



ANNUAL STATEMENT

For the Year Ended December 31, 2020
of the Condition and Affairs of the

OHIO NATIONAL LIFE ASSURANCE CORPORATION

NAIC Group Code.....0704, 0704 (Current Period) (Prior Period)	NAIC Company Code..... 89206	Employer's ID Number..... 31-0962495
Organized under the Laws of OH	State of Domicile or Port of Entry OH	Country of Domicile US
Licensed as Business Type:	Life, Accident & Health	
Incorporated/Organized..... June 26, 1979	Commenced Business..... August 22, 1979	
Statutory Home Office	One Financial Way .. Cincinnati .. OH .. US .. 45242 (Street and Number) (City or Town, State, Country and Zip Code)	
Main Administrative Office	One Financial Way .. Cincinnati .. OH .. US .. 45242 (Street and Number) (City or Town, State, Country and Zip Code)	513-794-6100 (Area Code) (Telephone Number)
Mail Address	Post Office Box 237 .. Cincinnati .. OH .. US .. 45201 (Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)	
Primary Location of Books and Records	One Financial Way .. Cincinnati .. OH .. US .. 45242 (Street and Number) (City or Town, State, Country and Zip Code)	513-794-6100-6015 (Area Code) (Telephone Number)
Internet Web Site Address	N/A	
Statutory Statement Contact	Amber Dawn Roberts (Name) amber_roberts@ohionational.com (E-Mail Address)	513-794-6100-6015 (Area Code) (Telephone Number) (Extension) 513-794-4622 (Fax Number)

OFFICERS

Name	Title	Name	Title
Barbara Ann Turner	President & Chief Operating Officer	Therese Susan McDonough	Secretary
Doris Lee Paul	Treasurer	Scott Niel Shepherd #	Senior Vice President, Head of Valuation, AFR, Appointed Actuary

OTHER

Christopher James Calabro	Senior Vice President & Chief Marketing Officer	Rocky Coppola	Senior Vice President & CFO
John Andrew DelPozzo	Senior Vice President	Michael Joseph DeWeirdt	Senior Vice President & Chief Product Officer
Paul Gerard	Senior Vice President & CIO	Kristal Elaine Hambrick	Executive Vice President & CRO
Gary Thomas Huffman	Chairman & Chief Executive Officer	Danielle Denise Ivory	Senior Vice President
Lori Ann Landrum	Senior Vice President	William Charles Price	Senior Vice President & General Counsel
Peter Edward Whipple	Senior Vice President		

DIRECTORS OR TRUSTEES

Michael Joseph DeWeirdt	Kristal Elaine Hambrick	Gary Thomas Huffman	Barbara Ann Turner
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State of..... Ohio
County of..... Clermont

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 17th day of February 2021

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

Darlene Cook, Notary Public
Expires on February 17, 2025

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	27,763	0	0	0	27,763
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	27,763	0	0	0	27,763
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	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.....	9	8,624,938	0	(a).....0	0	0	0	0	9	8,624,938
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(3)	(3,300,000)	0	0	0	0	0	0	(3)	(3,300,000)
23. In force December 31 of current year.....	6	5,324,938	0	(a).....0	0	0	0	0	6	5,324,938

(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).....	2,142	2,152	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	2,142	2,152	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	2,142	2,152	0	0	0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	338,371	0	0	0	338,371
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).....	338,371	0	0	0	338,371
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	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.....	97,818	0	0	0	97,818
12. Surrender values and withdrawals for life contracts.....	1,447	0	0	0	1,447
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.....	99,265	0	0	0	99,265

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0	0	0	0	0
1399. Total (Lines 1301 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.....	147	101,294,156	0	(a).....0	0	0	0	0	147	101,294,156
21. Issued during year.....	11	12,050,202	0	0	0	0	0	0	11	12,050,202
22. Other changes to in force (Net).....	(7)	(1,251,297)	0	0	0	0	0	0	(7)	(1,251,297)
23. In force December 31 of current year.....	151	112,093,061	0	(a).....0	0	0	0	0	151	112,093,061

(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).....	59,661	59,933	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).....	59,661	59,933	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	59,661	59,933	0	0	0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	5,074,441	0	0	0	5,074,441
2. Annuity considerations.....	240	0	0	0	240
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	5,074,681	0	0	0	5,074,681
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	6,635,056	0	0	0	6,635,056
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	100,348	0	0	0	100,348
12. Surrender values and withdrawals for life contracts.....	256,762	0	0	0	256,762
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.....	6,992,166	0	0	0	6,992,166

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.....	5	1,972,946	0	0	0	0	0	0	5	1,972,946
17. Incurred during current year.....	17	5,212,303	0	0	0	0	0	0	17	5,212,303
Settled during current year:										
18.1 By payment in full.....	19	4,937,313	0	0	0	0	0	0	19	4,937,313
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	19	4,937,313	0	0	0	0	0	0	19	4,937,313
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.....	19	4,937,313	0	0	0	0	0	0	19	4,937,313
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	2,247,936	0	0	0	0	0	0	3	2,247,936
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,582	2,141,190,961	0	(a)	0	0	0	0	3,582	2,141,190,961
21. Issued during year.....	78	47,232,330	0	0	0	0	0	0	78	47,232,330
22. Other changes to in force (Net).....	(203)	(116,093,019)	0	0	0	0	0	0	(203)	(116,093,019)
23. In force December 31 of current year.....	3,457	2,072,330,272	0	(a)	0	0	0	0	3,457	2,072,330,272

(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).....	735,261	738,614	0	346,313	303,688
25.2 Guaranteed renewable (b).....	2,059	2,068	0	0	0
25.3 Non-renewable for stated reasons only (b).....	5,333	5,358	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).....	742,653	746,040	0	346,313	303,688
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	742,653	746,040	0	346,313	303,688

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF ARKANSAS DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,942,765	0	0	0	2,942,765
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX.....	0	XXX.....	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	2,942,765	0	0	0	2,942,765
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,900,000	0	0	0	1,900,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	180,192	0	0	0	180,192
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.....	2,080,192	0	0	0	2,080,192

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	1,775,000	0	0	0	0	0	0	8	1,775,000
Settled during current year:										
18.1 By payment in full.....	7	1,575,000	0	0	0	0	0	0	7	1,575,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	7	1,575,000	0	0	0	0	0	0	7	1,575,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	7	1,575,000	0	0	0	0	0	0	7	1,575,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	200,000	0	0	0	0	0	0	1	200,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	2,606	1,425,624,097	0	(a).....0	0	0	0	0	2,606	1,425,624,097
21. Issued during year.....	56	37,626,478	0	0	0	0	0	0	56	37,626,478
22. Other changes to in force (Net).....	(156)	(75,108,192)	0	0	0	0	0	0	(156)	(75,108,192)
23. In force December 31 of current year.....	2,506	1,388,142,383	0	(a).....0	0	0	0	0	2,506	1,388,142,383

(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).....	243,099	244,207	0	40,350	43,523
25.2 Guaranteed renewable (b).....	3,451	3,467	0	0	0
25.3 Non-renewable for stated reasons only (b).....	1,160	1,165	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).....	247,710	248,839	0	40,350	43,523
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	247,710	248,839	0	40,350	43,523

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	0	0	0	0	0
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX.....	0	XXX.....	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS/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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	0	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	0	0	0	0	0

NONE

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0	0	0	0	0
1399. Total (Lines 1301 through 1303 plus 1398)(Line 13 above).....	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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

NONE

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	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

NONE

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF ARIZONA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	6,066,801	0	0	0	6,066,801
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	6,066,801	0	0	0	6,066,801
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	5,875,386	0	0	0	5,875,386
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	894	0	0	0	894
12. Surrender values and withdrawals for life contracts.....	610,892	0	0	0	610,892
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.....	6,487,172	0	0	0	6,487,172

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	3,649,995	0	0	0	0	0	0	12	3,649,995
Settled during current year:										
18.1 By payment in full.....	9	2,700,000	0	0	0	0	0	0	9	2,700,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	9	2,700,000	0	0	0	0	0	0	9	2,700,000
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.....	9	2,700,000	0	0	0	0	0	0	9	2,700,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	3	949,995	0	0	0	0	0	0	3	949,995
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,340	2,900,806,286	0	(a).....0	0	0	0	0	4,340	2,900,806,286
21. Issued during year.....	115	81,062,430	0	0	0	0	0	0	115	81,062,430
22. Other changes to in force (Net).....	(228)	(172,067,763)	0	0	0	0	0	0	(228)	(172,067,763)
23. In force December 31 of current year.....	4,227	2,809,800,953	0	(a).....0	0	0	0	0	4,227	2,809,800,953

(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).....	705,422	708,638	0	0	0
25.2 Guaranteed renewable (b).....	6,201	6,229	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).....	711,623	714,867	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	711,623	714,867	0	0	0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	39,145,593	0	0	0	39,145,593
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).....	39,145,593	0	0	0	39,145,593
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	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.....	24,880,930	0	0	0	24,880,930
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	80,572	0	0	0	80,572
12. Surrender values and withdrawals for life contracts.....	7,922,568	0	0	0	7,922,568
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.....	32,884,070	0	0	0	32,884,070

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.....	13	1,847,733	0	0	0	0	0	0	13	1,847,733
17. Incurred during current year.....	65	24,632,213	0	0	0	0	0	0	65	24,632,213
Settled during current year:										
18.1 By payment in full.....	70	25,042,012	0	0	0	0	0	0	70	25,042,012
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	70	25,042,012	0	0	0	0	0	0	70	25,042,012
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.....	70	25,042,012	0	0	0	0	0	0	70	25,042,012
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	8	1,437,934	0	0	0	0	0	0	8	1,437,934
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	23,600	18,229,102,975	0	(a).....0	0	0	0	0	23,600	18,229,102,975
21. Issued during year.....	755	638,618,741	0	0	0	0	0	0	755	638,618,741
22. Other changes to in force (Net).....	(1,529)	(1,200,972,726)	0	0	0	0	0	0	(1,529)	(1,200,972,726)
23. In force December 31 of current year.....	22,826	17,666,748,990	0	(a).....0	0	0	0	0	22,826	17,666,748,990

(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).....	943,556	947,858	0	5,895,638	5,806,379
25.2 Guaranteed renewable (b).....	3,200	3,215	0	0	0
25.3 Non-renewable for stated reasons only (b).....	12,162	12,217	0	124,992	124,992
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).....	958,918	963,290	0	6,020,630	5,931,371
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	958,918	963,290	0	6,020,630	5,931,371

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,949	0	0	0	4,949
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	4,949	0	0	0	4,949
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	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.....	10	8,125,000	0	(a).....0	0	0	0	0	10	8,125,000
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(2)	(1,925,000)	0	0	0	0	0	0	(2)	(1,925,000)
23. In force December 31 of current year.....	8	6,200,000	0	(a).....0	0	0	0	0	8	6,200,000

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	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).....	1,701	1,709	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	1,701	1,709	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,701	1,709	0	0	0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF COLORADO DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	9,921,045	0	0	0	9,921,045
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX.....	0	XXX.....	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	9,921,045	0	0	0	9,921,045
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	5,737,196	0	0	0	5,737,196
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	17,678	0	0	0	17,678
12. Surrender values and withdrawals for life contracts.....	2,524,423	0	0	0	2,524,423
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	8,279,297	0	0	0	8,279,297

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.....	6	2,221,663	0	0	0	0	0	0	6	2,221,663
17. Incurred during current year.....	17	4,812,179	0	0	0	0	0	0	17	4,812,179
Settled during current year:										
18.1 By payment in full.....	21	6,403,358	0	0	0	0	0	0	21	6,403,358
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	21	6,403,358	0	0	0	0	0	0	21	6,403,358
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	21	6,403,358	0	0	0	0	0	0	21	6,403,358
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	630,484	0	0	0	0	0	0	2	630,484
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	7,135	4,705,997,698	0	(a).....0	0	0	0	0	7,135	4,705,997,698
21. Issued during year.....	293	224,288,967	0	0	0	0	0	0	293	224,288,967
22. Other changes to in force (Net).....	(477)	(285,708,079)	0	0	0	0	0	0	(477)	(285,708,079)
23. In force December 31 of current year.....	6,951	4,644,578,586	0	(a).....0	0	0	0	0	6,951	4,644,578,586

(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).....	1,263,274	1,269,034	0	2,464,051	2,460,116
25.2 Guaranteed renewable (b).....	17,644	17,725	0	109,995	103,677
25.3 Non-renewable for stated reasons only (b).....	9,283	9,325	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	1,290,201	1,296,084	0	2,574,046	2,563,793
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,290,201	1,296,084	0	2,574,046	2,563,793

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	5,420,799	0	0	0	5,420,799
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	5,420,799	0	0	0	5,420,799
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	4,630,049	0	0	0	4,630,049
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	713	0	0	0	713
12. Surrender values and withdrawals for life contracts.....	280,959	0	0	0	280,959
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	4,911,721	0	0	0	4,911,721

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	3,174,887	0	0	0	0	0	0	4	3,174,887
17. Incurred during current year.....	12	4,323,542	0	0	0	0	0	0	12	4,323,542
Settled during current year:										
18.1 By payment in full.....	16	7,498,429	0	0	0	0	0	0	16	7,498,429
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	16	7,498,429	0	0	0	0	0	0	16	7,498,429
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	7,498,429	0	0	0	0	0	0	16	7,498,429
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,086	2,530,944,333	0	(a).....0	0	0	0	0	4,086	2,530,944,333
21. Issued during year.....	64	42,973,817	0	0	0	0	0	0	64	42,973,817
22. Other changes to in force (Net).....	(239)	(156,487,506)	0	0	0	0	0	0	(239)	(156,487,506)
23. In force December 31 of current year.....	3,911	2,417,430,644	0	(a).....0	0	0	0	0	3,911	2,417,430,644

(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).....	337,322	338,860	0	124,355	107,776
25.2 Guaranteed renewable (b).....	17,312	17,391	0	2,466	0
25.3 Non-renewable for stated reasons only (b).....	2,353	2,363	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).....	356,987	358,614	0	126,821	107,776
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	356,987	358,614	0	126,821	107,776

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF DISTRICT OF COLUMBIA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	687,205	0	0	0	687,205
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).....	687,205	0	0	0	687,205
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	2,100,000	0	0	0	2,100,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	198,643	0	0	0	198,643
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.....	2,298,643	0	0	0	2,298,643

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.....	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year.....	2	2,100,000	0	0	0	0	0	0	2	2,100,000
Settled during current year:										
18.1 By payment in full.....	2	2,100,000	0	0	0	0	0	0	2	2,100,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	2	2,100,000	0	0	0	0	0	0	2	2,100,000
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.....	2	2,100,000	0	0	0	0	0	0	2	2,100,000
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.....	362	436,907,297	0	(a).....0	0	0	0	0	362	436,907,297
21. Issued during year.....	18	23,650,000	0	0	0	0	0	0	18	23,650,000
22. Other changes to in force (Net).....	(35)	(50,225,000)	0	0	0	0	0	0	(35)	(50,225,000)
23. In force December 31 of current year.....	345	410,332,297	0	(a).....0	0	0	0	0	345	410,332,297

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	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).....	123,227	123,789	0	0	533
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).....	123,227	123,789	0	0	533
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	123,227	123,789	0	0	533

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	657,722	0	0	0	657,722
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).....	657,722	0	0	0	657,722
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,749,118	0	0	0	1,749,118
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	14,124	0	0	0	14,124
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	1,763,242	0	0	0	1,763,242

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0	0	0	0	0
1399. Total (Lines 1301 through 1303 plus 1398)(Line 13 above).....	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. 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	401,423	0	0	0	0	0	0	3	401,423
Settled during current year:										
18.1 By payment in full.....	3	401,423	0	0	0	0	0	0	3	401,423
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	3	401,423	0	0	0	0	0	0	3	401,423
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	401,423	0	0	0	0	0	0	3	401,423
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.....	657	355,646,937	0	(a).....0	0	0	0	0	657	355,646,937
21. Issued during year.....	5	3,494,957	0	0	0	0	0	0	5	3,494,957
22. Other changes to in force (Net).....	(17)	(4,489,032)	0	0	0	0	0	0	(17)	(4,489,032)
23. In force December 31 of current year.....	645	354,652,862	0	(a).....0	0	0	0	0	645	354,652,862

(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).....	67,122	67,428	0	0	0
25.2 Guaranteed renewable (b).....	1,332	1,338	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).....	68,454	68,766	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	68,454	68,766	0	0	0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF FLORIDA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	34,257,369	0	0	0	34,257,369
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).....	34,257,369	0	0	0	34,257,369
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	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.....	21,707,094	0	0	0	21,707,094
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	51,493	0	0	0	51,493
12. Surrender values and withdrawals for life contracts.....	6,091,800	0	0	0	6,091,800
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.....	27,850,387	0	0	0	27,850,387

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	4,885,808	0	0	0	0	0	0	3	4,885,808
17. Incurred during current year.....	62	21,158,222	0	0	0	0	0	0	62	21,158,222
Settled during current year:										
18.1 By payment in full.....	65	26,044,030	0	0	0	0	0	0	65	26,044,030
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	65	26,044,030	0	0	0	0	0	0	65	26,044,030
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.....	65	26,044,030	0	0	0	0	0	0	65	26,044,030
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.....	18,474	12,005,915,417	0	(a).....0	0	0	0	0	18,474	12,005,915,417
21. Issued during year.....	1,211	936,177,184	0	0	0	0	0	0	1,211	936,177,184
22. Other changes to in force (Net).....	(1,136)	(666,023,597)	0	0	0	0	0	0	(1,136)	(666,023,597)
23. In force December 31 of current year.....	18,549	12,276,069,004	0	(a).....0	0	0	0	0	18,549	12,276,069,004

(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).....	5,359,066	5,383,502	0	1,783,279	1,903,753
25.2 Guaranteed renewable (b).....	26,250	26,369	0	9,200	18,977
25.3 Non-renewable for stated reasons only (b).....	36,421	36,587	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).....	5,421,737	5,446,458	0	1,792,479	1,922,730
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	5,421,737	5,446,458	0	1,792,479	1,922,730

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF GEORGIA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	11,170,936	0	0	0	11,170,936
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	11,170,936	0	0	0	11,170,936
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	11,036,096	0	0	0	11,036,096
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	28,530	0	0	0	28,530
12. Surrender values and withdrawals for life contracts.....	3,510,479	0	0	0	3,510,479
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	14,575,105	0	0	0	14,575,105

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.....	6	751,981	0	0	0	0	0	0	6	751,981
17. Incurred during current year.....	31	21,323,581	0	0	0	0	0	0	31	21,323,581
Settled during current year:										
18.1 By payment in full.....	33	6,228,844	0	0	0	0	0	0	33	6,228,844
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	33	6,228,844	0	0	0	0	0	0	33	6,228,844
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	6,228,844	0	0	0	0	0	0	33	6,228,844
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	4	15,846,718	0	0	0	0	0	0	4	15,846,718
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	8,672	5,238,104,337	0	(a).....0	0	0	0	0	8,672	5,238,104,337
21. Issued during year.....	180	150,415,265	0	0	0	0	0	0	180	150,415,265
22. Other changes to in force (Net).....	(567)	(317,256,047)	0	0	0	0	0	0	(567)	(317,256,047)
23. In force December 31 of current year.....	8,285	5,071,263,555	0	(a).....0	0	0	0	0	8,285	5,071,263,555

(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).....	783,045	786,616	0	450,972	450,972
25.2 Guaranteed renewable (b).....	9,602	9,645	0	0	0
25.3 Non-renewable for stated reasons only (b).....	26,495	26,616	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	819,142	822,877	0	450,972	450,972
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	819,142	822,877	0	450,972	450,972

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	383,554,397	0	0	0	383,554,397
2. Annuity considerations.....	60,561	0	0	0	60,561
3. Deposit-type contract funds.....	25,669,898	XXX.....	0	XXX.....	25,669,898
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	409,284,856	0	0	0	409,284,856
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	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.....	342,951,533	0	0	0	342,951,533
10. Matured endowments.....	5,000	0	0	0	5,000
11. Annuity benefits.....	3,572,538	0	0	0	3,572,538
12. Surrender values and withdrawals for life contracts.....	100,097,019	0	0	0	100,097,019
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.....	446,626,090	0	0	0	446,626,090

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.....	207	62,284,058	0	0	0	0	0	0	207	62,284,058
17. Incurred during current year.....	1,097	317,057,346	0	0	0	0	0	0	1,097	317,057,346
Settled during current year:										
18.1 By payment in full.....	1,168	319,680,158	0	0	0	0	0	0	1,168	319,680,158
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1,168	319,680,158	0	0	0	0	0	0	1,168	319,680,158
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.....	1,168	319,680,158	0	0	0	0	0	0	1,168	319,680,158
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	136	59,661,246	0	0	0	0	0	0	136	59,661,246
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	267,314	162,774,176,829	0	(a).....0	0	0	0	0	267,314	162,774,176,829
21. Issued during year.....	9,592	7,314,855,725	0	0	0	0	0	0	9,592	7,314,855,725
22. Other changes to in force (Net).....	(16,968)	(10,001,493,370)	0	0	0	0	0	0	(16,968)	(10,001,493,370)
23. In force December 31 of current year.....	259,938	160,087,539,184	0	(a).....0	0	0	0	0	259,938	160,087,539,184

(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).....	37,169,457	37,338,940	0	23,223,218	23,244,684
25.2 Guaranteed renewable (b).....	570,323	572,922	0	280,158	271,037
25.3 Non-renewable for stated reasons only (b).....	459,733	461,828	0	124,992	124,992
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).....	38,199,513	38,373,690	0	23,628,368	23,640,713
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	38,199,513	38,373,690	0	23,628,368	23,640,713

(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 ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	73,992	0	0	0	73,992
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	73,992	0	0	0	73,992
DIRECT DIVIDENDS TO POLICYHOLDERS/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	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.....	1	2,000,000	0	(a).....0	0	0	0	0	1	2,000,000
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.....	1	2,000,000	0	(a).....0	0	0	0	0	1	2,000,000

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	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.

NONE

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	173,854	0	0	0	173,854
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).....	173,854	0	0	0	173,854
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	200,000	0	0	0	200,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	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.....	200,000	0	0	0	200,000

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0	0	0	0	0
1399. Total (Lines 1301 through 1303 plus 1398)(Line 13 above).....	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. 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.....	125	109,538,432	0	(a).....0	0	0	0	0	125	109,538,432
21. Issued during year.....	9	9,800,000	0	0	0	0	0	0	9	9,800,000
22. Other changes to in force (Net).....	4	5,226,568	0	0	0	0	0	0	4	5,226,568
23. In force December 31 of current year.....	138	124,565,000	0	(a).....0	0	0	0	0	138	124,565,000

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	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).....	56,974	57,234	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	56,974	57,234	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	56,974	57,234	0	0	0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,232,742	0	0	0	4,232,742
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	4,232,742	0	0	0	4,232,742
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	4,270,690	0	0	0	4,270,690
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	2,834	0	0	0	2,834
12. Surrender values and withdrawals for life contracts.....	1,221,952	0	0	0	1,221,952
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.....	5,495,476	0	0	0	5,495,476

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.....	10	967,998	0	0	0	0	0	0	10	967,998
17. Incurred during current year.....	29	4,904,121	0	0	0	0	0	0	29	4,904,121
Settled during current year:										
18.1 By payment in full.....	28	4,416,263	0	0	0	0	0	0	28	4,416,263
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	28	4,416,263	0	0	0	0	0	0	28	4,416,263
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	4,416,263	0	0	0	0	0	0	28	4,416,263
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	11	1,455,856	0	0	0	0	0	0	11	1,455,856
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,471	1,167,747,945	0	(a).....0	0	0	0	0	3,471	1,167,747,945
21. Issued during year.....	55	25,936,247	0	0	0	0	0	0	55	25,936,247
22. Other changes to in force (Net).....	(207)	(69,518,324)	0	0	0	0	0	0	(207)	(69,518,324)
23. In force December 31 of current year.....	3,319	1,124,165,868	0	(a).....0	0	0	0	0	3,319	1,124,165,868

(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).....	196,325	197,220	0	36,908	38,328
25.2 Guaranteed renewable (b).....	25,137	25,252	0	2,280	2,280
25.3 Non-renewable for stated reasons only (b).....	1,175	1,180	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).....	222,637	223,652	0	39,188	40,608
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	222,637	223,652	0	39,188	40,608

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	3,496,569	0	0	0	3,496,569
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	3,496,569	0	0	0	3,496,569
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	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.....	802,934	0	0	0	802,934
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	4,800	0	0	0	4,800
12. Surrender values and withdrawals for life contracts.....	1,601,528	0	0	0	1,601,528
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.....	2,409,262	0	0	0	2,409,262

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.....	2	137,765	0	0	0	0	0	0	2	137,765
17. Incurred during current year.....	7	1,018,433	0	0	0	0	0	0	7	1,018,433
Settled during current year:										
18.1 By payment in full.....	9	1,156,198	0	0	0	0	0	0	9	1,156,198
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	9	1,156,198	0	0	0	0	0	0	9	1,156,198
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	9	1,156,198	0	0	0	0	0	0	9	1,156,198
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.....	2,910	1,305,807,418	0	(a).....0	0	0	0	0	2,910	1,305,807,418
21. Issued during year.....	68	41,748,412	0	0	0	0	0	0	68	41,748,412
22. Other changes to in force (Net).....	(198)	(78,573,033)	0	0	0	0	0	0	(198)	(78,573,033)
23. In force December 31 of current year.....	2,780	1,268,982,797	0	(a).....0	0	0	0	0	2,780	1,268,982,797

(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).....	256,611	257,781	0	113,053	113,178
25.2 Guaranteed renewable (b).....	19,574	19,663	0	0	0
25.3 Non-renewable for stated reasons only (b).....	3,341	3,356	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).....	279,526	280,800	0	113,053	113,178
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	279,526	280,800	0	113,053	113,178

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF ILLINOIS DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	12,765,582	0	0	0	12,765,582
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	12,765,582	0	0	0	12,765,582
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	5,998,436	0	0	0	5,998,436
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	113,256	0	0	0	113,256
12. Surrender values and withdrawals for life contracts.....	5,755,311	0	0	0	5,755,311
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	11,867,003	0	0	0	11,867,003

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	770,037	0	0	0	0	0	0	4	770,037
17. Incurred during current year.....	33	6,459,536	0	0	0	0	0	0	33	6,459,536
Settled during current year:										
18.1 By payment in full.....	36	6,277,475	0	0	0	0	0	0	36	6,277,475
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	36	6,277,475	0	0	0	0	0	0	36	6,277,475
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	36	6,277,475	0	0	0	0	0	0	36	6,277,475
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	952,098	0	0	0	0	0	0	1	952,098
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	8,549	5,160,132,315	0	(a).....0	0	0	0	0	8,549	5,160,132,315
21. Issued during year.....	304	247,103,640	0	0	0	0	0	0	304	247,103,640
22. Other changes to in force (Net).....	(634)	(352,535,458)	0	0	0	0	0	0	(634)	(352,535,458)
23. In force December 31 of current year.....	8,219	5,054,700,497	0	(a).....0	0	0	0	0	8,219	5,054,700,497

(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).....	1,309,805	1,315,777	0	359,301	276,029
25.2 Guaranteed renewable (b).....	14,293	14,358	0	0	0
25.3 Non-renewable for stated reasons only (b).....	14,850	14,918	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).....	1,338,948	1,345,053	0	359,301	276,029
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,338,948	1,345,053	0	359,301	276,029

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	5,747,960	0	0	0	5,747,960
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	5,747,960	0	0	0	5,747,960
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	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.....	16,009,832	0	0	0	16,009,832
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	291,906	0	0	0	291,906
12. Surrender values and withdrawals for life contracts.....	4,217,809	0	0	0	4,217,809
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	20,519,547	0	0	0	20,519,547

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.....	8	947,101	0	0	0	0	0	0	8	947,101
17. Incurred during current year.....	23	7,745,463	0	0	0	0	0	0	23	7,745,463
Settled during current year:										
18.1 By payment in full.....	24	7,644,678	0	0	0	0	0	0	24	7,644,678
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	24	7,644,678	0	0	0	0	0	0	24	7,644,678
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	24	7,644,678	0	0	0	0	0	0	24	7,644,678
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	7	1,047,886	0	0	0	0	0	0	7	1,047,886
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,641	2,303,753,055	0	(a).....0	0	0	0	0	4,641	2,303,753,055
21. Issued during year.....	116	105,292,045	0	0	0	0	0	0	116	105,292,045
22. Other changes to in force (Net).....	(374)	(186,335,389)	0	0	0	0	0	0	(374)	(186,335,389)
23. In force December 31 of current year.....	4,383	2,222,709,711	0	(a).....0	0	0	0	0	4,383	2,222,709,711

(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).....	429,373	431,331	0	504,788	494,771
25.2 Guaranteed renewable (b).....	8,797	8,837	0	0	0
25.3 Non-renewable for stated reasons only (b).....	5,279	5,303	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).....	443,449	445,471	0	504,788	494,771
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	443,449	445,471	0	504,788	494,771

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	6,212,128	0	0	0	6,212,128
2. Annuity considerations.....	2,750	0	0	0	2,750
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	6,214,878	0	0	0	6,214,878
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,491,674	0	0	0	1,491,674
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	62,346	0	0	0	62,346
12. Surrender values and withdrawals for life contracts.....	1,328,264	0	0	0	1,328,264
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.....	2,882,284	0	0	0	2,882,284

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	730,241	0	0	0	0	0	0	2	730,241
17. Incurred during current year.....	19	1,860,619	0	0	0	0	0	0	19	1,860,619
Settled during current year:										
18.1 By payment in full.....	20	2,320,860	0	0	0	0	0	0	20	2,320,860
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	20	2,320,860	0	0	0	0	0	0	20	2,320,860
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.....	20	2,320,860	0	0	0	0	0	0	20	2,320,860
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	270,000	0	0	0	0	0	0	1	270,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,653	2,527,584,939	0	(a).....0	0	0	0	0	4,653	2,527,584,939
21. Issued during year.....	245	200,902,528	0	0	0	0	0	0	245	200,902,528
22. Other changes to in force (Net).....	(301)	(164,640,013)	0	0	0	0	0	0	(301)	(164,640,013)
23. In force December 31 of current year.....	4,597	2,563,847,454	0	(a).....0	0	0	0	0	4,597	2,563,847,454

(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).....	486,631	488,850	0	381,653	381,653
25.2 Guaranteed renewable (b).....	26,827	26,950	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).....	513,458	515,800	0	381,653	381,653
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	513,458	515,800	0	381,653	381,653

(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 ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,336,870	0	0	0	4,336,870
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX.....	0	XXX.....	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	4,336,870	0	0	0	4,336,870
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,908,225	0	0	0	1,908,225
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	427	0	0	0	427
12. Surrender values and withdrawals for life contracts.....	1,451,921	0	0	0	1,451,921
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.....	3,360,573	0	0	0	3,360,573

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	1,334,416	0	0	0	0	0	0	1	1,334,416
17. Incurred during current year.....	14	2,898,442	0	0	0	0	0	0	14	2,898,442
Settled during current year:										
18.1 By payment in full.....	14	2,985,942	0	0	0	0	0	0	14	2,985,942
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	14	2,985,942	0	0	0	0	0	0	14	2,985,942
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	2,985,942	0	0	0	0	0	0	14	2,985,942
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	1,246,916	0	0	0	0	0	0	1	1,246,916
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,560	1,952,690,605	0	(a).....0	0	0	0	0	3,560	1,952,690,605
21. Issued during year.....	125	88,603,645	0	0	0	0	0	0	125	88,603,645
22. Other changes to in force (Net).....	(213)	(115,808,747)	0	0	0	0	0	0	(213)	(115,808,747)
23. In force December 31 of current year.....	3,472	1,925,485,503	0	(a).....0	0	0	0	0	3,472	1,925,485,503

(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).....	363,536	365,193	0	562,973	552,606
25.2 Guaranteed renewable (b).....	5,489	5,514	0	0	0
25.3 Non-renewable for stated reasons only (b).....	5,949	5,976	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).....	374,974	376,683	0	562,973	552,606
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	374,974	376,683	0	562,973	552,606

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,174,875	0	0	0	4,174,875
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX.....	0	XXX.....	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	4,174,875	0	0	0	4,174,875
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	5,254,870	0	0	0	5,254,870
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	7,380	0	0	0	7,380
12. Surrender values and withdrawals for life contracts.....	423,946	0	0	0	423,946
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.....	5,686,196	0	0	0	5,686,196

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	325,166	0	0	0	0	0	0	2	325,166
17. Incurred during current year.....	15	5,730,219	0	0	0	0	0	0	15	5,730,219
Settled during current year:										
18.1 By payment in full.....	16	5,730,219	0	0	0	0	0	0	16	5,730,219
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	16	5,730,219	0	0	0	0	0	0	16	5,730,219
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	5,730,219	0	0	0	0	0	0	16	5,730,219
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	325,166	0	0	0	0	0	0	1	325,166
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,184	2,259,441,850	0	(a).....0	0	0	0	0	3,184	2,259,441,850
21. Issued during year.....	155	123,973,168	0	0	0	0	0	0	155	123,973,168
22. Other changes to in force (Net).....	(200)	(124,597,486)	0	0	0	0	0	0	(200)	(124,597,486)
23. In force December 31 of current year.....	3,139	2,258,817,532	0	(a).....0	0	0	0	0	3,139	2,258,817,532

(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).....	569,068	571,662	0	121,600	114,307
25.2 Guaranteed renewable (b).....	7,099	7,131	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).....	576,167	578,793	0	121,600	114,307
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	576,167	578,793	0	121,600	114,307

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	8,926,266	0	0	0	8,926,266
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	8,926,266	0	0	0	8,926,266
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	4,090,181	0	0	0	4,090,181
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	182,303	0	0	0	182,303
12. Surrender values and withdrawals for life contracts.....	777,548	0	0	0	777,548
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.....	5,050,032	0	0	0	5,050,032

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	119,133	0	0	0	0	0	0	1	119,133
17. Incurred during current year.....	15	3,723,704	0	0	0	0	0	0	15	3,723,704
Settled during current year:										
18.1 By payment in full.....	14	3,538,764	0	0	0	0	0	0	14	3,538,764
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	14	3,538,764	0	0	0	0	0	0	14	3,538,764
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	3,538,764	0	0	0	0	0	0	14	3,538,764
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	304,073	0	0	0	0	0	0	2	304,073
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	6,106	4,088,979,040	0	(a).....0	0	0	0	0	6,106	4,088,979,040
21. Issued during year.....	145	103,950,452	0	0	0	0	0	0	145	103,950,452
22. Other changes to in force (Net).....	(342)	(231,632,738)	0	0	0	0	0	0	(342)	(231,632,738)
23. In force December 31 of current year.....	5,909	3,961,296,754	0	(a).....0	0	0	0	0	5,909	3,961,296,754

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	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).....	741,801	745,183	0	239,065	220,004
25.2 Guaranteed renewable (b).....	27,658	27,784	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).....	769,459	772,967	0	239,065	220,004
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	769,459	772,967	0	239,065	220,004

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF MARYLAND DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	8,393,701	0	0	0	8,393,701
2. Annuity considerations.....	270	0	0	0	270
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	8,393,971	0	0	0	8,393,971
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	2,252,988	0	0	0	2,252,988
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	52,162	0	0	0	52,162
12. Surrender values and withdrawals for life contracts.....	791,164	0	0	0	791,164
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.....	3,096,314	0	0	0	3,096,314

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0	0	0	0	0
1399. Total (Lines 1301 through 1303 plus 1398)(Line 13 above).....	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. 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	749,905	0	0	0	0	0	0	2	749,905
17. Incurred during current year.....	24	3,692,410	0	0	0	0	0	0	24	3,692,410
Settled during current year:										
18.1 By payment in full.....	26	4,442,315	0	0	0	0	0	0	26	4,442,315
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	26	4,442,315	0	0	0	0	0	0	26	4,442,315
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.....	26	4,442,315	0	0	0	0	0	0	26	4,442,315
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.....	5,971	4,180,963,371	0	(a).....0	0	0	0	0	5,971	4,180,963,371
21. Issued during year.....	165	156,348,734	0	0	0	0	0	0	165	156,348,734
22. Other changes to in force (Net).....	(355)	(226,826,249)	0	0	0	0	0	0	(355)	(226,826,249)
23. In force December 31 of current year.....	5,781	4,110,485,856	0	(a).....0	0	0	0	0	5,781	4,110,485,856

(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).....	866,912	870,865	0	338,407	445,713
25.2 Guaranteed renewable (b).....	20,693	20,787	0	0	0
25.3 Non-renewable for stated reasons only (b).....	3,119	3,133	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).....	890,724	894,785	0	338,407	445,713
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	890,724	894,785	0	338,407	445,713

(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 ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,038,900	0	0	0	1,038,900
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	1,038,900	0	0	0	1,038,900
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	3,550,000	0	0	0	3,550,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	396,061	0	0	0	396,061
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.....	3,946,061	0	0	0	3,946,061

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	245,871	0	0	0	0	0	0	1	245,871
17. Incurred during current year.....	5	4,000,000	0	0	0	0	0	0	5	4,000,000
Settled during current year:										
18.1 By payment in full.....	6	4,245,871	0	0	0	0	0	0	6	4,245,871
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	6	4,245,871	0	0	0	0	0	0	6	4,245,871
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	6	4,245,871	0	0	0	0	0	0	6	4,245,871
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.....	1,129	599,411,971	0	(a).....0	0	0	0	0	1,129	599,411,971
21. Issued during year.....	21	13,994,229	0	0	0	0	0	0	21	13,994,229
22. Other changes to in force (Net).....	(42)	(16,971,160)	0	0	0	0	0	0	(42)	(16,971,160)
23. In force December 31 of current year.....	1,108	596,435,040	0	(a).....0	0	0	0	0	1,108	596,435,040

(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).....	62,663	62,949	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).....	62,663	62,949	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	62,663	62,949	0	0	0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	12,782,647	0	0	0	12,782,647
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	12,782,647	0	0	0	12,782,647
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	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.....	13,283,863	0	0	0	13,283,863
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	269,319	0	0	0	269,319
12. Surrender values and withdrawals for life contracts.....	4,044,127	0	0	0	4,044,127
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.....	17,597,309	0	0	0	17,597,309

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0	0	0	0	0
1399. Total (Lines 1301 through 1303 plus 1398)(Line 13 above).....	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. 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.....	10	1,650,662	0	0	0	0	0	0	10	1,650,662
17. Incurred during current year.....	27	10,765,688	0	0	0	0	0	0	27	10,765,688
Settled during current year:										
18.1 By payment in full.....	37	12,416,350	0	0	0	0	0	0	37	12,416,350
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	37	12,416,350	0	0	0	0	0	0	37	12,416,350
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.....	37	12,416,350	0	0	0	0	0	0	37	12,416,350
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.....	9,320	5,124,947,714	0	(a)	0	0	0	0	9,320	5,124,947,714
21. Issued during year.....	347	269,163,258	0	0	0	0	0	0	347	269,163,258
22. Other changes to in force (Net).....	(642)	(367,595,408)	0	0	0	0	0	0	(642)	(367,595,408)
23. In force December 31 of current year.....	9,025	5,026,515,564	0	(a)	0	0	0	0	9,025	5,026,515,564

(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).....	1,340,439	1,346,551	0	882,688	882,484
25.2 Guaranteed renewable (b).....	28,919	29,051	0	14,367	14,307
25.3 Non-renewable for stated reasons only (b).....	3,404	3,419	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).....	1,372,762	1,379,021	0	897,055	896,791
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,372,762	1,379,021	0	897,055	896,791

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	6,173,539	0	0	0	6,173,539
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	6,173,539	0	0	0	6,173,539
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	7,154,422	0	0	0	7,154,422
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	48,349	0	0	0	48,349
12. Surrender values and withdrawals for life contracts.....	2,761,954	0	0	0	2,761,954
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	9,964,725	0	0	0	9,964,725

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	650,000	0	0	0	0	0	0	4	650,000
17. Incurred during current year.....	11	3,883,500	0	0	0	0	0	0	11	3,883,500
Settled during current year:										
18.1 By payment in full.....	13	4,100,000	0	0	0	0	0	0	13	4,100,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	13	4,100,000	0	0	0	0	0	0	13	4,100,000
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.....	13	4,100,000	0	0	0	0	0	0	13	4,100,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	433,500	0	0	0	0	0	0	2	433,500
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,595	2,428,124,332	0	(a).....0	0	0	0	0	4,595	2,428,124,332
21. Issued during year.....	142	93,328,293	0	0	0	0	0	0	142	93,328,293
22. Other changes to in force (Net).....	(337)	(179,023,888)	0	0	0	0	0	0	(337)	(179,023,888)
23. In force December 31 of current year.....	4,400	2,342,428,737	0	(a).....0	0	0	0	0	4,400	2,342,428,737

(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).....	509,935	512,260	0	105,762	160,344
25.2 Guaranteed renewable (b).....	19,346	19,434	0	0	582
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).....	529,281	531,694	0	105,762	160,926
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	529,281	531,694	0	105,762	160,926

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	7,133,998	0	0	0	7,133,998
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	7,133,998	0	0	0	7,133,998
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	9,150,453	0	0	0	9,150,453
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	132,595	0	0	0	132,595
12. Surrender values and withdrawals for life contracts.....	9,760,943	0	0	0	9,760,943
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.....	19,043,991	0	0	0	19,043,991

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.....	4	2,648,000	0	0	0	0	0	0	4	2,648,000
17. Incurred during current year.....	28	8,882,855	0	0	0	0	0	0	28	8,882,855
Settled during current year:										
18.1 By payment in full.....	25	7,921,199	0	0	0	0	0	0	25	7,921,199
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	25	7,921,199	0	0	0	0	0	0	25	7,921,199
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	25	7,921,199	0	0	0	0	0	0	25	7,921,199
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	7	3,609,656	0	0	0	0	0	0	7	3,609,656
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,846	2,274,623,969	0	(a).....0	0	0	0	0	4,846	2,274,623,969
21. Issued during year.....	259	159,680,615	0	0	0	0	0	0	259	159,680,615
22. Other changes to in force (Net).....	(346)	(154,446,865)	0	0	0	0	0	0	(346)	(154,446,865)
23. In force December 31 of current year.....	4,759	2,279,857,719	0	(a).....0	0	0	0	0	4,759	2,279,857,719

(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).....	585,643	588,314	0	489,194	491,927
25.2 Guaranteed renewable (b).....	12,773	12,831	0	0	0
25.3 Non-renewable for stated reasons only (b).....	8,269	8,307	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).....	606,685	609,452	0	489,194	491,927
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	606,685	609,452	0	489,194	491,927

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF NORTHERN MARIANA ISLANDS DURING THE YEAR
NAIC Group Code....0704 NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	0	0	0	0	0
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX.....	0	XXX.....	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS/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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	0	0	0	0	0
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	0	0	0	0	0

NONE

DETAILS OF WRITE-INS					
1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0	0	0	0	0
1399. Total (Lines 1301 through 1303 plus 1398)(Line 13 above).....	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 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

NONE

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	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

NONE

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF MISSISSIPPI DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,302,291	0	0	0	2,302,291
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX.....	0	XXX.....	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	2,302,291	0	0	0	2,302,291
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	2,513,403	0	0	0	2,513,403
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	76,155	0	0	0	76,155
12. Surrender values and withdrawals for life contracts.....	718,732	0	0	0	718,732
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.....	3,308,290	0	0	0	3,308,290

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	31,905	0	0	0	0	0	0	1	31,905
17. Incurred during current year.....	13	2,241,990	0	0	0	0	0	0	13	2,241,990
Settled during current year:										
18.1 By payment in full.....	14	2,273,895	0	0	0	0	0	0	14	2,273,895
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	14	2,273,895	0	0	0	0	0	0	14	2,273,895
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	2,273,895	0	0	0	0	0	0	14	2,273,895
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.....	1,430	852,468,091	0	(a).....0	0	0	0	0	1,430	852,468,091
21. Issued during year.....	77	68,983,256	0	0	0	0	0	0	77	68,983,256
22. Other changes to in force (Net).....	(95)	(45,240,028)	0	0	0	0	0	0	(95)	(45,240,028)
23. In force December 31 of current year.....	1,412	876,211,319	0	(a).....0	0	0	0	0	1,412	876,211,319

(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).....	203,781	204,710	0	187,027	176,983
25.2 Guaranteed renewable (b).....	3,746	3,763	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).....	207,527	208,473	0	187,027	176,983
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	207,527	208,473	0	187,027	176,983

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,583,212	0	0	0	2,583,212
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	2,583,212	0	0	0	2,583,212
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	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.....	634,675	0	0	0	634,675
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	152,803	0	0	0	152,803
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	787,478	0	0	0	787,478

DETAILS OF WRITE-INS

1301.	0	0	0	0	0
1302.	0	0	0	0	0
1303.	0	0	0	0	0
1398. Summary of remaining write-ins for Line 13 from overflow page.....	0	0	0	0	0
1399. Total (Lines 1301 through 1303 plus 1398)(Line 13 above).....	0	0	0	0	0

	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. 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	350,147	0	0	0	0	0	0	2	350,147
17. Incurred during current year.....	5	634,675	0	0	0	0	0	0	5	634,675
Settled during current year:										
18.1 By payment in full.....	7	984,822	0	0	0	0	0	0	7	984,822
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	7	984,822	0	0	0	0	0	0	7	984,822
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	984,822	0	0	0	0	0	0	7	984,822
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.....	2,019	1,036,205,061	0	(a)	0	0	0	0	2,019	1,036,205,061
21. Issued during year.....	74	50,200,000	0	0	0	0	0	0	74	50,200,000
22. Other changes to in force (Net).....	(102)	(28,600,046)	0	0	0	0	0	0	(102)	(28,600,046)
23. In force December 31 of current year.....	1,991	1,057,805,015	0	(a)	0	0	0	0	1,991	1,057,805,015

(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).....	132,492	133,096	0	37,232	37,232
25.2 Guaranteed renewable (b).....	4,378	4,398	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).....	136,870	137,494	0	37,232	37,232
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	136,870	137,494	0	37,232	37,232

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF NORTH CAROLINA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	11,172,198	0	0	0	11,172,198
2. Annuity considerations.....	2,180	0	0	0	2,180
3. Deposit-type contract funds.....	0	XXX.....	0	XXX.....	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	11,174,378	0	0	0	11,174,378
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	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.....	17,629,212	0	0	0	17,629,212
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	140,215	0	0	0	140,215
12. Surrender values and withdrawals for life contracts.....	1,278,758	0	0	0	1,278,758
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.....	19,048,185	0	0	0	19,048,185

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.....	8	1,891,805	0	0	0	0	0	0	8	1,891,805
17. Incurred during current year.....	32	9,591,706	0	0	0	0	0	0	32	9,591,706
Settled during current year:										
18.1 By payment in full.....	31	6,817,518	0	0	0	0	0	0	31	6,817,518
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	31	6,817,518	0	0	0	0	0	0	31	6,817,518
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	6,817,518	0	0	0	0	0	0	31	6,817,518
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	9	4,665,993	0	0	0	0	0	0	9	4,665,993
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	7,729	4,913,485,847	0	(a).....0	0	0	0	0	7,729	4,913,485,847
21. Issued during year.....	322	244,387,243	0	0	0	0	0	0	322	244,387,243
22. Other changes to in force (Net).....	(426)	(275,817,944)	0	0	0	0	0	0	(426)	(275,817,944)
23. In force December 31 of current year.....	7,625	4,882,055,146	0	(a).....0	0	0	0	0	7,625	4,882,055,146

(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).....	1,703,324	1,711,091	0	868,072	852,564
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	14,069	14,134	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).....	1,717,393	1,725,225	0	868,072	852,564
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,717,393	1,725,225	0	868,072	852,564

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



* 8 9 2 0 6 2 0 2 0 4 3 0 3 5 1 0 0 *

DIRECT BUSINESS IN THE STATE OF NORTH DAKOTA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,066,018	0	0	0	1,066,018
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	1,066,018	0	0	0	1,066,018
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	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.....	42,003	0	0	0	42,003
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	233,809	0	0	0	233,809
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	275,812	0	0	0	275,812

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	195,690	0	0	0	0	0	0	1	195,690
17. Incurred during current year.....	3	191,048	0	0	0	0	0	0	3	191,048
Settled during current year:										
18.1 By payment in full.....	3	191,048	0	0	0	0	0	0	3	191,048
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	3	191,048	0	0	0	0	0	0	3	191,048
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	191,048	0	0	0	0	0	0	3	191,048
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	195,690	0	0	0	0	0	0	1	195,690
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	946	458,624,842	0	(a).....0	0	0	0	0	946	458,624,842
21. Issued during year.....	19	19,745,816	0	0	0	0	0	0	19	19,745,816
22. Other changes to in force (Net).....	(72)	(28,923,982)	0	0	0	0	0	0	(72)	(28,923,982)
23. In force December 31 of current year.....	893	449,446,676	0	(a).....0	0	0	0	0	893	449,446,676

(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).....	77,191	77,543	0	17,875	14,125
25.2 Guaranteed renewable (b).....	5,260	5,284	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).....	82,451	82,827	0	17,875	14,125
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	82,451	82,827	0	17,875	14,125

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,174,741	0	0	0	4,174,741
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX.....	0	XXX.....	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	4,174,741	0	0	0	4,174,741
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	6,642,370	0	0	0	6,642,370
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	9,357	0	0	0	9,357
12. Surrender values and withdrawals for life contracts.....	1,868,459	0	0	0	1,868,459
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	8,520,186	0	0	0	8,520,186

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	1,483,030	0	0	0	0	0	0	1	1,483,030
17. Incurred during current year.....	34	6,365,678	0	0	0	0	0	0	34	6,365,678
Settled during current year:										
18.1 By payment in full.....	35	7,848,708	0	0	0	0	0	0	35	7,848,708
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	35	7,848,708	0	0	0	0	0	0	35	7,848,708
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.....	35	7,848,708	0	0	0	0	0	0	35	7,848,708
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.....	3,477	1,172,752,335	0	(a).....0	0	0	0	0	3,477	1,172,752,335
21. Issued during year.....	61	40,825,000	0	0	0	0	0	0	61	40,825,000
22. Other changes to in force (Net).....	(259)	(94,438,882)	0	0	0	0	0	0	(259)	(94,438,882)
23. In force December 31 of current year.....	3,279	1,119,138,453	0	(a).....0	0	0	0	0	3,279	1,119,138,453

(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).....	199,300	200,209	0	91,396	91,396
25.2 Guaranteed renewable (b).....	11,302	11,354	0	6,000	6,000
25.3 Non-renewable for stated reasons only (b).....	4,836	4,858	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).....	215,438	216,421	0	97,396	97,396
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	215,438	216,421	0	97,396	97,396

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,334,170	0	0	0	2,334,170
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	2,334,170	0	0	0	2,334,170
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,750,000	0	0	0	1,750,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	104,041	0	0	0	104,041
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	1,854,041	0	0	0	1,854,041

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	1,750,000	0	0	0	0	0	0	4	1,750,000
Settled during current year:										
18.1 By payment in full.....	3	1,350,000	0	0	0	0	0	0	3	1,350,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	3	1,350,000	0	0	0	0	0	0	3	1,350,000
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	1,350,000	0	0	0	0	0	0	3	1,350,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	400,000	0	0	0	0	0	0	1	400,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,862	1,137,298,773	0	(a).....0	0	0	0	0	1,862	1,137,298,773
21. Issued during year.....	46	28,027,028	0	0	0	0	0	0	46	28,027,028
22. Other changes to in force (Net).....	(78)	(51,789,881)	0	0	0	0	0	0	(78)	(51,789,881)
23. In force December 31 of current year.....	1,830	1,113,535,920	0	(a).....0	0	0	0	0	1,830	1,113,535,920

(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).....	178,722	179,537	0	0	0
25.2 Guaranteed renewable (b).....	6,828	6,859	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).....	185,550	186,396	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	185,550	186,396	0	0	0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	10,803,248	0	0	0	10,803,248
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).....	10,803,248	0	0	0	10,803,248
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	2,903,012	0	0	0	2,903,012
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	17,808	0	0	0	17,808
12. Surrender values and withdrawals for life contracts.....	2,255,055	0	0	0	2,255,055
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.....	5,175,875	0	0	0	5,175,875

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.....	5	3,213,935	0	0	0	0	0	0	5	3,213,935
17. Incurred during current year.....	7	1,698,152	0	0	0	0	0	0	7	1,698,152
Settled during current year:										
18.1 By payment in full.....	10	2,744,518	0	0	0	0	0	0	10	2,744,518
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	10	2,744,518	0	0	0	0	0	0	10	2,744,518
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	10	2,744,518	0	0	0	0	0	0	10	2,744,518
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	2	2,167,569	0	0	0	0	0	0	2	2,167,569
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	6,426	4,561,723,963	0	(a).....0	0	0	0	0	6,426	4,561,723,963
21. Issued during year.....	285	241,189,337	0	0	0	0	0	0	285	241,189,337
22. Other changes to in force (Net).....	(387)	(270,853,892)	0	0	0	0	0	0	(387)	(270,853,892)
23. In force December 31 of current year.....	6,324	4,532,059,408	0	(a).....0	0	0	0	0	6,324	4,532,059,408

(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).....	1,232,427	1,238,047	0	824,601	789,453
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	40,995	41,182	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).....	1,273,422	1,279,229	0	824,601	789,453
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,273,422	1,279,229	0	824,601	789,453

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF NEW MEXICO DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,126,994	0	0	0	1,126,994
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	1,126,994	0	0	0	1,126,994
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,850,000	0	0	0	1,850,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	253,466	0	0	0	253,466
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	2,103,466	0	0	0	2,103,466

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.....	3	1,100,000	0	0	0	0	0	0	3	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).....	3	1,100,000	0	0	0	0	0	0	3	1,100,000
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	595	313,287,929	0	(a)	0	0	0	0	595	313,287,929
21. Issued during year.....	14	13,450,000	0	0	0	0	0	0	14	13,450,000
22. Other changes to in force (Net).....	(45)	(17,384,451)	0	0	0	0	0	0	(45)	(17,384,451)
23. In force December 31 of current year.....	564	309,353,478	0	(a)	0	0	0	0	564	309,353,478

(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).....	92,462	92,883	0	36,000	4,768
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).....	92,462	92,883	0	36,000	4,768
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	92,462	92,883	0	36,000	4,768

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,858,256	0	0	0	1,858,256
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	1,858,256	0	0	0	1,858,256
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	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.....	875,000	0	0	0	875,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	10,109	0	0	0	10,109
12. Surrender values and withdrawals for life contracts.....	227,378	0	0	0	227,378
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	1,112,487	0	0	0	1,112,487

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.....	5	1,975,000	0	0	0	0	0	0	5	1,975,000
Settled during current year:										
18.1 By payment in full.....	5	1,975,000	0	0	0	0	0	0	5	1,975,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	5	1,975,000	0	0	0	0	0	0	5	1,975,000
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	5	1,975,000	0	0	0	0	0	0	5	1,975,000
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.....	1,139	813,829,130	0	(a).....0	0	0	0	0	1,139	813,829,130
21. Issued during year.....	43	30,933,331	0	0	0	0	0	0	43	30,933,331
22. Other changes to in force (Net).....	(45)	(38,605,601)	0	0	0	0	0	0	(45)	(38,605,601)
23. In force December 31 of current year.....	1,137	806,156,860	0	(a).....0	0	0	0	0	1,137	806,156,860

(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).....	191,132	192,004	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).....	191,132	192,004	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	191,132	192,004	0	0	0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF NEW YORK DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	879,446	0	0	0	879,446
2. Annuity considerations.....	5,636	0	0	0	5,636
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).....	885,082	0	0	0	885,082
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	100,000	0	0	0	100,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	6,487	0	0	0	6,487
12. Surrender values and withdrawals for life contracts.....	3,477,178	0	0	0	3,477,178
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.....	3,583,665	0	0	0	3,583,665

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.....	528	460,187,479	0	(a).....0	0	0	0	0	528	460,187,479
21. Issued during year.....	9	11,600,000	0	0	0	0	0	0	9	11,600,000
22. Other changes to in force (Net).....	(24)	(20,882,610)	0	0	0	0	0	0	(24)	(20,882,610)
23. In force December 31 of current year.....	513	450,904,869	0	(a).....0	0	0	0	0	513	450,904,869

(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).....	148,890	149,569	0	45,339	97,472
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).....	148,890	149,569	0	45,339	97,472
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	148,890	149,569	0	45,339	97,472

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	28,138,423	0	0	0	28,138,423
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	24,340,639	XXX	0	XXX	24,340,639
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	52,479,062	0	0	0	52,479,062
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	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.....	34,881,484	0	0	0	34,881,484
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	245,628	0	0	0	245,628
12. Surrender values and withdrawals for life contracts.....	9,018,918	0	0	0	9,018,918
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.....	44,146,030	0	0	0	44,146,030

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.....	49	5,800,337	0	0	0	0	0	0	49	5,800,337
17. Incurred during current year.....	152	32,726,870	0	0	0	0	0	0	152	32,726,870
Settled during current year:										
18.1 By payment in full.....	164	33,855,508	0	0	0	0	0	0	164	33,855,508
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	164	33,855,508	0	0	0	0	0	0	164	33,855,508
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.....	164	33,855,508	0	0	0	0	0	0	164	33,855,508
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	37	4,671,699	0	0	0	0	0	0	37	4,671,699
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	20,859	10,292,639,716	0	(a).....0	0	0	0	0	20,859	10,292,639,716
21. Issued during year.....	718	519,767,358	0	0	0	0	0	0	718	519,767,358
22. Other changes to in force (Net).....	(1,436)	(663,788,631)	0	0	0	0	0	0	(1,436)	(663,788,631)
23. In force December 31 of current year.....	20,141	10,148,618,443	0	(a).....0	0	0	0	0	20,141	10,148,618,443

(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).....	2,187,375	2,197,349	0	712,906	780,710
25.2 Guaranteed renewable (b).....	36,073	36,237	0	0	0
25.3 Non-renewable for stated reasons only (b).....	55,969	56,224	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).....	2,279,417	2,289,810	0	712,906	780,710
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	2,279,417	2,289,810	0	712,906	780,710

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF OKLAHOMA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,792,323	0	0	0	4,792,323
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX.....	0	XXX.....	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	4,792,323	0	0	0	4,792,323
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	7,584,628	0	0	0	7,584,628
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	839,705	0	0	0	839,705
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	8,424,333	0	0	0	8,424,333

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	4,131,320	0	0	0	0	0	0	3	4,131,320
17. Incurred during current year.....	23	6,678,746	0	0	0	0	0	0	23	6,678,746
Settled during current year:										
18.1 By payment in full.....	18	4,863,137	0	0	0	0	0	0	18	4,863,137
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	18	4,863,137	0	0	0	0	0	0	18	4,863,137
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	4,863,137	0	0	0	0	0	0	18	4,863,137
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	8	5,946,929	0	0	0	0	0	0	8	5,946,929
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,533	1,916,107,938	0	(a).....0	0	0	0	0	3,533	1,916,107,938
21. Issued during year.....	135	95,690,747	0	0	0	0	0	0	135	95,690,747
22. Other changes to in force (Net).....	(269)	(128,878,941)	0	0	0	0	0	0	(269)	(128,878,941)
23. In force December 31 of current year.....	3,399	1,882,919,744	0	(a).....0	0	0	0	0	3,399	1,882,919,744

(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).....	560,244	562,798	0	146,700	147,528
25.2 Guaranteed renewable (b).....	5,151	5,174	0	0	0
25.3 Non-renewable for stated reasons only (b).....	5,498	5,523	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).....	570,893	573,495	0	146,700	147,528
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	570,893	573,495	0	146,700	147,528

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	5,726,762	0	0	0	5,726,762
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	5,726,762	0	0	0	5,726,762
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	4,380,000	0	0	0	4,380,000
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	2,428,225	0	0	0	2,428,225
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.....	6,808,225	0	0	0	6,808,225

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	2,442,109	0	0	0	0	0	0	3	2,442,109
17. Incurred during current year.....	9	4,680,000	0	0	0	0	0	0	9	4,680,000
Settled during current year:										
18.1 By payment in full.....	12	7,122,109	0	0	0	0	0	0	12	7,122,109
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	12	7,122,109	0	0	0	0	0	0	12	7,122,109
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	12	7,122,109	0	0	0	0	0	0	12	7,122,109
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	4,280	2,551,118,550	0	(a).....0	0	0	0	0	4,280	2,551,118,550
21. Issued during year.....	184	126,362,989	0	0	0	0	0	0	184	126,362,989
22. Other changes to in force (Net).....	(306)	(177,903,954)	0	0	0	0	0	0	(306)	(177,903,954)
23. In force December 31 of current year.....	4,158	2,499,577,585	0	(a).....0	0	0	0	0	4,158	2,499,577,585

(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).....	457,170	459,254	0	168,913	163,933
25.2 Guaranteed renewable (b).....	11,105	11,156	0	6,272	5,608
25.3 Non-renewable for stated reasons only (b).....	19,723	19,813	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).....	487,998	490,223	0	175,185	169,541
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	487,998	490,223	0	175,185	169,541

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN OTHER ALIEN GRAND TOTAL DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	27,763	0	0	0	27,763
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	27,763	0	0	0	27,763
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	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.....	9	8,624,938	0	(a).....0	0	0	0	0	9	8,624,938
21. Issued during year.....	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net).....	(3)	(3,300,000)	0	0	0	0	0	0	(3)	(3,300,000)
23. In force December 31 of current year.....	6	5,324,938	0	(a).....0	0	0	0	0	6	5,324,938

(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).....	2,142	2,152	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	2,142	2,152	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	2,142	2,152	0	0	0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF PENNSYLVANIA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	14,764,668	0	0	0	14,764,668
2. Annuity considerations.....	39,285	0	0	0	39,285
3. Deposit-type contract funds.....	1,004,259	XXX.....	0	XXX.....	1,004,259
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	15,808,212	0	0	0	15,808,212
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	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.....	17,519,900	0	0	0	17,519,900
10. Matured endowments.....	5,000	0	0	0	5,000
11. Annuity benefits.....	477,282	0	0	0	477,282
12. Surrender values and withdrawals for life contracts.....	2,891,183	0	0	0	2,891,183
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.....	20,893,365	0	0	0	20,893,365

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	492,983	0	0	0	0	0	0	0	492,983
17. Incurred during current year.....	79	13,515,384	0	0	0	0	0	0	79	13,515,384
Settled during current year:										
18.1 By payment in full.....	79	14,008,367	0	0	0	0	0	0	79	14,008,367
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	79	14,008,367	0	0	0	0	0	0	79	14,008,367
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.....	79	14,008,367	0	0	0	0	0	0	79	14,008,367
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.....	13,720	6,657,344,495	0	(a).....0	0	0	0	0	13,720	6,657,344,495
21. Issued during year.....	369	274,206,402	0	0	0	0	0	0	369	274,206,402
22. Other changes to in force (Net).....	(842)	(437,201,562)	0	0	0	0	0	0	(842)	(437,201,562)
23. In force December 31 of current year.....	13,247	6,494,349,335	0	(a).....0	0	0	0	0	13,247	6,494,349,335

(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).....	1,683,254	1,690,929	0	416,922	428,850
25.2 Guaranteed renewable (b).....	87,699	88,099	0	80,085	65,080
25.3 Non-renewable for stated reasons only (b).....	14,479	14,545	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).....	1,785,432	1,793,573	0	497,007	493,930
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,785,432	1,793,573	0	497,007	493,930

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	3,643,901	0	0	0	3,643,901
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	3,643,901	0	0	0	3,643,901
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	3,017,183	0	0	0	3,017,183
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	1,808,046	0	0	0	1,808,046
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	4,825,229	0	0	0	4,825,229

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.....	5	3,017,177	0	0	0	0	0	0	5	3,017,177
Settled during current year:										
18.1 By payment in full.....	4	2,463,090	0	0	0	0	0	0	4	2,463,090
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	4	2,463,090	0	0	0	0	0	0	4	2,463,090
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	2,463,090	0	0	0	0	0	0	4	2,463,090
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	554,087	0	0	0	0	0	0	1	554,087
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	929	935,858,945	0	(a).....0	0	0	0	0	929	935,858,945
21. Issued during year.....	37	14,428,699	0	0	0	0	0	0	37	14,428,699
22. Other changes to in force (Net).....	(80)	(64,071,917)	0	0	0	0	0	0	(80)	(64,071,917)
23. In force December 31 of current year.....	886	886,215,727	0	(a).....0	0	0	0	0	886	886,215,727

(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).....	1,128,523	1,133,669	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	32,043	32,189	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).....	1,160,566	1,165,858	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,160,566	1,165,858	0	0	0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF RHODE ISLAND DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,689,076	.0	.0	.0	1,689,076
2. Annuity considerations.....	.0	.0	.0	.0	.0
3. Deposit-type contract funds.....	.0	XXX	.0	XXX	.0
4. Other considerations.....	.0	.0	.0	.0	.0
5. Totals (Sum of Lines 1 to 4).....	1,689,076	.0	.0	.0	1,689,076
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	.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	.0	.0	.0	.0	.0
6.4 Other.....	.0	.0	.0	.0	.0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	.0	.0	.0	.0	.0
Annuities:					
7.1 Paid in cash or left on deposit.....	.0	.0	.0	.0	.0
7.2 Applied to provide paid-up annuities.....	.0	.0	.0	.0	.0
7.3 Other.....	.0	.0	.0	.0	.0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 + 7.4).....	.0	.0	.0	.0	.0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	1,400,000	.0	.0	.0	1,400,000
10. Matured endowments.....	.0	.0	.0	.0	.0
11. Annuity benefits.....	.0	.0	.0	.0	.0
12. Surrender values and withdrawals for life contracts.....	26,825	.0	.0	.0	26,825
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	.0	.0	.0	.0	.0
14. All other benefits, except accident and health.....	.0	.0	.0	.0	.0
15. Totals.....	1,426,825	.0	.0	.0	1,426,825

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	751,740	.0	.0	.0	.0	.0	.0	2	751,740
17. Incurred during current year.....	5	1,100,000	.0	.0	.0	.0	.0	.0	5	1,100,000
Settled during current year:										
18.1 By payment in full.....	6	1,600,000	.0	.0	.0	.0	.0	.0	6	1,600,000
18.2 By payment on compromised claims.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.3 Totals paid.....	6	1,600,000	.0	.0	.0	.0	.0	.0	6	1,600,000
18.4 Reduction by compromise.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.5 Amount rejected.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.6 Total settlements.....	6	1,600,000	.0	.0	.0	.0	.0	.0	6	1,600,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	251,740	.0	.0	.0	.0	.0	.0	1	251,740
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	1,273	688,531,613	.0	(a).....0	.0	.0	.0	.0	1,273	688,531,613
21. Issued during year.....	44	22,897,058	.0	.0	.0	.0	.0	.0	44	22,897,058
22. Other changes to in force (Net).....	(77)	(34,785,492)	.0	.0	.0	.0	.0	.0	(77)	(34,785,492)
23. In force December 31 of current year.....	1,240	676,643,179	.0	(a).....0	.0	.0	.0	.0	1,240	676,643,179

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	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).....	129,785	130,377	.0	.0	.0
25.2 Guaranteed renewable (b).....	2,500	2,511	.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).....	132,285	132,888	.0	.0	.0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	132,285	132,888	.0	.0	.0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF SOUTH CAROLINA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	4,367,288	0	0	0	4,367,288
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX.....	0	XXX.....	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	4,367,288	0	0	0	4,367,288
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	2,835,160	0	0	0	2,835,160
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	11,830	0	0	0	11,830
12. Surrender values and withdrawals for life contracts.....	937,598	0	0	0	937,598
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	3,784,588	0	0	0	3,784,588

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	830,355	0	0	0	0	0	0	2	830,355
17. Incurred during current year.....	11	2,720,000	0	0	0	0	0	0	11	2,720,000
Settled during current year:										
18.1 By payment in full.....	12	3,155,000	0	0	0	0	0	0	12	3,155,000
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	12	3,155,000	0	0	0	0	0	0	12	3,155,000
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.....	12	3,155,000	0	0	0	0	0	0	12	3,155,000
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	395,355	0	0	0	0	0	0	1	395,355
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	3,397	1,829,986,136	0	(a).....0	0	0	0	0	3,397	1,829,986,136
21. Issued during year.....	104	59,076,621	0	0	0	0	0	0	104	59,076,621
22. Other changes to in force (Net).....	(139)	(68,139,480)	0	0	0	0	0	0	(139)	(68,139,480)
23. In force December 31 of current year.....	3,362	1,820,923,277	0	(a).....0	0	0	0	0	3,362	1,820,923,277

(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).....	509,632	511,955	0	93,814	90,190
25.2 Guaranteed renewable (b).....	8,488	8,526	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).....	518,120	520,481	0	93,814	90,190
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	518,120	520,481	0	93,814	90,190

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF SOUTH DAKOTA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	364,442	0	0	0	364,442
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	325,000	XXX	0	XXX	325,000
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	689,442	0	0	0	689,442
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	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.....	685,553	0	0	0	685,553
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	143,531	0	0	0	143,531
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.....	829,084	0	0	0	829,084

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.....	5	479,969	0	0	0	0	0	0	5	479,969
Settled during current year:										
18.1 By payment in full.....	5	479,969	0	0	0	0	0	0	5	479,969
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	5	479,969	0	0	0	0	0	0	5	479,969
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	5	479,969	0	0	0	0	0	0	5	479,969
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.....	444	221,802,751	0	(a).....0	0	0	0	0	444	221,802,751
21. Issued during year.....	9	6,472,270	0	0	0	0	0	0	9	6,472,270
22. Other changes to in force (Net).....	(37)	(31,313,978)	0	0	0	0	0	0	(37)	(31,313,978)
23. In force December 31 of current year.....	416	196,961,043	0	(a).....0	0	0	0	0	416	196,961,043

(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).....	124,382	124,949	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).....	124,382	124,949	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	124,382	124,949	0	0	0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF TENNESSEE DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	14,963,699	0	0	0	14,963,699
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).....	14,963,699	0	0	0	14,963,699
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	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.....	16,474,983	0	0	0	16,474,983
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	623,183	0	0	0	623,183
12. Surrender values and withdrawals for life contracts.....	4,354,032	0	0	0	4,354,032
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	21,452,198	0	0	0	21,452,198

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.....	5	2,865,697	0	0	0	0	0	0	5	2,865,697
17. Incurred during current year.....	47	18,405,035	0	0	0	0	0	0	47	18,405,035
Settled during current year:										
18.1 By payment in full.....	47	17,613,552	0	0	0	0	0	0	47	17,613,552
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	47	17,613,552	0	0	0	0	0	0	47	17,613,552
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.....	47	17,613,552	0	0	0	0	0	0	47	17,613,552
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	5	3,657,180	0	0	0	0	0	0	5	3,657,180
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	7,995	5,084,262,807	0	(a).....0	0	0	0	0	7,995	5,084,262,807
21. Issued during year.....	252	206,353,704	0	0	0	0	0	0	252	206,353,704
22. Other changes to in force (Net).....	(453)	(296,269,568)	0	0	0	0	0	0	(453)	(296,269,568)
23. In force December 31 of current year.....	7,794	4,994,346,943	0	(a).....0	0	0	0	0	7,794	4,994,346,943

(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).....	1,691,578	1,699,292	0	512,379	487,341
25.2 Guaranteed renewable (b).....	9,146	9,187	0	0	0
25.3 Non-renewable for stated reasons only (b).....	70,752	71,075	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).....	1,771,476	1,779,554	0	512,379	487,341
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	1,771,476	1,779,554	0	512,379	487,341

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	33,180,381	0	0	0	33,180,381
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).....	33,180,381	0	0	0	33,180,381
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	31,904,290	0	0	0	31,904,290
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	5,514	0	0	0	5,514
12. Surrender values and withdrawals for life contracts.....	4,977,141	0	0	0	4,977,141
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.....	36,886,945	0	0	0	36,886,945

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.....	13	5,730,430	0	0	0	0	0	0	13	5,730,430
17. Incurred during current year.....	93	29,839,007	0	0	0	0	0	0	93	29,839,007
Settled during current year:										
18.1 By payment in full.....	95	32,546,723	0	0	0	0	0	0	95	32,546,723
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	95	32,546,723	0	0	0	0	0	0	95	32,546,723
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.....	95	32,546,723	0	0	0	0	0	0	95	32,546,723
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	11	3,022,714	0	0	0	0	0	0	11	3,022,714
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	20,264	13,907,674,536	0	(a).....0	0	0	0	0	20,264	13,907,674,536
21. Issued during year.....	826	646,081,667	0	0	0	0	0	0	826	646,081,667
22. Other changes to in force (Net).....	(1,205)	(854,876,046)	0	0	0	0	0	0	(1,205)	(854,876,046)
23. In force December 31 of current year.....	19,885	13,698,880,157	0	(a).....0	0	0	0	0	19,885	13,698,880,157

(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).....	2,878,068	2,891,192	0	1,617,887	1,657,965
25.2 Guaranteed renewable (b).....	10,964	11,014	0	0	0
25.3 Non-renewable for stated reasons only (b).....	46,004	46,214	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).....	2,935,036	2,948,420	0	1,617,887	1,657,965
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	2,935,036	2,948,420	0	1,617,887	1,657,965

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	7,027,693	0	0	0	7,027,693
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	7,027,693	0	0	0	7,027,693
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	5,400,100	0	0	0	5,400,100
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	758,656	0	0	0	758,656
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.....	6,158,756	0	0	0	6,158,756

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	1,345,148	0	0	0	0	0	0	3	1,345,148
17. Incurred during current year.....	10	4,600,000	0	0	0	0	0	0	10	4,600,000
Settled during current year:										
18.1 By payment in full.....	12	4,390,506	0	0	0	0	0	0	12	4,390,506
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	12	4,390,506	0	0	0	0	0	0	12	4,390,506
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	4,390,506	0	0	0	0	0	0	12	4,390,506
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	1,554,642	0	0	0	0	0	0	1	1,554,642
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	6,418	4,633,459,992	0	(a).....0	0	0	0	0	6,418	4,633,459,992
21. Issued during year.....	314	224,525,222	0	0	0	0	0	0	314	224,525,222
22. Other changes to in force (Net).....	(389)	(264,323,587)	0	0	0	0	0	0	(389)	(264,323,587)
23. In force December 31 of current year.....	6,343	4,593,661,627	0	(a).....0	0	0	0	0	6,343	4,593,661,627

(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).....	746,573	749,977	0	194,150	194,334
25.2 Guaranteed renewable (b).....	8,252	8,290	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).....	754,825	758,267	0	194,150	194,334
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	754,825	758,267	0	194,150	194,334

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	9,634,984	0	0	0	9,634,984
2. Annuity considerations.....	200	0	0	0	200
3. Deposit-type contract funds.....	0	XXX.....	0	XXX.....	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	9,635,184	0	0	0	9,635,184
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	7,073,352	0	0	0	7,073,352
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	139,196	0	0	0	139,196
12. Surrender values and withdrawals for life contracts.....	771,544	0	0	0	771,544
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.....	7,984,092	0	0	0	7,984,092

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	2,738,872	0	0	0	0	0	0	4	2,738,872
17. Incurred during current year.....	24	7,173,137	0	0	0	0	0	0	24	7,173,137
Settled during current year:										
18.1 By payment in full.....	28	9,912,009	0	0	0	0	0	0	28	9,912,009
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	28	9,912,009	0	0	0	0	0	0	28	9,912,009
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	9,912,009	0	0	0	0	0	0	28	9,912,009
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	7,288	4,678,238,386	0	(a).....0	0	0	0	0	7,288	4,678,238,386
21. Issued during year.....	246	173,645,419	0	0	0	0	0	0	246	173,645,419
22. Other changes to in force (Net).....	(432)	(243,128,425)	0	0	0	0	0	0	(432)	(243,128,425)
23. In force December 31 of current year.....	7,102	4,608,755,380	0	(a).....0	0	0	0	0	7,102	4,608,755,380

(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).....	789,783	793,384	0	842,637	823,299
25.2 Guaranteed renewable (b).....	6,040	6,068	0	28,043	29,510
25.3 Non-renewable for stated reasons only (b).....	4,749	4,771	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).....	800,572	804,223	0	870,680	852,809
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	800,572	804,223	0	870,680	852,809

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	2,725	0	0	0	2,725
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	2,725	0	0	0	2,725
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	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.....	6	1,875,000	0	(a).....0	0	0	0	0	6	1,875,000
21. Issued during year.....	2	750,000	0	0	0	0	0	0	2	750,000
22. Other changes to in force (Net).....	(3)	(1,025,000)	0	0	0	0	0	0	(3)	(1,025,000)
23. In force December 31 of current year.....	5	1,600,000	0	(a).....0	0	0	0	0	5	1,600,000

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	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).....	2,499	2,511	0	0	0
25.2 Guaranteed renewable (b).....	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b).....	0	0	0	0	0
25.4 Other accident only.....	0	0	0	0	0
25.5 All other (b).....	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5).....	2,499	2,511	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	2,499	2,511	0	0	0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	528,440	0	0	0	528,440
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).....	528,440	0	0	0	528,440
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	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.....	814	0	0	0	814
12. Surrender values and withdrawals for life contracts.....	6,025	0	0	0	6,025
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.....	6,839	0	0	0	6,839

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.....	553	291,624,645	0	(a).....0	0	0	0	0	553	291,624,645
21. Issued during year.....	20	15,950,000	0	0	0	0	0	0	20	15,950,000
22. Other changes to in force (Net).....	(18)	(9,061,025)	0	0	0	0	0	0	(18)	(9,061,025)
23. In force December 31 of current year.....	555	298,513,620	0	(a).....0	0	0	0	0	555	298,513,620

(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).....	54,053	54,300	0	0	0
25.2 Guaranteed renewable (b).....	3,873	3,891	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).....	57,926	58,191	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	57,926	58,191	0	0	0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	7,143,161	0	0	0	7,143,161
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	7,143,161	0	0	0	7,143,161
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	7,508,562	0	0	0	7,508,562
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	0	0	0	0	0
12. Surrender values and withdrawals for life contracts.....	2,311,003	0	0	0	2,311,003
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	9,819,565	0	0	0	9,819,565

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	500,000	0	0	0	0	0	0	1	500,000
17. Incurred during current year.....	19	6,595,904	0	0	0	0	0	0	19	6,595,904
Settled during current year:										
18.1 By payment in full.....	20	7,095,904	0	0	0	0	0	0	20	7,095,904
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	20	7,095,904	0	0	0	0	0	0	20	7,095,904
18.4 Reduction by compromise.....	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected.....	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements.....	20	7,095,904	0	0	0	0	0	0	20	7,095,904
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.....	6,156	4,104,460,665	0	(a).....0	0	0	0	0	6,156	4,104,460,665
21. Issued during year.....	189	172,492,937	0	0	0	0	0	0	189	172,492,937
22. Other changes to in force (Net).....	(419)	(265,302,086)	0	0	0	0	0	0	(419)	(265,302,086)
23. In force December 31 of current year.....	5,926	4,011,651,516	0	(a).....0	0	0	0	0	5,926	4,011,651,516

(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).....	683,055	686,170	0	529,368	526,481
25.2 Guaranteed renewable (b).....	18,932	19,018	0	10,650	10,650
25.3 Non-renewable for stated reasons only (b).....	8,629	8,668	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).....	710,616	713,856	0	540,018	537,131
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	710,616	713,856	0	540,018	537,131

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF WISCONSIN DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	5,753,787	0	0	0	5,753,787
2. Annuity considerations.....	0	0	0	0	0
3. Deposit-type contract funds.....	0	XXX.....	0	XXX.....	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	5,753,787	0	0	0	5,753,787
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	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period.....	0	0	0	0	0
6.4 Other.....	0	0	0	0	0
6.5 Totals (Sum of Lines 6.1 to 6.4).....	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit.....	0	0	0	0	0
7.2 Applied to provide paid-up annuities.....	0	0	0	0	0
7.3 Other.....	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3).....	0	0	0	0	0
8. Grand Totals (Lines 6.5 + 7.4).....	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits.....	5,078,730	0	0	0	5,078,730
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	51,287	0	0	0	51,287
12. Surrender values and withdrawals for life contracts.....	1,443,324	0	0	0	1,443,324
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	6,573,341	0	0	0	6,573,341

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.....	13	1,024,280	0	0	0	0	0	0	13	1,024,280
17. Incurred during current year.....	18	4,250,881	0	0	0	0	0	0	18	4,250,881
Settled during current year:										
18.1 By payment in full.....	31	5,275,161	0	0	0	0	0	0	31	5,275,161
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	31	5,275,161	0	0	0	0	0	0	31	5,275,161
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	5,275,161	0	0	0	0	0	0	31	5,275,161
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.....	5,452	2,895,528,020	0	(a).....0	0	0	0	0	5,452	2,895,528,020
21. Issued during year.....	188	142,687,984	0	0	0	0	0	0	188	142,687,984
22. Other changes to in force (Net).....	(413)	(228,441,849)	0	0	0	0	0	0	(413)	(228,441,849)
23. In force December 31 of current year.....	5,227	2,809,774,155	0	(a).....0	0	0	0	0	5,227	2,809,774,155

(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).....	662,188	665,207	0	34,670	31,104
25.2 Guaranteed renewable (b).....	24,894	25,008	0	0	3,566
25.3 Non-renewable for stated reasons only (b).....	2,496	2,507	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).....	689,578	692,722	0	34,670	34,670
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	689,578	692,722	0	34,670	34,670

(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 ASSURANCE CORPORATION



DIRECT BUSINESS IN THE STATE OF WEST VIRGINIA DURING THE YEAR

NAIC Group Code....0704

NAIC Company Code....89206

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	1,324,623	0	0	0	1,324,623
2. Annuity considerations.....	10,000	0	0	0	10,000
3. Deposit-type contract funds.....	0	XXX	0	XXX	0
4. Other considerations.....	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4).....	1,334,623	0	0	0	1,334,623
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	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.....	435,503	0	0	0	435,503
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	12,089	0	0	0	12,089
12. Surrender values and withdrawals for life contracts.....	842,182	0	0	0	842,182
13. Aggregate write-ins for miscellaneous direct claims and benefits paid....	0	0	0	0	0
14. All other benefits, except accident and health.....	0	0	0	0	0
15. Totals.....	1,289,774	0	0	0	1,289,774

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	232,958	0	0	0	0	0	0	2	232,958
17. Incurred during current year.....	10	610,602	0	0	0	0	0	0	10	610,602
Settled during current year:										
18.1 By payment in full.....	12	843,560	0	0	0	0	0	0	12	843,560
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	12	843,560	0	0	0	0	0	0	12	843,560
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	843,560	0	0	0	0	0	0	12	843,560
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.....	1,030	372,082,689	0	(a).....0	0	0	0	0	1,030	372,082,689
21. Issued during year.....	37	17,660,000	0	0	0	0	0	0	37	17,660,000
22. Other changes to in force (Net).....	(83)	(37,311,369)	0	0	0	0	0	0	(83)	(37,311,369)
23. In force December 31 of current year.....	984	352,431,320	0	(a).....0	0	0	0	0	984	352,431,320

(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).....	259,836	261,021	0	604,980	600,872
25.2 Guaranteed renewable (b).....	1,520	1,527	0	10,800	10,800
25.3 Non-renewable for stated reasons only (b).....	898	902	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).....	262,254	263,450	0	615,780	611,672
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	262,254	263,450	0	615,780	611,672

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION



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

LIFE INSURANCE

	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS					
1. Life insurance.....	828,065	0	0	0	828,065
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).....	828,065	0	0	0	828,065
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	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.....	162,937	0	0	0	162,937
10. Matured endowments.....	0	0	0	0	0
11. Annuity benefits.....	1,218	0	0	0	1,218
12. Surrender values and withdrawals for life contracts.....	43,228	0	0	0	43,228
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.....	207,383	0	0	0	207,383

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	162,937	0	0	0	0	0	0	2	162,937
Settled during current year:										
18.1 By payment in full.....	1	43,511	0	0	0	0	0	0	1	43,511
18.2 By payment on compromised claims.....	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid.....	1	43,511	0	0	0	0	0	0	1	43,511
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	43,511	0	0	0	0	0	0	1	43,511
19. Unpaid Dec. 31, current year (Lines 16 + 17 - 18.6).....	1	119,426	0	0	0	0	0	0	1	119,426
POLICY EXHIBIT					No. of Pol.					
20. In force December 31, prior year.....	825	417,685,107	0	(a).....0	0	0	0	0	825	417,685,107
21. Issued during year.....	26	9,050,000	0	0	0	0	0	0	26	9,050,000
22. Other changes to in force (Net).....	(48)	(8,947,695)	0	0	0	0	0	0	(48)	(8,947,695)
23. In force December 31 of current year.....	803	417,787,412	0	(a).....0	0	0	0	0	803	417,787,412

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

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	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).....	62,124	62,407	0	0	0
25.2 Guaranteed renewable (b).....	516	519	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).....	62,640	62,926	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6).....	62,640	62,926	0	0	0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION
FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve

	1 Amount
1. Reserve as of December 31, prior year.....	12,416,966
2. Current year's realized pre-tax capital gains/(losses) of \$..... 15,923,821 transferred into the reserve net of taxes of \$..... 3,344,001.....	12,579,819
3. Adjustment for current year's liability gains/(losses) released from the reserve.....	0
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3).....	24,996,785
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4).....	3,483,849
6. Reserve as of December 31, current year (Line 4 minus Line 5).....	21,512,936

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. 2020.....	1,876,873	1,606,976	0	3,483,849
2. 2021.....	1,682,435	3,041,877	0	4,724,313
3. 2022.....	1,536,987	2,641,110	0	4,178,097
4. 2023.....	1,399,121	2,032,694	0	3,431,816
5. 2024.....	1,290,972	1,385,073	0	2,676,045
6. 2025.....	1,139,590	722,130	0	1,861,721
7. 2026.....	944,482	355,852	0	1,300,334
8. 2027.....	732,480	282,693	0	1,015,174
9. 2028.....	520,072	206,808	0	726,880
10. 2029.....	303,349	128,198	0	431,548
11. 2030.....	175,762	49,390	0	225,152
12. 2031.....	136,417	8,623	0	145,040
13. 2032.....	104,159	8,831	0	112,990
14. 2033.....	76,342	9,238	0	85,580
15. 2034.....	51,261	9,445	0	60,707
16. 2035.....	38,660	9,654	0	48,315
17. 2036.....	42,688	10,027	0	52,714
18. 2037.....	46,413	10,373	0	56,786
19. 2038.....	47,578	10,318	0	57,896
20. 2039.....	47,229	10,855	0	58,084
21. 2040.....	44,466	10,994	0	55,460
22. 2041.....	39,660	10,170	0	49,830
23. 2042.....	32,817	7,784	0	40,600
24. 2043.....	28,266	5,796	0	34,062
25. 2044.....	23,715	3,608	0	27,323
26. 2045.....	19,554	1,223	0	20,778
27. 2046.....	15,499	27	0	15,526
28. 2047.....	11,079	22	0	11,100
29. 2048.....	6,693	15	0	6,708
30. 2049.....	2,343	10	0	2,353
31. 2050 and Later.....	0	3	0	3
32. Total (Lines 1 to 31).....	12,416,964	12,579,819	0	24,996,783

OHIO NATIONAL LIFE ASSURANCE CORPORATION
ASSET VALUATION RESERVE

	Default Component			Equity Component			7 Total Amount (Cols. 3 + 6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	
1. Reserve as of December 31, prior year.....	13,989,551	3,570,253	17,559,804	49,225	(0)	49,225	17,609,028
2. Realized capital gains/(losses) net of taxes - General Account.....	(3,012,794)	0	(3,012,794)	0	0	0	(3,012,794)
3. Realized capital gains/(losses) net of taxes - Separate Accounts.....	0	0	0	0	0	0	0
4. Unrealized capital gains/(losses) - net of deferred taxes - General Account.....	415,337	0	415,337	99,118	0	99,118	514,455
5. Unrealized capital gains/(losses) - net of deferred taxes - Separate Accounts.....	0	0	0	0	0	0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves.....	0	0	0	0	0	0	0
7. Basic contribution.....	3,253,000	561,986	3,814,986	0	20,363	20,363	3,835,349
8. Accumulated balances (Lines 1 through 5, minus 6 plus 7).....	14,645,093	4,132,239	18,777,333	148,343	20,363	168,706	18,946,038
9. Maximum reserve.....	15,669,340	3,268,508	18,937,848	270,350	119,697	390,047	19,327,895
10. Reserve objective.....	9,639,779	2,514,784	12,154,564	239,797	63,718	303,515	12,458,079
11. 20% of (Line 10 minus Line 8).....	(1,001,063)	(323,491)	(1,324,554)	18,291	8,671	26,962	(1,297,592)
12. Balance before transfers (Lines 8 + 11).....	13,644,031	3,808,748	17,452,779	166,634	29,034	195,668	17,648,446
13. Transfers.....	540,241	(540,241)	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).....	14,184,272	3,268,507	17,452,779	166,634	29,034	195,668	17,648,446

OHIO NATIONAL LIFE ASSURANCE CORPORATION
ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Design- 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	43,268,847	.XXX	XXX	43,268,847	0.0000	0	0.0000	0	0.0000	0
2.1	1	NAIC Designation Category 1.A.	151,460,055	.XXX	XXX	151,460,055	0.0005	75,730	0.0016	242,336	0.0033	499,818
2.2	1	NAIC Designation Category 1.B.	46,725,172	.XXX	XXX	46,725,172	0.0005	23,363	0.0016	74,760	0.0033	154,193
2.3	1	NAIC Designation Category 1.C.	99,195,709	.XXX	XXX	99,195,709	0.0005	49,598	0.0016	158,713	0.0033	327,346
2.4	1	NAIC Designation Category 1.D.	133,486,893	.XXX	XXX	133,486,893	0.0005	66,743	0.0016	213,579	0.0033	440,507
2.5	1	NAIC Designation Category 1.E.	68,007,726	.XXX	XXX	68,007,726	0.0005	34,004	0.0016	108,812	0.0033	224,425
2.6	1	NAIC Designation Category 1.F.	217,202,216	.XXX	XXX	217,202,216	0.0005	108,601	0.0016	347,524	0.0033	716,767
2.7	1	NAIC Designation Category 1.G.	163,769,609	.XXX	XXX	163,769,609	0.0005	81,885	0.0016	262,031	0.0033	540,440
2.8		Subtotal NAIC (2.1+2.2+2.3+2.4+2.5+2.6+2.7)	879,847,380	.XXX	XXX	879,847,380	XXX	439,924	XXX	1,407,756	XXX	2,903,496
3.1	2	NAIC Designation Category 2.A.	197,533,824	.XXX	XXX	197,533,824	0.0021	414,821	0.0064	1,264,216	0.0106	2,093,859
3.2	2	NAIC Designation Category 2.B.	327,385,878	.XXX	XXX	327,385,878	0.0021	687,510	0.0064	2,095,270	0.0106	3,470,290
3.3	2	NAIC Designation Category 2.C.	207,575,497	.XXX	XXX	207,575,497	0.0021	435,909	0.0064	1,328,483	0.0106	2,200,300
3.4		Subtotal NAIC (3.1+3.2+3.3)	732,495,199	.XXX	XXX	732,495,199	XXX	1,538,240	XXX	4,687,969	XXX	7,764,449
4.1	3	NAIC Designation Category 3.A.	37,522,124	.XXX	XXX	37,522,124	0.0099	371,469	0.0263	986,832	0.0376	1,410,832
4.2	3	NAIC Designation Category 3.B.	18,544,917	.XXX	XXX	18,544,917	0.0099	183,595	0.0263	487,731	0.0376	697,289
4.3	3	NAIC Designation Category 3.C.	19,853,440	.XXX	XXX	19,853,440	0.0099	196,549	0.0263	522,145	0.0376	746,489
4.4		Subtotal NAIC (4.1+4.2+4.3)	75,920,481	.XXX	XXX	75,920,481	XXX	751,613	XXX	1,996,709	XXX	2,854,610
5.1	4	NAIC Designation Category 4.A.	3,204,949	.XXX	XXX	3,204,949	0.0245	78,521	0.0572	183,323	0.0817	261,844
5.2	4	NAIC Designation Category 4.B.	9,915,620	.XXX	XXX	9,915,620	0.0245	242,933	0.0572	567,173	0.0817	810,106
5.3	4	NAIC Designation Category 4.C.	440,735	.XXX	XXX	440,735	0.0245	10,798	0.0572	25,210	0.0817	36,008
5.4		Subtotal NAIC (5.1+5.2+5.3)	13,561,304	.XXX	XXX	13,561,304	XXX	332,252	XXX	775,707	XXX	1,107,959
6.1	5	NAIC Designation Category 5.A.	2,706,734	.XXX	XXX	2,706,734	0.0630	170,524	0.1128	305,320	0.1880	508,866
6.2	5	NAIC Designation Category 5.B.	0	.XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
6.3	5	NAIC Designation Category 5.C.	0	.XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
6.4		Subtotal NAIC (6.1+6.2+6.3)	2,706,734	.XXX	XXX	2,706,734	XXX	170,524	XXX	305,320	XXX	508,866
7	6	NAIC 6.	1,694,215	.XXX	XXX	1,694,215	0.0000	0	0.2370	401,529	0.2370	401,529
8		Total unrated multi-class securities acquired by conversion	0	.XXX	XXX	0	XXX	0	XXX	0	XXX	0
9		Total long-term bonds (1+2.8+3.4+4.4+5.4+6.4+7+8)	1,749,494,160	.XXX	XXX	1,749,494,160	XXX	3,232,553	XXX	9,574,989	XXX	15,540,909
		PREFERRED STOCKS										
10	1	Highest quality	0	.XXX	XXX	0	0.0005	0	0.0016	0	0.0033	0
11	2	High quality	2,000,000	.XXX	XXX	2,000,000	0.0021	4,200	0.0064	12,800	0.0106	21,200
12	3	Medium quality	0	.XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
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)	2,000,000	.XXX	XXX	2,000,000	XXX	4,200	XXX	12,800	XXX	21,200

OHIO NATIONAL LIFE ASSURANCE CORPORATION
ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
31		SHORT-TERM BONDS										
	18	Exempt obligations.....	.0	.XXX	XXX	.0	.0.0000	.0	.0.0000	.0	.0.0000	.0
	19.1	NAIC Designation Category 1.A.....	.0	.XXX	XXX	.0	.0.0005	.0	.0.0016	.0	.0.0033	.0
	19.2	NAIC Designation Category 1.B.....	.0	.XXX	XXX	.0	.0.0005	.0	.0.0016	.0	.0.0033	.0
	19.3	NAIC Designation Category 1.C.....	.0	.XXX	XXX	.0	.0.0005	.0	.0.0016	.0	.0.0033	.0
	19.4	NAIC Designation Category 1.D.....	28,717,412	.XXX	XXX	28,717,412	.0.0005	14,359	.0.0016	45,948	.0.0033	94,767
	19.5	NAIC Designation Category 1.E.....	.0	.XXX	XXX	.0	.0.0005	.0	.0.0016	.0	.0.0033	.0
	19.6	NAIC Designation Category 1.F.....	.0	.XXX	XXX	.0	.0.0005	.0	.0.0016	.0	.0.0033	.0
	19.7	NAIC Designation Category 1.G.....	.0	.XXX	XXX	.0	.0.0005	.0	.0.0016	.0	.0.0033	.0
	19.8	Subtotal NAIC (19.1+19.2+19.3+19.4+19.5+19.6+19.7).....	28,717,412	.XXX	XXX	28,717,412	XXX	14,359	.XXX	45,948	.XXX	94,767
	20.1	NAIC Designation Category 2.A.....	.0	.XXX	XXX	.0	.0.0021	.0	.0.0064	.0	.0.0106	.0
	20.2	NAIC Designation Category 2.B.....	.0	.XXX	XXX	.0	.0.0021	.0	.0.0064	.0	.0.0106	.0
	20.3	NAIC Designation Category 2.C.....	.0	.XXX	XXX	.0	.0.0021	.0	.0.0064	.0	.0.0106	.0
	20.4	Subtotal NAIC (20.1+20.2+20.3).....	.0	.XXX	XXX	.0	XXX	.0	.XXX	.0	.XXX	.0
	21.1	NAIC Designation Category 3.A.....	.0	.XXX	XXX	.0	.0.0099	.0	.0.0263	.0	.0.0376	.0
	21.2	NAIC Designation Category 3.B.....	.0	.XXX	XXX	.0	.0.0099	.0	.0.0263	.0	.0.0376	.0
	21.3	NAIC Designation Category 3.C.....	.0	.XXX	XXX	.0	.0.0099	.0	.0.0263	.0	.0.0376	.0
	21.4	Subtotal NAIC (21.1+21.2+21.3).....	.0	.XXX	XXX	.0	XXX	.0	.XXX	.0	.XXX	.0
	22.1	NAIC Designation Category 4.A.....	.0	.XXX	XXX	.0	.0.0245	.0	.0.0572	.0	.0.0817	.0
	22.2	NAIC Designation Category 4.B.....	.0	.XXX	XXX	.0	.0.0245	.0	.0.0572	.0	.0.0817	.0
	22.3	NAIC Designation Category 4.C.....	.0	.XXX	XXX	.0	.0.0245	.0	.0.0572	.0	.0.0817	.0
	22.4	Subtotal NAIC (22.1+22.2+22.3).....	.0	.XXX	XXX	.0	XXX	.0	.XXX	.0	.XXX	.0
	23.1	NAIC Designation Category 5.A.....	.0	.XXX	XXX	.0	.0.0630	.0	.0.1128	.0	.0.1880	.0
	23.2	NAIC Designation Category 5.B.....	.0	.XXX	XXX	.0	.0.0630	.0	.0.1128	.0	.0.1880	.0
	23.3	NAIC Designation Category 5.C.....	.0	.XXX	XXX	.0	.0.0630	.0	.0.1128	.0	.0.1880	.0
	23.4	Subtotal NAIC (23.1+23.2+23.3).....	.0	.XXX	XXX	.0	XXX	.0	.XXX	.0	.XXX	.0
	24	NAIC 6.....	.0	.XXX	XXX	.0	.0.0000	.0	.0.2370	.0	.0.2370	.0
	25	Total short-term bonds (18+19.8+20.4+21.4+22.4+23.4+24).....	28,717,412	.XXX	XXX	28,717,412	XXX	14,359	.XXX	45,948	.XXX	94,767
		DERIVATIVE INSTRUMENTS										
	26	Exchange traded.....	.0	.XXX	XXX	.0	.0.0005	.0	.0.0016	.0	.0.0033	.0
	27	1 Highest quality.....	3,776,708	.XXX	XXX	3,776,708	.0.0005	1,888	.0.0016	6,043	.0.0033	12,463
	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.....	3,776,708	.XXX	XXX	3,776,708	XXX	1,888	.XXX	6,043	.XXX	12,463
	34	Total (Lines 9 + 17 + 25 + 33).....	1,783,988,280	.XXX	XXX	1,783,988,280	XXX	3,253,000	.XXX	9,639,779	.XXX	15,669,340

OHIO NATIONAL LIFE ASSURANCE CORPORATION
ASSET VALUATION RESERVE (continued)

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Default Component

Line Number	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
		MORTGAGE LOANS										
		In good standing:										
35		Farm mortgages - CM1 - highest quality.....	.0	.0	XXX	.0	.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.....	925,761	.0	XXX	925,761	.0015	1,389	.0034	3,148	.0046	4,259
42		Commercial mortgages-insured or guaranteed.....	.0	.0	XXX	.0	.0003	.0	.0007	.0	.0011	.0
43		Commercial mortgages-all other - CM1 - highest quality.....	356,102,048	.0	XXX	356,102,048	.0011	391,712	.0057	2,029,782	.0074	2,635,155
44		Commercial mortgages-all other - CM2 - high quality.....	39,486,987	.0	XXX	39,486,987	.0040	157,948	.0114	450,152	.0149	588,356
45		Commercial mortgages-all other - CM3 - medium quality.....	1,585,159	.0	XXX	1,585,159	.0069	10,938	.0200	31,703	.0257	40,739
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).....	398,099,955	.0	XXX	398,099,955	XXX	561,986	XXX	2,514,784	XXX	3,268,508
59		Schedule DA mortgages.....	.0	.0	XXX	.0	.0034	.0	.0114	.0	.0149	.0
60		Total mortgage loans on real estate (Lines 58 + 59).....	398,099,955	.0	XXX	398,099,955	XXX	561,986	XXX	2,514,784	XXX	3,268,508

OHIO NATIONAL LIFE ASSURANCE CORPORATION

ASSET VALUATION RESERVE

Basic Contribution, Reserve Objective and Maximum Reserve Calculations

Equity and Other Invested Asset Component

Line Number	NAIC Desig- nation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
COMMON STOCK												
1		Unaffiliated public.....	773,449	XXX	XXX	773,449	0.0000	0	(a).....0.2431	188,025	(a).....0.2431	188,025
2		Unaffiliated private.....	0	XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
3		Federal Home Loan Bank.....	8,487,100	XXX	XXX	8,487,100	0.0000	0	0.0061	51,771	0.0097	82,325
4		Affiliated life with AVR.....	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
Affiliated Investment Subsidiary:												
5		Fixed income exempt obligations.....	0	0	0	0	XXX	0	XXX	0	XXX	0
6		Fixed income highest quality.....	0	0	0	0	XXX	0	XXX	0	XXX	0
7		Fixed income high quality.....	0	0	0	0	XXX	0	XXX	0	XXX	0
8		Fixed income medium quality.....	0	0	0	0	XXX	0	XXX	0	XXX	0
9		Fixed income low quality.....	0	0	0	0	XXX	0	XXX	0	XXX	0
10		Fixed income lower quality.....	0	0	0	0	XXX	0	XXX	0	XXX	0
11		Fixed income in or near default.....	0	0	0	0	XXX	0	XXX	0	XXX	0
12		Unaffiliated common stock public.....	0	0	0	0	0.0000	0	(a).....0.0000	0	(a).....0.0000	0
13		Unaffiliated common stock private.....	0	0	0	0	0.0000	0	0.1945	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).....	0	XXX	XXX	0	0.0000	0	0.1580	0	0.1580	0
16		Affiliated - all other.....	0	XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
17		Total common stock (sum of Lines 1 through 16).....	9,260,549	0	0	9,260,549	XXX	0	XXX	239,797	XXX	270,350
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.....	0	0	0	0	0.0000	0	0.0912	0	0.0912	0
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).....	0	0	0	0	XXX	0	XXX	0	XXX	0
OTHER INVESTED ASSETS												
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS												
22		Exempt obligations.....	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
23	1	Highest quality.....	0	XXX	XXX	0	0.0005	0	0.0016	0	0.0033	0
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).....	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION
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.....	21,790,010	XXX	XXX	21,790,010	0.0005	10,895	0.0016	34,864	0.0033	71,907
31	2	High quality.....	4,508,482	XXX	XXX	4,508,482	0.0021	9,468	0.0064	28,854	0.0106	47,790
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).....	26,298,492	XXX	XXX	26,298,492	XXX	20,363	XXX	63,718	XXX	119,697
		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 ASSURANCE CORPORATION
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 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
65		Unaffiliated public.....	.0	XXX	XXX	.0	0.0000	.0	(a).....0.0000	.0	(a).....0.0000	.0
66		Unaffiliated private.....	.0	XXX	XXX	.0	0.0000	.0	0.1945	.0	0.1945	.0
67		Affiliated life with AVR.....	.0	XXX	XXX	.0	0.0000	.0	0.0000	.0	0.0000	.0
68		Affiliated certain other (see SVO Purposes and Procedures Manual).....	.0	XXX	XXX	.0	0.0000	.0	0.1580	.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).....	.0	XXX	XXX	.0	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).....	26,298,492	.0	.0	26,298,492	XXX	20,363	XXX	63,718	XXX	119,697

(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 ASSURANCE CORPORATION
SCHEDULE F

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

1	2	3	4	5	6	7	8
Contract Numbers	Claim Numbers	State of Residence of Claimant	Year of Claim for Death or Disability	Amount Claimed	Amount Paid During the Year	Amount Resisted Dec. 31 of Current Year	Why Compromised or Resisted
CLAIMS RESISTED DURING CURRENT YEAR							
Death Claims - Ordinary							
6830848.....	6036.....	PA.....	2009.....	100,000	0	100,000	Claim resisted due to suicide within the first 2 policy years. Refund of premium paid.
C6042516.....	12248.....	MI.....	2017.....	35,000	0	35,000	Policy lapsed prior to death due to non payment of premiums.
7233600.....	12658.....	TX.....	2018.....	500,000	0	500,000	Claim resisted due to suicide within the first 2 policy years. Refund of premium paid.
7203152.....	12498.....	GA.....	2018.....	700,000	0	700,000	Claim resisted due to suicide within the first 2 policy years. Refund of premium paid.
C6046123.....	13063.....	TN.....	2019.....	125,000	0	125,000	Policy Lapsed.....
6937867.....	13435.....	MI.....	2019.....	2,000,000	0	2,000,000	Aviation Exclusion applied- refund of premiums w/interest....
2799999. Death Claims - Ordinary.....				3,460,000	0	3,460,000	XXX.....
3199999. Subtotal - Resisted Death Claims.....				3,460,000	0	3,460,000	XXX.....
5299999. Subtotal - Claims Resisted of During Current Year.....				3,460,000	0	3,460,000	XXX.....
5399999. Totals.....				3,460,000	0	3,460,000	XXX.....

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

			Total		Group Accident and Health		Credit A&H (Group and Individual)		Collectively Renewable		Other Individual Contracts										
											Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other		
			1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %	
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS																					
1.	Premiums written.....	23,736,458	XXX.....	0	XXX...	0	XXX...	0	XXX...	22,884,270	XXX...	655,742	XXX..	196,446	XXX....	0	XXX...	0	XXX...	0	XXX..
2.	Premiums earned.....	21,716,812	XXX.....	0	XXX...	0	XXX...	0	XXX...	20,863,684	XXX...	673,175	XXX..	179,953	XXX....	0	XXX...	0	XXX...	0	XXX..
3.	Incurred claims.....	8,342,144	38.4	0	0.0	0	0.0	0	0.0	8,304,412	39.8	59,138	8.8	(21,406)	(11.9)	0	0.0	0	0.0	0	0.0
4.	Cost containment expenses.....	230,546	1.1	0	0.0	0	0.0	0	0.0	228,672	1.1	1,522	0.2	352	0.2	0	0.0	0	0.0	0	0.0
5.	Incurred claims and cost containment expenses (Lines 3 and 4).....	8,572,690	39.5	0	0.0	0	0.0	0	0.0	8,533,084	40.9	60,660	9.0	(21,054)	(11.7)	0	0.0	0	0.0	0	0.0
6.	Increase in contract reserves.....	1,231,877	5.7	0	0.0	0	0.0	0	0.0	1,509,624	7.2	(336,125)	(49.9)	58,378	32.4	0	0.0	0	0.0	0	0.0
7.	Commissions (a).....	5,225,978	24.1	0	0.0	0	0.0	0	0.0	5,169,171	24.8	57,121	8.5	(314)	(0.2)	0	0.0	0	0.0	0	0.0
8.	Other general insurance expenses.....	13,067,581	60.2	0	0.0	0	0.0	0	0.0	12,704,283	60.9	208,899	31.0	154,399	85.8	0	0.0	0	0.0	0	0.0
9.	Taxes, licenses and fees.....	1,615,753	7.4	0	0.0	0	0.0	0	0.0	1,570,833	7.5	25,829	3.8	19,091	10.6	0	0.0	0	0.0	0	0.0
10.	Total other expenses incurred.....	19,909,312	91.7	0	0.0	0	0.0	0	0.0	19,444,287	93.2	291,849	43.4	173,176	96.2	0	0.0	0	0.0	0	0.0
11.	Aggregate write-ins for deductions.....	2,747,032	12.6	0	0.0	0	0.0	0	0.0	2,413,759	11.6	333,273	49.5	0	0.0	0	0.0	0	0.0	0	0.0
12.	Gain from underwriting before dividends or refunds.....	(10,744,099)	(49.5)	0	0.0	0	0.0	0	0.0	(11,037,070)	(52.9)	323,518	48.1	(30,547)	(17.0)	0	0.0	0	0.0	0	0.0
13.	Dividends or refunds.....	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
14.	Gain from underwriting after dividends or refunds.....	(10,744,099)	(49.5)	0	0.0	0	0.0	0	0.0	(11,037,070)	(52.9)	323,518	48.1	(30,547)	(17.0)	0	0.0	0	0.0	0	0.0
DETAILS OF WRITE-INS																					
1101.	Surrenders/ROP Benefits.....	2,747,032	12.6	0	0.0	0	0.0	0	0.0	2,413,759	11.6	333,273	49.5	0	0.0	0	0.0	0	0.0	0	0.0
1102.	.....	.....0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	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	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	0	0.0
1199.	Total (Lines 1101 through 1103 plus 1198) (Line 11 above).	2,747,032	12.6	0	0.0	0	0.0	0	0.0	2,413,759	11.6	333,273	49.5	0	0.0	0	0.0	0	0.0	0	0.0

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

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

	1	2	3	4	Other Individual Contracts				
	Total	Group Accident and Health	Credit A&H (Group and Individual)	Collectively Renewable	5 Non-Cancelable	6 Guaranteed Renewable	7 Non-Renewable for Stated Reasons Only	8 Other Accident Only	9 All Other
PART 2 - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums.....	516,765	0	0	0	492,795	92,235	(68,265)	0	0
2. Advance premiums.....	266,277	0	0	0	262,103	3,442	732	0	0
3. Reserve for rate credits.....	0	0	0	0	0	0	0	0	0
4. Total premium reserves, current year.....	783,042	0	0	0	754,898	95,677	(67,533)	0	0
5. Total premium reserves, prior year.....	(1,236,603)	0	0	0	(1,265,686)	113,110	(84,027)	0	0
6. Increase in total premium reserves.....	2,019,645	0	0	0	2,020,584	(17,433)	16,494	0	0
B. Contract Reserves:									
1. Additional reserves (a).....	20,380,646	0	0	0	17,846,356	2,293,098	241,192	0	0
2. Reserve for future contingent benefits.....	0	0	0	0	0	0	0	0	0
3. Total contract reserves, current year.....	20,380,646	0	0	0	17,846,356	2,293,098	241,192	0	0
4. Total contract reserves, prior year.....	19,148,769	0	0	0	16,336,732	2,629,223	182,814	0	0
5. Increase in contract reserves.....	1,231,877	0	0	0	1,509,624	(336,125)	58,378	0	0
C. Claim Reserves and Liabilities:									
1. Total current year.....	64,284,656	0	0	0	63,762,150	424,327	98,179	0	0
2. Total prior year.....	66,204,603	0	0	0	65,352,640	706,660	145,303	0	0
3. Increase.....	(1,919,947)	0	0	0	(1,590,490)	(282,333)	(47,124)	0	0

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

1. Claims Paid During the Year:									
1.1 On claims incurred prior to current year.....	10,111,708	0	0	0	9,790,027	295,963	25,718	0	0
1.2 On claims incurred during current year.....	150,383	0	0	0	104,875	45,508	0	0	0
2. Claim Reserves and Liabilities, December 31, current year:									
2.1 On claims incurred prior to current year.....	56,960,742	0	0	0	56,721,022	239,720	0	0	0
2.2 On claims incurred during current year.....	7,323,914	0	0	0	7,041,128	184,607	98,179	0	0
3. Test:									
3.1 Lines 1.1 and 2.1.....	67,072,450	0	0	0	66,511,049	535,683	25,718	0	0
3.2 Claim reserves and liabilities, December 31, prior year.....	66,204,603	0	0	0	65,352,640	706,660	145,303	0	0
3.3 Line 3.1 minus Line 3.2.....	867,847	0	0	0	1,158,409	(170,977)	(119,585)	0	0

PART 4 - REINSURANCE

A. Reinsurance Assumed:									
1. Premiums written.....	264,292	0	0	0	236,255	27,080	957	0	0
2. Premiums earned.....	271,256	0	0	0	242,731	27,564	961	0	0
3. Incurred claims.....	679,198	0	0	0	656,289	22,909	0	0	0
4. Commissions.....	19,029	0	0	0	17,140	1,812	77	0	0
B. Reinsurance Ceded:									
1. Premiums written.....	15,858,858	0	0	0	15,589,549	85	269,224	0	0
2. Premiums earned.....	15,322,256	0	0	0	15,009,948	85	312,223	0	0
3. Incurred claims.....	10,867,119	0	0	0	10,943,417	26,245	(102,543)	0	0
4. Commissions.....	5,157,326	0	0	0	5,095,406	69	61,851	0	0

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

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

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred claims.....	0	0	18,530,064	18,530,064
2. Beginning claim reserves and liabilities.....	0	0	159,541,684	159,541,684
3. Ending claim reserves and liabilities.....	0	0	153,513,904	153,513,904
4. Claims paid.....	0	0	24,557,844	24,557,844
B. Assumed Reinsurance:				
5. Incurred claims.....	0	0	679,199	679,199
6. Beginning claim reserves and liabilities.....	0	0	5,133,973	5,133,973
7. Ending claim reserves and liabilities.....	0	0	4,570,964	4,570,964
8. Claims paid.....	0	0	1,242,208	1,242,208
C. Ceded Reinsurance:				
9. Incurred claims.....	0	0	10,867,118	10,867,118
10. Beginning claim reserves and liabilities.....	0	0	109,929,801	109,929,801
11. Ending claim reserves and liabilities.....	0	0	97,535,739	97,535,739
12. Claims paid.....	0	0	23,261,180	23,261,180
D. Net:				
13. Incurred claims.....	0	0	8,342,145	8,342,145
14. Beginning claim reserves and liabilities.....	0	0	54,745,856	54,745,856
15. Ending claim reserves and liabilities.....	0	0	60,549,129	60,549,129
16. Claims paid.....	0	0	2,538,872	2,538,872
E. Net Incurred Claims and Cost Containment Expenses:				
17. Incurred claims and cost containment expenses.....	0	0	8,572,690	8,572,690
18. Beginning reserves and liabilities.....	0	0	54,752,667	54,752,667
19. Ending reserves and liabilities.....	0	0	60,555,567	60,555,567
20. Paid claims and cost containment expenses.....	0	0	2,769,790	2,769,790

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE S - PART 1 - SECTION 1

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Effective Date	Name of Reinsured	Domiciliary Jurisdiction	Type of Reinsurance Assumed	Type of Business Assumed	Amount of In Force at End of Year	Reserve	Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld under Coinsurance

NONE

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE S - PART 1 - SECTION 2

Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Effective Date	Name of Reinsured	Domiciliary Jurisdiction	Type of Reinsurance Assumed	Type of Business Assumed	Premiums	Unearned Premiums	Reserve Liability Other than for Unearned Premiums	Reinsurance Payable on Paid and Unpaid Losses	Modified Coinsurance Reserve	Funds Withheld under Coinsurance
Non-Affiliates - U.S. Non-Affiliates												
61301.....	47-0098400....	05/01/1985	Ameritas Life Insurance Corporation.....	NE.....	QA/I.....	LTDI.....	75,283	3,332	1,393,100	7,121	0	0
64017.....	75-0300900....	11/23/1987	Jefferson National Life Insurance Company.....	TX.....	QA/I.....	LTDI.....	117,957	11,315	2,968,949	77,068	0	0
57320.....	47-0339250....	09/09/1990	Woodmen of the World.....	NE.....	QA/I.....	LTDI.....	73,671	5,175	1,059,110	12,543	0	0
0899999.	Total - Non-Affiliates - U.S. Non-Affiliates.....						266,911	19,822	5,421,159	96,732	0	0
1099999.	Total - Non-Affiliates.....						266,911	19,822	5,421,159	96,732	0	0
1199999.	Total - U.S.....						266,911	19,822	5,421,159	96,732	0	0
9999999.	Total.....						266,911	19,822	5,421,159	96,732	0	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE S - PART 2

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

1	2	3	4	5	6	7
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Paid Losses	Unpaid Losses
Life and Annuity - Affiliates - U.S. - Captive						
13575.....	26-3791519....	05/01/2011	Montgomery Re.....	VT.....	0	154,529
13575.....	26-3791519....	07/01/2012	Montgomery Re.....	VT.....	0	6,697,974
15363.....	80-0955278....	12/31/2013	Kenwood Re.....	VT.....	0	4,708,917
15855.....	47-4249160....	12/31/2015	Camargo Re.....	OH.....	0	5,997,869
15855.....	47-4249160....	12/31/2018	Camargo Re.....	OH.....	0	418,456
0199999.	Total - Life and Annuity Affiliates - U.S. - Captive.....				0	17,977,745
Life and Annuity - Affiliates - U.S. - Other						
67172.....	31-0397080....	10/01/2006	The Ohio National Life Insurance Comp.....	OH.....	0	378,118
67172.....	31-0397080....	10/01/2009	The Ohio National Life Insurance Comp.....	OH.....	0	266,936
67172.....	31-0397080....	09/01/2014	The Ohio National Life Insurance Comp.....	OH.....	0	345,612
0299999.	Total - Life and Annuity Affiliates - U.S. - Other.....				0	990,666
0399999.	Total - Life and Annuity Affiliates - U.S. - Total.....				0	18,968,411
0799999.	Total - Life and Annuity Affiliates.....				0	18,968,411
Life and Annuity - Non-Affiliates - U.S. Non-Affiliates						
90611.....	41-1366075....	04/15/1999	Allianz Life Insurance Co. of North Amer.....	MN.....	90,000	0
90611.....	41-1366075....	07/31/2001	Allianz Life Insurance Co. of North Amer.....	MN.....	30,306	97,520
90611.....	41-1366075....	01/01/2003	Allianz Life Insurance Co. of North Amer.....	MN.....	0	18,000
90611.....	41-1366075....	04/01/2003	Allianz Life Insurance Co. of North Amer.....	MN.....	0	63,000
90611.....	41-1366075....	09/01/2000	Allianz Life Insurance Co. of North Amer.....	MN.....	0	2,193
90611.....	41-1366075....	04/01/2003	Allianz Life Insurance Co. of North Amer.....	MN.....	0	918,395
90611.....	41-1366075....	01/01/2002	Allianz Life Insurance Co. of North Amer.....	MN.....	0	48,297
90611.....	41-1366075....	07/01/2002	Allianz Life Insurance Co. of North Amer.....	MN.....	0	20,231
86258.....	13-2572994....	04/01/2004	General & Cologne Life Re of America.....	CT.....	0	25,385
86258.....	13-2572994....	10/10/2009	General & Cologne Life Re of America.....	CT.....	21,921	1,142,263
88340.....	59-2859797....	01/01/2006	Hannover Life Reassurance Comp of America.....	FL.....	90,000	78,750
88340.....	59-2859797....	01/01/2010	Hannover Life Reassurance Comp of America.....	FL.....	10,803	105,732
88340.....	59-2859797....	01/01/2006	Hannover Life Reassurance Comp of America.....	FL.....	134,401	0
66346.....	58-0828824....	04/15/1999	Munich American Reassurance Company.....	GA.....	90,000	0
66346.....	58-0828824....	07/31/2001	Munich American Reassurance Company.....	GA.....	90,618	195,038
66346.....	58-0828824....	04/01/2004	Munich American Reassurance Company.....	GA.....	67,500	405,000
66346.....	58-0828824....	01/19/2005	Munich American Reassurance Company.....	GA.....	270,000	0
66346.....	58-0828824....	01/01/2006	Munich American Reassurance Company.....	GA.....	90,000	78,750
66346.....	58-0828824....	06/04/2007	Munich American Reassurance Company.....	GA.....	942,760	1,362,500
66346.....	58-0828824....	04/01/2004	Munich American Reassurance Company.....	GA.....	8,958,479	669,441
66346.....	58-0828824....	10/01/2007	Munich American Reassurance Company.....	GA.....	12,500	88,272
66346.....	58-0828824....	10/10/2009	Munich American Reassurance Company.....	GA.....	17,675	227,596
66346.....	58-0828824....	04/15/1999	Munich American Reassurance Company.....	GA.....	110,769	0
66346.....	58-0828824....	09/01/2000	Munich American Reassurance Company.....	GA.....	0	60,000
66346.....	58-0828824....	01/01/2003	Munich American Reassurance Company.....	GA.....	0	18,000
66346.....	58-0828824....	04/01/2003	Munich American Reassurance Company.....	GA.....	0	157,500
66346.....	58-0828824....	09/01/2000	Munich American Reassurance Company.....	GA.....	0	60,992
66346.....	58-0828824....	04/01/2003	Munich American Reassurance Company.....	GA.....	0	918,395
66346.....	58-0828824....	01/01/2002	Munich American Reassurance Company.....	GA.....	0	89,848
66346.....	58-0828824....	07/01/2002	Munich American Reassurance Company.....	GA.....	0	29,159
66346.....	58-0828824....	01/01/2014	Munich American Reassurance Company.....	GA.....	0	183,740
93572.....	43-1235868....	04/15/1999	RGA Reinsurance Company.....	MO.....	90,000	0
93572.....	43-1235868....	07/31/2001	RGA Reinsurance Company.....	MO.....	30,288	97,461
93572.....	43-1235868....	07/01/1997	RGA Reinsurance Company.....	MO.....	22,939	80,000
93572.....	43-1235868....	07/01/2019	RGA Reinsurance Company.....	MO.....	887,556	527,156
93572.....	43-1235868....	10/10/2009	RGA Reinsurance Company.....	MO.....	17,675	227,596
93572.....	43-1235868....	09/01/2000	RGA Reinsurance Company.....	MO.....	0	60,000
93572.....	43-1235868....	01/01/2003	RGA Reinsurance Company.....	MO.....	0	18,000
93572.....	43-1235868....	10/01/1995	RGA Reinsurance Company.....	MO.....	0	155,897
93572.....	43-1235868....	01/01/1987	RGA Reinsurance Company.....	MO.....	0	484,233
93572.....	43-1235868....	01/01/1994	RGA Reinsurance Company.....	MO.....	0	5,481
93572.....	43-1235868....	09/01/2000	RGA Reinsurance Company.....	MO.....	0	61,122
93572.....	43-1235868....	04/01/2003	RGA Reinsurance Company.....	MO.....	0	918,395
93572.....	43-1235868....	01/01/2002	RGA Reinsurance Company.....	MO.....	0	54,318
93572.....	43-1235868....	07/01/2002	RGA Reinsurance Company.....	MO.....	0	30,355
93572.....	43-1235868....	04/01/2004	RGA Reinsurance Company.....	MO.....	0	25,385
93572.....	43-1235868....	10/01/2007	RGA Reinsurance Company.....	MO.....	0	88,272
64688.....	75-6020048....	10/10/2009	SCOR Global Life American Reins Co.....	DE.....	17,675	227,596
64688.....	75-6020048....	10/01/2007	SCOR Global Life American Reins Co.....	DE.....	0	88,272
64688.....	75-6020048....	01/01/2014	SCOR Global Life American Reins Co.....	DE.....	0	91,675
87572.....	23-2038295....	01/01/2006	Scottish Re USA Inc.....	DE.....	0	94,529
68713.....	84-0499703....	07/31/2001	Security Life of Denver Insurance Co.....	CO.....	30,306	97,520
68713.....	84-0499703....	04/01/2004	Security Life of Denver Insurance Co.....	CO.....	40,500	243,000
68713.....	84-0499703....	07/01/1997	Security Life of Denver Insurance Co.....	CO.....	0	80,000
68713.....	84-0499703....	05/01/2002	Security Life of Denver Insurance Co.....	CO.....	184,301	359,484
68713.....	84-0499703....	04/01/2004	Security Life of Denver Insurance Co.....	CO.....	0	117,393
68713.....	84-0499703....	01/01/2003	Security Life of Denver Insurance Co.....	CO.....	0	18,000

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE S - PART 2

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

1	2	3	4	5	6	7
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Paid Losses	Unpaid Losses
68713.....	84-0499703....	04/01/2003	Security Life of Denver Insurance Co.....	CO.....	0	94,500
68713.....	84-0499703....	10/01/1995	Security Life of Denver Insurance Co.....	CO.....	0	155,897
68713.....	84-0499703....	01/01/1994	Security Life of Denver Insurance Co.....	CO.....	0	5,481
68713.....	84-0499703....	09/01/2000	Security Life of Denver Insurance Co.....	CO.....	0	4,258
68713.....	84-0499703....	04/01/2003	Security Life of Denver Insurance Co.....	CO.....	0	918,395
68713.....	84-0499703....	01/01/2002	Security Life of Denver Insurance Co.....	CO.....	0	59,667
68713.....	84-0499703....	07/01/2002	Security Life of Denver Insurance Co.....	CO.....	0	39,283
82627.....	06-0839705....	06/04/2007	Swiss Re Life & Health America, Inc.....	MO.....	942,760	1,362,500
82627.....	06-0839705....	07/01/1997	Swiss Re Life & Health America, Inc.....	MO.....	22,939	240,000
82627.....	06-0839705....	01/01/2010	Swiss Re Life & Health America, Inc.....	MO.....	10,803	105,732
82627.....	06-0839705....	10/01/1995	Swiss Re Life & Health America, Inc.....	MO.....	0	467,691
82627.....	06-0839705....	01/01/1994	Swiss Re Life & Health America, Inc.....	MO.....	0	16,443
82627.....	06-0839705....	09/01/2000	Swiss Re Life & Health America, Inc.....	MO.....	0	3,290
82627.....	06-0839705....	01/01/2002	Swiss Re Life & Health America, Inc.....	MO.....	0	18,117
82627.....	06-0839705....	07/01/2002	Swiss Re Life & Health America, Inc.....	MO.....	0	30,355
82627.....	06-0839705....	01/01/2006	Swiss Re Life & Health America, Inc.....	MO.....	0	189,059
65676.....	35-0472300....	04/15/1999	The Lincoln National Life Insurance Comp.....	IN.....	90,000	0
65676.....	35-0472300....	07/31/2001	The Lincoln National Life Insurance Comp.....	IN.....	30,288	97,461
65676.....	35-0472300....	09/01/2000	The Lincoln National Life Insurance Comp.....	IN.....	0	60,000
65676.....	35-0472300....	01/01/2003	The Lincoln National Life Insurance Comp.....	IN.....	0	18,000
65676.....	35-0472300....	09/01/2000	The Lincoln National Life Insurance Comp.....	IN.....	0	60,027
65676.....	35-0472300....	01/01/2002	The Lincoln National Life Insurance Comp.....	IN.....	0	48,286
65676.....	35-0472300....	07/01/2002	The Lincoln National Life Insurance Comp.....	IN.....	0	20,249
86231.....	39-0989781....	01/01/2006	Transamerica Life Insurance Company.....	IA.....	0	94,500
86231.....	39-0989781....	10/01/2007	Transamerica Life Insurance Company.....	IA.....	0	88,272
80659.....	82-4533188....	04/01/2004	US Business of Canada Life Assurance Company.....	MI.....	0	162,000
80659.....	82-4533188....	04/01/2004	US Business of Canada Life Assurance Company.....	MI.....	0	184,016
0899999.	Total - Life and Annuity Non-Affiliates - U.S. Non-Affiliates.....				13,445,762	15,858,616
1099999.	Total - Life and Annuity Non-Affiliates.....				13,445,762	15,858,616
1199999.	Total - Life and Annuity.....				13,445,762	34,827,027

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

82627.....	06-0839705....	09/01/1967	Westport Ins. Corp.....	MO.....	57,991	0
82627.....	06-0839705....	01/01/1999	General Re Life Corporation.....	CT.....	31,125	62,350
82627.....	06-0839705....	01/01/1999	Munich American Reassurance Company.....	GA.....	56,671	239,461
82627.....	06-0839705....	02/01/1981	Swiss Re Life & Health America, Inc.....	MO.....	3,200,002	819,961
65676.....	35-0472300....	11/01/1988	Paul Revere Life Insurance Company.....	MA.....	389,737	38,707
1999999.	Total - Accident and Health Non-Affiliates - U.S. Non-Affiliates.....				3,735,527	1,160,479
2199999.	Total - Accident and Health Non-Affiliates.....				3,735,527	1,160,479
2299999.	Total - Accident and Health.....				3,735,527	1,160,479
2399999.	Total U.S.....				17,181,289	35,987,506
9999999.	Total.....				17,181,289	35,987,506

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE S - PART 3 - SECTION 1

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
General Account - Authorized - Affiliates - U.S. - Captive														
15855.....	47-4249160....	12/31/2015	Camargo Re Captive Inc.....	OH.....	CO/I.....	XXXL.....	...43,001,949,258	264,260,643	221,687,864	68,012,714	0	0	0	0
15855.....	47-4249160....	12/31/2015	Camargo Re Captive Inc.....	OH.....	CO/I.....	DIS.....	0	6,715,649	5,644,726	2,592,676	0	0	0	0
15855.....	47-4249160....	12/31/2018	Camargo Re Captive Inc.....	OH.....	CO/I.....	XXXL.....	8,003,139,722	18,938,124	14,535,639	181,241	0	0	0	0
15855.....	47-4249160....	12/31/2018	Camargo Re Captive Inc.....	OH.....	CO/I.....	DIS.....	0	591,174	343,891	259	0	0	0	0
0199999.	Total - General Account - Authorized - Affiliates - U.S. - Captive.....						...51,005,088,980	290,505,590	242,212,120	70,786,890	0	0	0	0
General Account - Authorized - Affiliates - U.S. - Other														
67172.....	31-0397080....	10/04/2006	Ohio Natl Life Ins Co.....	OH.....	CO/I.....	OL.....	292,508,345	166,391,661	163,573,804	0	0	0	0	0
67172.....	31-0397080....	10/01/2009	Ohio Natl Life Ins Co.....	OH.....	CO/I.....	OL.....	...1,235,010,201	493,978,924	496,968,571	0	0	0	0	0
67172.....	31-0397080....	09/01/2014	Ohio Natl Life Ins Co.....	OH.....	CO/I.....	OL.....	654,067,900	250,180,505	247,378,737	0	0	0	0	0
0299999.	Total - General Account - Authorized - Affiliates - U.S. - Other.....						...2,181,586,446	910,551,090	907,921,112	0	0	0	0	0
0399999.	Total - General Account - Authorized - Affiliates - U.S. - Total.....						...53,186,675,426	1,201,056,680	1,150,133,232	70,786,890	0	0	0	0
0799999.	Total - General Account - Authorized - Affiliates.....						...53,186,675,426	1,201,056,680	1,150,133,232	70,786,890	0	0	0	0
General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates														
90611.....	41-1366075....	11/01/1983	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	315,746	4,795	24,114	3,734	0	0	0	0
90611.....	41-1366075....	01/01/1987	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	3,336,352	68,818	63,928	53,587	0	0	0	0
90611.....	41-1366075....	06/01/1988	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	375,000	5,477	4,979	4,265	0	0	0	0
90611.....	41-1366075....	02/01/1999	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	2,824,144	39,007	38,229	30,374	0	0	0	0
90611.....	41-1366075....	02/01/1999	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	DIS.....	0	257	236	(15)	0	0	0	0
90611.....	41-1366075....	04/15/1999	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	OL.....	2,391,750	20,072	1,005,138	(1,667)	0	0	0	0
90611.....	41-1366075....	04/15/1999	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	38,553,013	384,279	543,695	299,231	0	0	0	0
90611.....	41-1366075....	04/15/1999	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	DIS.....	0	159,242	197,140	(9,229)	0	0	0	0
90611.....	41-1366075....	03/15/2000	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	153,295	388	63,409	302	0	0	0	0
90611.....	41-1366075....	03/15/2000	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	DIS.....	0	0	1,159	0	0	0	0	0
90611.....	41-1366075....	09/01/2000	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	1,149,995	8,592	8,954	6,690	0	0	0	0
90611.....	41-1366075....	09/01/2000	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	DIS.....	0	167	175	(10)	0	0	0	0
90611.....	41-1366075....	09/30/2000	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	7,795,336	113,124	118,804	88,088	0	0	0	0
90611.....	41-1366075....	07/31/2001	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	XXXL.....	294,302,345	3,384,854	5,369,939	(281,115)	0	0	0	0
90611.....	41-1366075....	07/31/2001	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	15,701,054	114,789	109,367	89,384	0	0	0	0
90611.....	41-1366075....	07/31/2001	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	DIS.....	0	138,826	133,324	(8,046)	0	0	0	0
90611.....	41-1366075....	01/01/2002	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	20,309,689	158,781	155,225	123,639	0	0	0	0
90611.....	41-1366075....	07/01/2002	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	13,217,394	178,621	167,260	139,088	0	0	0	0
90611.....	41-1366075....	01/01/2003	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	XXXL.....	71,968,230	1,380,062	1,695,455	(114,615)	0	0	0	0
90611.....	41-1366075....	01/01/2003	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	10,460,996	95,992	103,363	74,747	0	0	0	0
90611.....	41-1366075....	01/01/2003	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	DIS.....	0	16,555	16,029	(960)	0	0	0	0
90611.....	41-1366075....	04/01/2003	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	XXXL.....	437,881,558	9,253,967	11,140,681	(768,550)	0	0	0	0
90611.....	41-1366075....	04/01/2003	Allianz Life Insurance Co of N Amer.....	MN.....	YRT/I.....	OL.....	70,992,284	823,263	813,383	641,058	0	0	0	0
90611.....	41-1366075....	04/01/2003	Allianz Life Insurance Co of N Amer.....	MN.....	CO/I.....	DIS.....	0	191,487	159,309	(11,098)	0	0	0	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE S - PART 3 - SECTION 1

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

44.1

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....	07/01/1982	General Re Life Corp.....	CT.....	YRT/I.....	OL.....	52,624	2,412	2,177	1,725	0	0	0	0
86258.....	13-2572994....	01/01/1987	General Re Life Corp.....	CT.....	YRT/I.....	OL.....	831,463	36,400	37,947	26,038	0	0	0	0
86258.....	13-2572994....	10/01/1988	General Re Life Corp.....	CT.....	YRT/I.....	OL.....	26,312	148	134	106	0	0	0	0
86258.....	13-2572994....	04/01/2004	General Re Life Corp.....	CT.....	YRT/I.....	OL.....	34,953,197	426,160	428,836	304,838	0	0	0	0
86258.....	13-2572994....	04/01/2004	General Re Life Corp.....	CT.....	CO/I.....	DIS.....	0	354	306	64	0	0	0	0
86258.....	13-2572994....	01/19/2005	General Re Life Corp.....	CT.....	YRT/I.....	OL.....	44,548,561	447,034	414,104	319,770	0	0	0	0
86258.....	13-2572994....	01/19/2005	General Re Life Corp.....	CT.....	CO/I.....	DIS.....	0	4,238	4,498	762	0	0	0	0
86258.....	13-2572994....	12/01/2005	General Re Life Corp.....	CT.....	YRT/I.....	OL.....	18,487,517	73,137	59,579	52,316	0	0	0	0
86258.....	13-2572994....	12/01/2005	General Re Life Corp.....	CT.....	CO/I.....	DIS.....	0	1,922	2,427	346	0	0	0	0
86258.....	13-2572994....	01/01/2006	General Re Life Corp.....	CT.....	YRT/I.....	OL.....	259,068,248	1,362,906	1,289,858	974,907	0	0	0	0
86258.....	13-2572994....	01/01/2006	General Re Life Corp.....	CT.....	CO/I.....	DIS.....	0	42,432	38,613	7,632	0	0	0	0
88340.....	59-2859797....	01/19/2005	Hannover Life Reassur Co of Amer.....	FL.....	YRT/I.....	OL.....	3,460,712	10,028	7,728	9,914	0	0	0	0
88340.....	59-2859797....	09/01/2005	Hannover Life Reassur Co of Amer.....	FL.....	CO/I.....	XXXL.....	148,738,667	3,155,650	3,534,486	298,883	0	0	0	0
88340.....	59-2859797....	09/01/2005	Hannover Life Reassur Co of Amer.....	FL.....	CO/I.....	DIS.....	0	85,874	86,916	6,652	0	0	0	0
88340.....	59-2859797....	12/01/2005	Hannover Life Reassur Co of Amer.....	FL.....	CO/I.....	XXXL.....	61,308,973	1,256,219	1,328,959	118,981	0	0	0	0
88340.....	59-2859797....	12/01/2005	Hannover Life Reassur Co of Amer.....	FL.....	CO/I.....	DIS.....	0	12,003	12,557	930	0	0	0	0
88340.....	59-2859797....	01/01/2006	Hannover Life Reassur Co of Amer.....	FL.....	CO/I.....	XXXL.....	1,001,696,291	20,915,590	22,298,289	1,980,990	0	0	0	0
88340.....	59-2859797....	01/01/2006	Hannover Life Reassur Co of Amer.....	FL.....	YRT/I.....	OL.....	10,773,663	33,820	30,905	33,435	0	0	0	0
88340.....	59-2859797....	01/01/2006	Hannover Life Reassur Co of Amer.....	FL.....	CO/I.....	DIS.....	0	356,653	320,360	27,628	0	0	0	0
88340.....	59-2859797....	01/01/2010	Hannover Life Reassur Co of Amer.....	FL.....	YRT/I.....	OL.....	234,212,894	307,323	275,807	303,821	0	0	0	0
88340.....	59-2859797....	01/01/2014	Hannover Life Reassur Co of Amer.....	FL.....	YRT/I.....	OL.....	20,371,553	104,910	96,189	103,715	0	0	0	0
88340.....	59-2859797....	11/01/2016	Hannover Life Reassur Co of Amer.....	FL.....	YRT/I.....	OL.....	21,840,477	64,864	62,005	64,125	0	0	0	0
88340.....	59-2859797....	01/01/2017	Hannover Life Reassur Co of Amer.....	FL.....	YRT/I.....	OL.....	145,279,059	157,026	121,352	155,237	0	0	0	0
88340.....	59-2859797....	01/01/2017	Hannover Life Reassur Co of Amer.....	FL.....	CO/I.....	DIS.....	0	2,033	0	158	0	0	0	0
88340.....	59-2859797....	01/01/2019	Hannover Life Reassur Co of Amer.....	FL.....	YRT/I.....	OL.....	3,683,698	5,271	31,678	5,211	0	0	0	0
65676.....	35-0472300....	03/18/1982	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	2,978,501	194,512	426,801	149,214	0	0	0	0
65676.....	35-0472300....	03/09/1998	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	3,509,509	99,520	86,264	76,343	0	0	0	0
65676.....	35-0472300....	06/01/1998	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	4,454,900	71,427	71,832	54,793	0	0	0	0
65676.....	35-0472300....	08/01/1998	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	32,890	1,925	1,751	1,476	0	0	0	0
65676.....	35-0472300....	02/01/1999	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	4,825,988	45,960	44,540	35,257	0	0	0	0
65676.....	35-0472300....	02/01/1999	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	DIS.....	0	257	236	(4)	0	0	0	0
65676.....	35-0472300....	04/15/1999	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	OL.....	2,391,750	20,072	1,005,138	(2,022)	0	0	0	0
65676.....	35-0472300....	04/15/1999	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	48,163,628	431,365	583,448	330,909	0	0	0	0
65676.....	35-0472300....	04/15/1999	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	DIS.....	0	159,268	197,189	(2,742)	0	0	0	0
65676.....	35-0472300....	03/01/2000	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	XXXL.....	2,880,000	17,751	726,563	(1,788)	0	0	0	0
65676.....	35-0472300....	03/01/2000	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	DIS.....	0	1,003	75,495	(17)	0	0	0	0
65676.....	35-0472300....	03/15/2000	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	153,410	388	63,456	298	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
65676.....	35-0472300....	03/15/2000	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	DIS.....	0	0	1,160	0	0	0	0	0
65676.....	35-0472300....	09/01/2000	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	XXXL.....	153,845,901	1,122,762	2,237,296	(113,078)	0	0	0	0
65676.....	35-0472300....	09/01/2000	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	2,001,010	13,641	13,530	10,464	0	0	0	0
65676.....	35-0472300....	09/01/2000	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	DIS.....	0	104,145	186,069	(1,793)	0	0	0	0
65676.....	35-0472300....	09/05/2000	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	36,512,696	263,082	248,194	201,815	0	0	0	0
65676.....	35-0472300....	09/30/2000	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	18,682,419	154,586	158,942	118,586	0	0	0	0
65676.....	35-0472300....	07/01/2001	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	318,881	3,153	2,865	2,419	0	0	0	0
65676.....	35-0472300....	07/31/2001	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	XXXL.....	288,978,363	3,334,318	5,299,349	(335,812)	0	0	0	0
65676.....	35-0472300....	07/31/2001	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	13,806,529	89,814	88,767	68,898	0	0	0	0
65676.....	35-0472300....	07/31/2001	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	DIS.....	0	137,885	132,460	(2,374)	0	0	0	0
65676.....	35-0472300....	01/01/2002	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	20,347,968	161,754	157,505	124,085	0	0	0	0
65676.....	35-0472300....	07/01/2002	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	13,224,200	178,760	167,391	137,130	0	0	0	0
65676.....	35-0472300....	01/01/2003	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	XXXL.....	71,968,230	1,380,062	1,695,455	(138,991)	0	0	0	0
65676.....	35-0472300....	01/01/2003	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	9,851,384	89,210	97,632	68,435	0	0	0	0
65676.....	35-0472300....	01/01/2003	Lincoln Natl Life Ins Co.....	IN.....	CO/I.....	DIS.....	0	16,555	16,029	(285)	0	0	0	0
65676.....	35-0472300....	01/19/2005	Lincoln Natl Life Ins Co.....	IN.....	YRT/I.....	OL.....	7,136,655	42,978	40,375	32,969	0	0	0	0
76694.....	23-2044256....	12/31/2009	London Life Reins Co.....	PA.....	YRT/I.....	OL.....	4,266,096,858	0	0	47,709,291	0	0	0	0
66346.....	58-0828824....	04/01/1984	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	84,199	889	806	870	0	0	0	0
66346.....	58-0828824....	03/01/1998	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	711,972	7,703	7,200	7,541	0	0	0	0
66346.....	58-0828824....	03/09/1998	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	3,509,515	99,520	86,264	97,426	0	0	0	0
66346.....	58-0828824....	06/01/1998	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	4,454,896	71,427	71,832	69,924	0	0	0	0
66346.....	58-0828824....	08/01/1998	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	32,890	1,925	1,751	1,884	0	0	0	0
66346.....	58-0828824....	02/01/1999	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	2,824,149	38,955	38,229	38,136	0	0	0	0
66346.....	58-0828824....	02/01/1999	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	257	236	15	0	0	0	0
66346.....	58-0828824....	04/15/1999	Munich Amer Reassur Co.....	GA.....	CO/I.....	OL.....	2,391,750	20,072	1,005,138	1,221	0	0	0	0
66346.....	58-0828824....	04/15/1999	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	39,323,967	358,321	517,533	350,782	0	0	0	0
66346.....	58-0828824....	04/15/1999	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	159,242	197,140	9,496	0	0	0	0
66346.....	58-0828824....	03/15/2000	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	153,295	388	63,409	380	0	0	0	0
66346.....	58-0828824....	03/15/2000	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	0	1,159	0	0	0	0	0
66346.....	58-0828824....	09/01/2000	Munich Amer Reassur Co.....	GA.....	CO/I.....	XXXL.....	153,019,090	1,115,435	2,193,128	67,855	0	0	0	0
66346.....	58-0828824....	09/01/2000	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	1,657,495	12,383	12,905	12,122	0	0	0	0
66346.....	58-0828824....	09/01/2000	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	104,219	182,451	6,215	0	0	0	0
66346.....	58-0828824....	09/30/2000	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	22,042,050	205,540	212,042	201,216	0	0	0	0
66346.....	58-0828824....	07/31/2001	Munich Amer Reassur Co.....	GA.....	CO/I.....	XXXL.....	578,302,370	6,672,619	10,605,031	405,913	0	0	0	0
66346.....	58-0828824....	07/31/2001	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	23,887,462	151,458	147,662	148,272	0	0	0	0
66346.....	58-0828824....	07/31/2001	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	275,842	264,963	16,449	0	0	0	0
66346.....	58-0828824....	01/01/2002	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	33,439,337	245,684	242,194	240,515	0	0	0	0

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44.3

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount in Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
66346.....	58-0828824....	07/01/2002	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	20,765,718	262,325	245,409	256,805	0	0	0	0
66346.....	58-0828824....	01/01/2003	Munich Amer Reassur Co.....	GA.....	CO/I.....	XXXL.....	72,768,229	1,398,782	1,717,578	85,092	0	0	0	0
66346.....	58-0828824....	01/01/2003	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	11,592,312	107,414	117,769	105,154	0	0	0	0
66346.....	58-0828824....	01/01/2003	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	16,555	16,029	987	0	0	0	0
66346.....	58-0828824....	04/01/2003	Munich Amer Reassur Co.....	GA.....	CO/I.....	XXXL.....	1,085,774,958	22,086,350	26,580,163	1,343,571	0	0	0	0
66346.....	58-0828824....	04/01/2003	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	107,612,149	990,319	962,917	969,483	0	0	0	0
66346.....	58-0828824....	04/01/2003	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	359,569	280,750	21,442	0	0	0	0
66346.....	58-0828824....	04/01/2004	Munich Amer Reassur Co.....	GA.....	CO/I.....	XXXL.....	1,040,457,440	24,548,102	28,414,721	1,493,326	0	0	0	0
66346.....	58-0828824....	04/01/2004	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	89,185,401	602,996	926,856	590,309	0	0	0	0
66346.....	58-0828824....	04/01/2004	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	270,896	263,713	16,154	0	0	0	0
66346.....	58-0828824....	01/19/2005	Munich Amer Reassur Co.....	GA.....	CO/I.....	XXXL.....	562,467,752	13,380,908	16,157,380	813,996	0	0	0	0
66346.....	58-0828824....	01/19/2005	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	123,793,717	968,507	888,912	948,130	0	0	0	0
66346.....	58-0828824....	01/19/2005	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	355,973	382,570	21,228	0	0	0	0
66346.....	58-0828824....	07/01/2005	Munich Amer Reassur Co.....	GA.....	CO/I.....	XXXL.....	73,840,547	2,054,417	2,705,071	124,976	0	0	0	0
66346.....	58-0828824....	07/01/2005	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	55,629,200	201,876	192,049	197,629	0	0	0	0
66346.....	58-0828824....	07/01/2005	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	29,688	36,958	1,770	0	0	0	0
66346.....	58-0828824....	09/01/2005	Munich Amer Reassur Co.....	GA.....	CO/I.....	XXXL.....	140,400,858	3,121,647	3,716,346	189,898	0	0	0	0
66346.....	58-0828824....	09/01/2005	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	88,650,754	273,087	245,059	267,341	0	0	0	0
66346.....	58-0828824....	09/01/2005	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	166,730	170,067	9,943	0	0	0	0
66346.....	58-0828824....	12/01/2005	Munich Amer Reassur Co.....	GA.....	CO/I.....	XXXL.....	54,380,387	1,093,415	1,184,506	66,515	0	0	0	0
66346.....	58-0828824....	12/01/2005	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	46,012,033	165,931	135,019	162,440	0	0	0	0
66346.....	58-0828824....	12/01/2005	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	18,653	20,342	1,112	0	0	0	0
66346.....	58-0828824....	01/01/2006	Munich Amer Reassur Co.....	GA.....	CO/I.....	XXXL.....	552,555,730	9,802,799	10,848,777	596,330	0	0	0	0
66346.....	58-0828824....	01/01/2006	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	84,663,703	934,865	890,116	915,196	0	0	0	0
66346.....	58-0828824....	01/01/2006	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	214,535	192,289	12,793	0	0	0	0
66346.....	58-0828824....	06/04/2007	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	1,512,500	5,540	4,948	5,423	0	0	0	0
66346.....	58-0828824....	10/01/2007	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	100,243,835	904,164	899,725	885,141	0	0	0	0
66346.....	58-0828824....	10/01/2007	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	858	1,286	51	0	0	0	0
66346.....	58-0828824....	10/10/2009	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	269,889,337	1,842,981	1,666,473	1,804,204	0	0	0	0
66346.....	58-0828824....	10/10/2009	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	21,319	20,968	1,271	0	0	0	0
66346.....	58-0828824....	04/01/2011	Munich Amer Reassur Co.....	GA.....	CO/I.....	XXXL.....	6,641,010,385	144,262,742	146,907,814	8,775,887	0	0	0	0
66346.....	58-0828824....	04/01/2011	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	1,596,095	1,431,159	95,180	0	0	0	0
66346.....	58-0828824....	01/01/2014	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	69,980,151	208,004	196,183	203,627	0	0	0	0
66346.....	58-0828824....	01/01/2017	Munich Amer Reassur Co.....	GA.....	YRT/I.....	OL.....	218,004,660	127,497	115,692	124,815	0	0	0	0
66346.....	58-0828824....	01/01/2017	Munich Amer Reassur Co.....	GA.....	CO/I.....	DIS.....	0	5,708	0	340	0	0	0	0
93572.....	43-1235868....	01/01/1977	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	1,165,000	14,877	27,814	12,398	0	0	0	0
93572.....	43-1235868....	01/01/1983	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	400,000	6,761	6,127	5,634	0	0	0	0

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1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount in Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
93572.....	43-1235868....	01/01/1983	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	279,670	275,608	(3,519)	0	0	0	0
93572.....	43-1235868....	02/01/1983	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	2,157,731	57,877	55,580	48,232	0	0	0	0
93572.....	43-1235868....	01/01/1984	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	505,193	5,900	14,970	4,917	0	0	0	0
93572.....	43-1235868....	06/01/1984	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	3,631,074	175,422	233,532	146,190	0	0	0	0
93572.....	43-1235868....	01/01/1987	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	44,283,473	992,748	1,051,813	827,321	0	0	0	0
93572.....	43-1235868....	05/01/1988	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	425,000	6,235	7,797	5,196	0	0	0	0
93572.....	43-1235868....	11/14/1991	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	7,003,787	58,272	63,079	48,562	0	0	0	0
93572.....	43-1235868....	01/01/1994	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	11,018,189	149,185	261,716	124,325	0	0	0	0
93572.....	43-1235868....	10/01/1995	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	20,554,539	431,405	444,063	359,518	0	0	0	0
93572.....	43-1235868....	10/01/1995	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	17,846	18,421	(225)	0	0	0	0
93572.....	43-1235868....	07/01/1997	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	14,289,060	370,444	360,046	308,715	0	0	0	0
93572.....	43-1235868....	03/09/1998	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	9,627,967	264,084	230,976	220,078	0	0	0	0
93572.....	43-1235868....	06/01/1998	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	9,962,284	145,787	145,919	121,494	0	0	0	0
93572.....	43-1235868....	08/01/1998	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	65,780	3,849	3,502	3,208	0	0	0	0
93572.....	43-1235868....	02/01/1999	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	5,221,355	68,748	65,814	57,292	0	0	0	0
93572.....	43-1235868....	02/01/1999	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	385	355	(5)	0	0	0	0
93572.....	43-1235868....	04/15/1999	RGA Reins Co.....	MO.....	CO/I.....	OL.....	2,391,750	20,072	1,005,138	(3,934)	0	0	0	0
93572.....	43-1235868....	04/15/1999	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	71,300,430	659,624	1,079,184	549,708	0	0	0	0
93572.....	43-1235868....	04/15/1999	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	176,841	229,591	(2,225)	0	0	0	0
93572.....	43-1235868....	03/15/2000	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	230,000	582	384,503	485	0	0	0	0
93572.....	43-1235868....	03/15/2000	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	0	1,739	0	0	0	0	0
93572.....	43-1235868....	09/01/2000	RGA Reins Co.....	MO.....	CO/I.....	XXXL.....	153,019,085	1,115,435	2,193,128	(218,624)	0	0	0	0
93572.....	43-1235868....	09/01/2000	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	1,725,500	12,891	13,434	10,743	0	0	0	0
93572.....	43-1235868....	09/01/2000	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	104,229	182,462	(1,312)	0	0	0	0
93572.....	43-1235868....	09/30/2000	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	30,269,153	628,197	588,433	523,517	0	0	0	0
93572.....	43-1235868....	07/31/2001	RGA Reins Co.....	MO.....	CO/I.....	XXXL.....	300,878,363	3,414,270	5,410,348	(669,194)	0	0	0	0
93572.....	43-1235868....	07/31/2001	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	36,874,920	266,832	207,242	222,368	0	0	0	0
93572.....	43-1235868....	07/31/2001	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	137,966	132,562	(1,736)	0	0	0	0
93572.....	43-1235868....	01/01/2002	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	44,908,989	1,040,406	917,879	867,038	0	0	0	0
93572.....	43-1235868....	07/01/2002	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	20,739,071	452,366	421,892	376,985	0	0	0	0
93572.....	43-1235868....	01/01/2003	RGA Reins Co.....	MO.....	CO/I.....	XXXL.....	73,593,230	1,463,418	1,796,699	(286,829)	0	0	0	0
93572.....	43-1235868....	01/01/2003	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	15,423,648	149,066	163,641	124,226	0	0	0	0
93572.....	43-1235868....	01/01/2003	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	16,555	16,029	(208)	0	0	0	0
93572.....	43-1235868....	04/01/2003	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	67,754,579	1,457,728	1,436,769	1,214,819	0	0	0	0
93572.....	43-1235868....	04/01/2003	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	57,078	58,391	(718)	0	0	0	0
93572.....	43-1235868....	04/01/2004	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	101,712,874	1,096,795	1,021,674	914,030	0	0	0	0
93572.....	43-1235868....	04/01/2004	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	354	306	(4)	0	0	0	0

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount in Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
93572.....	43-1235868....	01/19/2005	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	67,918,725	781,523	716,999	651,293	0	0	0	0
93572.....	43-1235868....	01/19/2005	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	4,238	4,498	(53)	0	0	0	0
93572.....	43-1235868....	06/04/2007	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	6,130,279	9,594	8,469	7,996	0	0	0	0
93572.....	43-1235868....	10/01/2007	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	114,207,511	1,133,579	1,314,372	944,685	0	0	0	0
93572.....	43-1235868....	10/01/2007	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	494	901	(6)	0	0	0	0
93572.....	43-1235868....	07/01/2008	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	8,922,262	27,822	25,875	23,186	0	0	0	0
93572.....	43-1235868....	10/10/2009	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	244,969,902	2,254,741	2,184,660	1,879,021	0	0	0	0
93572.....	43-1235868....	10/10/2009	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	20,857	20,968	(262)	0	0	0	0
93572.....	43-1235868....	01/01/2014	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	46,546,658	266,172	247,817	221,818	0	0	0	0
93572.....	43-1235868....	01/01/2017	RGA Reins Co.....	MO.....	YRT/I.....	OL.....	363,465,495	339,500	183,620	282,927	0	0	0	0
93572.....	43-1235868....	01/01/2017	RGA Reins Co.....	MO.....	CO/I.....	DIS.....	0	9,368	0	(118)	0	0	0	0
93572.....	43-1235868....	07/01/2019	RGA Reins Co.....	MO.....	CO/I.....	OL.....	1,745,570,746	1,073,820,299	1,059,389,391	(1,188,996)	0	0	0	0
93572.....	43-1235868....	07/01/2019	RGA Reins Co.....	MO.....	CO/I.....	FA.....	0	20,260,982	23,120,065	0	0	0	0	0
64688.....	75-6020048....	04/01/2004	SCOR Global Life Amer Reins Co.....	DE.....	YRT/I.....	OL.....	3,390,318	29,950	25,285	28,893	0	0	0	0
64688.....	75-6020048....	01/19/2005	SCOR Global Life Amer Reins Co.....	DE.....	YRT/I.....	OL.....	1,355,075	5,189	4,406	5,005	0	0	0	0
64688.....	75-6020048....	01/01/2006	SCOR Global Life Amer Reins Co.....	DE.....	YRT/I.....	OL.....	6,658,285	30,392	39,623	29,319	0	0	0	0
64688.....	75-6020048....	10/01/2007	SCOR Global Life Amer Reins Co.....	DE.....	YRT/I.....	OL.....	45,178,851	719,438	703,360	694,042	0	0	0	0
64688.....	75-6020048....	10/10/2009	SCOR Global Life Amer Reins Co.....	DE.....	YRT/I.....	OL.....	148,581,807	2,073,246	1,880,492	2,000,061	0	0	0	0
64688.....	75-6020048....	10/10/2009	SCOR Global Life Amer Reins Co.....	DE.....	CO/I.....	DIS.....	0	20,396	20,968	4,206	0	0	0	0
64688.....	75-6020048....	01/01/2014	SCOR Global Life Amer Reins Co.....	DE.....	YRT/I.....	OL.....	63,188,373	251,366	295,010	242,493	0	0	0	0
97071.....	13-3126819....	06/04/2007	SCOR Global Life USA Reins Co.....	DE.....	YRT/I.....	OL.....	9,598,156	26,639	23,153	30,018	0	0	0	0
97071.....	13-3126819....	10/01/2007	SCOR Global Life USA Reins Co.....	DE.....	YRT/I.....	OL.....	16,377,842	46,461	58,679	52,355	0	0	0	0
97071.....	13-3126819....	10/01/2007	SCOR Global Life USA Reins Co.....	DE.....	CO/I.....	DIS.....	0	297	541	232	0	0	0	0
97071.....	13-3126819....	10/10/2009	SCOR Global Life USA Reins Co.....	DE.....	YRT/I.....	OL.....	210,009,127	1,570,554	1,560,854	1,769,801	0	0	0	0
97071.....	13-3126819....	10/10/2009	SCOR Global Life USA Reins Co.....	DE.....	CO/I.....	DIS.....	0	20,857	20,968	16,315	0	0	0	0
97071.....	13-3126819....	01/01/2017	SCOR Global Life USA Reins Co.....	DE.....	YRT/I.....	OL.....	511,759,264	251,696	200,241	283,627	0	0	0	0
97071.....	13-3126819....	01/01/2017	SCOR Global Life USA Reins Co.....	DE.....	CO/I.....	DIS.....	0	10,916	0	8,539	0	0	0	0
87572.....	23-2038295....	01/19/2005	Scottish Re US Inc.....	DE.....	YRT/I.....	OL.....	7,136,648	42,978	40,375	32,578	0	0	0	0
87572.....	23-2038295....	01/01/2006	Scottish Re US Inc.....	DE.....	YRT/I.....	OL.....	63,147,326	261,606	249,554	198,301	0	0	0	0
68713.....	84-0499703....	08/01/1993	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	458,357	16,730	45,076	17,152	0	0	0	0
68713.....	84-0499703....	01/01/1994	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	8,339,614	106,562	111,038	109,246	0	0	0	0
68713.....	84-0499703....	10/01/1995	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	21,844,267	525,434	528,138	538,670	0	0	0	0
68713.....	84-0499703....	10/01/1995	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	17,846	18,421	210	0	0	0	0
68713.....	84-0499703....	07/01/1997	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	13,171,231	462,407	442,524	474,055	0	0	0	0
68713.....	84-0499703....	03/09/1998	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	7,019,016	198,823	172,526	203,831	0	0	0	0
68713.....	84-0499703....	06/01/1998	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	10,642,821	154,637	157,595	158,532	0	0	0	0
68713.....	84-0499703....	06/01/1998	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	21,039	21,685	247	0	0	0	0

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1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount in Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
68713.....	84-0499703....	06/08/1998	Security Life of Denver Ins Co.....	CO.....	CO/I.....	OL.....	2,025,000	25,472	41,993	938	0	0	0	0
68713.....	84-0499703....	06/08/1998	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	3,184,228	36,936	33,144	37,866	0	0	0	0
68713.....	84-0499703....	06/08/1998	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	21,048	31,210	247	0	0	0	0
68713.....	84-0499703....	08/01/1998	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	107,880	4,983	4,517	5,108	0	0	0	0
68713.....	84-0499703....	02/01/1999	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	4,332,005	58,880	57,692	60,363	0	0	0	0
68713.....	84-0499703....	02/01/1999	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	385	355	5	0	0	0	0
68713.....	84-0499703....	04/15/1999	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	42,093,476	533,940	785,363	547,390	0	0	0	0
68713.....	84-0499703....	04/15/1999	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	52,772	97,303	620	0	0	0	0
68713.....	84-0499703....	03/15/2000	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	230,000	582	95,137	597	0	0	0	0
68713.....	84-0499703....	03/15/2000	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	0	1,739	0	0	0	0	0
68713.....	84-0499703....	09/01/2000	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	2,983,000	20,165	20,552	20,673	0	0	0	0
68713.....	84-0499703....	09/01/2000	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	325	339	4	0	0	0	0
68713.....	84-0499703....	09/30/2000	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	22,775,245	350,742	340,463	359,577	0	0	0	0
68713.....	84-0499703....	07/31/2001	Security Life of Denver Ins Co.....	CO.....	CO/I.....	XXXL.....	289,152,346	3,336,324	5,302,540	122,870	0	0	0	0
68713.....	84-0499703....	07/31/2001	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	21,967,708	164,261	162,546	168,399	0	0	0	0
68713.....	84-0499703....	07/31/2001	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	138,121	132,731	1,622	0	0	0	0
68713.....	84-0499703....	01/01/2002	Security Life of Denver Ins Co.....	CO.....	CO/I.....	XXXL.....	21,509,095	645,656	811,251	23,778	0	0	0	0
68713.....	84-0499703....	01/01/2002	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	33,902,620	372,396	353,378	381,776	0	0	0	0
68713.....	84-0499703....	01/01/2002	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	7,668	7,352	90	0	0	0	0
68713.....	84-0499703....	05/01/2002	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	140,999,160	2,297,979	2,190,272	2,355,864	0	0	0	0
68713.....	84-0499703....	05/01/2002	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	0	29,450	0	0	0	0	0
68713.....	84-0499703....	07/01/2002	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	24,547,195	514,438	468,274	527,396	0	0	0	0
68713.....	84-0499703....	01/01/2003	Security Life of Denver Ins Co.....	CO.....	CO/I.....	XXXL.....	53,459,135	993,809	1,203,008	36,600	0	0	0	0
68713.....	84-0499703....	01/01/2003	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	16,536,567	265,081	269,240	271,758	0	0	0	0
68713.....	84-0499703....	01/01/2003	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	8,887	8,676	104	0	0	0	0
68713.....	84-0499703....	04/01/2003	Security Life of Denver Ins Co.....	CO.....	CO/I.....	XXXL.....	647,326,333	13,172,733	15,840,422	485,124	0	0	0	0
68713.....	84-0499703....	04/01/2003	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	72,878,717	844,752	834,146	866,031	0	0	0	0
68713.....	84-0499703....	04/01/2003	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	237,811	190,579	2,793	0	0	0	0
68713.....	84-0499703....	04/01/2003	Security Life of Denver Ins Co.....	CO.....	CO/I.....	AXXX.....	0	11,343,224	11,383,503	417,747	0	0	0	0
68713.....	84-0499703....	04/01/2004	Security Life of Denver Ins Co.....	CO.....	CO/I.....	XXXL.....	632,404,858	14,835,074	16,806,536	546,344	0	0	0	0
68713.....	84-0499703....	04/01/2004	Security Life of Denver Ins Co.....	CO.....	YRT/I.....	OL.....	62,040,329	878,977	854,909	901,118	0	0	0	0
68713.....	84-0499703....	04/01/2004	Security Life of Denver Ins Co.....	CO.....	CO/I.....	DIS.....	0	162,006	150,275	1,903	0	0	0	0
82627.....	06-0839705....	11/01/1981	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	199,972	1,003	882	781	0	0	0	0
82627.....	06-0839705....	01/01/1982	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	360,000	3,044	2,848	2,369	0	0	0	0
82627.....	06-0839705....	06/06/1983	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	105,249	3,296	3,180	2,566	0	0	0	0
82627.....	06-0839705....	06/01/1984	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	1,948,604	68,871	69,054	53,608	0	0	0	0
82627.....	06-0839705....	06/01/1984	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	0	16,077	16,456	1,296	0	0	0	0

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44.7

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount in Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
82627.....	06-0839705....	01/01/1987	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	26,156,687	666,852	676,090	519,064	0	0	0	0
82627.....	06-0839705....	01/01/1990	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	900,000	6,124	5,553	4,767	0	0	0	0
82627.....	06-0839705....	01/01/1990	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	0	0	774	0	0	0	0	0
82627.....	06-0839705....	11/14/1991	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	7,558,444	118,934	132,550	92,576	0	0	0	0
82627.....	06-0839705....	08/01/1993	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	879,351	26,110	53,876	20,323	0	0	0	0
82627.....	06-0839705....	01/01/1994	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	27,313,259	347,050	380,359	270,136	0	0	0	0
82627.....	06-0839705....	10/01/1995	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	57,904,302	1,251,451	1,298,755	974,104	0	0	0	0
82627.....	06-0839705....	10/01/1995	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	0	53,959	55,648	4,350	0	0	0	0
82627.....	06-0839705....	07/01/1997	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	29,122,904	817,117	814,341	636,027	0	0	0	0
82627.....	06-0839705....	03/09/1998	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	15,353,638	411,379	356,974	320,209	0	0	0	0
82627.....	06-0839705....	06/01/1998	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	18,240,591	291,250	292,079	226,703	0	0	0	0
82627.....	06-0839705....	08/01/1998	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	131,561	7,699	7,004	5,993	0	0	0	0
82627.....	06-0839705....	02/01/1999	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	4,237,282	58,448	57,357	45,494	0	0	0	0
82627.....	06-0839705....	02/01/1999	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	0	385	355	31	0	0	0	0
82627.....	06-0839705....	04/15/1999	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	42,418,694	530,037	795,128	412,570	0	0	0	0
82627.....	06-0839705....	04/15/1999	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	0	52,772	97,303	4,254	0	0	0	0
82627.....	06-0839705....	03/15/2000	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	230,000	582	95,137	453	0	0	0	0
82627.....	06-0839705....	03/15/2000	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	0	0	1,739	0	0	0	0	0
82627.....	06-0839705....	09/01/2000	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	1,725,500	12,891	13,434	10,034	0	0	0	0
82627.....	06-0839705....	09/01/2000	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	0	251	262	20	0	0	0	0
82627.....	06-0839705....	09/05/2000	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	36,512,609	263,081	248,193	204,777	0	0	0	0
82627.....	06-0839705....	09/29/2000	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	526,243	89,216	75,492	69,444	0	0	0	0
82627.....	06-0839705....	09/30/2000	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	11,399,281	170,072	178,427	132,380	0	0	0	0
82627.....	06-0839705....	10/02/2000	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	1,929,111	13,400	12,840	10,430	0	0	0	0
82627.....	06-0839705....	07/31/2001	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	11,661,733	92,883	113,745	72,298	0	0	0	0
82627.....	06-0839705....	07/31/2001	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	0	245	306	20	0	0	0	0
82627.....	06-0839705....	01/01/2002	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	24,704,837	232,380	211,782	180,880	0	0	0	0
82627.....	06-0839705....	07/01/2002	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	14,928,059	248,917	233,877	193,752	0	0	0	0
82627.....	06-0839705....	01/01/2003	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	12,145,371	134,893	150,561	104,998	0	0	0	0
82627.....	06-0839705....	01/19/2005	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	7,136,659	42,978	40,375	33,453	0	0	0	0
82627.....	06-0839705....	01/01/2006	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	126,294,708	523,213	499,109	407,258	0	0	0	0
82627.....	06-0839705....	07/01/2008	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	13,138,659	41,646	38,371	32,416	0	0	0	0
82627.....	06-0839705....	01/01/2010	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	234,300,536	307,220	275,703	239,133	0	0	0	0
82627.....	06-0839705....	07/01/2011	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	XXXL.....	6,641,010,211	144,262,738	146,907,809	8,753,920	0	0	0	0
82627.....	06-0839705....	07/01/2011	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	0	1,596,095	1,431,159	128,664	0	0	0	0
82627.....	06-0839705....	03/19/2013	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	10,524,852	2,816	2,626	2,192	0	0	0	0
82627.....	06-0839705....	01/01/2014	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	98,830,840	508,769	452,750	396,015	0	0	0	0
82627.....	06-0839705....	01/01/2017	Swiss Re Life & Hlth Amer Inc.....	MO.....	CO/I.....	DIS.....	0	7,371	0	594	0	0	0	0

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
82627.....	06-0839705....	01/01/2017	Swiss Re Life & Hlth Amer Inc.....	MO.....	YRT/I.....	OL.....	398,389,585	255,740	248,636	199,062	0	0	0	0
86231.....	39-0989781....	01/01/2006	Transamerica Life Ins Co.....	IA.....	CO/I.....	XXXL.....	1,272,711,056	26,238,482	28,002,408	1,651,363	0	0	0	0
86231.....	39-0989781....	01/01/2006	Transamerica Life Ins Co.....	IA.....	YRT/I.....	OL.....	109,831,439	1,431,589	1,340,331	1,627,456	0	0	0	0
86231.....	39-0989781....	01/01/2006	Transamerica Life Ins Co.....	IA.....	CO/I.....	DIS.....	0	433,076	388,983	16,277	0	0	0	0
86231.....	39-0989781....	06/04/2007	Transamerica Life Ins Co.....	IA.....	YRT/I.....	OL.....	3,484,347	11,321	10,228	12,870	0	0	0	0
86231.....	39-0989781....	10/01/2007	Transamerica Life Ins Co.....	IA.....	YRT/I.....	OL.....	115,716,112	1,255,637	1,212,320	1,427,431	0	0	0	0
86231.....	39-0989781....	10/01/2007	Transamerica Life Ins Co.....	IA.....	CO/I.....	DIS.....	0	593	1,081	22	0	0	0	0
80659.....	82-4533188....	08/01/1982	US Business of Canada Life Assur Co.....	MI.....	YRT/I.....	OL.....	526,243	13,873	12,631	13,190	0	0	0	0
80659.....	82-4533188....	09/10/1987	US Business of Canada Life Assur Co.....	MI.....	YRT/I.....	OL.....	157,873	6,145	5,305	5,842	0	0	0	0
80659.....	82-4533188....	04/01/2004	US Business of Canada Life Assur Co.....	MI.....	CO/I.....	XXXL.....	414,620,557	9,620,210	11,068,080	524,807	0	0	0	0
80659.....	82-4533188....	04/01/2004	US Business of Canada Life Assur Co.....	MI.....	YRT/I.....	OL.....	15,633,560	64,240	55,942	61,075	0	0	0	0
80659.....	82-4533188....	04/01/2004	US Business of Canada Life Assur Co.....	MI.....	CO/I.....	DIS.....	0	110,886	105,857	6,857	0	0	0	0
80659.....	82-4533188....	01/19/2005	US Business of Canada Life Assur Co.....	MI.....	CO/I.....	XXXL.....	321,809,248	7,942,984	8,983,910	433,310	0	0	0	0
80659.....	82-4533188....	01/19/2005	US Business of Canada Life Assur Co.....	MI.....	YRT/I.....	OL.....	10,851,684	25,851	20,479	24,577	0	0	0	0
80659.....	82-4533188....	01/19/2005	US Business of Canada Life Assur Co.....	MI.....	CO/I.....	DIS.....	0	154,530	158,465	9,555	0	0	0	0
80659.....	82-4533188....	07/01/2005	US Business of Canada Life Assur Co.....	MI.....	CO/I.....	XXXL.....	125,353,906	4,061,176	4,640,365	221,547	0	0	0	0
80659.....	82-4533188....	07/01/2005	US Business of Canada Life Assur Co.....	MI.....	CO/I.....	DIS.....	0	17,840	20,353	1,103	0	0	0	0
80659.....	82-4533188....	09/01/2005	US Business of Canada Life Assur Co.....	MI.....	CO/I.....	XXXL.....	168,229,635	3,708,411	4,136,436	202,303	0	0	0	0
80659.....	82-4533188....	09/01/2005	US Business of Canada Life Assur Co.....	MI.....	CO/I.....	DIS.....	0	81,718	80,994	5,053	0	0	0	0
80659.....	82-4533188....	01/01/2014	US Business of Canada Life Assur Co.....	MI.....	YRT/I.....	OL.....	54,912,028	246,400	216,174	234,260	0	0	0	0
80659.....	82-4533188....	11/01/2016	US Business of Canada Life Assur Co.....	MI.....	YRT/I.....	OL.....	21,900,106	65,047	62,183	61,842	0	0	0	0
80659.....	82-4533188....	01/01/2017	US Business of Canada Life Assur Co.....	MI.....	YRT/I.....	OL.....	282,967,735	143,680	85,987	136,601	0	0	0	0
80659.....	82-4533188....	01/01/2017	US Business of Canada Life Assur Co.....	MI.....	CO/I.....	DIS.....	0	3,436	0	212	0	0	0	0
0899999.....	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						38,038,349,691	1,677,101,736	1,720,464,053	121,683,690	0	0	0	0
1099999.....	Total - General Account - Authorized - Non-Affiliates.....						38,038,349,691	1,677,101,736	1,720,464,053	121,683,690	0	0	0	0
1199999.....	Total - General Account - Authorized.....						91,225,025,117	2,878,158,416	2,870,597,285	192,470,580	0	0	0	0
General Account - Unauthorized - Affiliates - U.S. - Captive														
15363.....	80-0955278....	12/31/2013	Kenwood Re Inc.....	VT.....	CO/I.....	XXXL.....	42,678,193,630	560,961,223	559,911,205	55,581,039	0	0	0	0
15363.....	80-0955278....	12/31/2013	Kenwood Re Inc.....	VT.....	CO/I.....	DIS.....	0	6,610,487	6,837,208	1,440,750	0	0	0	0
13575.....	26-3791519....	05/01/2011	Montgomery Re Inc.....	VT.....	CO/I.....	AXXX.....	422,833,411	190,506,355	183,749,684	5,369,825	0	0	0	0
13575.....	26-3791519....	07/01/2012	Montgomery Re Inc.....	VT.....	CO/I.....	XXXL.....	8,549,515,135	122,250,564	121,549,856	11,052,807	0	0	0	0
13575.....	26-3791519....	07/01/2012	Montgomery Re Inc.....	VT.....	CO/I.....	DIS.....	0	858,160	899,421	249,614	0	0	0	0
1288888.....	Total - General Account - Unauthorized - Affiliates - U.S. - Captive.....						51,650,542,176	881,186,789	872,947,374	73,694,035	0	0	0	0
1499999.....	Total - General Account - Unauthorized - Affiliates - U.S. - Total.....						51,650,542,176	881,186,789	872,947,374	73,694,035	0	0	0	0
1899999.....	Total - General Account - Unauthorized - Affiliates.....						51,650,542,176	881,186,789	872,947,374	73,694,035	0	0	0	0
General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates														
00000.....	AA-3190770...	01/01/2006	Chubb Tempest Reins LTD.....	BMU.....	YRT/I.....	OL.....	38,177,098	368,739	360,932	339,551	0	0	0	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE S - PART 3 - SECTION 1

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

1	2	3	4	5	6	7	8	Reserve Credit Taken		11	Outstanding Surplus Relief		14	15
								9	10		12	13		
NAIC Company Code	ID Number	Effective Date	Name of Company	Domiciliary Jurisdiction	Type of Reinsurance Ceded	Type of Business Ceded	Amount in Force at End of Year	Current Year	Prior Year	Premiums	Current Year	Prior Year	Modified Coinsurance Reserve	Funds Withheld Under Coinsurance
00000.....	AA-3190770...	01/01/2006	Chubb Tempest Reins LTD.....	BMU.....	YRT/I.....	DIS.....	0	0	40	0	0	0	0	0
2099999.	Total - General Account - Unauthorized - Non-Affiliates - Non-U.S. Non-Affiliates.....						38,177,098	368,739	360,972	339,551	0	0	0	0
2199999.	Total - General Account - Unauthorized - Non-Affiliates.....						38,177,098	368,739	360,972	339,551	0	0	0	0
2299999.	Total - General Account - Unauthorized.....						...51,688,719,274	881,555,528	873,308,346	74,033,586	0	0	0	0
4599999.	Total - General Account - Authorized, Reciprocal Jurisdiction, Unauthorized and Certified.....						.142,913,744,391	3,759,713,944	3,743,905,631	266,504,166	0	0	0	0
9199999.	Total U.S.....						.142,875,567,293	3,759,345,205	3,743,544,659	266,164,615	0	0	0	0
9299999.	Total Non-U.S.....						38,177,098	368,739	360,972	339,551	0	0	0	0
9999999.	Total.....						.142,913,744,391	3,759,713,944	3,743,905,631	266,504,166	0	0	0	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE S - PART 3 - SECTION 2

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

1	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.....	4,329,628	2,555,746	4,335,483	0	0	0	0
66346.....	58-0828824....	.01/01/1999	Munich American Reassurance Company.....	GA.....	QA/I.....	LTDI.....	7,987,676	3,778,142	11,420,616	0	0	0	0
82627.....	06-0839705....	.02/01/1981	Swiss Re Life & Health America, Inc.....	MO.....	QA/I.....	LTDI.....	3,228,314	1,431,335	77,128,546	0	0	0	0
67598.....	04-1768571....	.11/01/1988	Paul Revere Life Ins Co.....	MA.....	QA/I.....	LTDI.....	313,208	80,763	10,218,208	0	0	0	0
0899999.	Total - General Account - Authorized - Non-Affiliates - U.S. Non-Affiliates.....						15,858,826	7,845,986	103,102,853	0	0	0	0
1099999.	Total - General Account - Authorized - Non-Affiliates.....						15,858,826	7,845,986	103,102,853	0	0	0	0
1199999.	Total - General Account - Authorized.....						15,858,826	7,845,986	103,102,853	0	0	0	0
4599999.	Total - General Account - Authorized, Reciprocal Jurisdiction, Unauthorized and Certified.....						15,858,826	7,845,986	103,102,853	0	0	0	0
9199999.	Total - U.S.....						15,858,826	7,845,986	103,102,853	0	0	0	0
9999999.	Total.....						15,858,826	7,845,986	103,102,853	0	0	0	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION

SCHEDULE S - PART 4

Reinsurance Ceded To Unauthorized Companies

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
NAIC Company Code	ID Number	Effective Date	Name of Reinsurer	Reserve Credit Taken	Paid and Unpaid Losses Recoverable (Debit)	Other Debits	Total (Cols. 5 + 6 + 7)	Letters of Credit	Issuing or Confirming Bank Reference Number (a)	Trust Agreements	Funds Deposited by and Withheld from Reinsurers	Other	Miscellaneous Balances (Credit)	Sum of Cols. 9 + 11 + 12 + 13 + 14 But Not in Excess of Col. 8

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

15363.....	80-0955278.	.12/31/2013	Kenwood Re Inc.....	560,961,223	4,708,917	0	565,670,140	0	0.....	256,585,512	0	347,340,253	5,063,035	565,670,140
15363.....	80-0955278.	.12/31/2013	Kenwood Re Inc.....	6,610,487	0	0	6,610,487	0	0.....	7,768,772	0	0	0	6,610,487
13575.....	26-3791519.	.05/01/2011	Montgomery Re.....	190,506,355	154,529	0	190,660,884	0	0.....	183,853,193	0	100,355,702	931,256	190,660,884
13575.....	26-3791519.	.07/01/2012	Montgomery Re.....	122,250,564	6,697,974	0	128,948,538	0	0.....	124,344,333	0	67,872,973	410,621	128,948,538
13575.....	26-3791519.	.07/01/2012	Montgomery Re.....	858,160	0	0	858,160	0	0.....	1,747,136	0	0	0	858,160
0199999.	Total - General Account - Life and Annuity - Affiliates - U.S. - Captive.....			881,186,789	11,561,420	0	892,748,209	0	XXX.....	574,298,946	0	515,568,928	6,404,913	892,748,209
0399999.	Total - General Account - Life and Annuity - Affiliates - U.S. - Total.....			881,186,789	11,561,420	0	892,748,209	0	XXX.....	574,298,946	0	515,568,928	6,404,913	892,748,209
0799999.	Total - General Account - Life and Annuity - Affiliates.....			881,186,789	11,561,420	0	892,748,209	0	XXX.....	574,298,946	0	515,568,928	6,404,913	892,748,209

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

00000.....	AA-3190770	.01/01/2006	Chubb Tempest Reins LTD.....	368,739	0	0	368,739	354,000	0.....	0	0	0	44,450	368,739
0999999.	Total - General Account - Life and Annuity - Non-Affiliates - Non-U.S. Non-Affiliates.....			368,739	0	0	368,739	354,000	XXX.....	0	0	0	44,450	368,739
1099999.	Total - General Account - Life and Annuity - Non-Affiliates.....			368,739	0	0	368,739	354,000	XXX.....	0	0	0	44,450	368,739
1199999.	Total - General Account - Life and Annuity.....			881,555,528	11,561,420	0	893,116,948	354,000	XXX.....	574,298,946	0	515,568,928	6,449,363	893,116,948
2399999.	Total - General Account.....			881,555,528	11,561,420	0	893,116,948	354,000	XXX.....	574,298,946	0	515,568,928	6,449,363	893,116,948
3599999.	Total - U.S.....			881,186,789	11,561,420	0	892,748,209	0	XXX.....	574,298,946	0	515,568,928	6,404,913	892,748,209
3699999.	Total - Non-U.S.....			368,739	0	0	368,739	354,000	XXX.....	0	0	0	44,450	368,739
9999999.	Total.....			881,555,528	11,561,420	0	893,116,948	354,000	XXX.....	574,298,946	0	515,568,928	6,449,363	893,116,948

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(a)

Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount
0001.....	2.....	121000248.....	Wells Fargo Bank, National Association.....	35,400
0001.....	2.....	021000089.....	Citibank, N.A.....	35,400
0001.....	2.....	021000021.....	JPMorgan Chase Bank, N.A.....	35,400
0001.....	2.....	026009593.....	Bank of America, N.A.....	35,400
0001.....	2.....	026002574.....	Barclays Bank PLC.....	26,550
0001.....	2.....	021001088.....	HSBC Bank USA, National Association.....	26,550
0001.....	2.....	026009632.....	The Bank of Tokyo-Mitsubishi UFJ, LTD.....	35,400
0001.....	2.....	026009917.....	Australia and New Zealand Banking Group Limited.....	17,700
0001.....	2.....	121000248.....	Wells Fargo Bank, National Association as Fronting Bank for ING Bank N.V., London Branc.....	26,550
0001.....	2.....	011000028.....	State Street Bank and Trust Company.....	17,700
0001.....	2.....	026004093.....	Royal Bank of Canada	26,550
0001.....	2.....	026002561.....	Standard Chartered Bank.....	17,700
0001.....	2.....	021000018.....	The Bank of New York Mellon.....	17,700

OHIO NATIONAL LIFE ASSURANCE CORPORATION

SCHEDULE S - PART 5

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

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

NONE

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE S - PART 6

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

		1	2	3	4	5
		2020	2019	2018	2017	2016
A.	OPERATIONS ITEMS					
1.	Premiums and annuity considerations for life and accident and health contracts.....	282,363	300,459	275,201	281,952	352,829
2.	Commissions and reinsurance expense allowances.....	51,133	64,291	30,383	37,530	39,956
3.	Contract claims.....	276,181	284,378	258,364	210,299	195,567
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.....	0	0	0	0	0
7.	Increase in aggregate reserves for life and accident and health contracts.....	7,992	1,117,089	86,456	106,074	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.....	3,870,663	3,862,670	2,745,582	2,659,125	0
10.	Liability for deposit-type contracts.....	0	0	0	0	0
11.	Contract claims unpaid.....	35,988	35,348	39,509	19,060	22,213
12.	Amounts recoverable on reinsurance.....	17,181	21,400	11,686	9,708	6,436
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).....	0	0	0	0	0
19.	Letters of credit (L).....	354	463	357	356	240
20.	Trust agreements (T).....	574,299	542,682	501,528	497,505	464,858
21.	Other (O).....	515,569	521,277	500,647	471,325	430,353
D.	REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)					
22.	Multiple beneficiary trust.....	0	0	0	0	0
23.	Funds deposited by and withheld from (F).....	0	0	0	0	0
24.	Letters of credit (L).....	0	0	0	0	0
25.	Trust agreements (T).....	0	0	0	0	0
26.	Other (O).....	0	0	0	0	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE S - PART 7

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (Net of Ceded)	2 Restatement Adjustments	3 Restated (Gross of Ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 12).....	2,455,358,332	0	2,455,358,332
2. Reinsurance (Line 16).....	17,748,611	0	17,748,611
3. Premiums and considerations (Line 15).....	127,909,543	0	127,909,543
4. Net credit for ceded reinsurance.....	XXX	3,906,650,292	3,906,650,292
5. All other admitted assets (balance).....	138,360,984	0	138,360,984
6. Total assets excluding Separate Accounts (Line 26).....	2,739,377,470	3,906,650,292	6,646,027,762
7. Separate Account assets (Line 27).....	293,200,671	0	293,200,671
8. Total assets (Line 28).....	3,032,578,141	3,906,650,292	6,939,228,433
LIABILITIES, CAPITAL AND SURPLUS (Page 3)			
9. Contract reserves (Lines 1 and 2).....	2,183,668,846	3,870,662,786	6,054,331,632
10. Liability for deposit-type contracts (Line 3).....	107,819,676	0	107,819,676
11. Claim reserves (Line 4).....	24,085,869	35,987,506	60,073,375
12. Policyholder dividends/member refunds/reserves (Lines 5 through 7).....	0	0	0
13. Premium & annuity considerations received in advance (Line 8).....	800,728	0	800,728
14. Other contract liabilities (Line 9).....	41,185,762	0	41,185,762
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount).....	0	0	0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount).....	0	0	0
17. Reinsurance with certified reinsurers (Line 24.02 inset amount).....	0	0	0
18. Funds held under reinsurance treaties with certified reinsurers (Line 24.03 inset amount).....	0	0	0
19. All other liabilities (balance).....	149,070,326	0	149,070,326
20. Total liabilities excluding Separate Accounts (Line 26).....	2,506,631,207	3,906,650,292	6,413,281,499
21. Separate Account liabilities (Line 27).....	293,200,672	0	293,200,672
22. Total liabilities (Line 28).....	2,799,831,879	3,906,650,292	6,706,482,171
23. Capital & surplus (Line 38).....	232,746,262	XXX	232,746,262
24. Total liabilities, capital & surplus (Line 39).....	3,032,578,141	3,906,650,292	6,939,228,433
NET CREDIT FOR CEDED REINSURANCE			
25. Contract reserves.....	3,870,662,786		
26. Claim reserves.....	35,987,506		
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.....	3,906,650,292		
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.....	3,906,650,292		

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

States, Etc.			Direct Business Only					
			1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1.	Alabama.....	AL.....	5,074,441	240	742,653	0	0	5,817,334
2.	Alaska.....	AK.....	338,371	0	59,661	0	0	398,032
3.	Arizona.....	AZ.....	6,066,801	0	711,623	0	0	6,778,424
4.	Arkansas.....	AR.....	2,942,765	0	247,710	0	0	3,190,475
5.	California.....	CA.....	39,145,593	0	958,917	0	0	40,104,510
6.	Colorado.....	CO.....	9,921,045	0	1,290,201	0	0	11,211,246
7.	Connecticut.....	CT.....	5,420,799	0	356,986	0	0	5,777,785
8.	Delaware.....	DE.....	657,722	0	68,453	0	0	726,175
9.	District of Columbia.....	DC.....	687,205	0	123,227	0	0	810,432
10.	Florida.....	FL.....	34,257,369	0	5,421,737	0	0	39,679,106
11.	Georgia.....	GA.....	11,170,936	0	819,142	0	0	11,990,078
12.	Hawaii.....	HI.....	173,854	0	56,974	0	0	230,828
13.	Idaho.....	ID.....	3,496,569	0	279,526	0	0	3,776,095
14.	Illinois.....	IL.....	12,765,582	0	1,338,948	0	0	14,104,530
15.	Indiana.....	IN.....	5,747,960	0	443,450	0	0	6,191,410
16.	Iowa.....	IA.....	4,232,742	0	222,637	0	0	4,455,379
17.	Kansas.....	KS.....	6,212,128	2,750	513,459	0	0	6,728,337
18.	Kentucky.....	KY.....	4,336,870	0	374,974	0	0	4,711,844
19.	Louisiana.....	LA.....	4,174,875	0	576,167	0	0	4,751,042
20.	Maine.....	ME.....	1,038,900	0	62,663	0	0	1,101,563
21.	Maryland.....	MD.....	8,393,701	270	890,724	0	0	9,284,695
22.	Massachusetts.....	MA.....	8,926,266	0	769,459	0	0	9,695,725
23.	Michigan.....	MI.....	12,782,647	0	1,372,761	0	0	14,155,408
24.	Minnesota.....	MN.....	6,173,539	0	529,281	0	0	6,702,820
25.	Mississippi.....	MS.....	2,302,291	0	207,527	0	0	2,509,818
26.	Missouri.....	MO.....	7,133,998	0	606,685	0	0	7,740,683
27.	Montana.....	MT.....	2,583,212	0	136,870	0	0	2,720,082
28.	Nebraska.....	NE.....	4,174,741	0	215,439	0	0	4,390,180
29.	Nevada.....	NV.....	1,858,256	0	191,132	0	0	2,049,388
30.	New Hampshire.....	NH.....	2,334,170	0	185,550	0	0	2,519,720
31.	New Jersey.....	NJ.....	10,803,248	0	1,273,422	0	0	12,076,670
32.	New Mexico.....	NM.....	1,126,994	0	92,462	0	0	1,219,456
33.	New York.....	NY.....	879,446	5,636	148,890	0	0	1,033,972
34.	North Carolina.....	NC.....	11,172,198	2,180	1,717,393	0	0	12,891,771
35.	North Dakota.....	ND.....	1,066,018	0	82,452	0	0	1,148,470
36.	Ohio.....	OH.....	28,138,423	0	2,279,416	0	24,340,639	54,758,478
37.	Oklahoma.....	OK.....	4,792,323	0	570,892	0	0	5,363,215
38.	Oregon.....	OR.....	5,726,762	0	487,998	0	0	6,214,760
39.	Pennsylvania.....	PA.....	14,764,668	39,285	1,785,432	0	1,004,259	17,593,644
40.	Rhode Island.....	RI.....	1,689,076	0	132,285	0	0	1,821,361
41.	South Carolina.....	SC.....	4,367,288	0	518,119	0	0	4,885,407
42.	South Dakota.....	SD.....	364,442	0	124,382	0	325,000	813,824
43.	Tennessee.....	TN.....	14,963,699	0	1,771,476	0	0	16,735,175
44.	Texas.....	TX.....	33,180,381	0	2,935,036	0	0	36,115,417
45.	Utah.....	UT.....	7,027,693	0	754,825	0	0	7,782,518
46.	Vermont.....	VT.....	528,440	0	57,926	0	0	586,366
47.	Virginia.....	VA.....	9,634,984	200	800,573	0	0	10,435,757
48.	Washington.....	WA.....	7,143,161	0	710,616	0	0	7,853,777
49.	West Virginia.....	WV.....	1,324,623	10,000	262,254	0	0	1,596,877
50.	Wisconsin.....	WI.....	5,753,787	0	689,578	0	0	6,443,365
51.	Wyoming.....	WY.....	828,065	0	62,640	0	0	890,705
52.	American Samoa.....	AS.....	0	0	0	0	0	0
53.	Guam.....	GU.....	73,992	0	0	0	0	73,992
54.	Puerto Rico.....	PR.....	3,643,901	0	1,160,566	0	0	4,804,467
55.	US Virgin Islands.....	VI.....	2,725	0	2,499	0	0	5,224
56.	Northern Mariana Islands.....	MP.....	0	0	0	0	0	0
57.	Canada.....	CAN.....	4,949	0	1,701	0	0	6,650
58.	Aggregate Other Alien.....	OT.....	27,763	0	2,142	0	0	29,905
59.	Totals.....		383,554,397	60,561	38,199,511	0	25,669,898	447,484,367

OHIO NATIONAL LIFE ASSURANCE CORPORATION

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
Members															
0704	Ohio National Mutual Holdings, Inc.	0.....	31-1614095..	0	0		Ohio National Mutual Holdings, Inc.....	OH.....	UIP.....		Ownership, Board of Directors, Management	0.000		N.....	0.....
0704	Ohio National Mutual Holdings, Inc.	0.....	31-1614097..	0	0		Ohio National Financial Sevice, 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 ASSURANCE CORPORATION

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
0704	Ohio National Mutual Holdings, Inc.	0.....	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.....	UDP.....	Ohio National Financial Services, Inc.....	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.....	N.....	0.....
0704	Ohio National Mutual Holdings, Inc.	89206...	31-0962495..	0	0		Ohio National Life Assurance Corporation.....	OH.....	RE.....	The Ohio National Life Insurance Company....	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.....	N.....	0.....
0704	Ohio National Mutual Holdings, Inc.	85472...	13-2740556..	0	0		National Security Life and Annuity Company.....	NY.....	IA.....	The Ohio National Life Insurance Company....	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.....	N.....	0.....
0704	Ohio National Mutual Holdings, Inc.	13575...	26-3791519..	0	0		Montgomery Re, Inc.....	VT.....	IA.....	The Ohio National Life Insurance Company....	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.....	N.....	0.....
0704	Ohio National Mutual Holdings, Inc.	15363...	80-0955278..	0	0		Kenwood Re, Inc.....	VT.....	IA.....	The Ohio National Life Insurance Company....	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.....	N.....	0.....
0704	Ohio National Mutual Holdings, Inc.	15855...	47-4249160..	0	0		Camargo Re Captive, Inc.....	OH.....	IA.....	The Ohio National Life Insurance Company....	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.....	N.....	0.....
0704	Ohio National Mutual Holdings, Inc.	16481...	83-2532656..	0	0		Sunrise Captive Re, LLC.....	OH.....	IA.....	The Ohio National Life Insurance Company....	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.....	N.....	0.....
0704	Ohio National Mutual Holdings, Inc.	0.....	31-1454693..	0	0		Ohio National Investments, Inc.....	OH.....	NIA.....	The Ohio National Life Insurance Company....	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.....	Y.....	0.....

OHIO NATIONAL LIFE ASSURANCE CORPORATION

SCHEDULE Y

PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Group Code	Group Name	NAIC Company Code	ID Number	Federal RSSD	CIK	Name of Securities Exchange if Publicly Traded (U.S. or International)	Names of Parent, Subsidiaries or Affiliates	Domiciliary Location	Relationship to Reporting Entity	Directly Controlled by (Name of Entity/Person)	Type of Control (Ownership Board, Management, Attorney-in-Fact, Influence, Other)	If Control is Ownership Provide Percentage	Ultimate Controlling Entity(ies)/Person(s)	Is an SCA Filing Required? (Y/N)	*
0704	Ohio National Mutual Holdings, Inc.	0.....	31-1454699..	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.....

OHIO NATIONAL LIFE ASSURANCE CORPORATION

SCHEDULE Y

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

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/ (Liability)
Affiliated Transactions												
00000.....	31-1614095.....	Ohio National Mutual Holdings, Inc.....	0	0	0	0	0	0	.....	......0	0	0
00000.....	31-1614097.....	Ohio National Financial Services, Inc.....	0	0	0	0	0	0	.....	......0	0	0
67172.....	31-0397080.....	The Ohio National Life Insurance Company.....	12,000,000	0	0	0	59,691,538	(25,233,494)	.....	......0	46,458,044	(911,541,756)
89206.....	31-0962495.....	Ohio National Life Assurance Corporation.....	(12,000,000)	0	0	0	(59,691,596)	54,710,442	.....	......0	(16,981,154)	2,101,211,880
00000.....	31-1702660.....	ON Global Holdings, SMLLC.....	0	0	0	0	0	0	.....	......0	0	0
00000.....	00-0000000.....	Ohio National Sudamerica S.A.....	0	0	0	0	0	0	.....	......0	0	0
00000.....	00-0000000.....	Ohio National Seguros de Vida S.A.....	0	0	0	0	0	0	.....	......0	0	0
00000.....	06-1187459.....	Fiduciary Capital Management, Inc.....	0	0	0	0	0	0	.....	......0	0	0
00000.....	31-1684349.....	ON Flight, Inc.....	0	0	0	0	0	0	.....	......0	0	0
85472.....	13-2740556.....	National Security Life and Annuity Co.....	0	0	0	0	0	0	.....	......0	0	0
00000.....	31-1454693.....	Ohio National Investments, Inc.....	0	0	0	0	0	0	.....	......0	0	0
00000.....	31-1454699.....	Ohio National Equities, Inc.....	0	0	0	0	0	0	.....	......0	0	0
00000.....	31-0742113.....	The O.N. Equity Sales Company.....	0	0	0	0	58	0	.....	......0	58	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	0	0	.....	......0	0	0
13575.....	26-3791519.....	Montgomery Re, Inc.....	0	0	0	0	0	(9,114,142)	.....	......0	(9,114,142)	(320,467,582)
00000.....	26-4812790.....	Financial Way Reality, Inc.....	0	0	0	0	0	0	.....	......0	0	0
15363.....	80-0955278.....	Kenwood Re, Inc.....	0	0	0	0	0	(4,647,236)	.....	......0	(4,647,236)	(572,280,627)
15855.....	47-4249160.....	Camargo Re Captive, Inc.....	0	0	0	0	0	(15,715,570)	.....	......0	(15,715,570)	(296,921,915)
16481.....	83-2532656.....	Sunrise Captive Re, LLC.....	0	0	0	0	0	0	.....	......0	0	0
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	0	0	.....	......0	0	0
00000.....	00-0000000.....	O.N. International do Brasil Participações Ltda.....	0	0	0	0	0	0	.....	......0	0	0
00000.....	82-2868171.....	Princeton Captive Re, Inc.....	0	0	0	0	0	0	.....	......0	0	0
9999999.....	Control Totals.....	.....	.....0	0	0	0	0	0	XXX	0	0	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

MARCH FILING		Responses
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will the confidential Risk-Based Capital Report be filed with the NAIC by March 1?	YES
3.	Will the confidential Risk-Based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4.	Will an actuarial opinion be filed by March 1?	YES
APRIL FILING		
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1? (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?	NO
16.	Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	YES
17.	Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	YES
18.	Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	NO
19.	Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	NO
20.	Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
21.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22.	Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
24.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	YES
25.	Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	YES
26.	Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	NO
27.	Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	NO
28.	Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?	NO
29.	Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	N/A
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?	N/A
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?	N/A
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?	N/A
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?	YES
49.	Will the Variable Annuities Supplement be filed with the state of domicile and the NAIC by April 1?	NO
50.	Will the confidential Executive Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?	YES
51.	Will the confidential Life Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?	YES
52.	Will the confidential Variable Annuities Summary of the PBR Actuarial Report be filed with the state of domicile by April 1?	NO

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

AUGUST FILING

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

YES

EXPLANATIONS:

BAR CODE:

1.

2.

3.

4.

5.

6.

7.

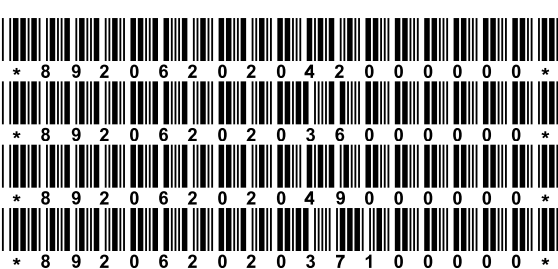
8.

9.

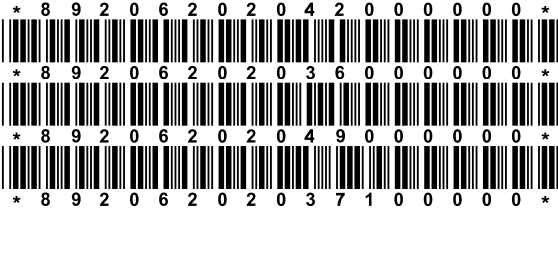
10.

11.

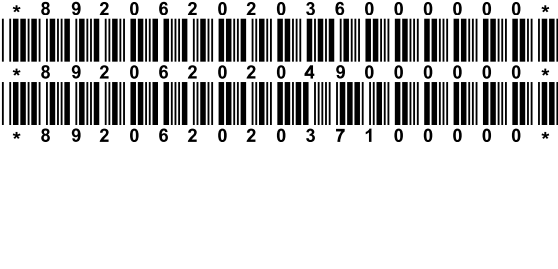
12. The data for this supplement is not required to be filed.



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



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



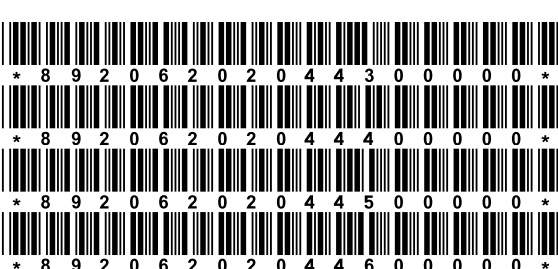
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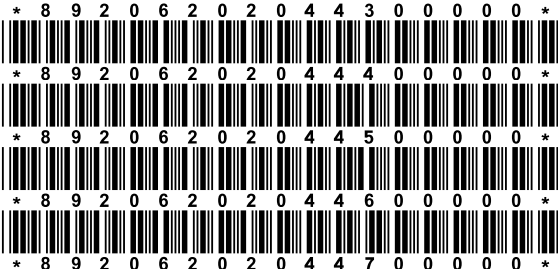
16.

17.

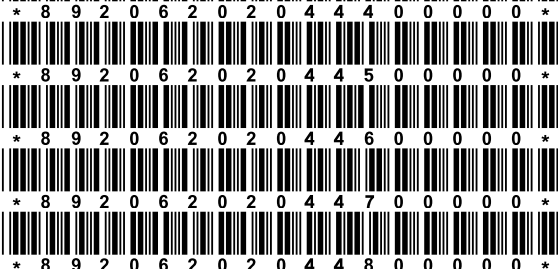
18. The data for this supplement is not required to be filed.



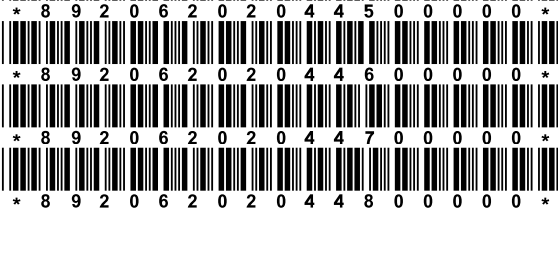
19. The data for this supplement is not required to be filed.



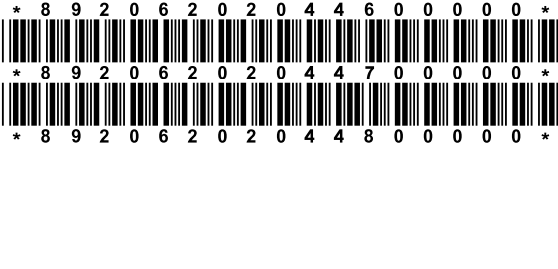
20. The data for this supplement is not required to be filed.



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



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



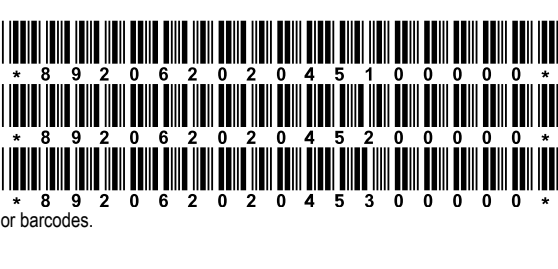
23. The data for this supplement is not required to be filed.



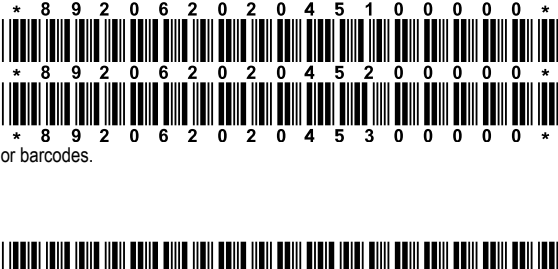
24.

25.

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



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



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



Lines 29 thru 32 are marked as strike through above, so there is nothing required for explanation or barcodes.

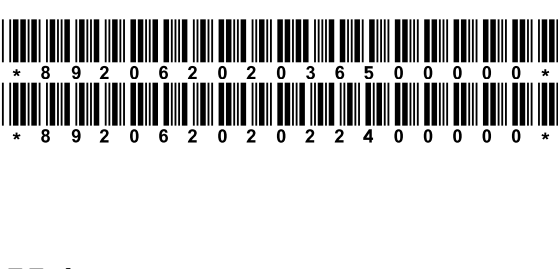
33.

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

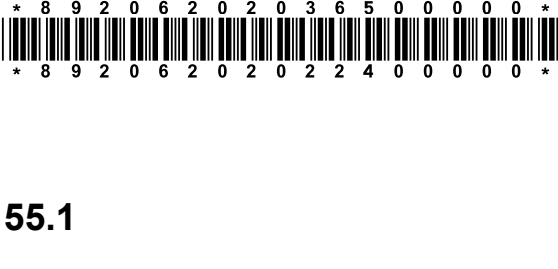


35.

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



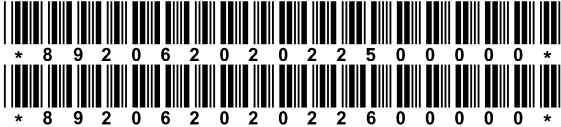
37. The data for this supplement is not required to be filed.



OHIO NATIONAL LIFE ASSURANCE CORPORATION
SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

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

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.

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



50.

51.

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



53.

OHIO NATIONAL LIFE ASSURANCE CORPORATION
Overflow Page for Write-Ins

Additional Write-ins for Summary of Operations:

		1	2
		Current Year	Prior Year
08.304	Administrative Charges.....	125,038	138,195
08.305	VUL Gain (Loss).....	(484,375)	11,136
08.397	Summary of remaining write-ins for Line 8.3.....	(359,337)	149,331

OHIO NATIONAL LIFE ASSURANCE CORPORATION
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
08.304. Administrative Charges.....	125,038	127,942	0	(1,493)	0	(1,411)	0	0	0
08.305. VUL Gain (Loss).....	(484,375)	(484,375)	0	0	0	0	0	0	0
08.397. Summary of remaining write-ins for Line 8.3.....	(359,337)	(356,433)	0	(1,493)	0	(1,411)	0	0	0

Additional Write-ins for Analysis of Operations - Individual Life Insurance:

	1	2	3	4	5	6	7	8	9	10	11	12
	Total	Industrial Life	Whole Life	Term Life	Indexed Life Insurance	Universal Life	Universal Life with Secondary Guarantees	Variable Life	Variable Universal Life	Credit Life (c) N/A Fraternal	Other Individual Life	YRT Mortality Risk Only
08.304. Administrative Charges.....	127,942	0	(258)	981	(2,394)	(325,105)	(317)	0	455,035	0	0	0
08.305. VUL Gain (Loss).....	(484,375)	0	0	0	0	0	0	0	(484,375)	0	0	0
08.397. Summary of remaining write-ins for Line 8.3.....	(356,433)	0	(258)	981	(2,394)	(325,105)	(317)	0	(29,340)	0	0	0

VM-20 RESERVES SUPPLEMENT - PART 1A

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

For the Year Ended December, 31, 2020

(To Be Filed by March 1)



NAIC Group Code: 0704

NAIC Company Code: 89206

		Current Year		
		1	2	3
		Reported Reserve	Reported Reserve	Due and Deferred Premium Asset
1.	Post-Reinsurance-Ceded Reserve			
1.1	Term Life Insurance.....	0	2,621,431	3,433,033
1.2	Universal Life with Secondary Guarantee.....	0	5,106,818	0
1.3	Non-participating Whole Life.....	0	0	0
1.4	Participating Whole Life.....	0	0	0
1.5	Universal Life without Secondary Guarantee.....	0	543,161	0
1.6	Variable Universal Life without Secondary Guarantee.....	0	0	0
1.7	Variable Life without Secondary Guarantee.....	0	0	0
1.8	Indexed Life without Secondary Guarantee.....	0	0	0
1.9	Aggregate write-ins for other products.....	0	0	0
2.	Total Post-Reinsurance Cede Reserves (Sum of Lines 1.1 through 1.9).....	0	8,271,410	XXX
3.	Pre-Reinsurance-Ceded Reserves			
3.1	Term Life Insurance.....	0	3,016,556	3,433,033
3.2	Universal Life with Secondary Guarantee.....	0	5,306,139	0
3.3	Non-participating Whole Life.....	0	0	0
3.4	Participating Whole Life.....	0	0	0
3.5	Universal Life without Secondary Guarantee.....	0	543,346	0
3.6	Variable Universal Life without Secondary Guarantee.....	0	0	0
3.7	Variable Life without Secondary Guarantee.....	0	0	0
3.8	Indexed Life without Secondary Guarantee.....	0	0	0
3.9	Aggregate write-ins for other products.....	0	0	0
4.	Total Pre-Reinsurance Ceded Reserve (Sum of Lines 3.1 through 3.9).....	0	8,866,041	XXX
5.	Total Reserves Ceded (Line 4 minus Line 2).....	0	594,631	XXX
DETAILS OF WRITE-INS				
1.901	.....	0	0	0
1.902	.....	0	0	0
1.903	.....	0	0	0
1.998	Summ. of remaining write-ins for Line 1.9 from overflow.....	0	0	0
1.999	Totals (Lines 1.901 thru 1.903 + 1.998) (Line 1.9 above).....	0	0	0
3.901	.....	0	0	0
3.902	.....	0	0	0
3.903	.....	0	0	0
3.998	Summ. of remaining write-ins for Line 3.9 from overflow.....	0	0	0
3.999	Totals (Lines 3.901 thru 3.903 + 3.998) (Line 3.9 above).....	0	0	0

456.1

OHIO NATIONAL LIFE ASSURANCE CORPORATION

VM-20 RESERVES SUPPLEMENT - PART 1B

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

For the Year Ended December, 31, 2020

(To Be Filed by March 1)

NAIC Group Code: 0704

(\$000 Omitted for Face Amount)

NAIC Company Code: 89206

		Current Year											
		Section A					Section B				Section C		
		1 Net Premium Reserve	2 Deterministic Reserve	3 Stochastic Reserve	4 Number of Policies	5 Face Amount	6 Net Premium Reserve	7 Deterministic Reserve	8 Number of Policies	9 Face Amount	10 Net Premium Reserve	11 Number of Policies	12 Face Amount
1.	Post-Reinsurance-Ceded Reserve												
1.1	Term Life Insurance.....	0	0	0	XXX	XXX	1,266,964	1,354,467	XXX	XXX	XXX	XXX	XXX
1.2	Universal Life with Secondary Guarantee.....	5,106,818	0	0	XXX	XXX	0	0	XXX	XXX	0	XXX	XXX
1.3	Non-participating Whole Life.....	0	0	0	XXX	XXX	0	0	XXX	XXX	0	XXX	XXX
1.4	Participating Whole Life.....	0	0	0	XXX	XXX	0	0	XXX	XXX	0	XXX	XXX
1.5	Universal Life without Secondary Guarantee.....	543,161	0	0	XXX	XXX	0	0	XXX	XXX	0	XXX	XXX
1.6	Variable Universal Life without Secondary Guarantee.....	0	0	0	XXX	XXX	0	0	XXX	XXX	0	XXX	XXX
1.7	Variable Life without Secondary Guarantee.....	0	0	0	XXX	XXX	0	0	XXX	XXX	0	XXX	XXX
1.8	Indexed Life without Secondary Guarantee.....	0	0	0	XXX	XXX	0	0	XXX	XXX	0	XXX	XXX
1.9	Aggregate write-ins for other products.....	0	0	0	XXX	XXX	0	0	XXX	XXX	0	XXX	XXX
2.	Total Post-Reinsurance Ceded Reserve (Sum of Lines 1.1 through 1.9).....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
3.	Pre-Reinsurance-Ceded Reserves												
3.1	Term Life Insurance.....	0	0	0	0	0	1,457,933	1,558,624	7,933	6,503,901	XXX	0	0
3.2	Universal Life with Secondary Guarantee.....	5,306,139	0	0	1,249	520,241	0	0	0	0	0	0	0
3.3	Non-participating Whole Life.....	0	0	0	0	0	0	0	0	0	0	0	0
3.4	Participating Whole Life.....	0	0	0	0	0	0	0	0	0	0	0	0
3.5	Universal Life without Secondary Guarantee.....	543,346	0	0	8	1,196	0	0	0	0	0	0	0
3.6	Variable Universal Life without Secondary Guarantee.....	0	0	0	0	0	0	0	0	0	0	0	0
3.7	Variable Life without Secondary Guarantee.....	0	0	0	0	0	0	0	0	0	0	0	0
3.8	Indexed Life without Secondary Guarantee.....	0	0	0	0	0	0	0	0	0	0	0	0
3.9	Aggregate write-ins for other products.....	0	0	0	0	0	0	0	0	0	0	0	0
4.	Total Pre-Reinsurance Ceded Reserve (Sum of Lines 3.1 through 3.9).....	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX
5.	Total Reserves Ceded (Line 4 minus Line 2)	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX

DETAILS OF WRITE-INS

1.901	.....	0	0	0	XXX	XXX	0	0	XXX	XXX	0	XXX	XXX
1.902	.....	0	0	0	XXX	XXX	0	0	XXX	XXX	0	XXX	XXX
1.903	.....	0	0	0	XXX	XXX	0	0	XXX	XXX	0	XXX	XXX
1.998	Summ. of remaining write-ins for Line 1.9 from overflow.....	0	0	0	XXX	XXX	0	0	XXX	XXX	0	XXX	XXX
1.999	Totals (Lines 1.901 thru 1.903 + 1.998) (Line 1.9 above).....	0	0	0	XXX	XXX	0	0	XXX	XXX	0	XXX	XXX
3.901	.....	0	0	0	0	0	0	0	0	0	0	0	0
3.902	.....	0	0	0	0	0	0	0	0	0	0	0	0
3.903	.....	0	0	0	0	0	0	0	0	0	0	0	0
3.998	Summ. of remaining write-ins for Line 3.9 from overflow.....	0	0	0	0	0	0	0	0	0	0	0	0
3.999	Totals (Lines 3.901 thru 3.903 + 3.998) (Line 3.9 above).....	0	0	0	0	0	0	0	0	0	0	0	0

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

Life PBR Exemption
For the Year Ended December 31, 2020
(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 [X]
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):

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 3

Other Exclusions from Life PBR
For the Year Ended December 31, 2020
(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?
If the answer to question 1 is "Yes" please discuss any business not covered under the Single Exemption.

Yes [☐] No [X]
2.

If the answer to question 1 is "Yes", does the company have risks for policies issued outside its state of domicile?
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.

Yes [☐] No [☐]
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 [X]



SCHEDULE O SUPPLEMENT

For the year ended December 31, 2020
(To Be Filled In)

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

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

NAIC Group Code.....0704

NAIC Company Code.....89206

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

SUPPLEMENTAL SCHEDULE O - PART 1

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid Policyholders				
	1 2016	2 2017	3 2018	4 2019	5 2020 (a)
1. Prior.....	0	0	0	0	0
2. 2016.....	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0
6. 2020.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. Prior.....	10,176	9,883	9,138	9,910	6,361
2. 2016.....	160	482	468	662	1,783
3. 2017.....	XXX	86	632	592	916
4. 2018.....	XXX	XXX	171	305	578
5. 2019.....	XXX	XXX	XXX	256	474
6. 2020.....	XXX	XXX	XXX	XXX	150

Section C - Credit Accident and Health

1. Prior.....	0	0	0	0	0
2. 2016.....	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0
6. 2020.....	XXX	XXX	XXX	XXX	0

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

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O - PART 2

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid for Cost Containment Expenses				
	1 2016	2 2017	3 2018	4 2019	5 2020
1. Prior.....	0	0	0	0	0
2. 2016.....	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0
6. 2020.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. Prior.....	0	0	0	0	0
2. 2016.....	145	0	0	0	0
3. 2017.....	XXX	136	0	0	0
4. 2018.....	XXX	XXX	237	0	0
5. 2019.....	XXX	XXX	XXX	203	0
6. 2020.....	XXX	XXX	XXX	XXX	231

Section C - Credit Accident and Health

1. Prior.....	0	0	0	0	0
2. 2016.....	0	0	0	0	0
3. 2017.....	XXX	0	0	0	0
4. 2018.....	XXX	XXX	0	0	0
5. 2019.....	XXX	XXX	XXX	0	0
6. 2020.....	XXX	XXX	XXX	XXX	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O - PART 3

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
	1 2016	2 2017	3 2018	4 2019	5 2020
1. 2016.....	0	0	0	XXX	XXX
2. 2017.....	XXX	0	0	0	XXX
3. 2018.....	XXX	XXX	0	0	0
4. 2019.....	XXX	XXX	XXX	0	0
5. 2020.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. 2016.....	6,037	3,250	2,824	XXX	XXX
2. 2017.....	XXX	5,005	3,338	2,795	XXX
3. 2018.....	XXX	XXX	6,091	3,610	2,400
4. 2019.....	XXX	XXX	XXX	9,640	6,536
5. 2020.....	XXX	XXX	XXX	XXX	7,474

Section C - Credit Accident and Health

1. 2016.....	0	0	0	XXX	XXX
2. 2017.....	XXX	0	0	0	XXX
3. 2018.....	XXX	XXX	0	0	0
4. 2019.....	XXX	XXX	XXX	0	0
5. 2020.....	XXX	XXX	XXX	XXX	0

OHIO NATIONAL LIFE ASSURANCE CORPORATION
SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O - PART 4

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability Reserve Outstanding at End of Year				
	1 2016	2 2017	3 2018	4 2019	5 2020
1. 2016.....	0	0	0	0	0
2. 2017.....	XXX	0	0	0	0
3. 2018.....	XXX	XXX	0	0	0
4. 2019.....	XXX	XXX	XXX	0	0
5. 2020.....	XXX	XXX	XXX	XXX	0

Section B - Other Accident and Health

1. 2016.....	6,037	3,250	2,824	2,391	3,191
2. 2017.....	XXX	5,005	3,338	2,795	3,075
3. 2018.....	XXX	XXX	6,091	3,610	2,400
4. 2019.....	XXX	XXX	XXX	9,640	6,536
5. 2020.....	XXX	XXX	XXX	XXX	7,474

Section C - Credit Accident and Health

1. 2016.....	0	0	0	0	0
2. 2017.....	XXX	0	0	0	0
3. 2018.....	XXX	XXX	0	0	0
4. 2019.....	XXX	XXX	XXX	0	0
5. 2020.....	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.....	23,200
3. Individual annuity.....		0
4. Supplementary contracts.....		0
5. Credit life.....		0
6. Group life.....		0
7. Group annuities.....		0
8. Group accident and health.....		0
9. Credit accident and health.....		0
10. Other accident and health.....	Standard Factor and Other.....	64,285
11. Total.....		87,485

Sch. O - Pt. 1 - Sn. D
NONE

Sch. O - Pt. 1 - Sn. E
NONE

Sch. O - Pt. 1 - Sn. F
NONE

Sch. O - Pt. 1 - Sn. G
NONE

Sch. O - Pt. 2 - Sn. D
NONE

Sch. O - Pt. 2 - Sn. E
NONE

Sch. O - Pt. 2 - Sn. F
NONE

Sch. O - Pt. 2 - Sn. G
NONE

Sch. O - Pt. 3 - Sn. D
NONE

Sch. O - Pt. 3 - Sn. E
NONE

Sch. O - Pt. 3 - Sn. F
NONE

Sch. O - Pt. 3 - Sn. G
NONE

Sch. O - Pt. 4 - Sn. D
NONE

Sch. O - Pt. 4 - Sn. E
NONE

Sch. O - Pt. 4 - Sn. F
NONE

Sch. O - Pt. 4 - Sn. G
NONE