



QUARTERLY STATEMENT

As of March 31, 2021  
of the Condition and Affairs of the

MANHATTAN NATIONAL LIFE INSURANCE COMPANY

NAIC Group Code.....0084, 0084  
(Current Period) (Prior Period)

NAIC Company Code..... 67083

Employer's ID Number..... 45-0252531

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..... December 20, 1956

Commenced Business..... January 4, 1957

Statutory Home Office

301 East Fourth Street .. Cincinnati .. OH .. US .. 45202  
(Street and Number) (City or Town, State, Country and Zip Code)

Main Administrative Office

301 East Fourth Street .. Cincinnati .. OH .. US .. 45202  
(Street and Number) (City or Town, State, Country and Zip Code)

513-357-3300  
(Area Code) (Telephone Number)

Mail Address

Post Office Box 5420 .. 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

301 East Fourth Street .. Cincinnati .. OH .. US .. 45202  
(Street and Number) (City or Town, State, Country and Zip Code)

513-357-3300  
(Area Code) (Telephone Number)

Internet Web Site Address

www.gaig.com

Statutory Statement Contact

Robert Mayhew Earle II  
(Name)

513-412-1735  
(Area Code) (Telephone Number) (Extension)

rearle@gaig.com  
(E-Mail Address)

513-412-1673  
(Fax Number)

OFFICERS

Name	Title	Name	Title
1. Mark Francis Muething	President	2. John Paul Gruber	Secretary
3. Christopher Patrick Miliano	Treasurer	4. Dominic Joseph Moster	Appointed Actuary
OTHER			
Adrienne Susan Baglier	Executive Vice President	Brian Patrick Sponaugle	Vice President

DIRECTORS OR TRUSTEES

John Paul Gruber	Jeffrey Gene Hester	Christopher Patrick Miliano	Mark Francis Muething
Michael James Prager	Brian Patrick Sponaugle		

State of..... Ohio  
County of..... Hamilton

The officers of this reporting entity being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to, is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC *Annual Statement Instructions and Accounting Practices and Procedures* manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

(Signature)	(Signature)	(Signature)
Mark Francis Muething	John Paul Gruber	Christopher Patrick Miliano
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
President	Secretary	Treasurer
(Title)	(Title)	(Title)

Subscribed and sworn to before me  
This 7th day of May 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



KELLY BULLER  
Notary Public, State of Ohio  
My Commission Expires 10-14-2023