	.....0	3,604,102
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	2,931	.....0	.....0	.....0	2,931
6.2 Applied to pay renewal premiums.....	17,940	.....0	.....0	.....0	17,940
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	560,658	.....0	.....0	.....0	560,658
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	581,528	.....0	.....0	.....0	581,528
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).....	581,528	.....0	.....0	.....0	581,528
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	120,290	.....0	.....0	.....0	120,290
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	7,637,094	.....0	31,134	.....0	7,668,228
12. Surrender values and withdrawals for life contracts.....	18,168,665	.....0	3,005,195	.....0	21,173,860
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.....	25,926,049	.....0	3,036,329	.....0	28,962,378

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
17. Incurred during current year.....	.....1	100,000	.....0	.....0	.....0	.....0	.....0	.....0	.....1	100,000
Settled during current year:										
18.1 By payment in full.....	.....1	100,000	.....0	.....0	.....0	.....0	.....0	.....0	.....1	100,000
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....1	100,000	.....0	.....0	.....0	.....0	.....0	.....0	.....1	100,000
18.4 Reduction by compromise.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.5 Amount rejected.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.6 Total settlements.....	.....1	100,000	.....0	.....0	.....0	.....0	.....0	.....0	.....1	100,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	.....422	127,496,706	.....0	(a).....0	.....0	5,000	.....0	.....0	.....422	127,501,706
21. Issued during year.....	.....25	7,176,259	.....0	.....0	.....0	.....0	.....0	.....0	.....25	7,176,259
22. Other changes to in force (Net).....	.....(17)	(2,399,507)	.....0	.....0	.....0	.....0	.....0	.....0	.....(17)	(2,399,507)
23. In force December 31 of current year.....	.....430	132,273,458	.....0	(a).....0	.....0	5,000	.....0	.....0	.....430	132,278,458

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	89,698	89,763	17,280	.....0	28,701
25.2 Guaranteed renewable (b).....	5,167	5,171	.....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).....	94,866	94,934	17,280	.....0	28,701
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	94,866	94,934	17,280	.....0	28,701

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF MONTANA DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,199,419	0	0	0	1,199,419
2. Annuity considerations.....	11,400	0	0	0	11,400
3. Deposit-type contract funds.....	48,649	XXX	0	XXX	48,649
4. Other considerations.....	0	0	143,116	0	143,116
5. Totals (Sum of Lines 1 to 4).....	1,259,467	0	143,116	0	1,402,584
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	7,930	0	0	0	7,930
6.2 Applied to pay renewal premiums.....	14,601	0	0	0	14,601
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	198,059	0	0	0	198,059
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	220,590	0	0	0	220,590
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).....	220,590	0	0	0	220,590
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	114,536	0	0	0	114,536
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	2,043,772	0	81,597	0	2,125,369
12. Surrender values and withdrawals for life contracts.....	5,760,770	0	531,311	0	6,292,081
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.....	7,919,078	0	612,908	0	8,531,986

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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	185,681	0	0	0	0	0	0	16	185,681
Settled during current year:										
18.1 By payment in full.....	16	185,681	0	0	0	0	0	0	16	185,681
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	16	185,681	0	0	0	0	0	0	16	185,681
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	16	185,681	0	0	0	0	0	0	16	185,681
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.....	407	49,325,957	0	(a).....0	0	0	0	0	407	49,325,957
21. Issued during year.....	9	6,272,775	0	0	0	0	0	0	9	6,272,775
22. Other changes to in force (Net).....	(20)	(937,934)	0	0	0	0	0	0	(20)	(937,934)
23. In force December 31 of current year.....	396	54,660,798	0	(a).....0	0	0	0	0	396	54,660,798

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	14,461	14,471	2,853	0	0
25.2 Guaranteed renewable (b).....	5,595	5,599	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).....	20,055	20,070	2,853	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	20,055	20,070	2,853	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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	12,831,642	.....0	.....0	.....0	12,831,642
2. Annuity considerations.....	2,354,996	.....0	.....0	.....0	2,354,996
3. Deposit-type contract funds.....	352,072	XXX.....	.....0	XXX.....	352,072
4. Other considerations.....	.....0	.....0	4,526,105	.....0	4,526,105
5. Totals (Sum of Lines 1 to 4).....	15,538,710	.....0	4,526,105	.....0	20,064,814
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	37,312	.....0	.....0	.....0	37,312
6.2 Applied to pay renewal premiums.....	71,479	.....0	.....0	.....0	71,479
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,760,047	.....0	.....0	.....0	1,760,047
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,868,839	.....0	.....0	.....0	1,868,839
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).....	1,868,839	.....0	.....0	.....0	1,868,839
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	385,656	.....0	.....0	.....0	385,656
10. Matured endowments.....	7,286	.....0	.....0	.....0	7,286
11. Annuity benefits.....	38,119,150	.....0	154,016	.....0	38,273,165
12. Surrender values and withdrawals for life contracts.....	94,224,060	.....0	31,417,804	.....0	125,641,864
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.....	132,736,152	.....0	31,571,819	.....0	164,307,971

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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	150,000	.....0	.....0	.....0	.....0	.....0	.....0	.....3	150,000
Settled during current year:										
18.1 By payment in full.....	.....3	150,000	.....0	.....0	.....0	.....0	.....0	.....0	.....3	150,000
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....3	150,000	.....0	.....0	.....0	.....0	.....0	.....0	.....3	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.....	.....3	150,000	.....0	.....0	.....0	.....0	.....0	.....0	.....3	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.....	1,817	514,022,187	.....0	(a).....0	.....0	50,000	.....0	.....0	1,817	514,072,187
21. Issued during year.....	199	59,935,443	.....0	.....0	.....0	.....0	.....0	.....0	199	59,935,443
22. Other changes to in force (Net).....	(79)	(25,978,539)	.....0	.....0	.....0	.....0	.....0	.....0	(79)	(25,978,539)
23. In force December 31 of current year.....	1,937	547,979,091	.....0	(a).....0	.....0	50,000	.....0	.....0	1,937	548,029,091

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (b).....	.....0	.....0	.....0	.....0	.....0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	.....0	.....0	.....0	.....0	.....0
Other Individual Policies:					
25.1 Non-cancelable (b).....	181,274	181,405	43,387	46,705	47,049
25.2 Guaranteed renewable (b).....	17,746	17,759	.....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).....	199,020	199,164	43,387	46,705	47,049
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	199,020	199,164	43,387	46,705	47,049

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	5,910,333	0	0	0	5,910,333
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	377,649	XXX	0	XXX	377,649
4. Other considerations.....	0	0	99,391	0	99,391
5. Totals (Sum of Lines 1 to 4).....	6,287,981	0	99,391	0	6,387,373
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	2,848	0	0	0	2,848
6.2 Applied to pay renewal premiums.....	27,941	0	0	0	27,941
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,298,070	0	0	0	1,298,070
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,328,860	0	0	0	1,328,860
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).....	1,328,860	0	0	0	1,328,860
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	13,926	0	0	0	13,926
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	551,853	0	6,796	0	558,649
12. Surrender values and withdrawals for life contracts.....	2,868,402	0	91,870	0	2,960,272
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.....	3,434,182	0	98,666	0	3,532,847

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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	11,000	0	0	0	0	0	0	2	11,000
Settled during current year:										
18.1 By payment in full.....	2	11,000	0	0	0	0	0	0	2	11,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	2	11,000	0	0	0	0	0	0	2	11,000
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	11,000	0	0	0	0	0	0	2	11,000
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.....	435	210,985,639	0	(a).....0	0	0	0	0	435	210,985,639
21. Issued during year.....	21	24,050,949	0	0	0	0	0	0	21	24,050,949
22. Other changes to in force (Net).....	(16)	(129,919)	0	0	0	0	0	0	(16)	(129,919)
23. In force December 31 of current year.....	440	234,906,669	0	(a).....0	0	0	0	0	440	234,906,669

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	87,377	87,440	17,177	40,300	37,713
25.2 Guaranteed renewable (b).....	11,250	11,258	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).....	98,627	98,698	17,177	40,300	37,713
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	98,627	98,698	17,177	40,300	37,713

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF NEBRASKA DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	9,492,831	.....0	.....0	.....0	9,492,831
2. Annuity considerations.....	568,514	.....0	.....0	.....0	568,514
3. Deposit-type contract funds.....	462,960	XXX.....	.....0	XXX.....	462,960
4. Other considerations.....	.....0	.....0	877,718	.....0	877,718
5. Totals (Sum of Lines 1 to 4).....	10,524,305	.....0	877,718	.....0	11,402,023
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	42,007	.....0	.....0	.....0	42,007
6.2 Applied to pay renewal premiums.....	153,495	.....0	.....0	.....0	153,495
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,414,402	.....0	.....0	.....0	1,414,402
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,609,904	.....0	.....0	.....0	1,609,904
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).....	1,609,904	.....0	.....0	.....0	1,609,904
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,993,628	.....0	.....0	.....0	1,993,628
10. Matured endowments.....	3,500	.....0	.....0	.....0	3,500
11. Annuity benefits.....	5,431,608	.....0	154,342	.....0	5,585,951
12. Surrender values and withdrawals for life contracts.....	20,756,459	.....0	1,966,203	.....0	22,722,662
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.....0	.....0	.....0	.....0	.....0
14. All other benefits, except accident and health.....	.....0	.....0	.....0	.....0	.....0
15. Totals.....	28,185,195	.....0	2,120,545	.....0	30,305,740

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	.....116	1,243,532	.....0	.....0	.....0	.....0	.....0	.....0	.....116	1,243,532
Settled during current year:										
18.1 By payment in full.....	.....116	1,243,532	.....0	.....0	.....0	.....0	.....0	.....0	.....116	1,243,532
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....116	1,243,532	.....0	.....0	.....0	.....0	.....0	.....0	.....116	1,243,532
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.....	.....116	1,243,532	.....0	.....0	.....0	.....0	.....0	.....0	.....116	1,243,532
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,159	277,560,061	.....0	(a).....0	.....0	44,000	.....0	.....0	3,159	277,604,061
21. Issued during year.....	.....113	67,005,114	.....0	.....0	.....0	.....0	.....0	.....0	.....113	67,005,114
22. Other changes to in force (Net).....	.....(186)	(8,730,342)	.....0	.....0	.....0	(12,750)	.....0	.....0	.....(186)	(8,743,092)
23. In force December 31 of current year.....	3,086	335,834,833	.....0	(a).....0	.....0	31,250	.....0	.....0	3,086	335,866,083

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	81,356	81,415	15,348	12,560	12,693
25.2 Guaranteed renewable (b).....	1,303	1,304	.....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).....	82,659	82,719	15,348	12,560	12,693
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	82,659	82,719	15,348	12,560	12,693

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF NEW HAMPSHIRE DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	7,157,983	.....0	.....0	.....0	7,157,983
2. Annuity considerations.....	2,024,677	.....0	.....0	.....0	2,024,677
3. Deposit-type contract funds.....	3,120	XXX.....	.....0	XXX.....	3,120
4. Other considerations.....	.....0	.....0	3,357	.....0	3,357
5. Totals (Sum of Lines 1 to 4).....	9,185,781	.....0	3,357	.....0	9,189,137
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	3,140	.....0	.....0	.....0	3,140
6.2 Applied to pay renewal premiums.....	19,640	.....0	.....0	.....0	19,640
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	899,744	.....0	.....0	.....0	899,744
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	922,523	.....0	.....0	.....0	922,523
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).....	922,523	.....0	.....0	.....0	922,523
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	23,407	.....0	.....0	.....0	23,407
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	5,048,459	.....0	38,000	.....0	5,086,459
12. Surrender values and withdrawals for life contracts.....	10,835,269	.....0	7,164	.....0	10,842,433
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.....	15,907,135	.....0	45,163	.....0	15,952,299

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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	2,000	.....0	.....0	.....0	.....0	.....0	.....0	.....1	2,000
Settled during current year:										
18.1 By payment in full.....	.....1	2,000	.....0	.....0	.....0	.....0	.....0	.....0	.....1	2,000
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....1	2,000	.....0	.....0	.....0	.....0	.....0	.....0	.....1	2,000
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	2,000	.....0	.....0	.....0	.....0	.....0	.....0	.....1	2,000
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.....	.....467	150,584,884	.....0	(a).....0	.....0	.....0	.....0	.....0	.....467	150,584,884
21. Issued during year.....	.....47	17,334,255	.....0	.....0	.....0	.....0	.....0	.....0	.....47	17,334,255
22. Other changes to in force (Net).....	.....(25)	(2,082,761)	.....0	.....0	.....0	.....0	.....0	.....0	.....(25)	(2,082,761)
23. In force December 31 of current year.....	.....489	165,836,378	.....0	(a).....0	.....0	.....0	.....0	.....0	.....489	165,836,378

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	28,631	28,652	5,083	29,328	29,753
25.2 Guaranteed renewable (b).....	5,767	5,771	.....0	.....0	.....0
25.3 Non-renewable for stated reasons only (b).....	.....0	.....0	.....0	.....0	.....0
25.4 Other accident only.....	.....0	.....0	.....0	.....0	.....0
25.5 All other (b).....	.....0	.....0	.....0	.....0	.....0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	34,398	34,423	5,083	29,328	29,753
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	34,398	34,423	5,083	29,328	29,753

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF NEW JERSEY DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	25,178,303	.....0	.....0	.....0	25,178,303
2. Annuity considerations.....	4,317,640	.....0	.....0	.....0	4,317,640
3. Deposit-type contract funds.....	3,286,966	....XXX.....	.....0	....XXX.....	3,286,966
4. Other considerations.....	.....0	.....0	1,042,173	.....0	1,042,173
5. Totals (Sum of Lines 1 to 4).....	32,782,909	.....0	1,042,173	.....0	33,825,082
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	24,777	.....0	.....0	.....0	24,777
6.2 Applied to pay renewal premiums.....	162,014	.....0	.....0	.....0	162,014
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	3,210,402	.....0	.....0	.....0	3,210,402
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	3,397,193	.....0	.....0	.....0	3,397,193
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).....	3,397,193	.....0	.....0	.....0	3,397,193
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	5,993,917	.....0	.....0	.....0	5,993,917
10. Matured endowments.....	624	.....0	.....0	.....0	624
11. Annuity benefits.....	28,023,367	.....0	1,645,659	.....0	29,669,026
12. Surrender values and withdrawals for life contracts.....	97,174,691	.....0	4,648,447	.....0	101,823,138
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.....	131,192,599	.....0	6,294,106	.....0	137,486,705

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	.....8	3,914,914	.....0	.....0	.....0	.....0	.....0	.....0	.....8	3,914,914
Settled during current year:										
18.1 By payment in full.....	.....4	1,416,095	.....0	.....0	.....0	.....0	.....0	.....0	.....4	1,416,095
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....4	1,416,095	.....0	.....0	.....0	.....0	.....0	.....0	.....4	1,416,095
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	1,416,095	.....0	.....0	.....0	.....0	.....0	.....0	.....4	1,416,095
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.....4	2,498,819	.....0	.....0	.....0	.....0	.....0	.....0	.....4	2,498,819
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	2,182	851,970,377	.....0	(a).....0	.....0	.....0	.....0	.....0	2,182	851,970,377
21. Issued during year.....	262	127,599,399	.....0	.....0	.....0	.....0	.....0	.....0	262	127,599,399
22. Other changes to in force (Net).....	(129)	(62,154,254)	.....0	.....0	.....0	.....0	.....0	.....0	(129)	(62,154,254)
23. In force December 31 of current year.....	2,315	917,415,522	.....0	(a).....0	.....0	.....0	.....0	.....0	2,315	917,415,522

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (b).....	.....0	.....0	.....0	.....0	.....0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	.....0	.....0	.....0	.....0	.....0
Other Individual Policies:					
25.1 Non-cancelable (b).....	186,132	186,267	35,759	108,253	110,803
25.2 Guaranteed renewable (b).....	15,563	15,575	.....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).....	201,695	201,841	35,759	108,253	110,803
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	201,695	201,841	35,759	108,253	110,803

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

OHIO NATIONAL LIFE INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	803,150	.....0	.....0	.....0	.....803,150
2. Annuity considerations.....	58,693	.....0	.....0	.....0	.....58,693
3. Deposit-type contract funds.....	612	.....XXX	.....0	.....XXX	.....612
4. Other considerations.....	0	.....0	.....0	.....0	.....0
5. Totals (Sum of Lines 1 to 4).....	862,454	.....0	.....0	.....0	.....862,454
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	1,193	.....0	.....0	.....0	.....1,193
6.2 Applied to pay renewal premiums.....	5,391	.....0	.....0	.....0	.....5,391
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	94,451	.....0	.....0	.....0	.....94,451
6.4 Other.....	0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	101,035	.....0	.....0	.....0	.....101,035
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).....	101,035	.....0	.....0	.....0	.....101,035
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	80,905	.....0	.....0	.....0	.....80,905
10. Matured endowments.....	0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	2,731,980	.....0	7,016	.....0	.....2,738,997
12. Surrender values and withdrawals for life contracts.....	3,900,687	.....0	5,540	.....0	.....3,906,227
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.....	6,713,572	.....0	.....12,556	.....0	.....6,726,128

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 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	3	.....19,294	.....0	.....0	.....0	.....0	.....0	.....0	.....3	.....19,294
17. Incurred during current year.....	4	.....25,435	.....0	.....0	.....0	.....0	.....0	.....0	.....4	.....25,435
Settled during current year:										
18.1 By payment in full.....	7	.....44,729	.....0	.....0	.....0	.....0	.....0	.....0	.....7	.....44,729
18.2 By payment on compromised claims.....	0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	7	.....44,729	.....0	.....0	.....0	.....0	.....0	.....0	.....7	.....44,729
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	.....44,729	.....0	.....0	.....0	.....0	.....0	.....0	.....7	.....44,729
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.....	193	.....25,038,791	.....0	(a).....0	.....0	.....62,000	.....0	.....0	.....193	.....25,100,791
21. Issued during year.....	8	.....2,059,272	.....0	.....0	.....0	.....0	.....0	.....0	.....8	.....2,059,272
22. Other changes to in force (Net).....	(13)	.....(1,869,841)	.....0	.....0	.....0	.....0	.....0	.....0	.....(13)	.....(1,869,841)
23. In force December 31 of current year.....	188	.....25,228,222	.....0	(a).....0	.....0	.....62,000	.....0	.....0	.....188	.....25,290,222

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	12,939	12,948	3,677	.....0	.....0
25.2 Guaranteed renewable (b).....	4,892	4,895	.....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).....	17,831	17,844	3,677	.....0	.....0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	17,831	17,844	3,677	.....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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF NEVADA DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,592,922	.....0	.....0	.....0	2,592,922
2. Annuity considerations.....	56,919	.....0	.....0	.....0	56,919
3. Deposit-type contract funds.....	213,276	XXX.....	.....0	XXX.....	213,276
4. Other considerations.....	.....0	.....0	15,954	.....0	15,954
5. Totals (Sum of Lines 1 to 4).....	2,863,117	.....0	15,954	.....0	2,879,070
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	3,261	.....0	.....0	.....0	3,261
6.2 Applied to pay renewal premiums.....	26,095	.....0	.....0	.....0	26,095
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	600,246	.....0	.....0	.....0	600,246
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	629,602	.....0	.....0	.....0	629,602
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).....	629,602	.....0	.....0	.....0	629,602
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	74,341	.....0	.....0	.....0	74,341
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	2,703,806	.....0	29,886	.....0	2,733,692
12. Surrender values and withdrawals for life contracts.....	12,477,487	.....0	1,073,762	.....0	13,551,250
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.....	15,255,634	.....0	1,103,648	.....0	16,359,283

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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	55,576	.....0	.....0	.....0	.....0	.....0	.....0	.....4	55,576
Settled during current year:										
18.1 By payment in full.....	.....4	55,576	.....0	.....0	.....0	.....0	.....0	.....0	.....4	55,576
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....4	55,576	.....0	.....0	.....0	.....0	.....0	.....0	.....4	55,576
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	55,576	.....0	.....0	.....0	.....0	.....0	.....0	.....4	55,576
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.....	343	112,469,063	.....0	(a).....0	.....0	.....0	.....0	.....0	343	112,469,063
21. Issued during year.....	24	6,949,322	.....0	.....0	.....0	.....0	.....0	.....0	24	6,949,322
22. Other changes to in force (Net).....	(9)	763,896	.....0	.....0	.....0	.....0	.....0	.....0	(9)	763,896
23. In force December 31 of current year.....	358	120,182,281	.....0	(a).....0	.....0	.....0	.....0	.....0	358	120,182,281

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (b).....	.....0	.....0	.....0	.....0	.....0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	.....0	.....0	.....0	.....0	.....0
Other Individual Policies:					
25.1 Non-cancelable (b).....	51,672	51,709	9,055	35,042	48,073
25.2 Guaranteed renewable (b).....	11,957	11,965	.....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).....	63,628	63,675	9,055	35,042	48,073
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	63,628	63,675	9,055	35,042	48,073

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,014,224	.....0	.....0	.....0	2,014,224
2. Annuity considerations.....	(608,093)	.....0	.....0	.....0	(608,093)
3. Deposit-type contract funds.....	26,350	XXX.....	.....0	XXX.....	26,350
4. Other considerations.....	.....0	.....0	2,624	.....0	2,624
5. Totals (Sum of Lines 1 to 4).....	1,432,481	.....0	2,624	.....0	1,435,105
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	3,215	.....0	.....0	.....0	3,215
6.2 Applied to pay renewal premiums.....	19,491	.....0	.....0	.....0	19,491
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	260,758	.....0	.....0	.....0	260,758
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	283,464	.....0	.....0	.....0	283,464
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).....	283,464	.....0	.....0	.....0	283,464
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	54,041	.....0	.....0	.....0	54,041
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	5,745,510	.....0	4,936	.....0	5,750,447
12. Surrender values and withdrawals for life contracts.....	10,313,209	.....0	.....0	.....0	10,313,209
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.....	16,112,761	.....0	4,936	.....0	16,117,697

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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	12,011	.....0	.....0	.....0	.....0	.....0	.....0	.....2	12,011
Settled during current year:										
18.1 By payment in full.....	.....2	12,011	.....0	.....0	.....0	.....0	.....0	.....0	.....2	12,011
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....2	12,011	.....0	.....0	.....0	.....0	.....0	.....0	.....2	12,011
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	12,011	.....0	.....0	.....0	.....0	.....0	.....0	.....2	12,011
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.....	.....295	85,212,296	.....0	(a).....0	.....0	.....0	.....0	.....0	.....295	85,212,296
21. Issued during year.....	.....10	3,516,089	.....0	.....0	.....0	.....0	.....0	.....0	.....10	3,516,089
22. Other changes to in force (Net).....	.....(6)	16,812,087	.....0	.....0	.....0	.....0	.....0	.....0	.....(6)	16,812,087
23. In force December 31 of current year.....	.....299	105,540,472	.....0	(a).....0	.....0	.....0	.....0	.....0	.....299	105,540,472

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	29,752	29,774	5,825	.....0	.....0
25.2 Guaranteed renewable (b).....	1,291	1,292	.....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).....	31,043	31,066	5,825	.....0	.....0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	31,043	31,066	5,825	.....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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF OHIO DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	46,895,890	.....0	.....0	.....0	46,895,890
2. Annuity considerations.....	6,533,981	.....0	.....0	.....0	6,533,981
3. Deposit-type contract funds.....	5,726,962	XXX.....	75,000,000	XXX.....	80,726,962
4. Other considerations.....	.....0	.....0	28,749,224	.....0	28,749,224
5. Totals (Sum of Lines 1 to 4).....	59,156,833	.....0	103,749,224	.....0	162,906,056
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	145,750	.....0	.....0	.....0	145,750
6.2 Applied to pay renewal premiums.....	719,922	.....0	.....0	.....0	719,922
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	8,345,747	.....0	.....0	.....0	8,345,747
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	9,211,420	.....0	.....0	.....0	9,211,420
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).....	9,211,420	.....0	.....0	.....0	9,211,420
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	5,451,241	.....0	12,000	.....0	5,463,241
10. Matured endowments.....	45,196	.....0	.....0	.....0	45,196
11. Annuity benefits.....	60,209,541	.....0	5,199,826	.....0	65,409,367
12. Surrender values and withdrawals for life contracts.....	149,898,522	.....0	103,565,718	.....0	253,464,240
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.....0	.....0	.....0	.....0	.....0
14. All other benefits, except accident and health.....	.....0	.....0	.....0	.....0	.....0
15. Totals.....	215,604,500	.....0	108,777,544	.....0	324,382,044

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	57	189,177	.....0	.....0	.....0	.....0	.....0	.....0	57	189,177
17. Incurred during current year.....	274	5,555,623	.....0	.....0	.....0	.....0	.....0	.....0	274	5,555,623
Settled during current year:										
18.1 By payment in full.....	331	5,744,800	.....0	.....0	.....0	.....0	.....0	.....0	331	5,744,800
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	331	5,744,800	.....0	.....0	.....0	.....0	.....0	.....0	331	5,744,800
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.....	331	5,744,800	.....0	.....0	.....0	.....0	.....0	.....0	331	5,744,800
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.....	12,229	1,813,445,614	.....0	(a).....0	.....0	2,268,413	.....0	.....0	12,229	1,815,714,027
21. Issued during year.....	459	160,927,467	.....0	.....0	.....0	.....0	.....0	.....0	459	160,927,467
22. Other changes to in force (Net).....	(618)	(50,798,885)	.....0	.....0	.....0	(176,184)	.....0	.....0	(618)	(50,975,069)
23. In force December 31 of current year.....	12,070	1,923,574,196	.....0	(a).....0	.....0	2,092,229	.....0	.....0	12,070	1,925,666,425

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	1,023,560	1,024,302	196,574	218,244	(137,756)
25.2 Guaranteed renewable (b).....	118,216	118,302	132	25,438	26,855
25.3 Non-renewable for stated reasons only (b).....	.....0	.....0	.....0	.....0	.....0
25.4 Other accident only.....	.....0	.....0	.....0	.....0	.....0
25.5 All other (b).....	.....0	.....0	.....0	.....0	.....0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	1,141,776	1,142,603	196,706	243,681	(110,901)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,141,776	1,142,603	196,706	243,681	(110,901)

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	9,933,185	.....0	.....0	.....0	9,933,185
2. Annuity considerations.....	235,937	.....0	.....0	.....0	235,937
3. Deposit-type contract funds.....	1,632	XXX.....0	.....0	XXX.....0	1,632
4. Other considerations.....	.....0	.....0	1,574,886	.....0	1,574,886
5. Totals (Sum of Lines 1 to 4).....	10,170,755	.....0	1,574,886	.....0	11,745,641
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	3,793	.....0	.....0	.....0	3,793
6.2 Applied to pay renewal premiums.....	16,913	.....0	.....0	.....0	16,913
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,491,125	.....0	.....0	.....0	1,491,125
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,511,830	.....0	.....0	.....0	1,511,830
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).....	1,511,830	.....0	.....0	.....0	1,511,830
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	207,928	.....0	.....0	.....0	207,928
10. Matured endowments.....	19,936	.....0	.....0	.....0	19,936
11. Annuity benefits.....	7,152,601	.....0	2,419	.....0	7,155,020
12. Surrender values and withdrawals for life contracts.....	22,413,304	.....0	6,155,037	.....0	28,568,342
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.....0	.....0	.....0	.....0	.....0
14. All other benefits, except accident and health.....	.....0	.....0	.....0	.....0	.....0
15. Totals.....	29,793,770	.....0	6,157,456	.....0	35,951,226

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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	308,912	.....0	.....0	.....0	.....0	.....0	.....0	.....4	308,912
Settled during current year:										
18.1 By payment in full.....	.....3	271,519	.....0	.....0	.....0	.....0	.....0	.....0	.....3	271,519
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....3	271,519	.....0	.....0	.....0	.....0	.....0	.....0	.....3	271,519
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	271,519	.....0	.....0	.....0	.....0	.....0	.....0	.....3	271,519
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.....1	37,393	.....0	.....0	.....0	.....0	.....0	.....0	.....1	37,393
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	.....946	356,479,757	.....0	(a).....0	.....0	.....0	.....0	.....0	.....946	356,479,757
21. Issued during year.....	.....54	26,787,563	.....0	.....0	.....0	.....0	.....0	.....0	.....54	26,787,563
22. Other changes to in force (Net).....	.....(42)	(23,459,011)	.....0	.....0	.....0	.....0	.....0	.....0	.....(42)	(23,459,011)
23. In force December 31 of current year.....	.....958	359,808,309	.....0	(a).....0	.....0	.....0	.....0	.....0	.....958	359,808,309

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	100,095	100,168	23,352	.....0	.....0
25.2 Guaranteed renewable (b).....	4,675	4,678	.....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).....	104,770	104,846	23,352	.....0	.....0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	104,770	104,846	23,352	.....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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF OREGON DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	3,608,032	.....0	.....0	.....0	3,608,032
2. Annuity considerations.....	43,484	.....0	.....0	.....0	43,484
3. Deposit-type contract funds.....	140,399	XXX.....	.....0	XXX.....	140,399
4. Other considerations.....	.....0	.....0	629,380	.....0	629,380
5. Totals (Sum of Lines 1 to 4).....	3,791,915	.....0	629,380	.....0	4,421,295
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	25,042	.....0	.....0	.....0	25,042
6.2 Applied to pay renewal premiums.....	29,202	.....0	.....0	.....0	29,202
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	827,405	.....0	.....0	.....0	827,405
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	881,649	.....0	.....0	.....0	881,649
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).....	881,649	.....0	.....0	.....0	881,649
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	314,581	.....0	.....0	.....0	314,581
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	8,315,714	.....0	37,340	.....0	8,353,055
12. Surrender values and withdrawals for life contracts.....	24,439,037	.....0	1,004,813	.....0	25,443,850
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.....	33,069,332	.....0	1,042,153	.....0	34,111,485

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	.....12	66,035	.....0	.....0	.....0	.....0	.....0	.....0	.....12	66,035
Settled during current year:										
18.1 By payment in full.....	.....12	66,035	.....0	.....0	.....0	.....0	.....0	.....0	.....12	66,035
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....12	66,035	.....0	.....0	.....0	.....0	.....0	.....0	.....12	66,035
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	66,035	.....0	.....0	.....0	.....0	.....0	.....0	.....12	66,035
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.....	.....939	160,478,975	.....0	(a).....0	.....0	.....0	.....0	.....0	.....939	160,478,975
21. Issued during year.....	.....60	19,717,570	.....0	.....0	.....0	.....0	.....0	.....0	.....60	19,717,570
22. Other changes to in force (Net).....	.....(53)	(10,179,292)	.....0	.....0	.....0	.....0	.....0	.....0	.....(53)	(10,179,292)
23. In force December 31 of current year.....	.....946	170,017,253	.....0	(a).....0	.....0	.....0	.....0	.....0	.....946	170,017,253

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	153,380	153,492	29,445	.....0	.....0
25.2 Guaranteed renewable (b).....	7,094	7,099	.....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).....	160,475	160,591	29,445	.....0	.....0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	160,475	160,591	29,445	.....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 INSURANCE COMPANY



DIRECT BUSINESS IN OTHER ALIEN GRAND TOTAL DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	147,824	0	0	0	147,824
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).....	147,824	0	0	0	147,824
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	38	0	0	0	38
6.2 Applied to pay renewal premiums.....	1,190	0	0	0	1,190
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	40,019	0	0	0	40,019
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	41,247	0	0	0	41,247
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).....	41,247	0	0	0	41,247
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	0	0	0	0	0
10. Matured endowments.....	4,623	0	0	0	4,623
11. Annuity benefits.....	146,000	0	1,286	0	147,286
12. Surrender values and withdrawals for life contracts.....	13,119	0	0	0	13,119
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.....	163,742	0	1,286	0	165,028

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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).....	40	10,549,520	0	0	0	0	0	0	40	10,549,520
23. In force December 31 of current year.....	40	10,549,520	0	(a).....0	0	0	0	0	40	10,549,520

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	18,032	18,045	3,769	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).....	18,032	18,045	3,769	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	18,032	18,045	3,769	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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	37,356,459	.....0	.....0	.....0	37,356,459
2. Annuity considerations.....	4,884,726	.....0	.....0	.....0	4,884,726
3. Deposit-type contract funds.....	1,247,862	XXX.....	.....0	XXX.....	1,247,862
4. Other considerations.....	.....0	.....0	2,782,844	.....0	2,782,844
5. Totals (Sum of Lines 1 to 4).....	43,489,047	.....0	2,782,844	.....0	46,271,891
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	67,080	.....0	.....0	.....0	67,080
6.2 Applied to pay renewal premiums.....	140,966	.....0	.....0	.....0	140,966
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	5,798,765	.....0	.....0	.....0	5,798,765
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	6,006,810	.....0	.....0	.....0	6,006,810
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).....	6,006,810	.....0	.....0	.....0	6,006,810
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	2,697,688	.....0	16,250	.....0	2,713,938
10. Matured endowments.....	20,083	.....0	.....0	.....0	20,083
11. Annuity benefits.....	50,048,904	.....0	206,686	.....0	50,255,590
12. Surrender values and withdrawals for life contracts.....	138,777,592	.....0	9,542,119	.....0	148,319,712
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.....	191,544,267	.....0	9,765,055	.....0	201,309,322

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	.....119	2,496,539	.....0	.....0	.....0	.....0	.....0	.....0	.....119	2,496,539
Settled during current year:										
18.1 By payment in full.....	.....119	2,496,539	.....0	.....0	.....0	.....0	.....0	.....0	.....119	2,496,539
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....119	2,496,539	.....0	.....0	.....0	.....0	.....0	.....0	.....119	2,496,539
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.....	.....119	2,496,539	.....0	.....0	.....0	.....0	.....0	.....0	.....119	2,496,539
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	9,067	2,073,943,313	.....0	(a).....0	.....0	226,766	.....0	.....0	9,067	2,074,170,079
21. Issued during year.....	263	93,612,278	.....0	.....0	.....0	.....0	.....0	.....0	263	93,612,278
22. Other changes to in force (Net).....	(453)	(147,924,885)	.....0	.....0	.....0	(51,250)	.....0	.....0	(453)	(147,976,135)
23. In force December 31 of current year.....	8,877	2,019,630,706	.....0	(a).....0	.....0	175,516	.....0	.....0	8,877	2,019,806,222

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	556,199	556,603	104,466	149,443	159,946
25.2 Guaranteed renewable (b).....	45,427	45,460	.....0	14,400	14,440
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).....	601,627	602,063	104,466	163,843	174,386
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	601,627	602,063	104,466	163,843	174,386

(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 INSURANCE COMPANY



DIRECT BUSINESS IN PUERTO RICO DURING THE YEAR
NAIC Group Code.....0704 NAIC Company Code.....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	301,205	.....0	.....0	.....0	301,205
2. Annuity considerations.....	113,278	.....0	.....0	.....0	113,278
3. Deposit-type contract funds.....	64	XXX.....	.....0	XXX.....	64
4. Other considerations.....	.....0	.....0	.....0	.....0	.....0
5. Totals (Sum of Lines 1 to 4).....	414,548	.....0	.....0	.....0	414,548
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	1,177	.....0	.....0	.....0	1,177
6.2 Applied to pay renewal premiums.....	1,859	.....0	.....0	.....0	1,859
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	16,969	.....0	.....0	.....0	16,969
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	20,005	.....0	.....0	.....0	20,005
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).....	20,005	.....0	.....0	.....0	20,005
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	.....0	.....0	.....0	.....0	.....0
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	249,138	.....0	.....0	.....0	249,138
12. Surrender values and withdrawals for life contracts.....	524,484	.....0	.....0	.....0	524,484
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.....	773,622	.....0	.....0	.....0	773,622

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	30	15,093,790	.....0	(a).....0	.....0	.....0	.....0	.....0	30	15,093,790
21. Issued during year.....	2	200,000	.....0	.....0	.....0	.....0	.....0	.....0	2	200,000
22. Other changes to in force (Net).....	(4)	(6,098,768)	.....0	.....0	.....0	.....0	.....0	.....0	(4)	(6,098,768)
23. In force December 31 of current year.....	28	9,195,022	.....0	(a).....0	.....0	.....0	.....0	.....0	28	9,195,022

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	1,134,228	1,135,051	217,504	102,268	105,118
25.2 Guaranteed renewable (b).....	2,877	2,879	.....0	.....0	.....0
25.3 Non-renewable for stated reasons only (b).....	.....0	.....0	.....0	.....0	.....0
25.4 Other accident only.....	.....0	.....0	.....0	.....0	.....0
25.5 All other (b).....	.....0	.....0	.....0	.....0	.....0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	1,137,105	1,137,930	217,504	102,268	105,118
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,137,105	1,137,930	217,504	102,268	105,118

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,023,068	.....0	.....0	.....0	2,023,068
2. Annuity considerations.....	1,147,512	.....0	.....0	.....0	1,147,512
3. Deposit-type contract funds.....	80,833	XXX.....	.....0	XXX.....	80,833
4. Other considerations.....	.....0	.....0	65,508	.....0	65,508
5. Totals (Sum of Lines 1 to 4).....	3,251,413	.....0	65,508	.....0	3,316,921
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	121	.....0	.....0	.....0	121
6.2 Applied to pay renewal premiums.....	10,456	.....0	.....0	.....0	10,456
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	251,040	.....0	.....0	.....0	251,040
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	261,616	.....0	.....0	.....0	261,616
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).....	261,616	.....0	.....0	.....0	261,616
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	.....0	.....0	.....0	.....0	.....0
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	5,601,197	.....0	.....0	.....0	5,601,197
12. Surrender values and withdrawals for life contracts.....	9,981,477	.....0	11,249	.....0	9,992,726
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.....	15,582,674	.....0	11,249	.....0	15,593,923

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	(1)	(100,000)	.....0	.....0	.....0	.....0	.....0	.....0	(1)	(100,000)
17. Incurred during current year.....	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).....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	221	55,075,651	.....0	(a).....0	.....0	.....0	.....0	.....0	221	55,075,651
21. Issued during year.....	20	15,962,052	.....0	.....0	.....0	.....0	.....0	.....0	20	15,962,052
22. Other changes to in force (Net).....	(11)	(9,122,426)	.....0	.....0	.....0	.....0	.....0	.....0	(11)	(9,122,426)
23. In force December 31 of current year.....	230	61,915,277	.....0	(a).....0	.....0	.....0	.....0	.....0	230	61,915,277

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	49,958	49,994	9,926	30,000	30,083
25.2 Guaranteed renewable (b).....	3,309	3,311	.....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).....	53,267	53,305	9,926	30,000	30,083
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	53,267	53,305	9,926	30,000	30,083

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	5,357,387	.....0	.....0	.....0	5,357,387
2. Annuity considerations.....	471,108	.....0	.....0	.....0	471,108
3. Deposit-type contract funds.....	3,448	XXX.....	.....0	XXX.....	3,448
4. Other considerations.....	.....0	.....0	763,680	.....0	763,680
5. Totals (Sum of Lines 1 to 4).....	5,831,943	.....0	763,680	.....0	6,595,623
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	5,839	.....0	.....0	.....0	5,839
6.2 Applied to pay renewal premiums.....	115,882	.....0	.....0	.....0	115,882
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	797,135	.....0	.....0	.....0	797,135
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	918,856	.....0	.....0	.....0	918,856
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).....	918,856	.....0	.....0	.....0	918,856
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	679,600	.....0	.....0	.....0	679,600
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	22,183,392	.....0	154,242	.....0	22,337,635
12. Surrender values and withdrawals for life contracts.....	43,528,614	.....0	2,299,655	.....0	45,828,269
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.....	66,391,606	.....0	2,453,897	.....0	68,845,503

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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	526,684	.....0	.....0	.....0	.....0	.....0	.....0	.....1	526,684
Settled during current year:										
18.1 By payment in full.....	.....1	472,567	.....0	.....0	.....0	.....0	.....0	.....0	.....1	472,567
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....1	472,567	.....0	.....0	.....0	.....0	.....0	.....0	.....1	472,567
18.4 Reduction by compromise.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.5 Amount rejected.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.6 Total settlements.....	.....1	472,567	.....0	.....0	.....0	.....0	.....0	.....0	.....1	472,567
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.....0	54,117	.....0	.....0	.....0	.....0	.....0	.....0	.....0	54,117
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	796	188,976,287	.....0	(a).....0	.....0	.....0	.....0	.....0	796	188,976,287
21. Issued during year.....	61	16,992,509	.....0	.....0	.....0	.....0	.....0	.....0	61	16,992,509
22. Other changes to in force (Net).....	(48)	(7,841,719)	.....0	.....0	.....0	.....0	.....0	.....0	(48)	(7,841,719)
23. In force December 31 of current year.....	809	198,127,077	.....0	(a).....0	.....0	.....0	.....0	.....0	809	198,127,077

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	80,436	80,495	16,555	90,384	97,859
25.2 Guaranteed renewable (b).....	6,739	6,743	.....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).....	87,175	87,238	16,555	90,384	97,859
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	87,175	87,238	16,555	90,384	97,859

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,988,851	.....0	.....0	.....0	1,988,851
2. Annuity considerations.....	28,325	.....0	.....0	.....0	28,325
3. Deposit-type contract funds.....	35,542	XXX.....	.....0	XXX.....	35,542
4. Other considerations.....	.....0	.....0	13,588	.....0	13,588
5. Totals (Sum of Lines 1 to 4).....	2,052,719	.....0	13,588	.....0	2,066,307
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	3,251	.....0	.....0	.....0	3,251
6.2 Applied to pay renewal premiums.....	13,387	.....0	.....0	.....0	13,387
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	265,832	.....0	.....0	.....0	265,832
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	282,470	.....0	.....0	.....0	282,470
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).....	282,470	.....0	.....0	.....0	282,470
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	239,523	.....0	.....0	.....0	239,523
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	937,663	.....0	18,558	.....0	956,222
12. Surrender values and withdrawals for life contracts.....	4,686,799	.....0	8,192	.....0	4,694,990
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.....	5,863,985	.....0	26,750	.....0	5,890,735

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	2	27,000	.....0	.....0	.....0	.....0	.....0	.....0	2	27,000
17. Incurred during current year.....	6	43,000	.....0	.....0	.....0	.....0	.....0	.....0	6	43,000
Settled during current year:										
18.1 By payment in full.....	8	70,000	.....0	.....0	.....0	.....0	.....0	.....0	8	70,000
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	8	70,000	.....0	.....0	.....0	.....0	.....0	.....0	8	70,000
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	70,000	.....0	.....0	.....0	.....0	.....0	.....0	8	70,000
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.....	333	80,792,996	.....0	(a).....0	.....0	.....0	.....0	.....0	333	80,792,996
21. Issued during year.....	8	3,069,706	.....0	.....0	.....0	.....0	.....0	.....0	8	3,069,706
22. Other changes to in force (Net).....	(10)	959,761	.....0	.....0	.....0	.....0	.....0	.....0	(10)	959,761
23. In force December 31 of current year.....	331	84,822,463	.....0	(a).....0	.....0	.....0	.....0	.....0	331	84,822,463

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	8,397	8,403	1,181	.....0	.....0
25.2 Guaranteed renewable (b).....	355	355	.....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).....	8,752	8,758	1,181	.....0	.....0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	8,752	8,758	1,181	.....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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	17,829,745	.....0	.....0	.....0	17,829,745
2. Annuity considerations.....	1,401,519	.....0	.....0	.....0	1,401,519
3. Deposit-type contract funds.....	5,676	XXX.....0	.....0	XXX.....0	5,676
4. Other considerations.....	.....0	.....0	5,318,634	.....0	5,318,634
5. Totals (Sum of Lines 1 to 4).....	19,236,940	.....0	5,318,634	.....0	24,555,574
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	75,297	.....0	.....0	.....0	75,297
6.2 Applied to pay renewal premiums.....	176,891	.....0	.....0	.....0	176,891
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,989,901	.....0	.....0	.....0	1,989,901
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	2,242,088	.....0	.....0	.....0	2,242,088
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).....	2,242,088	.....0	.....0	.....0	2,242,088
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	736,450	.....0	30,000	.....0	766,450
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	17,572,735	.....0	586,488	.....0	18,159,223
12. Surrender values and withdrawals for life contracts.....	43,962,196	.....0	32,978,353	.....0	76,940,550
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.....	62,271,382	.....0	33,594,841	.....0	95,866,223

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	4	118,256	.....0	.....0	.....0	.....0	.....0	.....0	4	118,256
17. Incurred during current year.....	7	160,033	.....0	.....0	.....0	.....0	.....0	.....0	7	160,033
Settled during current year:										
18.1 By payment in full.....	11	278,289	.....0	.....0	.....0	.....0	.....0	.....0	11	278,289
18.2 By payment on compromised claims.....	0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	0	.....0
18.3 Totals paid.....	11	278,289	.....0	.....0	.....0	.....0	.....0	.....0	11	278,289
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	278,289	.....0	.....0	.....0	.....0	.....0	.....0	11	278,289
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.....	1,842	571,892,571	.....0	(a).....0	.....0	395,500	.....0	.....0	1,842	572,288,071
21. Issued during year.....	147	126,522,034	.....0	.....0	.....0	.....0	.....0	.....0	147	126,522,034
22. Other changes to in force (Net).....	(80)	(21,198,879)	.....0	.....0	.....0	(38,750)	.....0	.....0	(80)	(21,237,629)
23. In force December 31 of current year.....	1,909	677,215,726	.....0	(a).....0	.....0	356,750	.....0	.....0	1,909	677,572,476

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	331,871	332,112	77,861	56,847	68,058
25.2 Guaranteed renewable (b).....	23,449	23,466	.....0	14,700	14,700
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).....	355,321	355,578	77,861	71,547	82,758
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	355,321	355,578	77,861	71,547	82,758

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF TEXAS DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	52,072,639	0	0	0	52,072,639
2. Annuity considerations.....	1,754,749	0	0	0	1,754,749
3. Deposit-type contract funds.....	3,174,179	XXX	0	XXX	3,174,179
4. Other considerations.....	0	0	6,898,918	0	6,898,918
5. Totals (Sum of Lines 1 to 4).....	57,001,567	0	6,898,918	0	63,900,485
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	52,809	0	0	0	52,809
6.2 Applied to pay renewal premiums.....	314,218	0	0	0	314,218
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	7,609,785	0	0	0	7,609,785
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	7,976,812	0	0	0	7,976,812
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).....	7,976,812	0	0	0	7,976,812
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,691,570	0	0	0	1,691,570
10. Matured endowments.....	4,037	0	0	0	4,037
11. Annuity benefits.....	35,336,512	0	321,129	0	35,657,641
12. Surrender values and withdrawals for life contracts.....	112,173,863	0	13,893,189	0	126,067,051
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.....	149,205,981	0	14,214,318	0	163,420,299

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	4	341,976	0	0	1	8,000	0	0	5	349,976
17. Incurred during current year.....	30	765,432	0	0	0	0	0	0	30	765,432
Settled during current year:										
18.1 By payment in full.....	34	1,107,408	0	0	0	0	0	0	34	1,107,408
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	34	1,107,408	0	0	0	0	0	0	34	1,107,408
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.....	34	1,107,408	0	0	0	0	0	0	34	1,107,408
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	1	8,000	0	0	1	8,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	5,309	1,909,393,342	0	(a).....0	0	40,300	0	0	5,309	1,909,433,642
21. Issued during year.....	452	181,856,712	0	0	0	0	0	0	452	181,856,712
22. Other changes to in force (Net).....	(231)	(64,087,807)	0	0	0	0	0	0	(231)	(64,087,807)
23. In force December 31 of current year.....	5,530	2,027,162,247	0	(a).....0	0	40,300	0	0	5,530	2,027,202,547

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (b).....	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b).....	456,486	456,817	90,385	254,590	253,627
25.2 Guaranteed renewable (b).....	58,370	58,413	0	54,219	45,739
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).....	514,856	515,229	90,385	308,809	299,366
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	514,856	515,229	90,385	308,809	299,366

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF UTAH DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	10,147,283	.....0	.....0	.....0	10,147,283
2. Annuity considerations.....	172,628	.....0	.....0	.....0	172,628
3. Deposit-type contract funds.....	908,718	XXX.....	.....0	XXX.....	908,718
4. Other considerations.....	.....0	.....0	6,986	.....0	6,986
5. Totals (Sum of Lines 1 to 4).....	11,228,630	.....0	6,986	.....0	11,235,616
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	11,183	.....0	.....0	.....0	11,183
6.2 Applied to pay renewal premiums.....	114,335	.....0	.....0	.....0	114,335
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	1,001,238	.....0	.....0	.....0	1,001,238
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	1,126,756	.....0	.....0	.....0	1,126,756
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).....	1,126,756	.....0	.....0	.....0	1,126,756
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,527	.....0	.....0	.....0	1,527
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	2,760,126	.....0	.....0	.....0	2,760,126
12. Surrender values and withdrawals for life contracts.....	13,304,691	.....0	798	.....0	13,305,489
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.....	16,066,344	.....0	798	.....0	16,067,142

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	2	271,732	.....0	.....0	.....0	.....0	.....0	.....0	2	271,732
17. Incurred during current year.....	1	911	.....0	.....0	.....0	.....0	.....0	.....0	1	911
Settled during current year:										
18.1 By payment in full.....	1	1,531	.....0	.....0	.....0	.....0	.....0	.....0	1	1,531
18.2 By payment on compromised claims.....	0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	0	.....0
18.3 Totals paid.....	1	1,531	.....0	.....0	.....0	.....0	.....0	.....0	1	1,531
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	1,531	.....0	.....0	.....0	.....0	.....0	.....0	1	1,531
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	271,112	.....0	.....0	.....0	.....0	.....0	.....0	2	271,112
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,028	401,977,602	.....0	(a).....0	.....0	.....0	.....0	.....0	1,028	401,977,602
21. Issued during year.....	144	85,112,124	.....0	.....0	.....0	.....0	.....0	.....0	144	85,112,124
22. Other changes to in force (Net).....	(55)	(21,059,371)	.....0	.....0	.....0	.....0	.....0	.....0	(55)	(21,059,371)
23. In force December 31 of current year.....	1,117	466,030,355	.....0	(a).....0	.....0	.....0	.....0	.....0	1,117	466,030,355

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	52,642	52,681	10,439	.....0	.....0
25.2 Guaranteed renewable (b).....	1,069	1,069	.....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).....	53,711	53,750	10,439	.....0	.....0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	53,711	53,750	10,439	.....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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF VIRGINIA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	10,897,516	.....0	.....0	.....0	10,897,516
2. Annuity considerations.....	1,010,503	.....0	.....0	.....0	1,010,503
3. Deposit-type contract funds.....	4,038	XXX.....0	.....0	XXX.....0	4,038
4. Other considerations.....	.....0	.....0	5,372,509	.....0	5,372,509
5. Totals (Sum of Lines 1 to 4).....	11,912,058	.....0	5,372,509	.....0	17,284,567
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	15,775	.....0	.....0	.....0	15,775
6.2 Applied to pay renewal premiums.....	332,507	.....0	.....0	.....0	332,507
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	2,313,649	.....0	.....0	.....0	2,313,649
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	2,661,930	.....0	.....0	.....0	2,661,930
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).....	2,661,930	.....0	.....0	.....0	2,661,930
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,718,006	.....0	.....0	.....0	1,718,006
10. Matured endowments.....	4,667	.....0	.....0	.....0	4,667
11. Annuity benefits.....	31,652,006	.....0	49,612	.....0	31,701,618
12. Surrender values and withdrawals for life contracts.....	82,982,001	.....0	22,356,155	.....0	105,338,155
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.....	116,356,679	.....0	22,405,767	.....0	138,762,446

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	2	636,925	.....0	.....0	1	14,000	.....0	.....0	3	650,925
17. Incurred during current year.....	10	1,363,812	.....0	.....0	0	.....0	.....0	.....0	10	1,363,812
Settled during current year:										
18.1 By payment in full.....	11	1,318,526	.....0	.....0	0	.....0	.....0	.....0	11	1,318,526
18.2 By payment on compromised claims.....	0	.....0	.....0	.....0	0	.....0	.....0	.....0	0	.....0
18.3 Totals paid.....	11	1,318,526	.....0	.....0	0	.....0	.....0	.....0	11	1,318,526
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	1,318,526	.....0	.....0	0	.....0	.....0	.....0	11	1,318,526
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	682,211	.....0	.....0	1	14,000	.....0	.....0	2	696,211
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,950	507,310,754	.....0	(a).....0	0	191,550	.....0	.....0	1,950	507,502,304
21. Issued during year.....	170	61,715,004	.....0	.....0	0	.....0	.....0	.....0	170	61,715,004
22. Other changes to in force (Net).....	(96)	(20,837,002)	.....0	.....0	0	(23,800)	.....0	.....0	(96)	(20,860,802)
23. In force December 31 of current year.....	2,024	548,188,756	.....0	(a).....0	0	167,750	.....0	.....0	2,024	548,356,506

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	155,711	155,824	36,072	71,792	71,792
25.2 Guaranteed renewable (b).....	31,535	31,558	.....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).....	187,246	187,382	36,072	71,792	71,792
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	187,246	187,382	36,072	71,792	71,792

(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 INSURANCE COMPANY



DIRECT BUSINESS IN U.S. VIRGIN ISLANDS DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	32	0	0	0	32
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).....	32	0	0	0	32
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	0	0	0	0	0
6.2 Applied to pay renewal premiums.....	80	0	0	0	80
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	94	0	0	0	94
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	174	0	0	0	174
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).....	174	0	0	0	174
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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	2	13,081	0	(a).....0	0	0	0	0	2	13,081
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	0	123	0	0	0	0	0	0	0	123
23. In force December 31 of current year.....	2	13,204	0	(a).....0	0	0	0	0	2	13,204

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members 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/certificates (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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF VERMONT DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	257,398	.....0	.....0	.....0	.....257,398
2. Annuity considerations.....	71,131	.....0	.....0	.....0	.....71,131
3. Deposit-type contract funds.....	41	.....XXX	.....0	.....XXX	.....41
4. Other considerations.....	.....0	.....0	.....27,081	.....0	.....27,081
5. Totals (Sum of Lines 1 to 4).....	328,571	.....0	.....27,081	.....0	.....355,652
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	120	.....0	.....0	.....0	.....120
6.2 Applied to pay renewal premiums.....	26,684	.....0	.....0	.....0	.....26,684
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	39,205	.....0	.....0	.....0	.....39,205
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	66,009	.....0	.....0	.....0	.....66,009
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).....	66,009	.....0	.....0	.....0	.....66,009
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	.....0	.....0	.....0	.....0	.....0
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	1,243,464	.....0	.....0	.....0	.....1,243,464
12. Surrender values and withdrawals for life contracts.....	4,126,193	.....0	.....0	.....0	.....4,126,193
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.....	5,369,657	.....0	.....0	.....0	.....5,369,657

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	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.....	.....70	.....11,690,313	.....0	(a).....0	.....0	.....0	.....0	.....0	.....70	.....11,690,313
21. Issued during year.....	.....3	.....851,217	.....0	.....0	.....0	.....0	.....0	.....0	.....3	.....851,217
22. Other changes to in force (Net).....	.....0	.....141,706	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....141,706
23. In force December 31 of current year.....	.....73	.....12,683,236	.....0	(a).....0	.....0	.....0	.....0	.....0	.....73	.....12,683,236

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (b).....	.....0	.....0	.....0	.....0	.....0
24.4 Medicare Title XVIII exempt from state taxes or fees.....	.....0	.....0	.....0	.....0	.....0
Other Individual Policies:					
25.1 Non-cancelable (b).....	6,166	6,170	1,202	.....0	.....0
25.2 Guaranteed renewable (b).....	.....0	.....0	.....0	.....0	.....0
25.3 Non-renewable for stated reasons only (b).....	.....0	.....0	.....0	.....0	.....0
25.4 Other accident only.....	.....0	.....0	.....0	.....0	.....0
25.5 All other (b).....	.....0	.....0	.....0	.....0	.....0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	6,166	6,170	1,202	.....0	.....0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	6,166	6,170	1,202	.....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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF WASHINGTON DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	7,015,352	.....0	.....0	.....0	7,015,352
2. Annuity considerations.....	591,397	.....0	.....0	.....0	591,397
3. Deposit-type contract funds.....	8,417	XXX.....	.....0	XXX.....	8,417
4. Other considerations.....	.....0	.....0	989,012	.....0	989,012
5. Totals (Sum of Lines 1 to 4).....	7,615,166	.....0	989,012	.....0	8,604,178
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	24,131	.....0	.....0	.....0	24,131
6.2 Applied to pay renewal premiums.....	112,392	.....0	.....0	.....0	112,392
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	837,115	.....0	.....0	.....0	837,115
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	973,638	.....0	.....0	.....0	973,638
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).....	973,638	.....0	.....0	.....0	973,638
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,162,941	.....0	.....0	.....0	1,162,941
10. Matured endowments.....	3,000	.....0	.....0	.....0	3,000
11. Annuity benefits.....	9,168,650	.....0	16,768	.....0	9,185,418
12. Surrender values and withdrawals for life contracts.....	25,947,829	.....0	1,641,956	.....0	27,589,785
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.....	36,282,420	.....0	1,658,724	.....0	37,941,144

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	9	242,181	.....0	.....0	.....0	.....0	.....0	.....0	9	242,181
17. Incurred during current year.....	29	562,120	.....0	.....0	.....0	.....0	.....0	.....0	29	562,120
Settled during current year:										
18.1 By payment in full.....	38	804,301	.....0	.....0	.....0	.....0	.....0	.....0	38	804,301
18.2 By payment on compromised claims.....	0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	0	.....0
18.3 Totals paid.....	38	804,301	.....0	.....0	.....0	.....0	.....0	.....0	38	804,301
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.....	38	804,301	.....0	.....0	.....0	.....0	.....0	.....0	38	804,301
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.....	1,462	309,321,081	.....0	(a).....0	.....0	.....0	.....0	.....0	1,462	309,321,081
21. Issued during year.....	79	36,143,631	.....0	.....0	.....0	.....0	.....0	.....0	79	36,143,631
22. Other changes to in force (Net).....	(86)	(16,515,922)	.....0	.....0	.....0	.....0	.....0	.....0	(86)	(16,515,922)
23. In force December 31 of current year.....	1,455	328,948,790	.....0	(a).....0	.....0	.....0	.....0	.....0	1,455	328,948,790

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	102,298	102,372	24,439	60,000	29,973
25.2 Guaranteed renewable (b).....	8,074	8,080	.....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).....	110,372	110,452	24,439	60,000	29,973
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	110,372	110,452	24,439	60,000	29,973

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

OHIO NATIONAL LIFE INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	17,075,817	.....0	.....0	.....0	17,075,817
2. Annuity considerations.....	2,201,370	.....0	.....0	.....0	2,201,370
3. Deposit-type contract funds.....	195,064	....XXX.....	.....0	....XXX.....	195,064
4. Other considerations.....	.....0	.....0	2,230,820	.....0	2,230,820
5. Totals (Sum of Lines 1 to 4).....	19,472,251	.....0	2,230,820	.....0	21,703,071
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	110,373	.....0	.....0	.....0	110,373
6.2 Applied to pay renewal premiums.....	270,940	.....0	.....0	.....0	270,940
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	3,632,714	.....0	.....0	.....0	3,632,714
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	4,014,027	.....0	.....0	.....0	4,014,027
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).....	4,014,027	.....0	.....0	.....0	4,014,027
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,893,835	.....0	.....0	.....0	1,893,835
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	22,545,539	.....0	172,113	.....0	22,717,652
12. Surrender values and withdrawals for life contracts.....	62,969,845	.....0	12,589,013	.....0	75,558,858
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.....	87,409,220	.....0	12,761,126	.....0	100,170,346

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	.....2	374,799	.....0	.....0	.....0	.....0	.....0	.....0	.....2	374,799
17. Incurred during current year.....	.....7	1,500,889	.....0	.....0	.....0	.....0	.....0	.....0	.....7	1,500,889
Settled during current year:										
18.1 By payment in full.....	.....8	1,754,849	.....0	.....0	.....0	.....0	.....0	.....0	.....8	1,754,849
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....8	1,754,849	.....0	.....0	.....0	.....0	.....0	.....0	.....8	1,754,849
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	1,754,849	.....0	.....0	.....0	.....0	.....0	.....0	.....8	1,754,849
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	.....1	120,839	.....0	.....0	.....0	.....0	.....0	.....0	.....1	120,839
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,171	731,460,209	.....0	(a).....0	.....0	111,000	.....0	.....0	3,171	731,571,209
21. Issued during year.....	173	76,785,754	.....0	.....0	.....0	.....0	.....0	.....0	173	76,785,754
22. Other changes to in force (Net).....	(100)	(16,039,448)	.....0	.....0	.....0	(41,000)	.....0	.....0	(100)	(16,080,448)
23. In force December 31 of current year.....	3,244	792,206,515	.....0	(a).....0	.....0	70,000	.....0	.....0	3,244	792,276,515

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	592,684	593,114	111,506	197,142	216,295
25.2 Guaranteed renewable (b).....	17,640	17,653	.....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).....	610,325	610,767	111,506	197,142	216,295
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	610,325	610,767	111,506	197,142	216,295

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,414,676	.....0	.....0	.....0	2,414,676
2. Annuity considerations.....	1,422,921	.....0	.....0	.....0	1,422,921
3. Deposit-type contract funds.....	6,448,400	XXX.....	.....0	XXX.....	6,448,400
4. Other considerations.....	.....0	.....0	1,295,091	.....0	1,295,091
5. Totals (Sum of Lines 1 to 4).....	10,285,997	.....0	1,295,091	.....0	11,581,088
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	2,440	.....0	.....0	.....0	2,440
6.2 Applied to pay renewal premiums.....	17,562	.....0	.....0	.....0	17,562
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	338,671	.....0	.....0	.....0	338,671
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	358,673	.....0	.....0	.....0	358,673
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).....	358,673	.....0	.....0	.....0	358,673
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	620,153	.....0	38,000	.....0	658,153
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	4,075,182	.....0	59,758	.....0	4,134,940
12. Surrender values and withdrawals for life contracts.....	8,496,726	.....0	1,504,175	.....0	10,000,901
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.....	13,192,061	.....0	1,601,933	.....0	14,793,994

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 No. of Pols. & Certifs.	2 Amount	3 No. of Ind. Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No. of Pols. & Certifs.	8 Amount	9 No. of Pols. & Certifs.	10 Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	.....1	185,614	.....0	.....0	.....0	.....0	.....0	.....0	.....1	185,614
17. Incurred during current year.....	.....6	292,500	.....0	.....0	.....0	.....0	.....0	.....0	.....6	292,500
Settled during current year:										
18.1 By payment in full.....	.....7	478,114	.....0	.....0	.....0	.....0	.....0	.....0	.....7	478,114
18.2 By payment on compromised claims.....	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0
18.3 Totals paid.....	.....7	478,114	.....0	.....0	.....0	.....0	.....0	.....0	.....7	478,114
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	478,114	.....0	.....0	.....0	.....0	.....0	.....0	.....7	478,114
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.....	.....669	95,016,805	.....0	(a).....0	.....0	54,500	.....0	.....0	.....669	95,071,305
21. Issued during year.....	.....30	14,746,802	.....0	.....0	.....0	.....0	.....0	.....0	.....30	14,746,802
22. Other changes to in force (Net).....	.....(31)	(4,050,449)	.....0	.....0	.....0	(44,500)	.....0	.....0	.....(31)	(4,094,949)
23. In force December 31 of current year.....	.....668	105,713,158	.....0	(a).....0	.....0	10,000	.....0	.....0	.....668	105,723,158

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	85,091	85,153	19,312	3,600	3,610
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).....	85,091	85,153	19,312	3,600	3,610
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	85,091	85,153	19,312	3,600	3,610

(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 INSURANCE COMPANY



DIRECT BUSINESS IN THE STATE OF WYOMING DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....67172

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,058,917	.....0	.....0	.....0	1,058,917
2. Annuity considerations.....	21,500	.....0	.....0	.....0	21,500
3. Deposit-type contract funds.....	2,257	XXX.....	.....0	XXX.....	2,257
4. Other considerations.....	.....0	.....0	.....0	.....0	.....0
5. Totals (Sum of Lines 1 to 4).....	1,082,674	.....0	.....0	.....0	1,082,674
DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS					
Life insurance:					
6.1 Paid in cash or left on deposit.....	3,435	.....0	.....0	.....0	3,435
6.2 Applied to pay renewal premiums.....	9,593	.....0	.....0	.....0	9,593
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	193,467	.....0	.....0	.....0	193,467
6.4 Other.....	.....0	.....0	.....0	.....0	.....0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	206,495	.....0	.....0	.....0	206,495
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).....	206,495	.....0	.....0	.....0	206,495
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	334,981	.....0	.....0	.....0	334,981
10. Matured endowments.....	.....0	.....0	.....0	.....0	.....0
11. Annuity benefits.....	651,079	.....0	.....0	.....0	651,079
12. Surrender values and withdrawals for life contracts.....	1,474,583	.....0	.....0	.....0	1,474,583
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.....	2,460,643	.....0	.....0	.....0	2,460,643

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. of Pols. & Certifs.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pols. & Certifs.	Amount	No. of Pols. & Certifs.	Amount
DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED										
16. Unpaid December 31, prior year.....	3	18,574	.....0	.....0	.....0	.....0	.....0	.....0	3	18,574
17. Incurred during current year.....	1	125,000	.....0	.....0	.....0	.....0	.....0	.....0	1	125,000
Settled during current year:										
18.1 By payment in full.....	1	128,339	.....0	.....0	.....0	.....0	.....0	.....0	1	128,339
18.2 By payment on compromised claims.....	0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	0	.....0
18.3 Totals paid.....	1	128,339	.....0	.....0	.....0	.....0	.....0	.....0	1	128,339
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	128,339	.....0	.....0	.....0	.....0	.....0	.....0	1	128,339
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	15,235	.....0	.....0	.....0	.....0	.....0	.....0	3	15,235
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	387	46,168,998	.....0	(a).....0	.....0	16,884	.....0	.....0	387	46,185,882
21. Issued during year.....	12	2,241,531	.....0	.....0	.....0	.....0	.....0	.....0	12	2,241,531
22. Other changes to in force (Net).....	(19)	(1,350,955)	.....0	.....0	.....0	.....0	.....0	.....0	(19)	(1,350,955)
23. In force December 31 of current year.....	380	47,059,574	.....0	(a).....0	.....0	16,884	.....0	.....0	380	47,076,458

(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	Policyholder Dividends Paid, Refunds to Members 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/certificates (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).....	18,633	18,647	5,641	124,649	125,116
25.2 Guaranteed renewable (b).....	.....0	.....0	.....0	3,074	2,706
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).....	18,633	18,647	5,641	127,723	127,822
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	18,633	18,647	5,641	127,723	127,822

(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 INSURANCE COMPANY
FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year.....	28,905,743
2. Current year's realized pre-tax capital gains/(losses) of \$..... 132,387,498 transferred into the reserve net of taxes of \$..... 27,801,374.....	99,098,530
3. Adjustment for current year's liability gains/(losses) released from the reserve.....	(109,570,609)
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3).....	18,433,663
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4).....	3,901,560
6. Reserve as of December 31, current year (Line 4 minus Line 5).....	14,532,103

Amortization

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released from the Reserve	4 Balance Before Reduction for the Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2019.....	5,025,766	5,605,405	(6,729,611)	3,901,560
2. 2020.....	4,299,016	10,915,926	(12,583,044)	2,631,897
3. 2021.....	3,470,951	10,352,192	(11,730,083)	2,093,060
4. 2022.....	2,726,526	9,625,683	(10,717,570)	1,634,639
5. 2023.....	2,144,242	8,885,629	(9,755,666)	1,274,204
6. 2024.....	1,726,402	8,152,125	(8,858,791)	1,019,737
7. 2025.....	1,458,096	7,321,026	(7,908,589)	870,533
8. 2026.....	1,306,972	6,546,396	(7,058,057)	795,311
9. 2027.....	1,234,559	5,703,245	(6,173,975)	763,828
10. 2028.....	1,121,586	4,813,856	(5,225,317)	710,124
11. 2029.....	988,574	3,894,862	(4,243,980)	639,456
12. 2030.....	854,379	3,180,886	(3,472,513)	562,752
13. 2031.....	673,236	2,697,581	(2,924,212)	446,605
14. 2032.....	516,196	2,162,644	(2,336,884)	341,956
15. 2033.....	399,304	1,580,916	(1,721,037)	259,182
16. 2034.....	280,450	1,053,855	(1,163,495)	170,810
17. 2035.....	177,834	743,434	(818,114)	103,154
18. 2036.....	130,453	740,028	(793,283)	77,198
19. 2037.....	119,896	747,855	(797,030)	70,721
20. 2038.....	100,755	744,112	(787,147)	57,719
21. 2039.....	71,875	738,690	(772,045)	38,520
22. 2040.....	43,786	682,180	(705,575)	20,391
23. 2041.....	23,639	594,026	(610,605)	7,060
24. 2042.....	5,779	473,515	(485,567)	(6,273)
25. 2043.....	(16)	369,947	(381,022)	(11,090)
26. 2044.....	1,878	258,990	(270,817)	(9,949)
27. 2045.....	1,580	181,027	(192,620)	(10,013)
28. 2046.....	1,123	144,083	(153,626)	(8,420)
29. 2047.....	671	103,444	(110,160)	(6,045)
30. 2048.....	237	62,805	(66,712)	(3,670)
31. 2049 and Later.....	0	22,167	(23,462)	(1,295)
32. Total (Lines 1 to 31).....	28,905,743	99,098,530	(109,570,609)	18,433,663

OHIO NATIONAL LIFE INSURANCE COMPANY
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.....	(0)	2,422,053	2,422,053	(0)	0	0	2,422,053
2. Realized capital gains/(losses) net of taxes - General Account.....	(6,373,308)	0	(6,373,308)	982,604	0	982,604	(5,390,704)
3. Realized capital gains/(losses) net of taxes - Separate Accounts.....	0	0	0	19,370	0	19,370	19,370
4. Unrealized capital gains/(losses) - net of deferred taxes - General Account.....	36,647,624	0	36,647,624	(951,079)	518,906	(432,173)	36,215,451
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.....	8,129,532	1,188,038	9,317,569	0	48,750	48,750	9,366,319
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7).....	38,403,847	3,610,091	42,013,938	50,895	567,656	618,551	42,632,489
9. Maximum reserve.....	39,757,070	7,311,699	47,068,769	2,120,161	2,653,442	4,773,603	51,842,372
10. Reserve objective.....	23,239,446	5,627,619	28,867,066	1,970,573	2,503,442	4,474,015	33,341,080
11. 20% of (Line 10 minus Line 8).....	(3,032,880)	403,506	(2,629,374)	383,936	387,157	771,093	(1,858,282)
12. Balance before transfers (Lines 8 + 11).....	35,370,967	4,013,597	39,384,563	434,831	954,813	1,389,644	40,774,207
13. Transfers.....	0	0	0	0	0	0	0
14. Voluntary contribution.....	0	0	0	0	0	0	0
15. Adjustment down to maximum/up to zero.....	0	0	0	0	0	0	0
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15).....	35,370,967	4,013,597	39,384,563	434,831	954,813	1,389,644	40,774,207

OHIO NATIONAL LIFE INSURANCE COMPANY
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.....	84,065,829	XXX	XXX	84,065,829	0.0000	0	0.0000	0	0.0000	0
2	1	Highest quality.....	3,297,986,832	XXX	XXX	3,297,986,832	0.0005	1,648,993	0.0016	5,276,779	0.0033	10,883,357
3	2	High quality.....	1,881,233,808	XXX	XXX	1,881,233,808	0.0021	3,950,591	0.0064	12,039,896	0.0106	19,941,078
4	3	Medium quality.....	115,791,494	XXX	XXX	115,791,494	0.0099	1,146,336	0.0263	3,045,316	0.0376	4,353,760
5	4	Low quality.....	14,441,641	XXX	XXX	14,441,641	0.0245	353,820	0.0572	826,062	0.0817	1,179,882
6	5	Lower quality.....	14,653,505	XXX	XXX	14,653,505	0.0630	923,171	0.1128	1,652,915	0.1880	2,754,859
7	6	In or near default.....	357,563	XXX	XXX	357,563	0.0000	0	0.2370	84,742	0.2370	84,742
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).....	5,408,530,672	XXX	XXX	5,408,530,672	XXX	8,022,911	XXX	22,925,711	XXX	39,197,679
		PREFERRED STOCKS										
10	1	Highest quality.....	0	XXX	XXX	0	0.0005	0	0.0016	0	0.0033	0
11	2	High quality.....	101,234	XXX	XXX	101,234	0.0021	213	0.0064	648	0.0106	1,073
12	3	Medium quality.....	5,000,000	XXX	XXX	5,000,000	0.0099	49,500	0.0263	131,500	0.0376	188,000
13	4	Low quality.....	0	XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
14	5	Lower quality.....	0	XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
15	6	In or near default.....	0	XXX	XXX	0	0.0000	0	0.2370	0	0.2370	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).....	5,101,234	XXX	XXX	5,101,234	XXX	49,713	XXX	132,148	XXX	189,073
		SHORT-TERM BONDS										
18		Exempt obligations.....	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19	1	Highest quality.....	104,158,317	XXX	XXX	104,158,317	0.0005	52,079	0.0016	166,653	0.0033	343,722
20	2	High quality.....	1,617,395	XXX	XXX	1,617,395	0.0021	3,397	0.0064	10,351	0.0106	17,144
21	3	Medium quality.....	0	XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
22	4	Low quality.....	0	XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
23	5	Lower quality.....	0	XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
24	6	In or near default.....	0	XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
25		Total short-term bonds (sum of Lines 18 through 24).....	105,775,712	XXX	XXX	105,775,712	XXX	55,476	XXX	177,005	XXX	360,867
		DERIVATIVE INSTRUMENTS										
26		Exchange traded.....	98,235	XXX	XXX	98,235	0.0005	49	0.0016	157	0.0033	324
27	1	Highest quality.....	2,765,836	XXX	XXX	2,765,836	0.0005	1,383	0.0016	4,425	0.0033	9,127
28	2	High quality.....	0	XXX	XXX	0	0.0021	0	0.0064	0	0.0106	0
29	3	Medium quality.....	0	XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
30	4	Low quality.....	0	XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
31	5	Lower quality.....	0	XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
32	6	In or near default.....	0	XXX	XXX	0	0.0000	0	0.2370	0	0.2370	0
33		Total derivative instruments.....	2,864,071	XXX	XXX	2,864,071	XXX	1,432	XXX	4,583	XXX	9,451
34		Total (Lines 9 + 17 + 25 + 33).....	5,522,271,689	XXX	XXX	5,522,271,689	XXX	8,129,532	XXX	23,239,446	XXX	39,757,070

OHIO NATIONAL LIFE INSURANCE COMPANY
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	.0011	.0	.0057	.0	.0074	.0
36		Farm mortgages - CM2 - high quality.....	.0	.0	XXX.....	.0	.0040	.0	.0114	.0	.0149	.0
37		Farm mortgages - CM3 - medium quality.....	.0	.0	XXX.....	.0	.0069	.0	.0200	.0	.0257	.0
38		Farm mortgages - CM4 - low medium quality.....	.0	.0	XXX.....	.0	.0120	.0	.0343	.0	.0428	.0
39		Farm mortgages - CM5 - low quality.....	.0	.0	XXX.....	.0	.0183	.0	.0486	.0	.0628	.0
40		Residential mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	.0003	.0	.0007	.0	.0011	.0
41		Residential mortgages-all other.....	.0	.0	XXX.....	.0	.0015	.0	.0034	.0	.0046	.0
42		Commercial mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	.0003	.0	.0007	.0	.0011	.0
43		Commercial mortgages-all other - CM1 - highest quality.....	873,961,498	.0	XXX.....	873,961,498	.0011	961,358	.0057	4,981,581	.0074	6,467,315
44		Commercial mortgages-all other - CM2 - high quality.....	56,670,058	.0	XXX.....	56,670,058	.0040	226,680	.0114	646,039	.0149	844,384
45		Commercial mortgages-all other - CM3 - medium quality.....	.0	.0	XXX.....	.0	.0069	.0	.0200	.0	.0257	.0
46		Commercial mortgages-all other - CM4 - low medium quality.....	.0	.0	XXX.....	.0	.0120	.0	.0343	.0	.0428	.0
47		Commercial mortgages-all other - CM5 - low quality.....	.0	.0	XXX.....	.0	.0183	.0	.0486	.0	.0628	.0
		Overdue, not in process:										
48		Farm mortgages.....	.0	.0	XXX.....	.0	.0480	.0	.0868	.0	.1371	.0
49		Residential mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	.0006	.0	.0014	.0	.0023	.0
50		Residential mortgages-all other.....	.0	.0	XXX.....	.0	.0029	.0	.0066	.0	.0103	.0
51		Commercial mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	.0006	.0	.0014	.0	.0023	.0
52		Commercial mortgages-all other.....	.0	.0	XXX.....	.0	.0480	.0	.0868	.0	.1371	.0
		In process of foreclosure:										
53		Farm mortgages.....	.0	.0	XXX.....	.0	.0000	.0	.1942	.0	.1942	.0
54		Residential mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	.0000	.0	.0046	.0	.0046	.0
55		Residential mortgages-all other.....	.0	.0	XXX.....	.0	.0000	.0	.0149	.0	.0149	.0
56		Commercial mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	.0000	.0	.0046	.0	.0046	.0
57		Commercial mortgages-all other.....	.0	.0	XXX.....	.0	.0000	.0	.1942	.0	.1942	.0
58		Total Schedule B mortgages (sum of Lines 35 through 57).....	930,631,556	.0	XXX.....	930,631,556	XXX.....	1,188,038	XXX.....	5,627,619	XXX.....	7,311,699
59		Schedule DA mortgages.....	.0	.0	XXX.....	.0	.0034	.0	.0114	.0	.0149	.0
60		Total mortgage loans on real estate (Lines 58 + 59).....	930,631,556	.0	XXX.....	930,631,556	XXX.....	1,188,038	XXX.....	5,627,619	XXX.....	7,311,699

OHIO NATIONAL LIFE INSURANCE COMPANY
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.....	168,921	XXX	XXX	168,921	0.0000	0	(a).....0.2431	41,065	(a).....0.2431	41,065
2		Unaffiliated private.....	0	XXX	XXX	0	0.0000	0	.....0.1945	0	.....0.1945	0
3		Federal Home Loan Bank.....	41,552,300	XXX	XXX	41,552,300	0.0000	0	.....0.0061	253,469	.....0.0097	403,057
4		Affiliated life with AVR.....	323,940,839	XXX	XXX	323,940,839	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	.....0.1945	0	.....0.1945	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).....	1,346,105	XXX	XXX	1,346,105	0.0000	0	.....0.1580	212,685	.....0.1580	212,685
16		Affiliated - all other.....	7,523,675	XXX	XXX	7,523,675	0.0000	0	.....0.1945	1,463,355	.....0.1945	1,463,355
17		Total common stock (sum of Lines 1 through 16).....	374,531,840	0	0	374,531,840	XXX	0	XXX	1,970,573	XXX	2,120,161
		REAL ESTATE										
18		Home office property (General Account only).....	0	0	0	0	0.0000	0	.....0.0912	0	.....0.0912	0
19		Investment properties.....	25,758,289	0	0	25,758,289	0.0000	0	.....0.0912	2,349,156	.....0.0912	2,349,156
20		Properties acquired in satisfaction of debt.....	0	0	0	0	0.0000	0	.....0.1337	0	.....0.1337	0
21		Total real estate (sum of Lines 18 through 20).....	25,758,289	0	0	25,758,289	XXX	0	XXX	2,349,156	XXX	2,349,156
		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.....	75,000,000	XXX	XXX	75,000,000	0.0005	37,500	.....0.0016	120,000	.....0.0033	247,500
24	2	High quality.....	0	XXX	XXX	0	0.0021	0	.....0.0064	0	.....0.0106	0
25	3	Medium quality.....	0	XXX	XXX	0	0.0099	0	.....0.0263	0	.....0.0376	0
26	4	Low quality.....	0	XXX	XXX	0	0.0245	0	.....0.0572	0	.....0.0817	0
27	5	Lower quality.....	0	XXX	XXX	0	0.0630	0	.....0.1128	0	.....0.1880	0
28	6	In or near default.....	0	XXX	XXX	0	0.0000	0	.....0.2370	0	.....0.2370	0
29		Total with bond characteristics (sum of Lines 22 through 28).....	75,000,000	XXX	XXX	75,000,000	XXX	37,500	XXX	120,000	XXX	247,500

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

Line Number	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
30	1	Highest quality.....	.0	XXX.....	XXX.....	.0	0.0005	.0	0.0016	.0	0.0033	.0
31	2	High quality.....	5,357,138	XXX.....	XXX.....	5,357,138	0.0021	11,250	0.0064	34,286	0.0106	56,786
32	3	Medium quality.....	.0	XXX.....	XXX.....	.0	0.0099	.0	0.0263	.0	0.0376	.0
33	4	Low quality.....	.0	XXX.....	XXX.....	.0	0.0245	.0	0.0572	.0	0.0817	.0
34	5	Lower quality.....	.0	XXX.....	XXX.....	.0	0.0630	.0	0.1128	.0	0.1880	.0
35	6	In or near default.....	.0	XXX.....	XXX.....	.0	0.0000	.0	0.2370	.0	0.2370	.0
36		Affiliated life with AVR.....	.0	XXX.....	XXX.....	.0	0.0000	.0	0.0000	.0	0.0000	.0
37		Total with preferred stock characteristics (sum of Lines 30 through 36).....	5,357,138	XXX.....	XXX.....	5,357,138	XXX.....	11,250	XXX.....	34,286	XXX.....	56,786
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing Affiliated:										
38		Mortgages - CM1 - highest quality.....	.0	.0	XXX.....	.0	0.0011	.0	0.0057	.0	0.0074	.0
39		Mortgages - CM2 - high quality.....	.0	.0	XXX.....	.0	0.0040	.0	0.0114	.0	0.0149	.0
40		Mortgages - CM3 - medium quality.....	.0	.0	XXX.....	.0	0.0069	.0	0.0200	.0	0.0257	.0
41		Mortgages - CM4 - low medium quality.....	.0	.0	XXX.....	.0	0.0120	.0	0.0343	.0	0.0428	.0
42		Mortgages - CM5 - low quality.....	.0	.0	XXX.....	.0	0.0183	.0	0.0486	.0	0.0628	.0
43		Residential mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	0.0003	.0	0.0007	.0	0.0011	.0
44		Residential mortgages-all other.....	.0	XXX.....	XXX.....	.0	0.0015	.0	0.0034	.0	0.0046	.0
45		Commercial mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	0.0003	.0	0.0007	.0	0.0011	.0
		Overdue, Not in Process Affiliated:										
46		Farm mortgages.....	.0	.0	XXX.....	.0	0.0480	.0	0.0868	.0	0.1371	.0
47		Residential mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	0.0006	.0	0.0014	.0	0.0023	.0
48		Residential mortgages-all other.....	.0	.0	XXX.....	.0	0.0029	.0	0.0066	.0	0.0103	.0
49		Commercial mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	0.0006	.0	0.0014	.0	0.0023	.0
50		Commercial mortgages-all other.....	.0	.0	XXX.....	.0	0.0480	.0	0.0868	.0	0.1371	.0
		In Process of foreclosure Affiliated:										
51		Farm mortgages.....	.0	.0	XXX.....	.0	0.0000	.0	0.1942	.0	0.1942	.0
52		Residential mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	0.0000	.0	0.0046	.0	0.0046	.0
53		Residential mortgages-all other.....	.0	.0	XXX.....	.0	0.0000	.0	0.0149	.0	0.0149	.0
54		Commercial mortgages-insured or guaranteed.....	.0	.0	XXX.....	.0	0.0000	.0	0.0046	.0	0.0046	.0
55		Commercial mortgages-all other.....	.0	.0	XXX.....	.0	0.0000	.0	0.1942	.0	0.1942	.0
56		Total Affiliated (Sum of Lines 38 through 55).....	.0	.0	XXX.....	.0	XXX.....	.0	XXX.....	.0	XXX.....	.0
57		Unaffiliated - In Good Standing with Covenants.....	.0	.0	XXX.....	.0	(c).....0.0000	.0	(c).....0.0000	.0	(c).....0.0000	.0
58		Unaffiliated - In Good Standing Defeased with Government Securities.....	.0	.0	XXX.....	.0	0.0011	.0	0.0057	.0	0.0074	.0
59		Unaffiliated - In Good Standing Primarily Senior.....	.0	.0	XXX.....	.0	0.0040	.0	0.0114	.0	0.0149	.0
60		Unaffiliated - In Good Standing All Other.....	.0	.0	XXX.....	.0	0.0069	.0	0.0200	.0	0.0257	.0
61		Unaffiliated - Overdue, Not in Process.....	.0	.0	XXX.....	.0	0.0480	.0	0.0868	.0	0.1371	.0
62		Unaffiliated - In Process of Foreclosure.....	.0	.0	XXX.....	.0	0.0000	.0	0.1942	.0	0.1942	.0
63		Total Unaffiliated (Sum of Lines 57 through 62).....	.0	.0	XXX.....	.0	XXX.....	.0	XXX.....	.0	XXX.....	.0
64		Total with Mortgage Loan Characteristics (Lines 56 + 63).....	.0	.0	XXX.....	.0	XXX.....	.0	XXX.....	.0	XXX.....	.0

OHIO NATIONAL LIFE INSURANCE COMPANY

ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

Line Number	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
65		Unaffiliated public.....	0	.XXX.	XXX	0	0.0000	0	(a).....0.0000	0	(a).....0.0000	0
66		Unaffiliated private.....	0	.XXX.	XXX	0	0.0000	0	0.1945	0	0.1945	0
67		Affiliated life with AVR.....	171,301,528	.XXX.	XXX	171,301,528	0.0000	0	0.0000	0	0.0000	0
68		Affiliated certain other (see SVO Purposes and Procedures Manual).....	0	.XXX.	XXX	0	0.0000	0	0.1580	0	0.1580	0
69		Affiliated other - all other.....	0	.XXX.	XXX	0	0.0000	0	0.1945	0	0.1945	0
70		Total with Common Stock Characteristics (Sum of Lines 65 through 69).....	171,301,528	.XXX.	XXX	171,301,528	.XXX.	0	.XXX.	0	.XXX.	0
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE										
71		Home office property (general account only).....	0	0	0	0	0.0000	0	0.0912	0	0.0912	0
72		Investment properties.....	0	0	0	0	0.0000	0	0.0912	0	0.0912	0
73		Properties acquired in satisfaction of debt.....	0	0	0	0	0.0000	0	0.1337	0	0.1337	0
74		Total with Real Estate Characteristics (Sum of Lines 71 through 73).....	0	0	0	0	.XXX.	0	.XXX.	0	.XXX.	0
		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
75		Guaranteed federal low income housing tax credit.....	0	0	0	0	0.0003	0	0.0006	0	0.0010	0
76		Non-guaranteed federal low income housing tax credit.....	0	0	0	0	0.0063	0	0.0120	0	0.0190	0
77		Guaranteed state low income housing tax credit.....	0	0	0	0	0.0003	0	0.0006	0	0.0010	0
78		Non-guaranteed state low income housing tax credit.....	0	0	0	0	0.0063	0	0.0120	0	0.0190	0
79		All other low income housing tax credit.....	0	0	0	0	0.0273	0	0.0600	0	0.0975	0
80		Total LIHTC (Sum of Lines 75 through 79).....	0	0	0	0	.XXX.	0	.XXX.	0	.XXX.	0
		ALL OTHER INVESTMENTS										
81		NAIC 1 working capital finance investments.....	0	.XXX.	0	0	0.0000	0	0.0042	0	0.0042	0
82		NAIC 2 working capital finance investments.....	0	.XXX.	0	0	0.0000	0	0.0137	0	0.0137	0
83		Other invested assets - Schedule BA.....	0	.XXX.	0	0	0.0000	0	0.1580	0	0.1580	0
84		Other short-term invested assets - Schedule DA.....	0	.XXX.	0	0	0.0000	0	0.1580	0	0.1580	0
85		Total All Other (sum of Lines 81, 82, 83 and 84).....	0	.XXX.	0	0	.XXX.	0	.XXX.	0	.XXX.	0
86		Total Other Invested Assets - Schedule BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80 and 85).....	251,658,666	0	0	251,658,666	.XXX.	48,750	.XXX.	154,286	.XXX.	304,286

(a) Times the company's weighted average portfolio beta (Minimum .1215, Maximum .2431).

(b) Determined using same factors and breakdowns used for directly owned real estate.

(c) This will be the factor associated with the risk category determined in the company generated worksheet.

ASSET VALUATION RESERVE (continued)

Basic Contributions, Reserve Objective and Maximum Reserve Calculations

Replications (Synthetic) Assets

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

NONE

OHIO NATIONAL LIFE INSURANCE COMPANY
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 RESISTED DURING CURRENT YEAR							
Death Claims - Ordinary							
1765215.....	121368.....	.....FL.....	.....2018.....	.....737,633	.....30,286	.....737,633	Claim resisted due to suicide within the first 2 policy years. Refund of premium paid.
1734212.....	120652.....	.....RI.....	.....2017.....	.....100,000	.....18,138	.....100,000	Claim resisted due to suicide within the first 2 policy years. Refund of premium paid.
1764665.....	122350.....	.....FL.....	.....2019.....	.....250,000	.....3,633	.....250,000	Claim resisted due to suicide within the first 2 policy years. Refund of premium paid.
1079765.....	122026.....	.....OH.....	.....2019.....	.....30,000	.....0	.....30,000	Competing Claimants - Interpleader being filed.....
2799999. Death Claims - Ordinary.....				.....1,117,633	.....52,057	.....1,117,633	.....XXX.....
3199999. Subtotal - Resisted Death Claims.....				.....1,117,633	.....52,057	.....1,117,633	.....XXX.....
5299999. Subtotal - Claims Resisted of During Current Year.....				.....1,117,633	.....52,057	.....1,117,633	.....XXX.....
5399999. Totals.....				.....1,117,633	.....52,057	.....1,117,633	.....XXX.....

OHIO NATIONAL LIFE INSURANCE COMPANY
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.....	5,796,206	XXX.....	.....0	XXX.....	.....0	XXX.....	.....0	XXX.....	5,361,796	XXX.....	434,410	XXX..	.....0	XXX.....	.....0	XXX.....	.....0	XXX.....
2.	Premiums earned.....	5,675,498	XXX.....	.....0	XXX.....	.....0	XXX.....	.....0	XXX.....	5,261,295	XXX.....	414,203	XXX..	.....0	XXX.....	.....0	XXX.....	.....0	XXX.....
3.	Incurred claims.....	(771,295)	(13.6)	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	(792,933)	(15.1)	21,638	5.2	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0
4.	Cost containment expenses.....	232,132	4.1	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	214,150	4.1	17,982	4.3	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0
5.	Incurred claims and cost containment expenses (Lines 3 and 4).....	(539,163)	(9.5)	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	(578,783)	(11.0)	39,620	9.6	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0
6.	Increase in contract reserves.....	(104,677)	(1.8)	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	44,429	0.8	(149,106)	(36.0)	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0
7.	Commissions (a).....	(406,033)	(7.2)	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	(365,280)	(6.9)	(40,753)	(9.8)	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0
8.	Other general insurance expenses.....	3,285,276	57.9	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	3,013,342	57.3	271,934	65.7	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0
9.	Taxes, licenses and fees.....	532,026	9.4	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	487,988	9.3	44,038	10.6	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0
10.	Total other expenses incurred.....	3,411,269	60.1	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	3,136,050	59.6	275,219	66.4	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0
11.	Aggregate write-ins for deductions.....	2,785,443	49.1	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	2,533,583	48.2	251,860	60.8	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0
12.	Gain from underwriting before dividends or refunds.....	122,626	2.2	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	126,016	2.4	(3,390)	(0.8)	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0
13.	Dividends or refunds.....	1,977,925	34.9	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	1,977,793	37.6	132	0.0	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0
14.	Gain from underwriting after dividends or refunds.....	(1,855,299)	(32.7)	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	(1,851,777)	(35.2)	(3,522)	(0.9)	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0
DETAILS OF WRITE-INS																			
1101.	Surrenders / ROP Benefits.....	2,785,443	49.1	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	2,533,583	48.2	251,860	60.8	.....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).	2,785,443	49.1	.....0	.....0.0	.....0	.....0.0	.....0	.....0.0	2,533,583	48.2	251,860	60.8	.....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 INSURANCE COMPANY
SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (continued)

	1	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.....	(822,600)	.....0	.....0	.....0	(736,464)	(86,136)	.....0	.....0	.....0
2. Advance premiums.....	82,334	.....0	.....0	.....0	78,412	3,922	.....0	.....0	.....0
3. Reserve for rate credits.....	0	.....0	.....0	.....0	0	0	.....0	.....0	.....0
4. Total premium reserves, current year.....	(740,266)	.....0	.....0	.....0	(658,052)	(82,214)	.....0	.....0	.....0
5. Total premium reserves, prior year.....	(860,974)	.....0	.....0	.....0	(758,553)	(102,421)	.....0	.....0	.....0
6. Increase in total premium reserves.....	120,708	.....0	.....0	.....0	100,501	20,207	.....0	.....0	.....0
B. Contract Reserves:									
1. Additional reserves (a).....	19,357,917	.....0	.....0	.....0	17,426,494	1,931,423	.....0	.....0	.....0
2. Reserve for future contingent benefits.....	0	.....0	.....0	.....0	0	0	.....0	.....0	.....0
3. Total contract reserves, current year.....	19,357,917	.....0	.....0	.....0	17,426,494	1,931,423	.....0	.....0	.....0
4. Total contract reserves, prior year.....	19,462,594	.....0	.....0	.....0	17,382,065	2,080,529	.....0	.....0	.....0
5. Increase in contract reserves.....	(104,677)	.....0	.....0	.....0	44,429	(149,106)	.....0	.....0	.....0
C. Claim Reserves and Liabilities:									
1. Total current year.....	8,985,101	.....0	.....0	.....0	8,289,047	696,054	.....0	.....0	.....0
2. Total prior year.....	10,471,964000	9,636,180	835,784000
3. Increase.....	(1,486,863)000	(1,347,133)	(139,730)000

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

1. Claims Paid During the Year:									
1.1 On claims incurred prior to current year.....	741,174	.....0	.....0	.....0	575,588	165,586	.....0	.....0	.....0
1.2 On claims incurred during current year.....	(25,606)	.....0	.....0	.....0	(21,388)	(4,218)	.....0	.....0	.....0
2. Claim Reserves and Liabilities, December 31, current year:									
2.1 On claims incurred prior to current year.....	8,539,638	.....0	.....0	.....0	7,888,699	650,939	.....0	.....0	.....0
2.2 On claims incurred during current year.....	445,463	.....0	.....0	.....0	400,348	45,115	.....0	.....0	.....0
3. Test:									
3.1 Lines 1.1 and 2.1.....	9,280,812	.....0	.....0	.....0	8,464,287	816,525	.....0	.....0	.....0
3.2 Claim reserves and liabilities, December 31, prior year.....	10,471,964	.....0	.....0	.....0	9,636,180	835,784	.....0	.....0	.....0
3.3 Line 3.1 minus Line 3.2.....	(1,191,152)	.....0	.....0	.....0	(1,171,893)	(19,259)	.....0	.....0	.....0

PART 4 - REINSURANCE

A. Reinsurance Assumed:									
1. Premiums written.....	0	.....0	.....0	.....0	0	0	.....0	.....0	.....0
2. Premiums earned.....	0	.....0	.....0	.....0	0	0	.....0	.....0	.....0
3. Incurred claims.....	0	.....0	.....0	.....0	0	0	.....0	.....0	.....0
4. Commissions.....	0	.....0	.....0	.....0	0	0	.....0	.....0	.....0
B. Reinsurance Ceded:									
1. Premiums written.....	5,883,269	.....0	.....0	.....0	5,350,927	532,342	.....0	.....0	.....0
2. Premiums earned.....	6,145,293	.....0	.....0	.....0	5,663,406	481,887	.....0	.....0	.....0
3. Incurred claims.....	4,849,415	.....0	.....0	.....0	4,526,392	323,023	.....0	.....0	.....0
4. Commissions.....	1,037,350	.....0	.....0	.....0	943,240	94,110	.....0	.....0	.....0

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

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

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred claims.....	0	0	4,078,121	4,078,121
2. Beginning claim reserves and liabilities.....	0	0	42,589,682	42,589,682
3. Ending claim reserves and liabilities.....	0	0	40,895,235	40,895,235
4. Claims paid.....	0	0	5,772,568	5,772,568
B. Assumed Reinsurance:				
5. Incurred claims.....	0	0	0	0
6. Beginning claim reserves and liabilities.....	0	0	0	0
7. Ending claim reserves and liabilities.....	0	0	0	0
8. Claims paid.....	0	0	0	0
C. Ceded Reinsurance:				
9. Incurred claims.....	0	0	4,849,415	4,849,415
10. Beginning claim reserves and liabilities.....	0	0	33,016,584	33,016,584
11. Ending claim reserves and liabilities.....	0	0	35,206,444	35,206,444
12. Claims paid.....	0	0	2,659,555	2,659,555
D. Net:				
13. Incurred claims.....	0	0	(771,294)	(771,294)
14. Beginning claim reserves and liabilities.....	0	0	9,573,098	9,573,098
15. Ending claim reserves and liabilities.....	0	0	5,688,791	5,688,791
16. Claims paid.....	0	0	3,113,013	3,113,013
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred claims and cost containment expenses.....	0	0	(539,163)	(539,163)
18. Beginning reserves and liabilities.....	0	0	9,578,475	9,578,475
19. Ending reserves and liabilities.....	0	0	5,706,728	5,706,728
20. Paid claims and cost containment expenses.....	0	0	3,332,584	3,332,584

OHIO NATIONAL LIFE INSURANCE COMPANY
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
General Account - Affiliates - U.S. - Captives												
15855.....	47-4249160....	12/31/2015	Camargo Re, Inc.....	OH.....	YRT/I.....	OL.....	.....40,946,627,441	.....2,965,248	.....22,946,574	.....3,671,535	.....0	.....0
15855.....	47-4249160....	12/31/2015	Camargo Re, Inc.....	OH.....	YRT/I.....	DIS.....	.....0	.....5,159,474	.....1,862,709	.....0	.....0	.....0
15855.....	47-4249160....	12/31/2018	Camargo Re, Inc.....	OH.....	YRT/I.....	OL.....	.....7,597,185,549	.....235,341	.....3,162,646	.....0	.....0	.....0
15855.....	47-4249160....	12/31/2018	Camargo Re, Inc.....	OH.....	YRT/I.....	DIS.....	.....0	.....315,325	.....506,778	.....0	.....0	.....0
15363.....	80-0955278....	12/31/2013	Kenwood Re, Inc.....	VT.....	YRT/I.....	OL.....	.....43,264,261,986	.....6,696,406	.....57,002,993	.....7,638,938	.....0	.....0
15363.....	80-0955278....	12/31/2013	Kenwood Re, Inc.....	VT.....	YRT/I.....	DIS.....	.....0	.....6,289,178	.....1,514,149	.....0	.....0	.....0
13575.....	26-3791519....	05/01/2011	Montgomery Re.....	VT.....	YRT/I.....	OL.....	.....358,707,616	.....517,582	.....4,049,152	.....820,910	.....0	.....0
13575.....	26-3791519....	07/01/2012	Montgomery Re.....	VT.....	YRT/I.....	OL.....	.....8,200,225,039	.....1,429,395	.....11,182,464	.....3,568,983	.....0	.....0
13575.....	26-3791519....	07/01/2012	Montgomery Re.....	VT.....	YRT/I.....	DIS.....	.....0	.....821,019	.....248,953	.....0	.....0	.....0
0199999.	Total - General Account - Affiliates - U.S. - Captives.....						.....100,367,007,631	.....24,428,968	.....102,476,418	.....15,700,367	.....0	.....0
General Account - Affiliates - U.S. - Other												
85472.....	13-2740556....	12/31/2008	National Security Life and Annuity Company.....	NY.....	CO/I.....	OA.....	.....0	.....11,387,464	.....2,999,716	.....3,660	.....0	.....0
89206.....	31-0962495....	10/04/2006	Ohio National Life Assurance Company.....	OH.....	CO/I.....	OL.....	.....294,763,770	.....163,573,804	.....0	.....179,071	.....0	.....0
89206.....	31-0962495....	10/01/2009	Ohio National Life Assurance Company.....	OH.....	CO/I.....	OL.....	.....1,273,501,577	.....496,968,571	.....0	.....0	.....0	.....0
89206.....	31-0962495....	09/01/2014	Ohio National Life Assurance Company.....	OH.....	CO/I.....	OL.....	.....663,338,821	.....247,378,737	.....0	.....0	.....0	.....0
0299999.	Total - General Account - Affiliates - U.S. - Other.....						.....2,231,604,168	.....919,308,576	.....2,999,716	.....182,731	.....0	.....0
0399999.	Total - General Account - Affiliates - U.S. - Totals.....						.....102,598,611,799	.....943,737,544	.....105,476,134	.....15,883,098	.....0	.....0
0799999.	Total - General Account - Affiliates.....						.....102,598,611,799	.....943,737,544	.....105,476,134	.....15,883,098	.....0	.....0
1199999.	Total - General Account.....						.....102,598,611,799	.....943,737,544	.....105,476,134	.....15,883,098	.....0	.....0
2399999.	Total U.S.....						.....102,598,611,799	.....943,737,544	.....105,476,134	.....15,883,098	.....0	.....0
9999999.	Total.....						.....102,598,611,799	.....943,737,544	.....105,476,134	.....15,883,098	.....0	.....0

OHIO NATIONAL LIFE INSURANCE COMPANY
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

NONE

OHIO NATIONAL LIFE INSURANCE COMPANY
SCHEDULE S - PART 2

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

1	2	3	4	5	6	7
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Paid Losses	Unpaid Losses

Life and Annuity - Affiliates - U.S. - Captive

16481.....	83-2532656....	04/01/2019	Sunrise Captive Re, LLC.....	OH.....	.....1,307,120	.....0
0199999.	Total - Life and Annuity Affiliates - U.S. - Captive.....				.....1,307,120	.....0
0399999.	Total - Life and Annuity Affiliates - U.S. - Total.....				.....1,307,120	.....0

Life and Annuity - Affiliates - Non-U.S. - Captive

00000.....	AA-0056843...	04/01/2008	Sycamore Re.....	CYM.....	.....3,888,866	.....0
0499999.	Total - Life and Annuity Affiliates - Non-U.S. - Captive.....				.....3,888,866	.....0
0699999.	Total - Life and Annuity Affiliates - Non-U.S. - Total.....				.....3,888,866	.....0
0799999.	Total - Life and Annuity Affiliates.....				.....5,195,986	.....0

Life and Annuity - Non-Affiliates - U.S. Non-Affiliates

90611.....	41-1366075....	03/01/1980	Allianz Life Insurance Co. of North America.....	MN.....	.....0	.....26,304
86258.....	13-2572994....	01/19/2005	General Re Life Corp.....	CT.....	.....0	.....483,606
86258.....	13-2572994....	01/01/2006	General Re Life Corp.....	CT.....	.....0	.....27,788
86258.....	13-2572994....	10/10/2009	General Re Life Corp.....	CT.....	.....0	.....1,000,000
86258.....	13-2572994....	01/01/2017	General Re Life Corp.....	CT.....	.....827,651	.....0
88340.....	59-2859797....	01/01/2010	Hannover Life Reassurance Comp of America.....	FL.....	.....72,805	.....19,164
88340.....	59-2859797....	01/01/2017	Hannover Life Reassurance Comp of America.....	FL.....	.....118,236	.....0
65838.....	01-0233346....	10/01/1998	John Hancock Life Insurance Company USA.....	MI.....	.....10,427	.....0
66346.....	58-0828824....	01/19/2005	Munich American Reassurance Company.....	GA.....	.....0	.....967,212
66346.....	58-0828824....	01/01/2006	Munich American Reassurance Company.....	GA.....	.....0	.....23,156
66346.....	58-0828824....	10/01/2007	Munich American Reassurance Company.....	GA.....	.....0	.....24,765
66346.....	58-0828824....	10/10/2009	Munich American Reassurance Company.....	GA.....	.....500,000	.....2,000,000
93572.....	43-1235868....	01/01/2001	RGA Reinsurance Company.....	MO.....	.....868,356	.....0
93572.....	43-1235868....	01/19/2005	RGA Reinsurance Company.....	MO.....	.....0	.....483,606
93572.....	43-1235868....	10/01/2007	RGA Reinsurance Company.....	MO.....	.....0	.....24,765
93572.....	43-1235868....	10/10/2009	RGA Reinsurance Company.....	MO.....	.....1,000,000	.....1,000,000
93572.....	43-1235868....	01/01/2017	RGA Reinsurance Company.....	MO.....	.....0	.....2,000,000
93572.....	43-1235868....	07/01/2019	RGA Reinsurance Company.....	MO.....	.....11,838,375	.....0
64688.....	75-6020048....	10/01/2007	SCOR Global Life American Reins Co.....	DE.....	.....77,864	.....24,765
87572.....	23-2038295....	06/01/2004	Scottish Re USA Inc.....	DE.....	.....9,836,215	.....0
87572.....	23-2038295....	01/01/2006	Scottish Re USA Inc.....	DE.....	.....57,308	.....25,604
82627.....	06-0839705....	09/01/1984	Swiss Re Life & Health America, Inc.....	MO.....	.....0	.....282,587
82627.....	06-0839705....	01/01/2006	Swiss Re Life & Health America, Inc.....	MO.....	.....89,166	.....51,207
82627.....	06-0839705....	01/01/2010	Swiss Re Life & Health America, Inc.....	MO.....	.....72,805	.....19,164
86231.....	39-0989781....	01/01/2006	Transamerica Life Insurance Company.....	IA.....	.....0	.....27,788
86231.....	39-0989781....	10/01/2007	Transamerica Life Insurance Company.....	IA.....	.....77,864	.....24,765
80659.....	82-4533188....	01/01/2017	US Business of Canada Life Assurance Company.....	MI.....	.....2,633	.....1,000,000
0899999.	Total - Life and Annuity Non-Affiliates - U.S. Non-Affiliates.....				.....25,449,705	.....9,536,246

Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates

00000.....	AA-3190770....	01/01/2006	Chubb Tempest Reinsurance LTD.....	BMU.....	.....0	.....13,894
00000.....	AA-3190770....	07/01/2006	Chubb Tempest Reinsurance LTD.....	BMU.....	.....17,681,926	.....0
0999999.	Total - Life and Annuity Non-Affiliates - Non-U.S. Non-Affiliates.....				.....17,681,926	.....13,894
1099999.	Total - Life and Annuity Non-Affiliates.....				.....43,131,631	.....9,550,140
1199999.	Total - Life and Annuity.....				.....48,327,617	.....9,550,140

Accident and Health - Non-Affiliates - U.S. Non-Affiliates

86258.....	13-2572994....	01/01/1999	General Re Life Corporation.....	CT.....	.....889,170	.....134,619
82627.....	06-0839705....	05/01/1982	Swiss Re Life & Health America, Inc.....	MO.....	.....1,516,370	.....59,742
66346.....	58-0828824....	01/01/1999	Munich American Reassurance Company.....	GA.....	.....889,170	.....96,937
67598.....	04-1768571....	01/10/1977	Paul Revere Life Ins. Company.....	MA.....	.....1,600	.....0
1999999.	Total - Accident and Health Non-Affiliates - U.S. Non-Affiliates.....				.....3,296,310	.....291,298
2199999.	Total - Accident and Health Non-Affiliates.....				.....3,296,310	.....291,298
2299999.	Total - Accident and Health.....				.....3,296,310	.....291,298
2399999.	Total U.S.....				.....30,053,136	.....9,827,544
2499999.	Total Non-U.S.....				.....21,570,792	.....13,894
9999999.	Total.....				.....51,623,928	.....9,841,438

OHIO NATIONAL LIFE INSURANCE COMPANY

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														
16481.....	83-2532656....	04/01/2019	Sunrise Captive Re, LLC.....	OH.....	OTH/I.....	OA.....	.....0	.....461,515,287	.....0	.....873,589,140	.....0	.....0	.....0	.....34,784,220
0199999.	Total - General Account - Authorized - Affiliates - U.S. - Captive.....						.....0	.....461,515,287	.....0	.....873,589,140	.....0	.....0	.....0	.....34,784,220
0399999.	Total - General Account - Authorized - Affiliates - U.S. - Total.....						.....0	.....461,515,287	.....0	.....873,589,140	.....0	.....0	.....0	.....34,784,220
0799999.	Total - General Account - Authorized - Affiliates.....						.....0	.....461,515,287	.....0	.....873,589,140	.....0	.....0	.....0	.....34,784,220
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates														
63274.....	52-6033321....	09/15/2003	Fidelity and Guaranty Life Insurance Co.....	IA.....	CO/I.....	FA.....	.....0	.....0	.....55,848,788	.....(52,305,296)	.....0	.....0	.....0	.....0
93572.....	43-1235868....	01/01/2001	RGA Reinsurance Company.....	MO.....	CO/I.....	FA.....	.....0	.....75,894,562	.....85,960,691	.....0	.....0	.....0	.....0	.....0
93572.....	43-1235868....	04/01/2002	RGA Reinsurance Company.....	MO.....	CO/I.....	FA.....	.....0	.....40,822,223	.....45,887,255	.....0	.....0	.....0	.....0	.....0
93572.....	43-1235868....	07/01/2019	RGA Reinsurance Company.....	MO.....	CO/I.....	FA.....	.....0	.....849,157,720	.....0	.....3,617	.....0	.....0	.....0	.....0
87572.....	23-2038295....	06/01/2004	Scottish Re U.S. Inc.....	DE.....	CO/I.....	FA.....	.....0	.....81,881,623	.....88,438,196	.....0	.....0	.....0	.....0	.....0
80802.....	38-1082080....	10/01/1998	Sun Life Assurance Company of Canada.....	MI.....	OTH/I.....	OA.....	.....0	.....587,961	.....1,020,622	.....109,701	.....0	.....0	.....0	.....0
65838.....	01-0233346....	10/01/1998	John Hancock Life Insurance Company.....	MI.....	OTH/I.....	OA.....	.....0	.....1,694,881	.....2,391,641	.....19,634	.....0	.....0	.....0	.....0
90611.....	41-1366075....	03/01/1980	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	.....656,690	.....17,684	.....18,519	.....13,254	.....0	.....0	.....0	.....0
90611.....	41-1366075....	03/01/1980	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	DIS.....	.....0	.....199	.....173	.....19	.....0	.....0	.....0	.....0
90611.....	41-1366075....	02/01/1999	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	.....273,945	.....1,648	.....1,457	.....1,236	.....0	.....0	.....0	.....0
90611.....	41-1366075....	02/01/1999	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	DIS.....	.....0	.....100	.....155	.....10	.....0	.....0	.....0	.....0
90611.....	41-1366075....	04/15/1999	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	.....6,673,585	.....29,261	.....26,709	.....21,932	.....0	.....0	.....0	.....0
90611.....	41-1366075....	04/15/1999	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	DIS.....	.....0	.....8,566	.....8,970	.....835	.....0	.....0	.....0	.....0
90611.....	41-1366075....	09/01/2000	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	.....2,228,926	.....29,304	.....25,360	.....21,964	.....0	.....0	.....0	.....0
90611.....	41-1366075....	09/01/2000	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	DIS.....	.....0	.....9,073	.....5,171	.....884	.....0	.....0	.....0	.....0
90611.....	41-1366075....	09/30/2000	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	.....178,892	.....2,061	.....1,771	.....1,545	.....0	.....0	.....0	.....0
90611.....	41-1366075....	07/31/2001	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	.....4,884,543	.....20,816	.....21,437	.....15,602	.....0	.....0	.....0	.....0
90611.....	41-1366075....	07/31/2001	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	DIS.....	.....0	.....7,901	.....9,692	.....770	.....0	.....0	.....0	.....0
90611.....	41-1366075....	01/01/2002	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	.....10,689,248	.....51,694	.....42,023	.....38,746	.....0	.....0	.....0	.....0
90611.....	41-1366075....	01/01/2002	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	DIS.....	.....0	.....24,815	.....24,139	.....2,419	.....0	.....0	.....0	.....0
90611.....	41-1366075....	07/01/2002	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	.....288,781	.....3,436	.....2,970	.....2,575	.....0	.....0	.....0	.....0
90611.....	41-1366075....	01/01/2003	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	.....4,714,544	.....21,641	.....18,645	.....16,220	.....0	.....0	.....0	.....0
90611.....	41-1366075....	01/01/2003	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	DIS.....	.....0	.....18,049	.....20,145	.....1,759	.....0	.....0	.....0	.....0
90611.....	41-1366075....	04/01/2003	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	.....34,929,511	.....132,811	.....117,969	.....99,545	.....0	.....0	.....0	.....0
90611.....	41-1366075....	04/01/2003	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	DIS.....	.....0	.....98,060	.....133,519	.....9,559	.....0	.....0	.....0	.....0
61689.....	42-0175020....	07/01/1990	Athene Annuity and Life Company.....	IA.....	YRT/I.....	OL.....	.....9,503,245	.....4,724,113	.....4,587,240	.....8,118	.....0	.....0	.....0	.....0
62308.....	06-0303370....	01/01/1955	Connecticut General Life Insurance Company.....	CT.....	YRT/I.....	OL.....	.....8,732	.....1,180	.....1,154	.....999	.....0	.....0	.....0	.....0
62308.....	06-0303370....	01/01/1967	Connecticut General Life Insurance Company.....	CT.....	YRT/I.....	OL.....	.....4,835	.....263	.....4,903	.....223	.....0	.....0	.....0	.....0
86258.....	13-2572994....	05/01/1981	General Re Life Corp.....	CT.....	YRT/I.....	OL.....	.....49,207	.....1,515	.....903	.....798	.....0	.....0	.....0	.....0
86258.....	13-2572994....	04/01/2003	General Re Life Corp.....	CT.....	YRT/I.....	OL.....	.....7,615,012	.....41,095	.....35,559	.....21,655	.....0	.....0	.....0	.....0
86258.....	13-2572994....	04/01/2003	General Re Life Corp.....	CT.....	CO/I.....	DIS.....	.....0	.....12,668	.....12,814	.....1,150	.....0	.....0	.....0	.....0
86258.....	13-2572994....	04/01/2004	General Re Life Corp.....	CT.....	YRT/I.....	OL.....	.....18,139,554	.....85,715	.....75,160	.....45,169	.....0	.....0	.....0	.....0

OHIO NATIONAL LIFE INSURANCE COMPANY
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
86258.....	13-2572994....	04/01/2004	General Re Life Corp.....	CT.....	CO/I.....	DIS.....	.....0	.....90,566	.....85,574	.....8,220	.....0	.....0	.....0	.....0
86258.....	13-2572994....	09/01/2004	General Re Life Corp.....	CT.....	YRT/I.....	OL.....	.....843,904	.....40,275	.....36,519	.....21,223	.....0	.....0	.....0	.....0
86258.....	13-2572994....	01/19/2005	General Re Life Corp.....	CT.....	YRT/I.....	OL.....	.....51,288,147	.....280,644	.....261,417	.....147,889	.....0	.....0	.....0	.....0
86258.....	13-2572994....	01/19/2005	General Re Life Corp.....	CT.....	CO/I.....	DIS.....	.....0	.....219,810	.....246,077	.....19,952	.....0	.....0	.....0	.....0
86258.....	13-2572994....	01/01/2006	General Re Life Corp.....	CT.....	YRT/I.....	OL.....	.....58,372,542	.....207,988	.....227,316	.....109,602	.....0	.....0	.....0	.....0
86258.....	13-2572994....	01/01/2006	General Re Life Corp.....	CT.....	CO/I.....	DIS.....	.....0	.....81,508	.....68,365	.....7,398	.....0	.....0	.....0	.....0
88340.....	59-2859797....	01/19/2005	Hannover Life Reassur Co of Amer.....	FL.....	YRT/I.....	OL.....	.....2,351,648	.....2,308	.....2,684	.....2,514	.....0	.....0	.....0	.....0
88340.....	59-2859797....	01/19/2005	Hannover Life Reassur Co of Amer.....	FL.....	CO/I.....	DIS.....	.....0	.....2,541	.....2,346	.....860	.....0	.....0	.....0	.....0
88340.....	59-2859797....	01/01/2006	Hannover Life Reassur Co of Amer.....	FL.....	YRT/I.....	OL.....	.....20,287,354	.....23,944	.....23,117	.....26,091	.....0	.....0	.....0	.....0
88340.....	59-2859797....	01/01/2006	Hannover Life Reassur Co of Amer.....	FL.....	CO/I.....	DIS.....	.....0	.....30,675	.....25,659	.....10,377	.....0	.....0	.....0	.....0
88340.....	59-2859797....	01/01/2010	Hannover Life Reassur Co of Amer.....	FL.....	YRT/I.....	OL.....	.....275,671,192	.....495,878	.....455,649	.....540,331	.....0	.....0	.....0	.....0
88340.....	59-2859797....	01/01/2014	Hannover Life Reassur Co of Amer.....	FL.....	YRT/I.....	OL.....	.....393,003,753	.....633,596	.....874,692	.....690,395	.....0	.....0	.....0	.....0
88340.....	59-2859797....	01/01/2014	Hannover Life Reassur Co of Amer.....	FL.....	CO/I.....	DIS.....	.....0	.....56,260	.....123,304	.....19,033	.....0	.....0	.....0	.....0
88340.....	59-2859797....	01/01/2017	Hannover Life Reassur Co of Amer.....	FL.....	YRT/I.....	OL.....	.....446,204,316	.....265,970	.....339,748	.....289,813	.....0	.....0	.....0	.....0
88340.....	59-2859797....	01/01/2017	Hannover Life Reassur Co of Amer.....	FL.....	CO/I.....	DIS.....	.....0	.....40,306	.....56,098	.....13,636	.....0	.....0	.....0	.....0
88340.....	59-2859797....	01/01/2019	Hannover Life Reassur Co of Amer.....	FL.....	YRT/I.....	OL.....	.....42,835,427	.....16,750	.....0	.....18,252	.....0	.....0	.....0	.....0
88340.....	59-2859797....	01/01/2019	Hannover Life Reassur Co of Amer.....	FL.....	CO/I.....	DIS.....	.....0	.....1,728	.....0	.....585	.....0	.....0	.....0	.....0
65676.....	35-0472300....	01/01/1947	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	.....0	.....0	.....808	.....0	.....0	.....0	.....0	.....0
65676.....	35-0472300....	01/01/1981	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	.....267,081	.....10,767	.....8,202	.....9,609	.....0	.....0	.....0	.....0
65676.....	35-0472300....	03/18/1982	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	.....328,943	.....3,720	.....3,141	.....3,320	.....0	.....0	.....0	.....0
65676.....	35-0472300....	03/09/1998	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	.....169,835	.....878	.....754	.....783	.....0	.....0	.....0	.....0
65676.....	35-0472300....	03/09/1998	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	DIS.....	.....0	.....4,085	.....4,476	.....358	.....0	.....0	.....0	.....0
65676.....	35-0472300....	06/01/1998	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	.....126,217	.....1,040	.....1,142	.....928	.....0	.....0	.....0	.....0
65676.....	35-0472300....	06/01/1998	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	DIS.....	.....0	.....262	.....356	.....23	.....0	.....0	.....0	.....0
65676.....	35-0472300....	08/01/1998	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	.....606,869	.....2,892	.....2,928	.....2,581	.....0	.....0	.....0	.....0
65676.....	35-0472300....	08/01/1998	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	DIS.....	.....0	.....1,350	.....1,827	.....118	.....0	.....0	.....0	.....0
65676.....	35-0472300....	02/01/1999	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	.....274,151	.....1,650	.....1,458	.....1,472	.....0	.....0	.....0	.....0
65676.....	35-0472300....	02/01/1999	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	DIS.....	.....0	.....100	.....155	.....9	.....0	.....0	.....0	.....0
65676.....	35-0472300....	04/15/1999	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	.....9,911,023	.....47,543	.....39,677	.....42,430	.....0	.....0	.....0	.....0
65676.....	35-0472300....	04/15/1999	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	DIS.....	.....0	.....10,583	.....11,806	.....929	.....0	.....0	.....0	.....0
65676.....	35-0472300....	09/01/2000	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	.....8,330,104	.....48,979	.....43,927	.....43,711	.....0	.....0	.....0	.....0
65676.....	35-0472300....	09/01/2000	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	DIS.....	.....0	.....33,989	.....36,725	.....2,982	.....0	.....0	.....0	.....0
65676.....	35-0472300....	09/30/2000	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	.....503,608	.....7,051	.....6,288	.....6,292	.....0	.....0	.....0	.....0
65676.....	35-0472300....	07/31/2001	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	.....4,884,039	.....20,819	.....21,442	.....18,580	.....0	.....0	.....0	.....0
65676.....	35-0472300....	07/31/2001	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	DIS.....	.....0	.....7,900	.....9,689	.....693	.....0	.....0	.....0	.....0
65676.....	35-0472300....	01/01/2002	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	.....10,707,226	.....52,968	.....43,213	.....47,271	.....0	.....0	.....0	.....0

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

43.2

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....	01/01/2002	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	DIS.....	0	24,835	24,143	2,179	0	0	0	0
65676.....	35-0472300....	07/01/2002	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	288,742	3,435	2,969	3,065	0	0	0	0
65676.....	35-0472300....	01/01/2003	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	4,716,430	21,654	18,656	19,325	0	0	0	0
65676.....	35-0472300....	01/01/2003	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	DIS.....	0	18,052	20,145	1,584	0	0	0	0
66346.....	58-0828824....	03/09/1998	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	169,836	878	754	767	0	0	0	0
66346.....	58-0828824....	03/09/1998	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	4,085	4,477	811	0	0	0	0
66346.....	58-0828824....	06/01/1998	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	126,217	1,040	1,142	909	0	0	0	0
66346.....	58-0828824....	06/01/1998	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	262	356	52	0	0	0	0
66346.....	58-0828824....	08/01/1998	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	606,857	2,892	2,928	2,528	0	0	0	0
66346.....	58-0828824....	08/01/1998	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	1,350	1,827	268	0	0	0	0
66346.....	58-0828824....	02/01/1999	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	273,945	1,648	1,457	1,441	0	0	0	0
66346.....	58-0828824....	02/01/1999	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	100	155	20	0	0	0	0
66346.....	58-0828824....	04/15/1999	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	6,693,326	30,193	27,568	26,396	0	0	0	0
66346.....	58-0828824....	04/15/1999	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	8,566	8,970	1,699	0	0	0	0
66346.....	58-0828824....	09/01/2000	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	8,054,503	58,410	50,927	51,065	0	0	0	0
66346.....	58-0828824....	09/01/2000	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	36,180	35,322	7,178	0	0	0	0
66346.....	58-0828824....	09/30/2000	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	582,395	7,959	7,068	6,958	0	0	0	0
66346.....	58-0828824....	07/31/2001	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	8,638,166	34,527	35,036	30,185	0	0	0	0
66346.....	58-0828824....	07/31/2001	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	14,338	14,464	2,845	0	0	0	0
66346.....	58-0828824....	01/01/2002	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	17,393,068	80,583	66,641	70,450	0	0	0	0
66346.....	58-0828824....	01/01/2002	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	36,318	26,260	7,205	0	0	0	0
66346.....	58-0828824....	07/01/2002	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	527,174	6,638	5,730	5,803	0	0	0	0
66346.....	58-0828824....	01/01/2003	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	5,290,903	25,022	21,574	21,875	0	0	0	0
66346.....	58-0828824....	01/01/2003	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	18,970	20,145	3,764	0	0	0	0
66346.....	58-0828824....	04/01/2003	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	50,317,118	165,272	151,122	144,490	0	0	0	0
66346.....	58-0828824....	04/01/2003	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	138,571	232,836	27,492	0	0	0	0
66346.....	58-0828824....	04/01/2004	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	50,518,600	169,995	147,652	148,619	0	0	0	0
66346.....	58-0828824....	04/01/2004	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	167,476	110,527	33,227	0	0	0	0
66346.....	58-0828824....	09/01/2004	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	843,904	40,275	36,519	35,210	0	0	0	0
66346.....	58-0828824....	01/19/2005	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	123,065,605	595,825	556,083	520,903	0	0	0	0
66346.....	58-0828824....	01/19/2005	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	477,007	389,740	94,637	0	0	0	0
66346.....	58-0828824....	01/01/2006	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	65,720,843	218,830	233,219	191,313	0	0	0	0
66346.....	58-0828824....	01/01/2006	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	80,864	77,167	16,043	0	0	0	0
66346.....	58-0828824....	06/04/2007	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	799,683,452	1,855,702	2,455,242	1,622,358	0	0	0	0
66346.....	58-0828824....	06/04/2007	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	122,742	154,080	24,352	0	0	0	0
66346.....	58-0828824....	10/01/2007	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	86,170,459	221,621	886,460	193,753	0	0	0	0
66346.....	58-0828824....	10/01/2007	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	245,853	165,558	48,776	0	0	0	0
66346.....	58-0828824....	10/10/2009	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	5,891,320,003	9,128,512	11,880,196	7,980,651	0	0	0	0

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

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1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount in Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
66346.....	58-0828824....	10/10/2009	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	.....0	.....905,177	.....790,303	.....179,584	.....0	.....0	.....0	.....0
66346.....	58-0828824....	01/01/2014	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	.....1,334,883,443	.....1,432,795	.....2,194,612	.....1,252,628	.....0	.....0	.....0	.....0
66346.....	58-0828824....	01/01/2014	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	.....0	.....270,370	.....183,945	.....53,641	.....0	.....0	.....0	.....0
66346.....	58-0828824....	01/01/2017	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	.....1,086,814,469	.....570,191	.....886,713	.....498,493	.....0	.....0	.....0	.....0
66346.....	58-0828824....	01/01/2017	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	.....0	.....116,322	.....100,128	.....23,078	.....0	.....0	.....0	.....0
66346.....	58-0828824....	01/01/2019	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	.....72,635,668	.....38,744	.....0	.....33,872	.....0	.....0	.....0	.....0
66346.....	58-0828824....	01/01/2019	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	.....0	.....4,819	.....0	.....956	.....0	.....0	.....0	.....0
93572.....	43-1235868....	01/01/1977	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	.....27,875	.....2,265	.....2,316	.....1,926	.....0	.....0	.....0	.....0
93572.....	43-1235868....	01/01/1980	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	.....41,197	.....3,740	.....4,037	.....3,179	.....0	.....0	.....0	.....0
93572.....	43-1235868....	01/01/1983	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	.....11,497,871	.....212,141	.....188,438	.....180,342	.....0	.....0	.....0	.....0
93572.....	43-1235868....	01/01/1983	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	.....0	.....67,051	.....106,409	.....12,214	.....0	.....0	.....0	.....0
93572.....	43-1235868....	02/01/1983	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	.....16,085	.....1,307	.....1,132	.....1,111	.....0	.....0	.....0	.....0
93572.....	43-1235868....	01/01/1987	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	.....592,098	.....21,325	.....19,192	.....18,128	.....0	.....0	.....0	.....0
93572.....	43-1235868....	05/01/1988	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	.....1,315,349	.....32,883	.....30,700	.....27,954	.....0	.....0	.....0	.....0
93572.....	43-1235868....	05/01/1988	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	.....0	.....11,553	.....11,105	.....2,104	.....0	.....0	.....0	.....0
93572.....	43-1235868....	01/01/1994	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	.....1,969,719	.....29,707	.....27,886	.....25,254	.....0	.....0	.....0	.....0
93572.....	43-1235868....	01/01/1994	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	.....0	.....1,188	.....1,379	.....216	.....0	.....0	.....0	.....0
93572.....	43-1235868....	10/01/1995	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	.....4,951,168	.....41,855	.....35,105	.....35,581	.....0	.....0	.....0	.....0
93572.....	43-1235868....	10/01/1995	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	.....0	.....11,541	.....9,386	.....2,102	.....0	.....0	.....0	.....0
93572.....	43-1235868....	07/01/1997	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	.....1,779,501	.....14,749	.....10,395	.....12,538	.....0	.....0	.....0	.....0
93572.....	43-1235868....	07/01/1997	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	.....0	.....2,007	.....2,387	.....366	.....0	.....0	.....0	.....0
93572.....	43-1235868....	03/09/1998	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	.....339,667	.....1,755	.....1,509	.....1,492	.....0	.....0	.....0	.....0
93572.....	43-1235868....	03/09/1998	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	.....0	.....8,170	.....7,900	.....1,488	.....0	.....0	.....0	.....0
93572.....	43-1235868....	06/01/1998	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	.....252,433	.....2,079	.....2,283	.....1,767	.....0	.....0	.....0	.....0
93572.....	43-1235868....	06/01/1998	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	.....0	.....523	.....356	.....95	.....0	.....0	.....0	.....0
93572.....	43-1235868....	08/01/1998	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	.....1,213,728	.....5,784	.....5,856	.....4,917	.....0	.....0	.....0	.....0
93572.....	43-1235868....	08/01/1998	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	.....0	.....2,700	.....1,827	.....492	.....0	.....0	.....0	.....0
93572.....	43-1235868....	02/01/1999	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	.....411,021	.....2,473	.....2,187	.....2,102	.....0	.....0	.....0	.....0
93572.....	43-1235868....	02/01/1999	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	.....0	.....149	.....155	.....27	.....0	.....0	.....0	.....0
93572.....	43-1235868....	04/15/1999	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	.....8,569,052	.....40,991	.....38,755	.....34,847	.....0	.....0	.....0	.....0
93572.....	43-1235868....	04/15/1999	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	.....0	.....11,307	.....8,970	.....2,060	.....0	.....0	.....0	.....0
93572.....	43-1235868....	09/01/2000	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	.....9,497,649	.....68,273	.....60,182	.....58,039	.....0	.....0	.....0	.....0
93572.....	43-1235868....	09/01/2000	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	.....0	.....38,522	.....37,633	.....7,017	.....0	.....0	.....0	.....0
93572.....	43-1235868....	09/30/2000	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	.....592,975	.....8,081	.....7,173	.....6,869	.....0	.....0	.....0	.....0
93572.....	43-1235868....	07/31/2001	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	.....16,172,166	.....44,475	.....43,793	.....37,808	.....0	.....0	.....0	.....0
93572.....	43-1235868....	07/31/2001	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	.....0	.....9,085	.....9,689	.....1,655	.....0	.....0	.....0	.....0
93572.....	43-1235868....	01/01/2002	RGA Reins Co.....	MO.....	YRT/I.....	OL.....14,240,54772,05557,47561,2540000

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount in Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
93572.....	43-1235868....	01/01/2002	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	36,737	26,544	6,692	0	0	0	0
93572.....	43-1235868....	07/01/2002	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	1,649,571	154,445	140,346	131,293	0	0	0	0
93572.....	43-1235868....	01/01/2003	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	6,298,403	32,277	27,492	27,439	0	0	0	0
93572.....	43-1235868....	01/01/2003	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	20,656	20,145	3,763	0	0	0	0
93572.....	43-1235868....	04/01/2003	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	30,208,751	156,001	141,074	132,616	0	0	0	0
93572.....	43-1235868....	04/01/2003	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	83,678	82,196	15,243	0	0	0	0
93572.....	43-1235868....	04/01/2004	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	29,853,095	146,379	123,012	124,437	0	0	0	0
93572.....	43-1235868....	04/01/2004	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	117,193	121,065	21,349	0	0	0	0
93572.....	43-1235868....	09/01/2004	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	1,337,319	46,634	41,813	39,644	0	0	0	0
93572.....	43-1235868....	01/19/2005	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	65,613,022	1,228,638	1,127,578	1,044,465	0	0	0	0
93572.....	43-1235868....	01/19/2005	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	236,964	267,134	43,167	0	0	0	0
93572.....	43-1235868....	06/04/2007	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	874,033,359	1,927,198	2,667,337	1,638,312	0	0	0	0
93572.....	43-1235868....	06/04/2007	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	131,963	165,777	24,039	0	0	0	0
93572.....	43-1235868....	10/01/2007	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	95,533,328	239,977	846,246	204,004	0	0	0	0
93572.....	43-1235868....	10/01/2007	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	235,117	168,206	42,830	0	0	0	0
93572.....	43-1235868....	07/01/2008	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	8,538,866	36,317	33,372	30,873	0	0	0	0
93572.....	43-1235868....	10/10/2009	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	3,356,847,100	5,449,962	7,006,361	4,633,012	0	0	0	0
93572.....	43-1235868....	10/10/2009	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	655,573	828,288	119,423	0	0	0	0
93572.....	43-1235868....	01/01/2014	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	610,050,204	979,932	1,365,984	833,040	0	0	0	0
93572.....	43-1235868....	01/01/2014	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	140,676	196,021	25,626	0	0	0	0
93572.....	43-1235868....	01/01/2017	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	852,424,798	774,004	1,105,866	657,981	0	0	0	0
93572.....	43-1235868....	01/01/2017	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	60,658	72,459	11,050	0	0	0	0
93572.....	43-1235868....	01/01/2019	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	80,143,226	68,055	0	57,854	0	0	0	0
93572.....	43-1235868....	01/01/2019	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	2,686	0	489	0	0	0	0
93572.....	43-1235868....	07/01/2019	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	1,258,393,234	761,716,255	0	(881,589)	0	0	0	0
64688.....	75-6020048....	10/01/2007	SCOR Global Life Amer Reins Co.....	DE.....	YRT/I.....	OL.....	49,121,638	145,793	127,677	129,122	0	0	0	0
64688.....	75-6020048....	10/01/2007	SCOR Global Life Amer Reins Co.....	DE.....	CO/I.....	DIS.....	0	107,295	63,869	24,347	0	0	0	0
64688.....	75-6020048....	10/10/2009	SCOR Global Life Amer Reins Co.....	DE.....	YRT/I.....	OL.....	298,542,951	376,230	393,440	333,210	0	0	0	0
64688.....	75-6020048....	10/10/2009	SCOR Global Life Amer Reins Co.....	DE.....	CO/I.....	DIS.....	0	342,581	336,372	77,737	0	0	0	0
64688.....	75-6020048....	01/01/2014	SCOR Global Life Amer Reins Co.....	DE.....	YRT/I.....	OL.....	1,703,376,545	1,567,739	2,311,451	1,388,477	0	0	0	0
64688.....	75-6020048....	01/01/2014	SCOR Global Life Amer Reins Co.....	DE.....	CO/I.....	DIS.....	0	379,782	203,245	86,178	0	0	0	0
97071.....	13-3126819....	06/04/2007	SCOR Global Life USA Reins Co.....	DE.....	YRT/I.....	OL.....	656,704,326	1,438,132	1,886,718	1,235,806	0	0	0	0
97071.....	13-3126819....	06/04/2007	SCOR Global Life USA Reins Co.....	DE.....	CO/I.....	DIS.....	0	149,040	197,480	50,441	0	0	0	0
97071.....	13-3126819....	10/01/2007	SCOR Global Life USA Reins Co.....	DE.....	YRT/I.....	OL.....	10,935,902	16,254	366,787	13,967	0	0	0	0
97071.....	13-3126819....	10/01/2007	SCOR Global Life USA Reins Co.....	DE.....	CO/I.....	DIS.....	0	38,844	30,739	13,146	0	0	0	0
97071.....	13-3126819....	10/10/2009	SCOR Global Life USA Reins Co.....	DE.....	YRT/I.....	OL.....	3,164,563,173	5,007,401	6,536,551	4,302,922	0	0	0	0
97071.....	13-3126819....	10/10/2009	SCOR Global Life USA Reins Co.....	DE.....	CO/I.....	DIS.....	0	641,742	801,268	217,190	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
97071.....	13-3126819....	01/01/2017	SCOR Global Life USA Reins Co.....	DE.....	YRT/I.....	OL.....	2,242,211,407	1,117,588	1,784,648	960,357	0	0	0	0
97071.....	13-3126819....	01/01/2017	SCOR Global Life USA Reins Co.....	DE.....	CO/I.....	DIS.....	0	251,597	155,602	85,150	0	0	0	0
97071.....	13-3126819....	01/01/2019	SCOR Global Life USA Reins Co.....	DE.....	YRT/I.....	OL.....	198,091,381	61,341	0	52,711	0	0	0	0
97071.....	13-3126819....	01/01/2019	SCOR Global Life USA Reins Co.....	DE.....	CO/I.....	DIS.....	0	19,506	0	6,601	0	0	0	0
87572.....	23-2038295....	01/01/2006	Scottish Re US Inc.....	DE.....	YRT/I.....	OL.....	27,154,919	169,876	162,194	143,789	0	0	0	0
68713.....	84-0499703....	01/01/1994	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	1,969,719	29,707	27,886	20,931	0	0	0	0
68713.....	84-0499703....	01/01/1994	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	1,188	1,379	111	0	0	0	0
68713.....	84-0499703....	10/01/1995	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	6,608,357	65,816	55,518	46,373	0	0	0	0
68713.....	84-0499703....	10/01/1995	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	10,193	8,222	952	0	0	0	0
68713.....	84-0499703....	07/01/1997	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	1,676,640	13,170	9,700	9,279	0	0	0	0
68713.....	84-0499703....	07/01/1997	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	2,007	2,387	188	0	0	0	0
68713.....	84-0499703....	03/09/1998	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	339,667	1,755	1,509	1,237	0	0	0	0
68713.....	84-0499703....	03/09/1998	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	8,170	7,900	763	0	0	0	0
68713.....	84-0499703....	06/01/1998	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	252,433	2,079	2,283	1,465	0	0	0	0
68713.....	84-0499703....	06/01/1998	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	523	356	49	0	0	0	0
68713.....	84-0499703....	08/01/1998	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	1,213,728	5,784	5,856	4,075	0	0	0	0
68713.....	84-0499703....	08/01/1998	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	2,700	1,827	252	0	0	0	0
68713.....	84-0499703....	02/01/1999	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	536,019	6,070	5,042	4,277	0	0	0	0
68713.....	84-0499703....	02/01/1999	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	149	155	14	0	0	0	0
68713.....	84-0499703....	04/15/1999	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	7,260,447	37,512	32,916	26,430	0	0	0	0
68713.....	84-0499703....	04/15/1999	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	9,739	7,241	910	0	0	0	0
68713.....	84-0499703....	09/01/2000	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	7,036,492	68,312	59,633	48,131	0	0	0	0
68713.....	84-0499703....	09/01/2000	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	19,116	6,314	1,786	0	0	0	0
68713.....	84-0499703....	09/30/2000	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	347,364	4,002	3,440	2,820	0	0	0	0
68713.....	84-0499703....	07/31/2001	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	6,591,322	31,149	32,352	21,947	0	0	0	0
68713.....	84-0499703....	07/31/2001	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	10,085	9,692	942	0	0	0	0
68713.....	84-0499703....	01/01/2002	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	18,688,399	109,864	88,705	77,408	0	0	0	0
68713.....	84-0499703....	01/01/2002	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	47,252	28,665	4,415	0	0	0	0
68713.....	84-0499703....	07/01/2002	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	373,719	3,831	3,324	2,699	0	0	0	0
68713.....	84-0499703....	01/01/2003	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	6,746,228	34,082	29,592	24,014	0	0	0	0
68713.....	84-0499703....	01/01/2003	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	20,656	20,145	1,930	0	0	0	0
68713.....	84-0499703....	04/01/2003	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	38,927,937	148,047	135,044	104,310	0	0	0	0
68713.....	84-0499703....	04/01/2003	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	97,033	115,302	9,066	0	0	0	0
68713.....	84-0499703....	04/01/2004	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	36,669,341	154,469	135,515	108,835	0	0	0	0
68713.....	84-0499703....	04/01/2004	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	119,497	108,789	11,165	0	0	0	0
68713.....	84-0499703....	09/01/2004	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	843,904	40,275	36,519	28,377	0	0	0	0
82627.....	06-0839705....	11/01/1981	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	1,572,351	5,920	4,491	5,525	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

43.6

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....	09/01/1984	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....16,473,063	.....221,140	.....194,577	.....206,389	.....0	.....0	.....0	.....0
82627.....	06-0839705....	09/01/1984	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	.....0	.....191,202	.....3,232	.....56,683	.....0	.....0	.....0	.....0
82627.....	06-0839705....	01/01/1994	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....6,052,000	.....98,921	.....92,614	.....92,322	.....0	.....0	.....0	.....0
82627.....	06-0839705....	01/01/1994	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	.....0	.....3,563	.....4,136	.....1,056	.....0	.....0	.....0	.....0
82627.....	06-0839705....	10/01/1995	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....9,982,110	.....104,416	.....88,907	.....97,451	.....0	.....0	.....0	.....0
82627.....	06-0839705....	10/01/1995	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	.....0	.....14,071	.....11,596	.....4,172	.....0	.....0	.....0	.....0
82627.....	06-0839705....	07/01/1997	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....5,029,918	.....39,510	.....29,099	.....36,875	.....0	.....0	.....0	.....0
82627.....	06-0839705....	07/01/1997	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	.....0	.....6,020	.....7,162	.....1,785	.....0	.....0	.....0	.....0
82627.....	06-0839705....	03/09/1998	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....679,335	.....3,511	.....3,017	.....3,276	.....0	.....0	.....0	.....0
82627.....	06-0839705....	03/09/1998	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	.....0	.....16,339	.....15,801	.....4,844	.....0	.....0	.....0	.....0
82627.....	06-0839705....	06/01/1998	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....504,867	.....4,158	.....4,567	.....3,881	.....0	.....0	.....0	.....0
82627.....	06-0839705....	06/01/1998	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	.....0	.....1,046	.....711	.....310	.....0	.....0	.....0	.....0
82627.....	06-0839705....	08/01/1998	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....2,427,456	.....11,568	.....11,713	.....10,796	.....0	.....0	.....0	.....0
82627.....	06-0839705....	08/01/1998	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	.....0	.....5,399	.....3,653	.....1,601	.....0	.....0	.....0	.....0
82627.....	06-0839705....	02/01/1999	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....411,021	.....2,473	.....2,187	.....2,308	.....0	.....0	.....0	.....0
82627.....	06-0839705....	02/01/1999	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	.....0	.....149	.....155	.....44	.....0	.....0	.....0	.....0
82627.....	06-0839705....	04/15/1999	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....6,017,800	.....33,557	.....29,650	.....31,319	.....0	.....0	.....0	.....0
82627.....	06-0839705....	04/15/1999	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	.....0	.....9,739	.....7,241	.....2,887	.....0	.....0	.....0	.....0
82627.....	06-0839705....	09/01/2000	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....3,344,359	.....43,969	.....38,052	.....41,036	.....0	.....0	.....0	.....0
82627.....	06-0839705....	09/01/2000	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	.....0	.....13,613	.....5,171	.....4,036	.....0	.....0	.....0	.....0
82627.....	06-0839705....	09/30/2000	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....268,418	.....3,093	.....2,658	.....2,886	.....0	.....0	.....0	.....0
82627.....	06-0839705....	07/31/2001	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....2,534,988	.....16,310	.....17,814	.....15,222	.....0	.....0	.....0	.....0
82627.....	06-0839705....	07/31/2001	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	.....0	.....3,562	.....3,872	.....1,056	.....0	.....0	.....0	.....0
82627.....	06-0839705....	01/01/2002	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....16,037,763	.....100,712	.....73,212	.....93,993	.....0	.....0	.....0	.....0
82627.....	06-0839705....	01/01/2002	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	.....0	.....44,024	.....31,037	.....13,051	.....0	.....0	.....0	.....0
82627.....	06-0839705....	07/01/2002	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....135,327	.....629	.....564	.....587	.....0	.....0	.....0	.....0
82627.....	06-0839705....	01/01/2003	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....3,780,424	.....25,386	.....21,116	.....23,693	.....0	.....0	.....0	.....0
82627.....	06-0839705....	01/01/2003	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	.....0	.....6,222	.....4,695	.....1,845	.....0	.....0	.....0	.....0
82627.....	06-0839705....	01/01/2006	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....54,309,806	.....339,751	.....324,388	.....317,087	.....0	.....0	.....0	.....0
82627.....	06-0839705....	07/01/2008	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....11,187,490	.....47,218	.....43,051	.....44,068	.....0	.....0	.....0	.....0
82627.....	06-0839705....	01/01/2010	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....275,781,050	.....495,263	.....455,090	.....462,225	.....0	.....0	.....0	.....0
82627.....	06-0839705....	01/01/2014	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....1,927,113,824	.....1,984,249	.....2,948,678	.....1,851,885	.....0	.....0	.....0	.....0
82627.....	06-0839705....	01/01/2014	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	.....0	.....396,187	.....251,560	.....117,453	.....0	.....0	.....0	.....0
82627.....	06-0839705....	01/01/2017	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....1,705,665,765	.....916,758	.....1,428,511	.....855,602	.....0	.....0	.....0	.....0
82627.....	06-0839705....	01/01/2017	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	.....0	.....189,508	.....146,732	.....56,181	.....0	.....0	.....0	.....0
82627.....	06-0839705....	01/01/2019	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	.....128,907,461	.....55,788	.....0	.....52,066	.....0	.....0	.....0	.....0
82627.....	06-0839705....	01/01/2019	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	.....0	.....9,001	.....0	.....2,668	.....0	.....0	.....0	.....0

OHIO NATIONAL LIFE INSURANCE COMPANY
SCHEDULE S - PART 3 - SECTION 1

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount in Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
86231.....	39-0989781....	01/01/1973	Transamerica Life Ins Co.....	IA.....	YRT/I.....	OL.....	.....16,770	.....511	.....284	.....365	.....0	.....0	.....0	.....0
86231.....	39-0989781....	01/01/2006	Transamerica Life Ins Co.....	IA.....	YRT/I.....	OL.....	.....93,721,422	.....308,223	.....318,649	.....220,140	.....0	.....0	.....0	.....0
86231.....	39-0989781....	01/01/2006	Transamerica Life Ins Co.....	IA.....	CO/I.....	DIS.....	.....0	.....108,944	.....84,452	.....10,793	.....0	.....0	.....0	.....0
86231.....	39-0989781....	06/04/2007	Transamerica Life Ins Co.....	IA.....	YRT/I.....	OL.....	.....986,468,886	.....2,127,385	.....2,813,839	.....1,519,430	.....0	.....0	.....0	.....0
86231.....	39-0989781....	06/04/2007	Transamerica Life Ins Co.....	IA.....	CO/I.....	DIS.....	.....0	.....151,699	.....171,467	.....15,029	.....0	.....0	.....0	.....0
86231.....	39-0989781....	10/01/2007	Transamerica Life Ins Co.....	IA.....	YRT/I.....	OL.....	.....88,570,705	.....384,843	.....998,351	.....274,864	.....0	.....0	.....0	.....0
86231.....	39-0989781....	10/01/2007	Transamerica Life Ins Co.....	IA.....	CO/I.....	DIS.....	.....0	.....258,083	.....174,955	.....25,569	.....0	.....0	.....0	.....0
80659.....	82-4533188....	04/01/2004	US Business of Canada Life Assur Co.....	MI.....	YRT/I.....	OL.....	.....8,359,647	.....14,251	.....12,379	.....13,719	.....0	.....0	.....0	.....0
80659.....	82-4533188....	04/01/2004	US Business of Canada Life Assur Co.....	MI.....	CO/I.....	DIS.....	.....0	.....19,966	.....10,759	.....8,434	.....0	.....0	.....0	.....0
80659.....	82-4533188....	01/19/2005	US Business of Canada Life Assur Co.....	MI.....	YRT/I.....	OL.....	.....13,117,923	.....27,179	.....24,631	.....26,165	.....0	.....0	.....0	.....0
80659.....	82-4533188....	01/19/2005	US Business of Canada Life Assur Co.....	MI.....	CO/I.....	DIS.....	.....0	.....19,071	.....22,729	.....8,056	.....0	.....0	.....0	.....0
80659.....	82-4533188....	01/01/2014	US Business of Canada Life Assur Co.....	MI.....	YRT/I.....	OL.....	.....886,448,385	.....934,347	.....1,463,840	.....899,470	.....0	.....0	.....0	.....0
80659.....	82-4533188....	01/01/2014	US Business of Canada Life Assur Co.....	MI.....	CO/I.....	DIS.....	.....0	.....183,195	.....142,129	.....77,390	.....0	.....0	.....0	.....0
80659.....	82-4533188....	10/01/2014	US Business of Canada Life Assur Co.....	MI.....	COMB/I.....	OL.....	.....7,178,327,549	.....126,586,017	.....111,810,178	.....224,275,844	.....0	.....0	.....404,540,414	.....0
80659.....	82-4533188....	01/01/2017	US Business of Canada Life Assur Co.....	MI.....	YRT/I.....	OL.....	.....1,046,421,609	.....599,624	.....974,312	.....577,240	.....0	.....0	.....0	.....0
80659.....	82-4533188....	01/01/2017	US Business of Canada Life Assur Co.....	MI.....	CO/I.....	DIS.....	.....0	.....122,338	.....106,412	.....51,681	.....0	.....0	.....0	.....0
80659.....	82-4533188....	01/01/2019	US Business of Canada Life Assur Co.....	MI.....	YRT/I.....	OL.....	.....111,011,843	.....27,273	.....0	.....26,255	.....0	.....0	.....0	.....0
80659.....	82-4533188....	01/01/2019	US Business of Canada Life Assur Co.....	MI.....	CO/I.....	DIS.....	.....0	.....7,171	.....0	.....3,029	.....0	.....0	.....0	.....0
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						...41,465,011,425	.....2,001,261,606	.....468,932,396	.....215,427,285	.....0	.....0	.....404,540,414	.....0
General Account - Authorized - Non-Affiliates - Non-U.S. Non-Affiliates														
00000.....	CR-1460100....	12/31/2018	New Reins Co Ltd.....	CHE.....	YRT/I.....	OL.....	.....60,401,549,946	.....0	.....0	.....63,962,668	.....0	.....0	.....0	.....0
0999999.	Total - General Account - Authorized - Non-Affiliates - Non-U.S. Non-Affiliates.....						.....60,401,549,946	.....0	.....0	.....63,962,668	.....0	.....0	.....0	.....0
1099999.	Total - General Account - Authorized - Non-Affiliates.....						..101,866,561,371	.....2,001,261,606	.....468,932,396	.....279,389,953	.....0	.....0	.....404,540,414	.....0
1199999.	Total - General Account - Authorized.....						..101,866,561,371	.....2,462,776,893	.....468,932,396	.....1,152,979,093	.....0	.....0	.....404,540,414	.....34,784,220
General Account - Unauthorized - Affiliates - Non-U.S. - Captive														
00000.....	AA-0056843....	04/01/2008	Sycamore Re.....	CYM.....	OTH/I.....	OA.....	.....0	.....577,609,555	.....1,526,207,564	.....(423,053,734)	.....0	.....0	.....0	.....492,466,784
1599999.	Total - General Account - Unauthorized - Affiliates - Non-U.S. - Captive.....						.....0	.....577,609,555	.....1,526,207,564	.....(423,053,734)	.....0	.....0	.....0	.....492,466,784
1799999.	Total - General Account - Unauthorized - Affiliates - Non-U.S. - Total.....						.....0	.....577,609,555	.....1,526,207,564	.....(423,053,734)	.....0	.....0	.....0	.....492,466,784
1899999.	Total - General Account - Unauthorized - Affiliates.....						.....0	.....577,609,555	.....1,526,207,564	.....(423,053,734)	.....0	.....0	.....0	.....492,466,784
General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates														
00000.....	AA-3190770...	04/01/2002	Chubb Tempest Reinsurance LTD.....	BMU.....	OTH/I.....	OA.....	.....0	.....1,045,736,672	.....1,166,696,065	.....39,126,012	.....0	.....0	.....0	.....0
00000.....	AA-3160032....	07/01/2013	CGT Insurance Company LTD.....	BRB.....	OTH/I.....	OA.....	.....0	.....0	.....2,409,813	.....34,221,286	.....0	.....0	.....0	.....0
00000.....	AA-3190770....	01/01/2006	Chubb Tempest Reins LTD.....	BMU.....	YRT/I.....	OL.....	.....26,373,494	.....94,779	.....110,837	.....78,386	.....0	.....0	.....0	.....0
00000.....	AA-3190770....	01/01/2006	Chubb Tempest Reins LTD.....	BMU.....	CO/I.....	DIS.....	.....0	.....36,604	.....56,964	.....7,329	.....0	.....0	.....0	.....0
2099999.	Total - General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates.....						.....26,373,494	.....1,045,868,055	.....1,169,273,679	.....73,433,013	.....0	.....0	.....0	.....0
2199999.	Total - General Account - Unauthorized - Non-Affiliates.....						.....26,373,494	.....1,045,868,055	.....1,169,273,679	.....73,433,013	.....0	.....0	.....0	.....0
2299999.	Total - General Account - Unauthorized.....					26,373,4941,623,477,6102,695,481,243(349,620,721)000492,466,784

OHIO NATIONAL LIFE INSURANCE COMPANY

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount in Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
3499999.	Total - General Account - Authorized, Unauthorized and Certified.....						..101,892,934,865	.....4,086,254,503	.....3,164,413,639	.....803,358,372	.....0	.....0	.....404,540,414	.....527,251,004
6999999.	Total U.S.....						...41,465,011,425	.....2,462,776,893	.....468,932,396	.....1,089,016,425	.....0	.....0	.....404,540,414	.....34,784,220
7099999.	Total Non-U.S.....						...60,427,923,440	.....1,623,477,610	.....2,695,481,243	.....(285,658,053)	.....0	.....0	.....0	.....492,466,784
9999999.	Total.....						..101,892,934,865	.....4,086,254,503	.....3,164,413,639	.....803,358,372	.....0	.....0	.....404,540,414	.....527,251,004

OHIO NATIONAL LIFE INSURANCE COMPANY
SCHEDULE S - PART 3 - SECTION 2

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

1	2	3	4	5	6	7	8	9	10	Outstanding Surplus Relief		13	14
										11	12		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Premiums	Unearned Premiums (Estimated)	Reserve Credit Taken Other Than for Unearned Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates													
86258.....	13-2572994....	.01/01/1999	General Re Life Corporation.....	CT.....	QA/I.....	LTDI.....	.....2,451,485	.....1,155,112	.....17,993,489	.....0	.....0	.....0	.....0
66346.....	58-0828824....	.01/01/1999	Munich American Reassurance Company.....	GA.....	QA/I.....	LTDI.....	.....2,500,516	.....1,189,654	.....17,754,024	.....0	.....0	.....0	.....0
82627.....	06-0839705....	.05/01/1982	Swiss Re Life & Health America, Inc.....	MO.....	QA/I.....	LTDI.....	.....931,038	.....449,879	.....9,635,478	.....0	.....0	.....0	.....0
67598.....	04-1768571....	.01/10/1977	Paul Revere Life Ins Co.....	MA.....	OTH/I.....	LTDI.....	.....229	.....0	.....0	.....0	.....0	.....0	.....0
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						.....5,883,268	.....2,794,645	.....45,382,991	.....0	.....0	.....0	.....0
1099999.	Total - General Account - Authorized - Non-Affiliates.....						.....5,883,268	.....2,794,645	.....45,382,991	.....0	.....0	.....0	.....0
1199999.	Total - General Account - Authorized.....						.....5,883,268	.....2,794,645	.....45,382,991	.....0	.....0	.....0	.....0
3499999.	Total - General Account - Authorized, Unauthorized and Certified.....						.....5,883,268	.....2,794,645	.....45,382,991	.....0	.....0	.....0	.....0
6999999.	Total - U.S.....						.....5,883,268	.....2,794,645	.....45,382,991	.....0	.....0	.....0	.....0
9999999.	Total.....						.....5,883,268	.....2,794,645	.....45,382,991	.....0	.....0	.....0	.....0

OHIO NATIONAL LIFE INSURANCE COMPANY

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 - Non-U.S. - Captive

00000.....	AA-0056843	.04/01/2008	Sycamore Re.....	....577,609,555	.....3,888,866	.....0	....581,498,421	....110,000,000	0001.....	.....7,563,972	....492,466,784	.....0	.....218,820	....581,498,421
0499999.	Total - General Account - Life and Annuity - Affiliates - Non-U.S. - Captive.....			....577,609,555	.....3,888,866	.....0	....581,498,421	....110,000,000	....XXX.....	.....7,563,972	....492,466,784	.....0	.....218,820	....581,498,421
0699999.	Total - General Account - Life and Annuity - Affiliates - Non-U.S. - Total.....			....577,609,555	.....3,888,866	.....0	....581,498,421	....110,000,000	....XXX.....	.....7,563,972	....492,466,784	.....0	.....218,820	....581,498,421
0799999.	Total - General Account - Life and Annuity - Affiliates.....			....577,609,555	.....3,888,866	.....0	....581,498,421	....110,000,000	....XXX.....	.....7,563,972	....492,466,784	.....0	.....218,820	....581,498,421

General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates

00000.....	AA-3190770	.04/01/2002	Chubb Tempest Reinsurance LTD.....	..1,045,736,672	.....17,681,926	.....0	..1,063,418,598	.....178,882,324	0002.....	.....953,387,088	.....0	.....0	.....3,389,165	..1,063,418,598
00000.....	AA-3190770	.01/01/2006	Chubb Tempest Reinsurance LTD.....	.....94,779	.....13,894	.....0	.....108,673	.....98,492	0002.....	.....0	.....0	.....0	.....10,181	.....108,673
00000.....	AA-3190770	.07/01/2006	Chubb Tempest Reinsurance LTD.....	.....61,684	.....0	.....0	.....61,684	.....61,684	0002.....	.....0	.....0	.....0	.....0	.....61,684
0999999.	Total - General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates.....			..1,045,893,135	.....17,695,820	.....0	..1,063,588,955	.....179,042,500	....XXX.....	.....953,387,088	.....0	.....0	.....3,399,346	..1,063,588,955
1099999.	Total - General Account - Life and Annuity - Non-Affiliates.....			..1,045,893,135	.....17,695,820	.....0	..1,063,588,955	.....179,042,500	....XXX.....	.....953,387,088	.....0	.....0	.....3,399,346	..1,063,588,955
1199999.	Total - General Account - Life and Annuity.....			..1,623,502,690	.....21,584,686	.....0	..1,645,087,376	.....289,042,500	....XXX.....	.....960,951,060	....492,466,784	.....0	.....3,618,166	..1,645,087,376
2399999.	Total - General Account.....			..1,623,502,690	.....21,584,686	.....0	..1,645,087,376	.....289,042,500	....XXX.....	.....960,951,060	....492,466,784	.....0	.....3,618,166	..1,645,087,376
3699999.	Total - Non-U.S.....			..1,623,502,690	.....21,584,686	.....0	..1,645,087,376	.....289,042,500	....XXX.....	.....960,951,060	....492,466,784	.....0	.....3,618,166	..1,645,087,376
9999999.	Total.....			..1,623,502,690	.....21,584,686	.....0	..1,645,087,376	.....289,042,500	....XXX.....	.....960,951,060	....492,466,784	.....0	.....3,618,166	..1,645,087,376

(a)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
0001.....	2.....	071025661.....	BMO Harris Bank N.A.....	.....15,277,778
0001.....	2.....	026073079.....	Wells Fargo Bank N.A.....	.....15,277,778
0001.....	2.....	042000013.....	U.S. BANK, NATIONAL ASSOCIATION.....	.....21,388,889
0001.....	2.....	043000096.....	PNC Bank, N.A.....	.....10,388,889
0001.....	2.....	102000908.....	KEYBANK, N.A.....	.....10,388,889
0001.....	2.....	053100737.....	FIFTH THIRD BANK.....	.....10,388,889
0001.....	2.....	066009650.....	NORTHERN TRUST.....	.....3,055,556
0001.....	2.....	026009593.....	BANK OF AMERICA, N.A.....	.....10,388,889
0001.....	2.....	075900575.....	ASSOCIATED BANK.....	.....4,888,889
0001.....	2.....	044000024.....	The Huntington National Bank.....	.....8,555,556
0002.....	2.....	053000219.....	WELLS FARGO BANK, N.A.....	.....29,042,500
0002.....	2.....	026009917.....	AUSTRALIA AND NEW ZEALAND BANKING GROUP LIMITED.....	.....150,000,000

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		
															16	17	18	19	20	21					22	
NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Domiciliary Jurisdiction	Certified Reinsurer 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)	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)	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)	
General Account-Life & Annuity - Non-Affiliates - Non-U.S. Non-Affiliates																										
00000.....	CR-1460100.....	12/31/2018	New Reins Co Ltd.....	CHE.....	...2	07/01/2017	.....10.0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0.0	.....0.0	.....0	.....0	
0999999.	Total General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates.....							.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....	.....0	.....0	.....0	.....0	.....XXX.....	.....XXX.....	.....0	.....0
1099999.	Total General Account - Life and Annuity - Non-Affiliates.....							.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....	.....0	.....0	.....0	.....0	.....XXX.....	.....XXX.....	.....0	.....0
1199999.	Total General Account - Total Life and Annuity.....							.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....	.....0	.....0	.....0	.....0	.....XXX.....	.....XXX.....	.....0	.....0
2399999.	Total General Account.....							.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....	.....0	.....0	.....0	.....0	.....XXX.....	.....XXX.....	.....0	.....0
3699999.	Total Non-U.S.....							.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....	.....0	.....0	.....0	.....0	.....XXX.....	.....XXX.....	.....0	.....0
9999999.	Total.....							.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....0	.....XXX.....	.....0	.....0	.....0	.....0	.....XXX.....	.....XXX.....	.....0	.....0

OHIO NATIONAL LIFE INSURANCE COMPANY
SCHEDULE S - PART 6

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

		1	2	3	4	5
		2019	2018	2017	2016	2015
A.	OPERATIONS ITEMS					
1.	Premiums and annuity considerations for life and accident and health contracts.....	809,242	994,972	424,394	357,774	295,391
2.	Commissions and reinsurance expense allowances.....	85,239	80,156	57,903	43,696	23,152
3.	Contract claims.....	246,528	122,077	86,303	72,897	59,221
4.	Surrender benefits and withdrawals for life contracts.....	0	0	0	0	0
5.	Dividends to policyholders and refunds to members.....	0	0	0	0	0
6.	Reserve adjustments on reinsurance ceded.....	150,628	118,437	76,934	40,093	18,700
7.	Increase in aggregate reserves for life and accident and health contracts.....	921,952	(1,489,651)	204,805	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.....	4,134,432	3,212,480	1,722,829	0	0
10.	Liability for deposit-type contracts.....	0	0	0	0	0
11.	Contract claims unpaid.....	9,841	5,938	2,963	6,483	2,851
12.	Amounts recoverable on reinsurance.....	51,624	21,525	10,259	11,613	6,875
13.	Experience rating refunds due or unpaid.....	0	0	0	0	0
14.	Policyholders' dividends and refunds to members (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).....	492,467	612,123	28,774	115,819	149,566
19.	Letters of credit (L).....	289,043	1,234,602	569,757	605,494	302,100
20.	Trust agreements (T).....	960,951	898,600	850,784	829,574	862,327
21.	Other (O).....	0	0	0	0	0
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 INSURANCE COMPANY
SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	8,422,962,816	.....0	8,422,962,816
2. Reinsurance (Line 16).....	54,539,626	.....0	54,539,626
3. Premiums and considerations (Line 15).....	90,292,579	.....0	90,292,579
4. Net credit for ceded reinsurance.....	XXX.....	4,144,273,577	4,144,273,577
5. All other admitted assets (balance).....	401,191,430	.....0	401,191,430
6. Total assets excluding Separate Accounts (Line 26).....	8,968,986,451	4,144,273,577	13,113,260,028
7. Separate Account assets (Line 27).....	19,255,771,388	.....0	19,255,771,388
8. Total assets (Line 28).....	28,224,757,839	4,144,273,577	32,369,031,416
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2).....	5,912,095,624	4,134,432,139	10,046,527,763
10. Liability for deposit-type contracts (Line 3).....	696,909,618	.....0	696,909,618
11. Claim reserves (Line 4).....	19,592,780	9,841,438	29,434,218
12. Policyholder dividends/member refunds/reserves (Lines 5 through 7).....	114,118,703	.....0	114,118,703
13. Premium & annuity considerations received in advance (Line 8).....	1,498,231	.....0	1,498,231
14. Other contract liabilities (Line 9).....	46,804,497	.....0	46,804,497
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).....	492,466,784	.....0	492,466,784
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).....	665,637,574	.....0	665,637,574
20. Total liabilities excluding Separate Accounts (Line 26).....	7,949,123,812	4,144,273,577	12,093,397,388
21. Separate Account liabilities (Line 27).....	19,255,771,388	.....0	19,255,771,388
22. Total liabilities (Line 28).....	27,204,895,200	4,144,273,577	31,349,168,777
23. Capital & surplus (Line 38).....	1,019,862,639	XXX.....	1,019,862,639
24. Total liabilities, capital & surplus (Line 39).....	28,224,757,839	4,144,273,577	32,369,031,416
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves.....	4,134,432,139		
26. Claim reserves.....	9,841,438		
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.....	4,144,273,577		
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.....	4,144,273,577		

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

			Direct Business Only					
			1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
States, Etc.								
1.	Alabama.....	AL	9,343,916	406,993	151,939	0	2,378	9,905,226
2.	Alaska.....	AK	306,495	0	7,421	0	962	314,877
3.	Arizona.....	AZ	13,396,034	(274,415)	89,254	0	14,327	13,225,201
4.	Arkansas.....	AR	5,103,745	134,397	59,931	0	31,171	5,329,244
5.	California.....	CA	47,421,868	3,968,345	696,843	0	1,732,868	53,819,924
6.	Colorado.....	CO	37,265,950	1,689,118	324,518	0	508,289	39,787,876
7.	Connecticut.....	CT	4,777,744	602,740	151,913	0	1,217	5,533,614
8.	Delaware.....	DE	2,612,583	339,785	37,363	0	236	2,989,968
9.	District of Columbia.....	DC	783,901	3,612	7,555	0	11	795,079
10.	Florida.....	FL	54,013,746	6,055,662	397,058	0	1,393,261	61,859,726
11.	Georgia.....	GA	9,891,776	1,434,782	169,477	0	8,892	11,504,927
12.	Hawaii.....	HI	162,405	0	2,553	0	227	165,185
13.	Idaho.....	ID	2,448,599	628,673	98,220	0	27,306	3,202,798
14.	Illinois.....	IL	35,509,536	4,860,805	667,210	0	2,287,745	43,325,297
15.	Indiana.....	IN	11,638,052	(138,137)	134,095	0	47,100	11,681,110
16.	Iowa.....	IA	7,415,156	2,001,462	119,091	0	128,172	9,663,881
17.	Kansas.....	KS	16,122,911	1,994,969	283,194	0	714,837	19,115,911
18.	Kentucky.....	KY	5,167,294	336,128	102,071	0	79,671	5,685,165
19.	Louisiana.....	LA	16,824,031	(36,603)	42,718	0	2,528,727	19,358,874
20.	Maine.....	ME	691,971	(357,565)	21,499	0	293	356,199
21.	Maryland.....	MD	9,517,881	5,688,452	206,903	0	8,199	15,421,436
22.	Massachusetts.....	MA	12,428,129	798,311	360,167	0	9,539,659	23,126,265
23.	Michigan.....	MI	38,237,986	3,051,952	350,179	0	2,266,752	43,906,870
24.	Minnesota.....	MN	9,213,306	1,806,428	154,955	0	10,814	11,185,503
25.	Mississippi.....	MS	2,978,144	204,546	94,866	0	208,994	3,486,550
26.	Missouri.....	MO	10,240,459	1,441,341	123,794	0	15,500	11,821,094
27.	Montana.....	MT	1,199,419	11,400	20,055	0	48,649	1,279,523
28.	Nebraska.....	NE	9,492,831	568,514	82,659	0	462,960	10,606,964
29.	Nevada.....	NV	2,592,922	56,919	63,628	0	213,276	2,926,745
30.	New Hampshire.....	NH	7,157,983	2,024,677	34,398	0	3,120	9,220,179
31.	New Jersey.....	NJ	25,178,303	4,317,640	201,695	0	3,286,966	32,984,604
32.	New Mexico.....	NM	803,150	58,693	17,831	0	612	880,285
33.	New York.....	NY	2,014,224	(608,093)	31,043	0	26,350	1,463,524
34.	North Carolina.....	NC	12,831,642	2,354,996	199,020	0	352,072	15,737,730
35.	North Dakota.....	ND	5,910,333	0	98,627	0	377,649	6,386,608
36.	Ohio.....	OH	46,895,890	6,533,981	1,141,776	0	80,726,962	135,298,608
37.	Oklahoma.....	OK	9,933,185	235,937	104,770	0	1,632	10,275,525
38.	Oregon.....	OR	3,608,032	43,484	160,475	0	140,399	3,952,390
39.	Pennsylvania.....	PA	37,356,459	4,884,726	601,627	0	1,247,862	44,090,673
40.	Rhode Island.....	RI	2,023,068	1,147,512	53,267	0	80,833	3,304,680
41.	South Carolina.....	SC	5,357,387	471,108	87,175	0	3,448	5,919,118
42.	South Dakota.....	SD	1,988,851	28,325	8,752	0	35,542	2,061,471
43.	Tennessee.....	TN	17,829,745	1,401,519	355,321	0	5,676	19,592,261
44.	Texas.....	TX	52,072,639	1,754,749	514,856	0	3,174,179	57,516,423
45.	Utah.....	UT	10,147,283	172,628	53,711	0	908,718	11,282,341
46.	Vermont.....	VT	257,398	71,131	6,166	0	41	334,737
47.	Virginia.....	VA	10,897,516	1,010,503	187,246	0	4,038	12,099,304
48.	Washington.....	WA	7,015,352	591,397	110,372	0	8,417	7,725,538
49.	West Virginia.....	WV	2,414,676	1,422,921	85,091	0	6,448,400	10,371,088
50.	Wisconsin.....	WI	17,075,817	2,201,370	610,325	0	195,064	20,082,575
51.	Wyoming.....	WY	1,058,917	21,500	18,633	0	2,257	1,101,307
52.	American Samoa.....	AS	0	0	0	0	0	0
53.	Guam.....	GU	0	0	0	0	0	0
54.	Puerto Rico.....	PR	301,205	113,278	1,137,105	0	64	1,551,653
55.	US Virgin Islands.....	VI	32	0	0	0	0	32
56.	Northern Mariana Islands.....	MP	0	0	0	0	0	0
57.	Canada.....	CAN	51,920	0	510	0	100	52,530
58.	Aggregate Other Alien.....	OT	147,824	0	18,032	0	0	165,856
59.	Totals.....		657,127,625	67,532,596	10,858,956	0	119,312,897	854,832,074

OHIO NATIONAL LIFE INSURANCE COMPANY

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 Seviles, 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		ON Netherlands Holdings B.V.....	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.....	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.....
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.....

OHIO NATIONAL LIFE INSURANCE COMPANY

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.....	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...	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...	67172...	31-0397080..	.....0	.....0		The Ohio National Life Insurance Company.....	OH.....	RE.....	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.....	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...	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.....
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.....

OHIO NATIONAL LIFE INSURANCE COMPANY

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.....	31-1454693..	.....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....	.....Y.....	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.....	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.....	.....55,000,000	......0	......0	......0	.....142,456,943	......0	.....	......0	.....197,456,943	......0
67172.....	31-0397080.....	The Ohio National Life Insurance Company.....	.....57,750,000	.....(137,404,350)	.....335,465,140	......0	.....(137,688,984)	.....(384,780,208)	.....	......0	.....(266,658,402)	.....84,700,187
89206.....	31-0962495.....	Ohio National Life Assurance Corporation.....	.....(106,000,000)	......0	......0	......0	.....(52,858,796)	.....24,966,746	.....	......0	.....(133,892,050)	.....908,100,183
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	.....1,783,298	......0	.....	......0	.....1,783,298	......0
85472.....	13-2740556.....	National Security Life and Annuity Co.....	......0	......0	......0	......0	.....(382,728)	.....9,443,820	.....	......0	.....9,061,092	.....11,391,124
00000.....	31-1454693.....	Ohio National Investments, Inc.....	.....(6,750,000)	......0	......0	......0	.....(25,529,340)	......0	.....	......0	.....(32,279,340)	......0
00000.....	31-1454699.....	Ohio National Equities, Inc.....	......0	......0	......0	......0	.....60,069,933	......0	.....	......0	.....60,069,933	......0
00000.....	31-0742113.....	The O.N. Equity Sales Company.....	......0	......0	......0	......0	.....1,391,336	......0	.....	......0	.....1,391,336	......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.....	AA-0056843.....	Sycamore Re, Ltd.....	......0	......0	......0	......0	.....(3,797,194)	.....(447,674,982)	.....	......0	.....(451,472,176)	.....(581,498,421)
13575.....	26-3791519.....	Montgomery Re, Inc.....	......0	......0	......0	......0	.....(191,553)	.....1,164,484	.....	......0	.....972,931	.....7,157,889
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	.....(172,398)	.....(1,758,699)	.....	......0	.....(1,931,097)	.....20,624,522
15855.....	47-4249160.....	Camargo Re Captive, Inc.....	......0	......0	......0	......0	.....(191,553)	.....(4,152,934)	.....	......0	.....(4,344,487)	.....12,346,923
16481.....	83-2532656.....	Sunrise Captive Re, LLC.....	......0	.....137,404,350	.....(335,465,140)	......0	.....(317,979)	.....802,791,773	.....	......0	.....604,413,004	.....(462,822,407)
00000.....	46-3873878.....	ON Foreign Holdings, LLC.....	......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	.....15,429,015	......0	.....	......0	.....15,429,015	......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 INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

MARCH FILING		Responses
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	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? (Not applicable to fraternal benefit societies)	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? (Not applicable to fraternal benefit societies)	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? (Not applicable to fraternal benefit societies)	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?	YES
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?	YES
22.	Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
24.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
25.	Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	YES
26.	Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	YES
27.	Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	NO
28.	Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?	NO
29.	Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
30.	Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	NO
31.	Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	YES
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?	YES
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? (Not applicable to fraternal benefit societies)	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 Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies)	NO
44.	Will the Accident and Health Policy Experience Exhibit be filed by April 1?	YES
45.	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
46.	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
47.	Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30?	NO
48.	Will the Supplemental Term and Universal Life Insurance Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1?	NO
49.	Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1?	YES
AUGUST FILING		
50.	Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1?	YES

EXPLANATIONS: BAR CODE:

OHIO NATIONAL LIFE INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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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.

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.

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.

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.

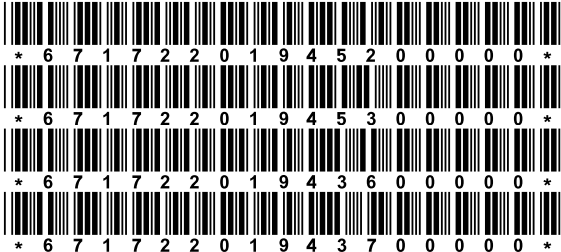
31.

32.

33.

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

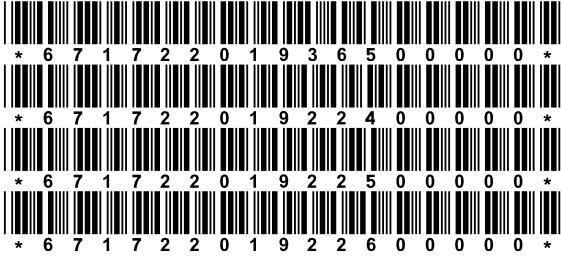
35.



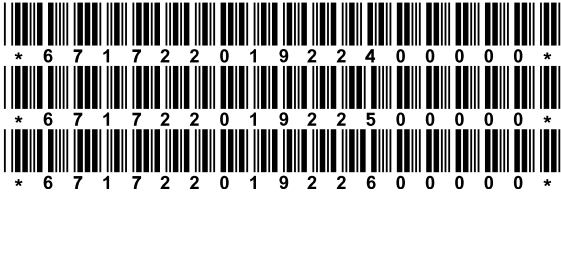
OHIO NATIONAL LIFE INSURANCE COMPANY
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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.

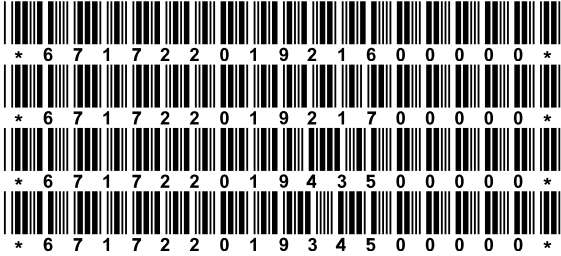


43. The data for this supplement is not required to be filed.

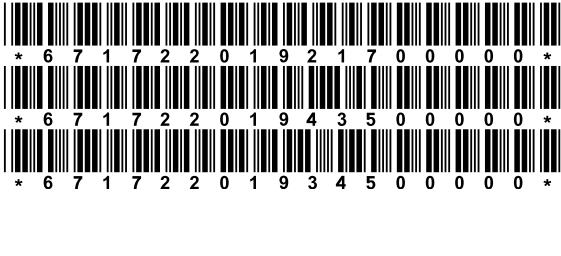


44.

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



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



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



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

49.

50.

OHIO NATIONAL LIFE INSURANCE COMPANY
Overflow Page for Write-Ins

Additional Write-ins for Assets:

	Current Statement Date			4 December 31, Prior Year Net Admitted Assets
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	
2504. State taxes recoverable.....	664,000	0	664,000	642,000
2505. Goodwill.....	158,505	0	158,505	237,758
2506. Pension fee income recoverable.....	31,456	0	31,456	212,082
2507. NSCC deposit.....	20,000	0	20,000	20,000
2508. Prepaid expenses.....	232,073	232,073	0	0
2509. Surplus note issuance costs.....	60,943	60,943	0	0
2597. Summary of remaining write-ins for Line 25.....	1,166,977	293,016	873,961	1,111,840

Additional Write-ins for Summary of Operations:

	1 Current Year	2 Prior Year
2704. IMR adjustment.....	393,599	0
2797. Summary of remaining write-ins for Line 27.....	393,599	0

Additional Write-ins for Summary of Operations:

	1 Current Year	2 Prior Year
5304. Prior period adjustment.....	(1,446,414)	(1,063,344)
5397. Summary of remaining write-ins for Line 53.....	(1,446,414)	(1,063,344)

Additional Write-ins for Exhibit of Capital Gains (Losses):

	1 Realized Gain (Loss) on Sale or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
0904. Currency translation unrealized.....	0	0	0	0	126
0997. Summary of remaining write-ins for Line 9.....	0	0	0	0	126

OHIO NATIONAL LIFE INSURANCE COMPANY

Overflow Page for Write-Ins

Additional Write-ins for Analysis of Operations - Summary:

		1	2	3	4	5	6	7	8	9
		Total	Individual Life	Group Life	Individual Annuities	Group Annuities	Accident and Health	Fraternal	Other Lines of Business	YRT Mortality Risk Only
2704.	IMR adjustment.....	.....393,599	.....393,599	......0	......0	......0	......0	.....0	.....0	.....0
2797.	Summary of remaining write-ins for Line 27.....	.....393,599	.....393,599	......0	......0	......0	......0	.....0	.....0	.....0

VM-20 RESERVES SUPPLEMENT - PART 1

Life Insurance Reserves Valued According to VM-20 by Product Type

For the Year Ended December, 31, 2019

(To Be Filed by March 1)

NAIC Group Code: 0704

(\$000 Omitted Except for Number of Policies)

NAIC Company Code: 67172

[illegible]

DETAILS OF WRITE-INS

[illegible]

OHIO NATIONAL LIFE INSURANCE COMPANY
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, 2019
(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.....	.....0	.....0	.....0	.....0	.....0
1.2	Universal Life with Secondary Guarantee.....	.....0	.....0	.....0	.....0	.....0
1.3	Non-participating Whole Life.....	.....0	.....0	.....0	.....0	.....0
1.4	Participating Whole Life.....	.....213,791	.....212,642	.....408,296	.....406,314	.....19,159
1.5	Universal Life without Secondary Guarantee.....	.....0	.....0	.....0	.....0	.....0
1.6	Variable Universal Life.....	.....0	.....0	.....0	.....0	.....0
1.7	Variable Life.....	.....0	.....0	.....0	.....0	.....0
1.8	Indexed Life.....	.....0	.....0	.....0	.....0	.....0
1.9	Aggregate write-ins for other products.....	.....0	.....0	.....0	.....0	.....0
2.	Total Life Insurance Reserves					
	(Sum of Lines 1.1 through 1.9).....	.....213,791	.....212,642	.....408,296	.....406,314	.....19,159
DETAILS OF WRITE-INS						
1.901	.....	.....0	.....0	.....0	.....0	.....0
1.902	.....	.....0	.....0	.....0	.....0	.....0
1.903	.....	.....0	.....0	.....0	.....0	.....0
1.998	Summary of remaining write-ins for Line 1.9 from overflow page.....	.....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

VM-20 RESERVES SUPPLEMENT - PART 3

Life PBR Exemption
For the Year Ended December 31, 2019
(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, 2019
(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, 2019
(To Be Filed March 1)

Of The.....OHIO NATIONAL LIFE INSURANCE COMPANY

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

NAIC Group Code.....0704

NAIC Company Code.....67172

Employer's ID Number.....31-0397080

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 2015	2 2016	3 2017	4 2018	5 2019 (a)
1. Prior.....	0	0	0	0	0
2. 2015.....	0	0	0	0	0
3. 2016.....	XXX	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. Prior.....	1,190	1,179	957	791	546
2. 2015.....	23	144	264	201	67
3. 2016.....	XXX	36	95	206	41
4. 2017.....	XXX	XXX	5	180	62
5. 2018.....	XXX	XXX	XXX	30	25
6. 2019.....	XXX	XXX	XXX	XXX	(26)

Section C - Credit Accident and Health

1. Prior.....	0	0	0	0	0
2. 2015.....	0	0	0	0	0
3. 2016.....	XXX	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0

(a) See the Annual Audited Financial Reports section of the Annual Statement Instructions.

OHIO NATIONAL LIFE INSURANCE COMPANY
SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O - PART 2

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid for Cost Containment Expenses				
	1 2015	2 2016	3 2017	4 2018	5 2019
1. Prior.....	0	0	0	0	0
2. 2015.....	0	0	0	0	0
3. 2016.....	XXX	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. Prior.....	0	0	0	0	0
2. 2015.....	112	0	0	0	0
3. 2016.....	XXX	45	0	0	0
4. 2017.....	XXX	XXX	44	0	0
5. 2018.....	XXX	XXX	XXX	80	0
6. 2019.....	XXX	XXX	XXX	XXX	232

Section C - Credit Accident and Health

1. Prior.....	0	0	0	0	0
2. 2015.....	0	0	0	0	0
3. 2016.....	XXX	0	0	0	0
4. 2017.....	XXX	XXX	0	0	0
5. 2018.....	XXX	XXX	XXX	0	0
6. 2019.....	XXX	XXX	XXX	XXX	0

OHIO NATIONAL LIFE INSURANCE COMPANY
SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O - PART 3

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
	1 2015	2 2016	3 2017	4 2018	5 2019
1. 2015.....	0	0	0	XXX	XXX
2. 2016.....	XXX	0	0	0	XXX
3. 2017.....	XXX	XXX	0	0	0
4. 2018.....	XXX	XXX	XXX	0	0
5. 2019.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. 2015.....	1,358	1,166	1,340	XXX	XXX
2. 2016.....	XXX	1,602	639	653	XXX
3. 2017.....	XXX	XXX	741	1,195	898
4. 2018.....	XXX	XXX	XXX	975	1,011
5. 2019.....	XXX	XXX	XXX	XXX	420

Section C - Credit Accident and Health

1. 2015.....	0	0	0	XXX	XXX
2. 2016.....	XXX	0	0	0	XXX
3. 2017.....	XXX	XXX	0	0	0
4. 2018.....	XXX	XXX	XXX	0	0
5. 2019.....	XXX	XXX	XXX	XXX	0

OHIO NATIONAL LIFE INSURANCE COMPANY
SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O - PART 4

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claims and Cost Containment Liabilities and Reserve Outstanding at End of Year				
	1 2015	2 2016	3 2017	4 2018	5 2019
1. 2015.....	.....0	.....0	.....0	.....0	.....0
2. 2016.....	.....XXX	.....0	.....0	.....0	.....0
3. 2017.....	.....XXX	.....XXX	.....0	.....0	.....0
4. 2018.....	.....XXX	.....XXX	.....XXX	.....0	.....0
5. 2019.....	.....XXX	.....XXX	.....XXX	.....XXX	.....0

Section B - Other Accident and Health

1. 2015.....	.....1,358	.....1,166	.....1,340	.....1,331	.....964
2. 2016.....	.....XXX	.....1,602	.....639	.....653	.....316
3. 2017.....	.....XXX	.....XXX	.....741	.....1,195	.....898
4. 2018.....	.....XXX	.....XXX	.....XXX	.....975	.....1,011
5. 2019.....	.....XXX	.....XXX	.....XXX	.....XXX	.....420

Section C - Credit Accident and Health

1. 2015.....	.....0	.....0	.....0	.....0	.....0
2. 2016.....	.....XXX	.....0	.....0	.....0	.....0
3. 2017.....	.....XXX	.....XXX	.....0	.....0	.....0
4. 2018.....	.....XXX	.....XXX	.....XXX	.....0	.....0
5. 2019.....	.....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.....	.....18,899
3. Individual annuity.....	Standard Factor and Other.....	.....500
4. Supplementary contracts.....		.....0
5. Credit life.....		.....0
6. Group life.....	Standard Factor and Other.....	.....15
7. Group annuities.....	Standard Factor and Other.....	.....2
8. Group accident and health.....		.....0
9. Credit accident and health.....		.....0
10. Other accident and health.....	Standard Factor and Other.....	.....8,985
11. Total.....		.....28,401

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

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NONE

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