



LIFE, AND ACCIDENT AND HEALTH COMPANIES/FRATERNAL BENEFIT SOCIETIES - ASSOCIATION EDITION

ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2021
OF THE CONDITION AND AFFAIRS OF

OHIO NATIONAL LIFE ASSURANCE CORPORATION

NAIC Group Code 0704 (Current) 0704 (Prior) NAIC Company Code 89206 Employer's ID Number 31-0962495

Organized under the Laws of Ohio, State of Domicile or Port of Entry OH

Country of Domicile United States of America

Licensed as business type: Life, Accident and Health [ X ] Fraternal Benefit Societies [ ]

Incorporated/Organized 06/26/1979 Commenced Business 08/22/1979

Statutory Home Office One Financial Way, Cincinnati, OH, US 45242

Main Administrative Office One Financial Way, Cincinnati, OH, US 45242

Mail Address Post Office Box 237, Cincinnati, OH, US 45201

Primary Location of Books and Records One Financial Way, Cincinnati, OH, US 45242

Internet Website Address N/A

Statutory Statement Contact Amber Dawn Roberts, 513-794-6100-6015

OFFICERS

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

OTHER

Christopher James Calabro, Senior Vice President & Chief Marketing Officer, Rocky Coppola, Senior Vice President & Chief Financial Officer, John Andrew DelPozzo, Senior Vice President, Paul Gerard, Senior Vice President & Chief Investment Officer, Kristal Elaine Hambrick, Executive Vice President & Chief Risk Officer, Danielle Denise Ivory, Senior Vice President, Lori Ann Landrum, Senior Vice President, William Charles Price, Senior Vice President & General Counsel, Raymond Donald Spears #, Senior Vice President & Chief Underwriting Officer, Peter Edward Whipple, Senior Vice President

DIRECTORS OR TRUSTEES

Christopher James Calabro #, Rocky Coppola #, Kristal Elaine Hambrick, Danielle Denise Ivory #, William Charles Price #, Barbara Ann Turner #

State of Ohio, County of Butler

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.

Barbara Ann Turner, President & Chief Operating Officer

Therese Susan McDonough, Secretary

Doris Lee Paul, Treasurer

Subscribed and sworn to before me this 15th day of February, 2022

- 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 .....

Stephanie Coleman, Notary Public, Expires November 24, 2025



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 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. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	365,984	0	0	0	365,984
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)	365,984	0	0	0	365,984
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	0	0	0	0	0
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	100,753	0	0	0	100,753
12. Surrender values and withdrawals for life contracts	51,920	0	0	0	51,920
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	152,673	0	0	0	152,673
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
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 (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	151	112,093,061	0	(a) 0	0	0	0	0	151	112,093,061
21. Issued during year	3	1,600,000	0	0	0	0	0	0	3	1,600,000
22. Other changes to in force (Net)	(14)	(4,843,751)	0	0	0	0	0	0	(14)	(4,843,751)
23. In force December 31 of current year	140	108,849,310	0	(a) 0	0	0	0	0	140	108,849,310

(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 Employees Health Benefits Plan premium (b)	0	0	0	0	0
24.2 Credit (Group and Individual)	0	0	0	0	0
24.3 Collectively renewable policies/certificates (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	73,021	73,018	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)	73,021	73,018	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	73,021	73,018	0	0	0

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: Ordinary (No. of Pols. & Certifs., Amount), Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pols. & Certifs., Amount), Total (No. of Pols. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,875,260	0	0	0	2,875,260
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)	2,875,260	0	0	0	2,875,260
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	4,255,101	0	0	0	4,255,101
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	533,654	0	0	0	533,654
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	4,788,755	0	0	0	4,788,755
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	.1	200,000	0	0	0	0	0	0	.1	200,000
17. Incurred during current year	14	9,180,101	0	0	0	0	0	0	14	9,180,101
Settled during current year:										
18.1 By payment in full	14	9,280,101	0	0	0	0	0	0	14	9,280,101
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	14	9,280,101	0	0	0	0	0	0	14	9,280,101
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	9,280,101	0	0	0	0	0	0	14	9,280,101
19. Unpaid Dec. 31, current year (16+17-18.6)	1	100,000	0	0	0	0	0	0	1	100,000
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	2,506	1,388,142,383	0	(a) 0	0	0	0	0	2,506	1,388,142,383
21. Issued during year	41	27,735,625	0	0	0	0	0	0	41	27,735,625
22. Other changes to in force (Net)	(148)	(72,674,875)	0	0	0	0	0	0	(148)	(72,674,875)
23. In force December 31 of current year	2,399	1,343,203,133	0	(a) 0	0	0	0	0	2,399	1,343,203,133

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

**ACCIDENT AND HEALTH INSURANCE**

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	0	0	0	0	0
24.1 Federal Employees 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)	253,781	253,772	0	64,135	60,962
25.2 Guaranteed renewable (b)	718	718	0	0	0
25.3 Non-renewable for stated reasons only (b)	1,160	1,160	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	255,659	255,650	0	64,135	60,962
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	255,659	255,650	0	64,135	60,962

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF California

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	40,124,585	0	0	0	40,124,585
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)	40,124,585	0	0	0	40,124,585
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	33,064,384	0	0	0	33,064,384
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	33,693	0	0	0	33,693
12. Surrender values and withdrawals for life contracts	4,292,559	0	0	0	4,292,559
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	37,390,637	0	0	0	37,390,637
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	8	1,437,934	0	0	0	0	0	0	8	1,437,934
17. Incurred during current year	90	30,618,449	0	0	0	0	0	0	90	30,618,449
Settled during current year:										
18.1 By payment in full	88	30,363,373	0	0	0	0	0	0	88	30,363,373
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	88	30,363,373	0	0	0	0	0	0	88	30,363,373
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	88	30,363,373	0	0	0	0	0	0	88	30,363,373
19. Unpaid Dec. 31, current year (16+17-18.6)	10	1,693,010	0	0	0	0	0	0	10	1,693,010
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	22,826	17,666,748,990	0	(a) 0	0	0	0	0	22,826	17,666,748,990
21. Issued during year	591	387,515,164	0	0	0	0	0	0	591	387,515,164
22. Other changes to in force (Net)	(1,584)	(1,220,523,500)	0	0	0	0	0	0	(1,584)	(1,220,523,500)
23. In force December 31 of current year	21,833	16,833,740,655	0	(a) 0	0	0	0	0	21,833	16,833,740,655

(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 Employees 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 Other Individual Policies:	0	0	0	0	0
25.1 Non-cancelable (b)	1,003,039	1,003,003	0	5,831,410	5,821,012
25.2 Guaranteed renewable (b)	2,825	2,825	0	0	0
25.3 Non-renewable for stated reasons only (b)	11,929	11,928	0	31,248	31,248
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)	1,017,792	1,017,757	0	5,862,658	5,852,260
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,017,792	1,017,757	0	5,862,658	5,852,260

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	10,275,540	0	0	0	10,275,540
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)	10,275,540	0	0	0	10,275,540
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	3,232,787	0	0	0	3,232,787
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	4,475	0	0	0	4,475
12. Surrender values and withdrawals for life contracts	1,685,422	0	0	0	1,685,422
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	4,922,684	0	0	0	4,922,684
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	2	630,484	0	0	0	0	0	0	2	630,484
17. Incurred during current year	19	3,216,098	0	0	0	0	0	0	19	3,216,098
Settled during current year:										
18.1 By payment in full	19	3,716,098	0	0	0	0	0	0	19	3,716,098
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	19	3,716,098	0	0	0	0	0	0	19	3,716,098
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	3,716,098	0	0	0	0	0	0	19	3,716,098
19. Unpaid Dec. 31, current year (16+17-18.6)	2	130,484	0	0	0	0	0	0	2	130,484
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	6,951	4,644,578,586	0	(a) 0	0	0	0	0	6,951	4,644,578,586
21. Issued during year	135	97,628,605	0	0	0	0	0	0	135	97,628,605
22. Other changes to in force (Net)	(478)	(313,133,771)	0	0	0	0	0	0	(478)	(313,133,771)
23. In force December 31 of current year	6,608	4,429,073,420	0	(a) 0	0	0	0	0	6,608	4,429,073,420

(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 Employees 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 Other Individual Policies:	0	0	0	0	0
25.1 Non-cancelable (b)	1,210,587	1,210,544	0	2,534,140	2,505,348
25.2 Guaranteed renewable (b)	23,292	23,291	0	31,740	31,740
25.3 Non-renewable for stated reasons only (b)	6,429	6,429	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)	1,240,308	1,240,264	0	2,565,880	2,537,088
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,240,308	1,240,264	0	2,565,880	2,537,088

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	5,646,717	0	0	0	5,646,717
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)	5,646,717	0	0	0	5,646,717
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	2,979,954	0	0	0	2,979,954
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	734	0	0	0	734
12. Surrender values and withdrawals for life contracts	782,370	0	0	0	782,370
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	3,763,058	0	0	0	3,763,058
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	10	2,869,845	0	0	0	0	0	0	10	2,869,845
Settled during current year:										
18.1 By payment in full	9	2,604,441	0	0	0	0	0	0	9	2,604,441
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	9	2,604,441	0	0	0	0	0	0	9	2,604,441
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	2,604,441	0	0	0	0	0	0	9	2,604,441
19. Unpaid Dec. 31, current year (16+17-18.6)	1	265,404	0	0	0	0	0	0	1	265,404
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	3,911	2,417,430,644	0 (a)	0	0	0	0	0	3,911	2,417,430,644
21. Issued during year	45	27,354,243	0	0	0	0	0	0	45	27,354,243
22. Other changes to in force (Net)	(217)	(110,674,212)	0	0	0	0	0	0	(217)	(110,674,212)
23. In force December 31 of current year	3,739	2,334,110,675	0 (a)	0	0	0	0	0	3,739	2,334,110,675

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

**ACCIDENT AND HEALTH INSURANCE**

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	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 Employees 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)	365,393	365,380	0	102,783	102,783
25.2 Guaranteed renewable (b)	14,962	14,962	0	0	0
25.3 Non-renewable for stated reasons only (b)	2,353	2,352	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)	382,708	382,694	0	102,783	102,783
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	382,708	382,694	0	102,783	102,783

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	642,209	0	0	0	642,209
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)	642,209	0	0	0	642,209
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	1,379,595	0	0	0	1,379,595
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	7,746	0	0	0	7,746
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	1,387,341	0	0	0	1,387,341
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	3	1,451,301	0	0	0	0	0	0	3	1,451,301
Settled during current year:										
18.1 By payment in full	2	629,301	0	0	0	0	0	0	2	629,301
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	2	629,301	0	0	0	0	0	0	2	629,301
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	2	629,301	0	0	0	0	0	0	2	629,301
19. Unpaid Dec. 31, current year (16+17-18.6)	1	822,000	0	0	0	0	0	0	1	822,000
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	645	354,652,862	0	(a) 0	0	0	0	0	645	354,652,862
21. Issued during year	1	100,000	0	0	0	0	0	0	1	100,000
22. Other changes to in force (Net)	(2)	(10,129,568)	0	0	0	0	0	0	(2)	(10,129,568)
23. In force December 31 of current year	644	344,623,294	0	(a) 0	0	0	0	0	644	344,623,294

(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 Employees 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)	82,406	82,403	0	8,000	8,000
25.2 Guaranteed renewable (b)	1,332	1,331	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)	83,737	83,734	0	8,000	8,000
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	83,737	83,734	0	8,000	8,000

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: Ordinary (No. of Pols. & Certifs., Amount), Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pols. & Certifs., Amount), Total (No. of Pols. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	36,425,175	0	0	0	36,425,175
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	36,425,175	0	0	0	36,425,175
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	26,271,725	0	0	0	26,271,725
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	30,763	0	0	0	30,763
12. Surrender values and withdrawals for life contracts	3,839,765	0	0	0	3,839,765
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	30,142,253	0	0	0	30,142,253
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	68	19,981,796	0	0	0	0	0	0	68	19,981,796
Settled during current year:										
18.1 By payment in full	68	19,981,796	0	0	0	0	0	0	68	19,981,796
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	68	19,981,796	0	0	0	0	0	0	68	19,981,796
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	68	19,981,796	0	0	0	0	0	0	68	19,981,796
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	18,549	12,276,069,004	0	(a) 0	0	0	0	0	18,549	12,276,069,004
21. Issued during year	1,085	732,294,073	0	0	0	0	0	0	1,085	732,294,073
22. Other changes to in force (Net)	(881)	(423,770,944)	0	0	0	0	0	0	(881)	(423,770,944)
23. In force December 31 of current year	18,753	12,584,592,134	0	(a) 0	0	0	0	0	18,753	12,584,592,134

(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 Employees 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 Other Individual Policies:					
25.1 Non-cancelable (b)	6,235,135	6,234,916	0	2,044,075	1,826,134
25.2 Guaranteed renewable (b)	23,137	23,137	0	8,940	4,756
25.3 Non-renewable for stated reasons only (b)	42,380	42,379	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	6,300,652	6,300,432	0	2,053,015	1,830,890
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	6,300,652	6,300,432	0	2,053,015	1,830,890

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	11,318,661	0	0	0	11,318,661
2. Annuity considerations	8,183	0	0	0	8,183
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)	11,326,844	0	0	0	11,326,844
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	12,370,622	0	0	0	12,370,622
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	28,840	0	0	0	28,840
12. Surrender values and withdrawals for life contracts	991,367	0	0	0	991,367
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	13,390,830	0	0	0	13,390,830
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	4	15,846,718	0	0	0	0	0	0	4	15,846,718
17. Incurred during current year	41	11,468,425	0	0	0	0	0	0	41	11,468,425
Settled during current year:										
18.1 By payment in full	41	15,567,555	0	0	0	0	0	0	41	15,567,555
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	41	15,567,555	0	0	0	0	0	0	41	15,567,555
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	41	15,567,555	0	0	0	0	0	0	41	15,567,555
19. Unpaid Dec. 31, current year (16+17-18.6)	4	11,747,588	0	0	0	0	0	0	4	11,747,588
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	8,285	5,071,263,555	0	(a) 0	0	0	0	0	8,285	5,071,263,555
21. Issued during year	145	98,443,869	0	0	0	0	0	0	145	98,443,869
22. Other changes to in force (Net)	(483)	(265,310,989)	0	0	0	0	0	0	(483)	(265,310,989)
23. In force December 31 of current year	7,947	4,904,396,435	0	(a) 0	0	0	0	0	7,947	4,904,396,435

(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 Employees 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)	884,406	884,375	0	312,302	314,736
25.2 Guaranteed renewable (b)	6,059	6,059	0	0	0
25.3 Non-renewable for stated reasons only (b)	23,681	23,680	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)	914,146	914,114	0	312,302	314,736
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	914,146	914,114	0	312,302	314,736

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	228,066	0	0	0	228,066
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)	228,066	0	0	0	228,066
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
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
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
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 (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	138	124,565,000	0	(a) 0	0	0	0	0	138	124,565,000
21. Issued during year	5	1,302,870	0	0	0	0	0	0	5	1,302,870
22. Other changes to in force (Net)	(5)	(15,330,000)	0	0	0	0	0	0	(5)	(15,330,000)
23. In force December 31 of current year	138	110,537,870	0	(a) 0	0	0	0	0	138	110,537,870

(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 Employees 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)	83,396	83,393	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)	83,396	83,393	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	83,396	83,393	0	0	0

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 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. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	12,815,197	0	0	0	12,815,197
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	250,000	XXX	0	XXX	250,000
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	13,065,197	0	0	0	13,065,197
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	12,869,533	0	0	0	12,869,533
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	132,832	0	0	0	132,832
12. Surrender values and withdrawals for life contracts	4,044,183	0	0	0	4,044,183
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	17,046,548	0	0	0	17,046,548
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year	.1	952,098	0	0	0	0	0	0	.1	952,098
17. Incurred during current year	52	13,848,683	0	0	0	0	0	0	52	13,848,683
Settled during current year:										
18.1 By payment in full	50	12,814,362	0	0	0	0	0	0	50	12,814,362
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	50	12,814,362	0	0	0	0	0	0	50	12,814,362
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	50	12,814,362	0	0	0	0	0	0	50	12,814,362
19. Unpaid Dec. 31, current year (16+17-18.6)	3	1,986,419	0	0	0	0	0	0	3	1,986,419
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	8,219	5,054,700,497	0	(a) 0	0	0	0	0	8,219	5,054,700,497
21. Issued during year	232	186,454,410	0	0	0	0	0	0	232	186,454,410
22. Other changes to in force (Net)	(712)	(399,500,192)	0	0	0	0	0	0	(712)	(399,500,192)
23. In force December 31 of current year	7,739	4,841,654,716	0	(a) 0	0	0	0	0	7,739	4,841,654,716

(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 Employees 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)	1,436,758	1,436,708	0	290,937	283,413
25.2 Guaranteed renewable (b)	12,655	12,655	0	0	0
25.3 Non-renewable for stated reasons only (b)	9,822	9,821	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)	1,459,235	1,459,184	0	290,937	283,413
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,459,235	1,459,184	0	290,937	283,413

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	6,046,245	0	0	0	6,046,245
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)	6,046,245	0	0	0	6,046,245
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	9,501,940	0	0	0	9,501,940
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	112,379	0	0	0	112,379
12. Surrender values and withdrawals for life contracts	2,893,187	0	0	0	2,893,187
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	12,507,505	0	0	0	12,507,505
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	7	1,047,886	0	0	0	0	0	0	7	1,047,886
17. Incurred during current year	22	6,017,705	0	0	0	0	0	0	22	6,017,705
Settled during current year:										
18.1 By payment in full	21	5,532,672	0	0	0	0	0	0	21	5,532,672
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	21	5,532,672	0	0	0	0	0	0	21	5,532,672
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	5,532,672	0	0	0	0	0	0	21	5,532,672
19. Unpaid Dec. 31, current year (16+17-18.6)	8	1,532,918	0	0	0	0	0	0	8	1,532,918
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year	4,383	2,222,709,711	0	(a) 0	0	0	0	0	4,383	2,222,709,711
21. Issued during year	71	40,521,638	0	0	0	0	0	0	71	40,521,638
22. Other changes to in force (Net)	(313)	(162,369,627)	0	0	0	0	0	0	(313)	(162,369,627)
23. In force December 31 of current year	4,141	2,100,861,723	0	(a) 0	0	0	0	0	4,141	2,100,861,723

(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 Employees 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 Other Individual Policies:					
25.1 Non-cancelable (b)	509,977	509,959	0	558,099	550,513
25.2 Guaranteed renewable (b)	6,976	6,975	0	0	0
25.3 Non-renewable for stated reasons only (b)	7,725	7,725	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)	524,677	524,659	0	558,099	550,513
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	524,677	524,659	0	558,099	550,513

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	4,209,153	0	0	0	4,209,153
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)	4,209,153	0	0	0	4,209,153
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	4,559,810	0	0	0	4,559,810
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	2,892	0	0	0	2,892
12. Surrender values and withdrawals for life contracts	1,917,622	0	0	0	1,917,622
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	6,480,324	0	0	0	6,480,324
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	11	1,455,856	0	0	0	0	0	0	11	1,455,856
17. Incurred during current year	31	4,428,147	0	0	0	0	0	0	31	4,428,147
Settled during current year:										
18.1 By payment in full	42	5,884,003	0	0	0	0	0	0	42	5,884,003
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	42	5,884,003	0	0	0	0	0	0	42	5,884,003
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	42	5,884,003	0	0	0	0	0	0	42	5,884,003
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	3,319	1,124,165,868	0	(a) 0	0	0	0	0	3,319	1,124,165,868
21. Issued during year	30	16,752,644	0	0	0	0	0	0	30	16,752,644
22. Other changes to in force (Net)	(151)	(31,767,025)	0	0	0	0	0	0	(151)	(31,767,025)
23. In force December 31 of current year	3,198	1,109,151,487	0	(a) 0	0	0	0	0	3,198	1,109,151,487

(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 Employees 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)	236,276	236,268	0	59,408	59,411
25.2 Guaranteed renewable (b)	21,371	21,370	0	2,261	2,223
25.3 Non-renewable for stated reasons only (b)	1,266	1,266	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	258,913	258,904	0	61,669	61,634
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	258,913	258,904	0	61,669	61,634

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	6,189,066	0	0	0	6,189,066
2. Annuity considerations	3,000	0	0	0	3,000
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)	6,192,066	0	0	0	6,192,066
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	5,517,107	0	0	0	5,517,107
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	24,358	0	0	0	24,358
12. Surrender values and withdrawals for life contracts	5,511,177	0	0	0	5,511,177
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	11,052,642	0	0	0	11,052,642
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year	.1	270,000	0	0	0	0	0	0	.1	270,000
17. Incurred during current year	20	5,133,644	0	0	0	0	0	0	20	5,133,644
Settled during current year:										
18.1 By payment in full	18	4,933,644	0	0	0	0	0	0	18	4,933,644
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	18	4,933,644	0	0	0	0	0	0	18	4,933,644
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	4,933,644	0	0	0	0	0	0	18	4,933,644
19. Unpaid Dec. 31, current year (16+17-18.6)	3	470,000	0	0	0	0	0	0	3	470,000
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	4,597	2,563,847,454	0	(a) 0	0	0	0	0	4,597	2,563,847,454
21. Issued during year	125	75,783,795	0	0	0	0	0	0	125	75,783,795
22. Other changes to in force (Net)	(277)	(137,307,270)	0	0	0	0	0	0	(277)	(137,307,270)
23. In force December 31 of current year	4,445	2,502,323,979	0	(a) 0	0	0	0	0	4,445	2,502,323,979

(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 Employees 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)	610,546	610,525	0	374,230	374,230
25.2 Guaranteed renewable (b)	25,829	25,828	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)	636,375	636,352	0	374,230	374,230
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	636,375	636,352	0	374,230	374,230

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	4,586,197	0	0	0	4,586,197
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)	4,586,197	0	0	0	4,586,197
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	3,622,274	0	0	0	3,622,274
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	43,376	0	0	0	43,376
12. Surrender values and withdrawals for life contracts	940,466	0	0	0	940,466
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	4,606,116	0	0	0	4,606,116
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	.1	1,246,916	0	0	0	0	0	0	.1	1,246,916
17. Incurred during current year	17	4,199,503	0	0	0	0	0	0	17	4,199,503
Settled during current year:										
18.1 By payment in full	17	3,711,604	0	0	0	0	0	0	17	3,711,604
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	17	3,711,604	0	0	0	0	0	0	17	3,711,604
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	17	3,711,604	0	0	0	0	0	0	17	3,711,604
19. Unpaid Dec. 31, current year (16+17-18.6)	1	1,734,815	0	0	0	0	0	0	1	1,734,815
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	3,472	1,925,485,503	0	(a) 0	0	0	0	0	3,472	1,925,485,503
21. Issued during year	74	55,386,366	0	0	0	0	0	0	74	55,386,366
22. Other changes to in force (Net)	(251)	(104,828,279)	0	0	0	0	0	0	(251)	(104,828,279)
23. In force December 31 of current year	3,295	1,876,043,590	0	(a) 0	0	0	0	0	3,295	1,876,043,590

(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 Employees 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 Other Individual Policies:	0	0	0	0	0
25.1 Non-cancelable (b)	373,734	373,721	0	413,762	411,896
25.2 Guaranteed renewable (b)	5,368	5,368	0	0	0
25.3 Non-renewable for stated reasons only (b)	6,729	6,729	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)	385,832	385,818	0	413,762	411,896
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	385,832	385,818	0	413,762	411,896

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	4,417,014	0	0	0	4,417,014
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)	4,417,014	0	0	0	4,417,014
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	4,539,636	0	0	0	4,539,636
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	7,427	0	0	0	7,427
12. Surrender values and withdrawals for life contracts	700,882	0	0	0	700,882
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	5,247,945	0	0	0	5,247,945
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	.1	325,166	0	0	0	0	0	0	.1	325,166
17. Incurred during current year	19	6,314,042	0	0	0	0	0	0	19	6,314,042
Settled during current year:										
18.1 By payment in full	17	3,599,310	0	0	0	0	0	0	17	3,599,310
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	17	3,599,310	0	0	0	0	0	0	17	3,599,310
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	17	3,599,310	0	0	0	0	0	0	17	3,599,310
19. Unpaid Dec. 31, current year (16+17-18.6)	3	3,039,898	0	0	0	0	0	0	3	3,039,898
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	3,139	2,258,817,532	0	(a) 0	0	0	0	0	3,139	2,258,817,532
21. Issued during year	109	100,125,733	0	0	0	0	0	0	109	100,125,733
22. Other changes to in force (Net)	(210)	(146,604,947)	0	0	0	0	0	0	(210)	(146,604,947)
23. In force December 31 of current year	3,038	2,212,338,318	0	(a) 0	0	0	0	0	3,038	2,212,338,318

(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 Employees 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 Other Individual Policies:	0	0	0	0	0
25.1 Non-cancelable (b)	596,241	596,220	0	146,900	139,326
25.2 Guaranteed renewable (b)	7,099	7,099	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	603,339	603,318	0	146,900	139,326
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	603,339	603,318	0	146,900	139,326

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 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. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 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. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1-2 Ordinary (No. of Pols. & Certifs., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No. of Pols. & Certifs., Amount), 9-10 Total (No. of Pols. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	13,741,975	0	0	0	13,741,975
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	13,741,975	0	0	0	13,741,975
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	6,127,228	0	0	0	6,127,228
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	158,777	0	0	0	158,777
12. Surrender values and withdrawals for life contracts	1,276,136	0	0	0	1,276,136
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	7,562,141	0	0	0	7,562,141
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	35	6,989,038	0	0	0	0	0	0	35	6,989,038
Settled during current year:										
18.1 By payment in full	33	6,860,995	0	0	0	0	0	0	33	6,860,995
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	33	6,860,995	0	0	0	0	0	0	33	6,860,995
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	6,860,995	0	0	0	0	0	0	33	6,860,995
19. Unpaid Dec. 31, current year (16+17-18.6)	2	128,043	0	0	0	0	0	0	2	128,043
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	9,025	5,026,515,564	0	(a) 0	0	0	0	0	9,025	5,026,515,564
21. Issued during year	295	205,980,097	0	0	0	0	0	0	295	205,980,097
22. Other changes to in force (Net)	(498)	(238,496,659)	0	0	0	0	0	0	(498)	(238,496,659)
23. In force December 31 of current year	8,822	4,993,999,003	0	(a) 0	0	0	0	0	8,822	4,993,999,003

(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 Employees 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 Other Individual Policies:					
25.1 Non-cancelable (b)	1,333,929	1,333,882	0	1,338,492	1,349,753
25.2 Guaranteed renewable (b)	23,753	23,753	0	0	0
25.3 Non-renewable for stated reasons only (b)	3,404	3,403	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	1,361,086	1,361,038	0	1,338,492	1,349,753
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,361,086	1,361,038	0	1,338,492	1,349,753

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	6,250,861	0	0	0	6,250,861
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	255,000	XXX	0	XXX	255,000
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	6,505,861	0	0	0	6,505,861
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	6,985,604	0	0	0	6,985,604
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	14,766	0	0	0	14,766
12. Surrender values and withdrawals for life contracts	788,590	0	0	0	788,590
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	7,788,960	0	0	0	7,788,960
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	2	433,500	0	0	0	0	0	0	2	433,500
17. Incurred during current year	15	4,037,190	0	0	0	0	0	0	15	4,037,190
Settled during current year:										
18.1 By payment in full	13	3,027,495	0	0	0	0	0	0	13	3,027,495
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	13	3,027,495	0	0	0	0	0	0	13	3,027,495
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	13	3,027,495	0	0	0	0	0	0	13	3,027,495
19. Unpaid Dec. 31, current year (16+17-18.6)	4	1,443,195	0	0	0	0	0	0	4	1,443,195
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	4,400	2,342,428,737	0	(a) 0	0	0	0	0	4,400	2,342,428,737
21. Issued during year	117	78,162,500	0	0	0	0	0	0	117	78,162,500
22. Other changes to in force (Net)	(239)	(128,976,726)	0	0	0	0	0	0	(239)	(128,976,726)
23. In force December 31 of current year	4,278	2,291,614,511	0	(a) 0	0	0	0	0	4,278	2,291,614,511

(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 Employees 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)	501,183	501,165	0	143,833	76,823
25.2 Guaranteed renewable (b)	18,955	18,954	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)	520,137	520,119	0	143,833	76,823
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	520,137	520,119	0	143,833	76,823

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,429,796	0	0	0	2,429,796
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)	2,429,796	0	0	0	2,429,796
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	5,735,380	0	0	0	5,735,380
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	3,916	0	0	0	3,916
12. Surrender values and withdrawals for life contracts	175,807	0	0	0	175,807
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	5,915,103	0	0	0	5,915,103
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	18	6,183,202	0	0	0	0	0	0	18	6,183,202
Settled during current year:										
18.1 By payment in full	16	5,983,202	0	0	0	0	0	0	16	5,983,202
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	16	5,983,202	0	0	0	0	0	0	16	5,983,202
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	5,983,202	0	0	0	0	0	0	16	5,983,202
19. Unpaid Dec. 31, current year (16+17-18.6)	2	200,000	0	0	0	0	0	0	2	200,000
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	1,412	876,211,319	0	(a) 0	0	0	0	0	1,412	876,211,319
21. Issued during year	30	16,064,168	0	0	0	0	0	0	30	16,064,168
22. Other changes to in force (Net)	(104)	(59,965,633)	0	0	0	0	0	0	(104)	(59,965,633)
23. In force December 31 of current year	1,338	832,309,854	0	(a) 0	0	0	0	0	1,338	832,309,854

(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 Employees 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 Other Individual Policies:					
25.1 Non-cancelable (b)	199,641	199,634	0	186,590	186,840
25.2 Guaranteed renewable (b)	3,746	3,745	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)	203,387	203,380	0	186,590	186,840
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	203,387	203,380	0	186,590	186,840

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	6,411,546	0	0	0	6,411,546
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)	6,411,546	0	0	0	6,411,546
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	10,624,143	0	0	0	10,624,143
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	172,230	0	0	0	172,230
12. Surrender values and withdrawals for life contracts	9,095,021	0	0	0	9,095,021
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	19,891,393	0	0	0	19,891,393
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year	7	3,609,656	0	0	0	0	0	0	7	3,609,656
17. Incurred during current year	30	9,566,625	0	0	0	0	0	0	30	9,566,625
Settled during current year:										
18.1 By payment in full	29	8,438,483	0	0	0	0	0	0	29	8,438,483
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	29	8,438,483	0	0	0	0	0	0	29	8,438,483
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	29	8,438,483	0	0	0	0	0	0	29	8,438,483
19. Unpaid Dec. 31, current year (16+17-18.6)	8	4,737,798	0	0	0	0	0	0	8	4,737,798
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	4,759	2,279,857,719	0	(a) 0	0	0	0	0	4,759	2,279,857,719
21. Issued during year	149	97,610,744	0	0	0	0	0	0	149	97,610,744
22. Other changes to in force (Net)	(315)	(140,354,924)	0	0	0	0	0	0	(315)	(140,354,924)
23. In force December 31 of current year	4,593	2,237,113,539	0	(a) 0	0	0	0	0	4,593	2,237,113,539

(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 Employees 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)	729,192	729,167	0	429,543	427,799
25.2 Guaranteed renewable (b)	11,066	11,066	0	0	0
25.3 Non-renewable for stated reasons only (b)	11,317	11,316	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)	751,575	751,549	0	429,543	427,799
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	751,575	751,549	0	429,543	427,799

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,504,274	0	0	0	2,504,274
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)	2,504,274	0	0	0	2,504,274
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	3,189,991	0	0	0	3,189,991
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	997,308	0	0	0	997,308
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	4,187,299	0	0	0	4,187,299
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	10	3,189,651	0	0	0	0	0	0	10	3,189,651
Settled during current year:										
18.1 By payment in full	10	3,189,651	0	0	0	0	0	0	10	3,189,651
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	10	3,189,651	0	0	0	0	0	0	10	3,189,651
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	10	3,189,651	0	0	0	0	0	0	10	3,189,651
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year	1,991	1,057,805,015	0 (a)	0	0	0	0	0	1,991	1,057,805,015
21. Issued during year	27	16,875,000	0	0	0	0	0	0	27	16,875,000
22. Other changes to in force (Net)	(112)	(85,345,127)	0	0	0	0	0	0	(112)	(85,345,127)
23. In force December 31 of current year	1,906	989,334,888	0 (a)	0	0	0	0	0	1,906	989,334,888

(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 Employees 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)	139,351	139,347	0	108,732	108,732
25.2 Guaranteed renewable (b)	4,378	4,378	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	143,729	143,724	0	108,732	108,732
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	143,729	143,724	0	108,732	108,732

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: Ordinary (No. of Pols. & Certifs., Amount), Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pols. & Certifs., Amount), Total (No. of Pols. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 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. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,306,804	0	0	0	2,306,804
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)	2,306,804	0	0	0	2,306,804
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	1,100,000	0	0	0	1,100,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	37,477	0	0	0	37,477
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	1,137,477	0	0	0	1,137,477
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	1	400,000	0	0	0	0	0	0	1	400,000
17. Incurred during current year	5	1,793,000	0	0	0	0	0	0	5	1,793,000
Settled during current year:										
18.1 By payment in full	4	1,693,000	0	0	0	0	0	0	4	1,693,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	4	1,693,000	0	0	0	0	0	0	4	1,693,000
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	4	1,693,000	0	0	0	0	0	0	4	1,693,000
19. Unpaid Dec. 31, current year (16+17-18.6)	2	500,000	0	0	0	0	0	0	2	500,000
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	1,830	1,113,535,920	0	0	0	0	0	0	1,830	1,113,535,920
21. Issued during year	46	35,239,000	0	0	0	0	0	0	46	35,239,000
22. Other changes to in force (Net)	(96)	(70,479,541)	0	0	0	0	0	0	(96)	(70,479,541)
23. In force December 31 of current year	1,780	1,078,295,379	0	0	0	0	0	0	1,780	1,078,295,379

(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 Employees 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 Other Individual Policies:	0	0	0	0	0
25.1 Non-cancelable (b)	190,039	190,032	0	0	0
25.2 Guaranteed renewable (b)	8,137	8,137	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)	198,176	198,169	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	198,176	198,169	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	10,451,327	0	0	0	10,451,327
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)	10,451,327	0	0	0	10,451,327
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	6,187,106	0	0	0	6,187,106
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	4,998,621	0	0	0	4,998,621
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	11,203,535	0	0	0	11,203,535
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	2	2,167,569	0	0	0	0	0	0	2	2,167,569
17. Incurred during current year	11	7,415,685	0	0	0	0	0	0	11	7,415,685
Settled during current year:										
18.1 By payment in full	7	6,458,579	0	0	0	0	0	0	7	6,458,579
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	7	6,458,579	0	0	0	0	0	0	7	6,458,579
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	6,458,579	0	0	0	0	0	0	7	6,458,579
19. Unpaid Dec. 31, current year (16+17-18.6)	6	3,124,675	0	0	0	0	0	0	6	3,124,675
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	6,324	4,532,059,408	0	(a) 0	0	0	0	0	6,324	4,532,059,408
21. Issued during year	151	131,404,831	0	0	0	0	0	0	151	131,404,831
22. Other changes to in force (Net)	(373)	(248,004,738)	0	0	0	0	0	0	(373)	(248,004,738)
23. In force December 31 of current year	6,102	4,415,459,502	0	(a) 0	0	0	0	0	6,102	4,415,459,502

(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 Employees 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 Other Individual Policies:	0	0	0	0	0
25.1 Non-cancelable (b)	1,454,408	1,454,357	0	774,183	1,007,516
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	39,730	39,728	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)	1,494,138	1,494,085	0	774,183	1,007,516
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,494,138	1,494,085	0	774,183	1,007,516

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 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. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF New York

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 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. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident and health insurance details.

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	11,190,283	0	0	0	11,190,283
2. Annuity considerations	7,680	0	0	0	7,680
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)	11,197,963	0	0	0	11,197,963
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	16,541,244	0	0	0	16,541,244
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	64,438	0	0	0	64,438
12. Surrender values and withdrawals for life contracts	1,261,083	0	0	0	1,261,083
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	17,866,765	0	0	0	17,866,765
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	9	4,665,993	0	0	0	0	0	0	9	4,665,993
17. Incurred during current year	29	9,027,975	0	0	0	0	0	0	29	9,027,975
Settled during current year:										
18.1 By payment in full	27	9,003,913	0	0	0	0	0	0	27	9,003,913
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	27	9,003,913	0	0	0	0	0	0	27	9,003,913
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	27	9,003,913	0	0	0	0	0	0	27	9,003,913
19. Unpaid Dec. 31, current year (16+17-18.6)	11	4,690,055	0	0	0	0	0	0	11	4,690,055
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	7,625	4,882,055,146	0	(a) 0	0	0	0	0	7,625	4,882,055,146
21. Issued during year	185	153,008,764	0	0	0	0	0	0	185	153,008,764
22. Other changes to in force (Net)	(369)	(245,420,716)	0	0	0	0	0	0	(369)	(245,420,716)
23. In force December 31 of current year	7,441	4,789,643,194	0	(a) 0	0	0	0	0	7,441	4,789,643,194

(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 Employees 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)	2,063,840	2,063,767	0	905,354	914,906
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	11,563	11,563	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)	2,075,403	2,075,330	0	905,354	914,906
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,075,403	2,075,330	0	905,354	914,906

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1-2 Ordinary (No. of Pols. & Certifs., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No. of Pols. & Certifs., Amount), 9-10 Total (No. of Pols. & Certifs., Amount). Rows include Maturity and Endowment Benefits Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies, Federal Employees Health Benefits Plan, Medicare Title XVIII, and various accident types.

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	29,325,359	0	0	0	29,325,359
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	91,913,684	XXX	0	XXX	91,913,684
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	121,239,043	0	0	0	121,239,043
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	30,027,018	0	0	0	30,027,018
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	109,601	0	0	0	109,601
12. Surrender values and withdrawals for life contracts	12,236,055	0	0	0	12,236,055
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	42,372,673	0	0	0	42,372,673
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	37	4,671,699	0	0	0	0	0	0	37	4,671,699
17. Incurred during current year	139	32,615,793	0	0	0	0	0	0	139	32,615,793
Settled during current year:										
18.1 By payment in full	142	35,691,796	0	0	0	0	0	0	142	35,691,796
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	142	35,691,796	0	0	0	0	0	0	142	35,691,796
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	142	35,691,796	0	0	0	0	0	0	142	35,691,796
19. Unpaid Dec. 31, current year (16+17-18.6)	34	1,595,696	0	0	0	0	0	0	34	1,595,696
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	20,141	10,148,618,443	0	(a) 0	0	0	0	0	20,141	10,148,618,443
21. Issued during year	685	411,047,608	0	0	0	0	0	0	685	411,047,608
22. Other changes to in force (Net)	(1,212)	(637,453,918)	0	0	0	0	0	0	(1,212)	(637,453,918)
23. In force December 31 of current year	19,614	9,922,212,133	0	(a) 0	0	0	0	0	19,614	9,922,212,133

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

**ACCIDENT AND HEALTH INSURANCE**

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	0	0	0	0	0
24.1 Federal Employees 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 Other Individual Policies:	0	0	0	0	0
25.1 Non-cancelable (b)	2,256,962	2,256,883	0	465,768	481,485
25.2 Guaranteed renewable (b)	36,317	36,316	0	3,812	8,546
25.3 Non-renewable for stated reasons only (b)	32,019	32,018	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	2,325,298	2,325,216	0	469,580	490,031
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,325,298	2,325,216	0	469,580	490,031

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	4,651,727	0	0	0	4,651,727
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)	4,651,727	0	0	0	4,651,727
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	4,106,787	0	0	0	4,106,787
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	341,523	0	0	0	341,523
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	4,448,311	0	0	0	4,448,311
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year	8	5,946,929	0	0	0	0	0	0	8	5,946,929
17. Incurred during current year	18	2,997,598	0	0	0	0	0	0	18	2,997,598
Settled during current year:										
18.1 By payment in full	26	8,944,527	0	0	0	0	0	0	26	8,944,527
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	26	8,944,527	0	0	0	0	0	0	26	8,944,527
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	8,944,527	0	0	0	0	0	0	26	8,944,527
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	3,399	1,882,919,744	0	(a) 0	0	0	0	0	3,399	1,882,919,744
21. Issued during year	78	37,849,320	0	0	0	0	0	0	78	37,849,320
22. Other changes to in force (Net)	(170)	(104,145,692)	0	0	0	0	0	0	(170)	(104,145,692)
23. In force December 31 of current year	3,307	1,816,623,372	0	(a) 0	0	0	0	0	3,307	1,816,623,372

(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 Employees 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)	616,816	616,794	0	60,600	59,772
25.2 Guaranteed renewable (b)	4,829	4,829	0	0	0
25.3 Non-renewable for stated reasons only (b)	6,738	6,738	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)	628,383	628,361	0	60,600	59,772
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	628,383	628,361	0	60,600	59,772

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	5,302,131	0	0	0	5,302,131
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)	5,302,131	0	0	0	5,302,131
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	6,204,525	0	0	0	6,204,525
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	648,757	0	0	0	648,757
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	6,853,282	0	0	0	6,853,282
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	25	7,154,533	0	0	0	0	0	0	25	7,154,533
Settled during current year:										
18.1 By payment in full	22	6,354,533	0	0	0	0	0	0	22	6,354,533
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	22	6,354,533	0	0	0	0	0	0	22	6,354,533
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	22	6,354,533	0	0	0	0	0	0	22	6,354,533
19. Unpaid Dec. 31, current year (16+17-18.6)	3	800,000	0	0	0	0	0	0	3	800,000
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year	4,158	2,499,577,585	0 (a)	0	0	0	0	0	4,158	2,499,577,585
21. Issued during year	130	79,928,499	0	0	0	0	0	0	130	79,928,499
22. Other changes to in force (Net)	(237)	(112,210,817)	0	0	0	0	0	0	(237)	(112,210,817)
23. In force December 31 of current year	4,051	2,467,295,267	0 (a)	0	0	0	0	0	4,051	2,467,295,267

(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 Employees 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 Other Individual Policies:	0	0	0	0	0
25.1 Non-cancelable (b)	497,973	497,955	0	170,073	170,073
25.2 Guaranteed renewable (b)	9,423	9,423	0	607	607
25.3 Non-renewable for stated reasons only (b)	19,723	19,723	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)	527,119	527,101	0	170,680	170,680
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	527,119	527,101	0	170,680	170,680

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	13,992,843	0	0	0	13,992,843
2. Annuity considerations	71,674	0	0	0	71,674
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)	14,064,518	0	0	0	14,064,518
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	15,994,205	0	0	0	15,994,205
10. Matured endowments	1,183	0	0	0	1,183
11. Annuity benefits	646,972	0	0	0	646,972
12. Surrender values and withdrawals for life contracts	1,866,012	0	0	0	1,866,012
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	18,508,371	0	0	0	18,508,371
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	96	15,173,401	0	0	0	0	0	0	96	15,173,401
Settled during current year:										
18.1 By payment in full	94	13,800,580	0	0	0	0	0	0	94	13,800,580
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	94	13,800,580	0	0	0	0	0	0	94	13,800,580
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	94	13,800,580	0	0	0	0	0	0	94	13,800,580
19. Unpaid Dec. 31, current year (16+17-18.6)	2	1,372,821	0	0	0	0	0	0	2	1,372,821
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	13,247	6,494,349,335	0	(a) 0	0	0	0	0	13,247	6,494,349,335
21. Issued during year	234	181,563,008	0	0	0	0	0	0	234	181,563,008
22. Other changes to in force (Net)	(809)	(387,601,418)	0	0	0	0	0	0	(809)	(387,601,418)
23. In force December 31 of current year	12,672	6,288,310,925	0	(a) 0	0	0	0	0	12,672	6,288,310,925

(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 Employees 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)	1,811,475	1,811,412	0	494,294	474,781
25.2 Guaranteed renewable (b)	78,808	78,805	0	48,608	49,374
25.3 Non-renewable for stated reasons only (b)	14,063	14,063	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)	1,904,346	1,904,280	0	542,902	524,155
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,904,346	1,904,280	0	542,902	524,155

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,728,304	0	0	0	1,728,304
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)	1,728,304	0	0	0	1,728,304
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	250,000	0	0	0	250,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	50,234	0	0	0	50,234
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	300,234	0	0	0	300,234
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	1	251,740	0	0	0	0	0	0	1	251,740
17. Incurred during current year	2	250,000	0	0	0	0	0	0	2	250,000
Settled during current year:										
18.1 By payment in full	2	250,000	0	0	0	0	0	0	2	250,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	2	250,000	0	0	0	0	0	0	2	250,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	2	250,000	0	0	0	0	0	0	2	250,000
19. Unpaid Dec. 31, current year (16+17-18.6)	1	251,740	0	0	0	0	0	0	1	251,740
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	1,240	676,643,179	0	(a) 0	0	0	0	0	1,240	676,643,179
21. Issued during year	26	14,239,534	0	0	0	0	0	0	26	14,239,534
22. Other changes to in force (Net)	(51)	(22,680,000)	0	0	0	0	0	0	(51)	(22,680,000)
23. In force December 31 of current year	1,215	668,202,713	0	(a) 0	0	0	0	0	1,215	668,202,713

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

**ACCIDENT AND HEALTH INSURANCE**

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	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 Employees 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)	149,121	149,116	0	0	0
25.2 Guaranteed renewable (b)	2,500	2,499	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	151,621	151,616	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	151,621	151,616	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	4,406,607	0	0	0	4,406,607
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)	4,406,607	0	0	0	4,406,607
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	2,849,702	0	0	0	2,849,702
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	3,984	0	0	0	3,984
12. Surrender values and withdrawals for life contracts	415,113	0	0	0	415,113
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	3,268,799	0	0	0	3,268,799
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	.1	395,355	0	0	0	0	0	0	.1	395,355
17. Incurred during current year	13	2,235,000	0	0	0	0	0	0	13	2,235,000
Settled during current year:										
18.1 By payment in full	13	2,250,000	0	0	0	0	0	0	13	2,250,000
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	13	2,250,000	0	0	0	0	0	0	13	2,250,000
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	13	2,250,000	0	0	0	0	0	0	13	2,250,000
19. Unpaid Dec. 31, current year (16+17-18.6)	1	380,355	0	0	0	0	0	0	1	380,355
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	3,362	1,820,923,277	0	(a) 0	0	0	0	0	3,362	1,820,923,277
21. Issued during year	81	93,839,775	0	0	0	0	0	0	81	93,839,775
22. Other changes to in force (Net)	(64)	(15,397,243)	0	0	0	0	0	0	(64)	(15,397,243)
23. In force December 31 of current year	3,379	1,899,365,809	0	(a) 0	0	0	0	0	3,379	1,899,365,809

(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 Employees 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)	621,271	621,249	0	81,488	81,488
25.2 Guaranteed renewable (b)	8,231	8,230	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)	629,501	629,479	0	81,488	81,488
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	629,501	629,479	0	81,488	81,488

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: Ordinary (No. of Pols. & Certifs., Amount), Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pols. & Certifs., Amount), Total (No. of Pols. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b) and various accident and health insurance details.

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	14,443,225	0	0	0	14,443,225
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)	14,443,225	0	0	0	14,443,225
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	21,254,347	0	0	0	21,254,347
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	665,210	0	0	0	665,210
12. Surrender values and withdrawals for life contracts	1,815,111	0	0	0	1,815,111
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	23,734,668	0	0	0	23,734,668
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year	5	3,657,180	0	0	0	0	0	0	5	3,657,180
17. Incurred during current year	52	16,833,043	0	0	0	0	0	0	52	16,833,043
Settled during current year:										
18.1 By payment in full	57	20,490,223	0	0	0	0	0	0	57	20,490,223
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	57	20,490,223	0	0	0	0	0	0	57	20,490,223
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	57	20,490,223	0	0	0	0	0	0	57	20,490,223
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	7,794	4,994,346,943	0	(a) 0	0	0	0	0	7,794	4,994,346,943
21. Issued during year	155	101,395,647	0	0	0	0	0	0	155	101,395,647
22. Other changes to in force (Net)	(411)	(216,033,775)	0	0	0	0	0	0	(411)	(216,033,775)
23. In force December 31 of current year	7,538	4,879,708,815	0	(a) 0	0	0	0	0	7,538	4,879,708,815

(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 Employees 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)	1,996,428	1,996,358	0	621,261	617,047
25.2 Guaranteed renewable (b)	8,414	8,414	0	0	0
25.3 Non-renewable for stated reasons only (b)	68,354	68,351	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)	2,073,196	2,073,123	0	621,261	617,047
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,073,196	2,073,123	0	621,261	617,047

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	32,865,948	0	0	0	32,865,948
2. Annuity considerations	0	0	0	0	0
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	32,865,948	0	0	0	32,865,948
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	40,013,227	0	0	0	40,013,227
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	2,583	0	0	0	2,583
12. Surrender values and withdrawals for life contracts	6,461,011	0	0	0	6,461,011
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	46,476,822	0	0	0	46,476,822
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year	11	3,022,714	0	0	0	0	0	0	11	3,022,714
17. Incurred during current year	94	34,545,720	0	0	0	0	0	0	94	34,545,720
Settled during current year:										
18.1 By payment in full	90	26,255,282	0	0	0	0	0	0	90	26,255,282
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	90	26,255,282	0	0	0	0	0	0	90	26,255,282
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	90	26,255,282	0	0	0	0	0	0	90	26,255,282
19. Unpaid Dec. 31, current year (16+17-18.6)	15	11,313,152	0	0	0	0	0	0	15	11,313,152
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	19,885	13,698,880,157	0	0	0	0	0	0	19,885	13,698,880,157
21. Issued during year	791	608,589,900	0	0	0	0	0	0	791	608,589,900
22. Other changes to in force (Net)	(1,108)	(706,803,423)	0	0	0	0	0	0	(1,108)	(706,803,423)
23. In force December 31 of current year	19,568	13,600,666,634	0	0	0	0	0	0	19,568	13,600,666,634

(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 Employees 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)	3,137,555	3,137,445	0	1,467,064	1,528,342
25.2 Guaranteed renewable (b)	11,447	11,446	0	0	0
25.3 Non-renewable for stated reasons only (b)	44,086	44,084	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)	3,193,087	3,192,976	0	1,467,064	1,528,342
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,193,087	3,192,976	0	1,467,064	1,528,342

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 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. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	555,856	0	0	0	555,856
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)	555,856	0	0	0	555,856
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	500,000	0	0	0	500,000
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	830	0	0	0	830
12. Surrender values and withdrawals for life contracts	21,074	0	0	0	21,074
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	521,904	0	0	0	521,904
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	2	600,000	0	0	0	0	0	0	2	600,000
Settled during current year:										
18.1 By payment in full	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 (16+17-18.6)	1	500,000	0	0	0	0	0	0	1	500,000
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	555	298,513,620	0	(a) 0	0	0	0	0	555	298,513,620
21. Issued during year	17	14,170,000	0	0	0	0	0	0	17	14,170,000
22. Other changes to in force (Net)	(39)	(17,828,315)	0	0	0	0	0	0	(39)	(17,828,315)
23. In force December 31 of current year	533	294,855,305	0	(a) 0	0	0	0	0	533	294,855,305

(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 Employees 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 Other Individual Policies:	0	0	0	0	0
25.1 Non-cancelable (b)	91,383	91,380	0	0	0
25.2 Guaranteed renewable (b)	3,070	3,070	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	94,453	94,449	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	94,453	94,449	0	0	0

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	9,506,892	0	0	0	9,506,892
2. Annuity considerations	255	0	0	0	255
3. Deposit-type contract funds	107,609	XXX	0	XXX	107,609
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	9,614,755	0	0	0	9,614,755
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	13,831,679	0	0	0	13,831,679
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	16,583	0	0	0	16,583
12. Surrender values and withdrawals for life contracts	922,871	0	0	0	922,871
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	14,771,132	0	0	0	14,771,132
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	31	12,428,671	0	0	0	0	0	0	31	12,428,671
Settled during current year:										
18.1 By payment in full	31	12,428,671	0	0	0	0	0	0	31	12,428,671
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	31	12,428,671	0	0	0	0	0	0	31	12,428,671
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	12,428,671	0	0	0	0	0	0	31	12,428,671
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year	7,102	4,608,755,380	0	(a) 0	0	0	0	0	7,102	4,608,755,380
21. Issued during year	150	97,217,864	0	0	0	0	0	0	150	97,217,864
22. Other changes to in force (Net)	(420)	(267,197,515)	0	0	0	0	0	0	(420)	(267,197,515)
23. In force December 31 of current year	6,832	4,438,775,729	0	(a) 0	0	0	0	0	6,832	4,438,775,729

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

**ACCIDENT AND HEALTH INSURANCE**

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	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 Employees 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 Other Individual Policies:	0	0	0	0	0
25.1 Non-cancelable (b)	864,757	864,727	0	734,623	735,210
25.2 Guaranteed renewable (b)	6,546	6,546	0	24,000	24,000
25.3 Non-renewable for stated reasons only (b)	1,735	1,735	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)	873,038	873,008	0	758,623	759,210
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	873,038	873,008	0	758,623	759,210

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	7,584,631	0	0	0	7,584,631
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)	7,584,631	0	0	0	7,584,631
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	2,807,421	0	0	0	2,807,421
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	725,004	0	0	0	725,004
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	3,532,425	0	0	0	3,532,425
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	19	3,257,421	0	0	0	0	0	0	19	3,257,421
Settled during current year:										
18.1 By payment in full	19	3,257,421	0	0	0	0	0	0	19	3,257,421
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	19	3,257,421	0	0	0	0	0	0	19	3,257,421
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	3,257,421	0	0	0	0	0	0	19	3,257,421
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year	5,926	4,011,651,516	0	(a) 0	0	0	0	0	5,926	4,011,651,516
21. Issued during year	129	88,751,567	0	0	0	0	0	0	129	88,751,567
22. Other changes to in force (Net)	(370)	(293,859,717)	0	0	0	0	0	0	(370)	(293,859,717)
23. In force December 31 of current year	5,685	3,806,543,366	0	(a) 0	0	0	0	0	5,685	3,806,543,366

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

**ACCIDENT AND HEALTH INSURANCE**

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	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 Employees 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 Other Individual Policies:	0	0	0	0	0
25.1 Non-cancelable (b)	819,133	819,105	0	433,740	432,258
25.2 Guaranteed renewable (b)	17,273	17,273	0	8,400	8,400
25.3 Non-renewable for stated reasons only (b)	8,629	8,628	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)	845,035	845,006	0	442,140	440,658
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	845,035	845,006	0	442,140	440,658

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,477,556	0	0	0	1,477,556
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)	1,487,556	0	0	0	1,487,556
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	624,196	0	0	0	624,196
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	110,750	0	0	0	110,750
12. Surrender values and withdrawals for life contracts	104,228	0	0	0	104,228
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	839,173	0	0	0	839,173
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	7	600,972	0	0	0	0	0	0	7	600,972
Settled during current year:										
18.1 By payment in full	7	600,972	0	0	0	0	0	0	7	600,972
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	7	600,972	0	0	0	0	0	0	7	600,972
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	600,972	0	0	0	0	0	0	7	600,972
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year	984	352,431,320	0 (a)	0	0	0	0	0	984	352,431,320
21. Issued during year	38	16,953,075	0	0	0	0	0	0	38	16,953,075
22. Other changes to in force (Net)	(60)	(21,022,942)	0	0	0	0	0	0	(60)	(21,022,942)
23. In force December 31 of current year	962	348,361,453	0 (a)	0	0	0	0	0	962	348,361,453

(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 Employees 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 Other Individual Policies:	0	0	0	0	0
25.1 Non-cancelable (b)	255,922	255,913	0	661,255	661,255
25.2 Guaranteed renewable (b)	2,302	2,302	0	0	4,108
25.3 Non-renewable for stated reasons only (b)	449	449	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	258,673	258,664	0	661,255	665,363
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	258,673	258,664	0	661,255	665,363

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	5,661,657	0	0	0	5,661,657
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)	5,661,657	0	0	0	5,661,657
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	3,690,866	0	0	0	3,690,866
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	87,117	0	0	0	87,117
12. Surrender values and withdrawals for life contracts	716,260	0	0	0	716,260
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	4,494,243	0	0	0	4,494,243
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year	12	4,110,603	0	0	0	0	0	0	12	4,110,603
Settled during current year:										
18.1 By payment in full	12	4,110,603	0	0	0	0	0	0	12	4,110,603
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	12	4,110,603	0	0	0	0	0	0	12	4,110,603
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	4,110,603	0	0	0	0	0	0	12	4,110,603
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year	5,227	2,809,774,155	0	(a) 0	0	0	0	0	5,227	2,809,774,155
21. Issued during year	108	81,113,314	0	0	0	0	0	0	108	81,113,314
22. Other changes to in force (Net)	(354)	(169,138,082)	0	0	0	0	0	0	(354)	(169,138,082)
23. In force December 31 of current year	4,981	2,721,749,387	0	(a) 0	0	0	0	0	4,981	2,721,749,387

(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 Employees 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)	738,597	738,571	0	85,593	115,337
25.2 Guaranteed renewable (b)	21,265	21,264	0	3,449	3,449
25.3 Non-renewable for stated reasons only (b)	2,425	2,425	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)	762,287	762,260	0	89,042	118,786
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	762,287	762,260	0	89,042	118,786

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: Ordinary, Credit Life (Group and Individual), Group, Industrial, Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: Ordinary (No. of Pols. & Certifs., Amount), Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), Group (No. of Certifs., Amount), Industrial (No. of Pols. & Certifs., Amount), Total (No. of Pols. & Certifs., Amount). Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: Direct Premiums, Direct Premiums Earned, Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, Direct Losses Paid, Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF American Samoa

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 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. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Guam

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 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. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various sub-categories.

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Puerto Rico

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	3,772,894	0	0	0	3,772,894
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)	3,772,894	0	0	0	3,772,894
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	1,591,257	0	0	0	1,591,257
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	1,329,755	0	0	0	1,329,755
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	2,921,011	0	0	0	2,921,011
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year	1	554,087	0	0	0	0	0	0	1	554,087
17. Incurred during current year	7	1,565,531	0	0	0	0	0	0	7	1,565,531
Settled during current year:										
18.1 By payment in full	7	1,819,618	0	0	0	0	0	0	7	1,819,618
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	7	1,819,618	0	0	0	0	0	0	7	1,819,618
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	1,819,618	0	0	0	0	0	0	7	1,819,618
19. Unpaid Dec. 31, current year (16+17-18.6)	1	300,000	0	0	0	0	0	0	1	300,000
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	886	886,215,727	0	(a) 0	0	0	0	0	886	886,215,727
21. Issued during year	109	46,360,534	0	0	0	0	0	0	109	46,360,534
22. Other changes to in force (Net)	(61)	(33,524,286)	0	0	0	0	0	0	(61)	(33,524,286)
23. In force December 31 of current year	934	899,051,976	0	(a) 0	0	0	0	0	934	899,051,976

(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 Employees 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)	1,220,909	1,220,866	0	0	9,800
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	27,759	27,758	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)	1,248,669	1,248,625	0	0	9,800
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,248,669	1,248,625	0	0	9,800

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF U.S. Virgin Islands

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	1,740	0	0	0	1,740
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)	1,740	0	0	0	1,740
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
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	6	0	0	0	6
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	0	0	0	6
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
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 (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	5	1,600,000	0	0	0	0	0	0	5	1,600,000
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(2)	(600,000)	0	0	0	0	0	0	(2)	(600,000)
23. In force December 31 of current year	3	1,000,000	0	0	0	0	0	0	3	1,000,000

(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 Employees 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	2,499	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	2,499	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,499	2,499	0	0	0

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Northern Mariana Islands

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 1-2 Ordinary (No. of Pols. & Certifs., Amount), 3-4 Credit Life (No. of Ind. Pols. & Gr. Certifs., Amount), 5-6 Group (No. of Certifs., Amount), 7-8 Industrial (No. of Pols. & Certifs., Amount), 9-10 Total (No. of Pols. & Certifs., Amount). Rows include Maturity and Endowment Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies, Federal Employees Health Benefits Plan, Medicare Title XVIII, and other individual policies.

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Canada

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	4,711	0	0	0	4,711
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)	4,711	0	0	0	4,711
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
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
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	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
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 (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	8	6,200,000	0	0	0	0	0	0	8	6,200,000
21. Issued during year	1	2,000,000	0	0	0	0	0	0	1	2,000,000
22. Other changes to in force (Net)	(1)	(2,000,000)	0	0	0	0	0	0	(1)	(2,000,000)
23. In force December 31 of current year	8	6,200,000	0	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 Employees 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 Other Individual Policies:					
25.1 Non-cancelable (b)	1,295	1,295	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)	1,295	1,295	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,295	1,295	0	0	0

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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

DIRECT BUSINESS IN THE STATE OF Other Aliens

DURING THE YEAR 2021

NAIC Group Code 0704

LIFE INSURANCE

NAIC Company Code 89206

Table with 5 columns: 1 Ordinary, 2 Credit Life (Group and Individual), 3 Group, 4 Industrial, 5 Total. Rows include Direct Premiums and Annuity Considerations, Direct Dividends to Policyholders/Refunds to Members, Direct Claims and Benefits Paid, and Details of Write-ins.

Table with 10 columns: 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. Rows include Direct Death Benefits and Matured Endowments Incurred and Policy Exhibit.

(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

Table with 5 columns: 1 Direct Premiums, 2 Direct Premiums Earned, 3 Policyholder Dividends Paid, Refunds to Members or Credited on Direct Business, 4 Direct Losses Paid, 5 Direct Losses Incurred. Rows include Group Policies (b) and various accident types.

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



**ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION**

DIRECT BUSINESS IN THE STATE OF Grand Total

DURING THE YEAR 2021

NAIC Group Code 0704

**LIFE INSURANCE**

NAIC Company Code 89206

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	388,734,396	0	0	0	388,734,396
2. Annuity considerations	102,217	0	0	0	102,217
3. Deposit-type contract funds	92,615,310	XXX	0	XXX	92,615,310
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	481,451,924	0	0	0	481,451,924
<b>DIRECT DIVIDENDS TO POLICYHOLDERS/REFUNDS TO MEMBERS</b>					
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 plus 7.4)	0	0	0	0	0
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits	373,740,391	0	0	0	373,740,391
10. Matured endowments	6,183	0	0	0	6,183
11. Annuity benefits	3,253,462	0	0	0	3,253,462
12. Surrender values and withdrawals for life contracts	83,607,608	0	0	0	83,607,608
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	460,607,644	0	0	0	460,607,644
<b>DETAILS OF WRITE-INS</b>					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No. of Pol. & Certifs.	Amount	No. of Ind. Pol. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No. of Pol. & Certifs.	Amount	No. of Pol. & Certifs.	Amount
16. Unpaid December 31, prior year	136	59,661,242	0	0	0	0	0	0	136	59,661,242
17. Incurred during current year	1,211	343,943,556	0	0	0	0	0	0	1,211	343,943,556
Settled during current year:										
18.1 By payment in full	1,200	341,612,430	0	0	0	0	0	0	1,200	341,612,430
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	1,200	341,612,430	0	0	0	0	0	0	1,200	341,612,430
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	1,200	341,612,430	0	0	0	0	0	0	1,200	341,612,430
19. Unpaid Dec. 31, current year (16+17-18.6)	147	61,992,368	0	0	0	0	0	0	147	61,992,368
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year	259,938	160,087,539,184	0	(a) 0	0	0	0	0	259,938	160,087,539,184
21. Issued during year	7,268	5,116,153,449	0	0	0	0	0	0	7,268	5,116,153,449
22. Other changes to in force (Net)	(15,075)	(8,760,534,965)	0	0	0	0	0	0	(15,075)	(8,760,534,965)
23. In force December 31 of current year	252,131	156,443,157,668	0	(a) 0	0	0	0	0	252,131	156,443,157,668

(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 Employees 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)	41,596,566	41,595,110	0	23,782,561	23,515,016
25.2 Guaranteed renewable (b)	524,134	524,115	0	139,337	151,505
25.3 Non-renewable for stated reasons only (b)	423,701	423,686	0	31,248	31,248
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (sum of Lines 25.1 to 25.5)	42,544,401	42,542,911	0	23,953,146	23,697,769
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	42,544,401	42,542,911	0	23,953,146	23,697,769

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

**ANNUAL STATEMENT FOR THE YEAR 2021 OF 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 .....	21,512,936
2. Current year's realized pre-tax capital gains/(losses) of \$ ..... 4,404,355 transferred into the reserve net of taxes of \$ ..... 924,914 .....	3,479,441
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) .....	24,992,377
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4) .....	5,410,396
6. Reserve as of December 31, current year (Line 4 minus Line 5)	19,581,981

**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 Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2021 .....	4,724,313	686,083	0	5,410,396
2. 2022 .....	4,178,097	1,234,639	0	5,412,736
3. 2023 .....	3,431,816	951,031	0	4,382,847
4. 2024 .....	2,676,045	687,433	0	3,363,478
5. 2025 .....	1,861,721	407,936	0	2,269,657
6. 2026 .....	1,300,334	120,822	0	1,421,156
7. 2027 .....	1,015,174	(23,535)	0	991,639
8. 2028 .....	726,880	(24,239)	0	702,641
9. 2029 .....	431,548	(25,641)	0	405,907
10. 2030 .....	225,152	(26,945)	0	198,207
11. 2031 .....	145,040	(27,850)	0	117,190
12. 2032 .....	112,990	(29,077)	0	83,913
13. 2033 .....	85,580	(29,871)	0	55,709
14. 2034 .....	60,707	(31,065)	0	29,642
15. 2035 .....	48,315	(31,576)	0	16,739
16. 2036 .....	52,714	(32,653)	0	20,061
17. 2037 .....	56,786	(33,400)	0	23,386
18. 2038 .....	57,896	(33,812)	0	24,084
19. 2039 .....	58,084	(33,369)	0	24,715
20. 2040 .....	55,460	(34,352)	0	21,108
21. 2041 .....	49,830	(33,969)	0	15,861
22. 2042 .....	40,600	(32,549)	0	8,051
23. 2043 .....	34,062	(28,042)	0	6,020
24. 2044 .....	27,323	(24,616)	0	2,707
25. 2045 .....	20,778	(20,225)	0	553
26. 2046 .....	15,526	(16,285)	0	(759)
27. 2047 .....	11,100	(12,473)	0	(1,373)
28. 2048 .....	6,708	(9,921)	0	(3,213)
29. 2049 .....	2,353	(7,087)	0	(4,734)
30. 2050 .....	3	(4,536)	0	(4,533)
31. 2051 and Later	0	(1,417)	0	(1,417)
32. Total (Lines 1 to 31)	21,512,935	3,479,441	0	24,992,376

ANNUAL STATEMENT FOR THE YEAR 2021 OF 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 .....	14,184,272	3,268,507	17,452,779	166,634	29,034	195,668	17,648,447
2. Realized capital gains/(losses) net of taxes - General Account .....	1,850,480	0	1,850,480	111,198	0	111,198	1,961,678
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 .....	119,438	0	119,438	1,002,969	1,221,910	2,224,879	2,344,317
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 .....	3,664,156	601,502	4,265,658	0	22,336	22,336	4,287,993
8. Accumulated balances (Lines 1 through 5 - 6 + 7) .....	19,818,346	3,870,009	23,688,355	1,280,801	1,273,280	2,554,081	26,242,435
9. Maximum reserve .....	17,276,553	3,479,782	20,756,335	2,874,968	839,724	3,714,693	24,471,028
10. Reserve objective .....	10,444,311	2,677,450	13,121,761	2,837,231	776,967	3,614,198	16,735,959
11. 20% of (Line 10 - Line 8) .....	(1,874,807)	(238,512)	(2,113,319)	311,286	(99,263)	212,023	(1,901,295)
12. Balance before transfers (Lines 8 + 11) .....	17,943,539	3,631,497	21,575,036	1,592,087	1,174,017	2,766,104	24,341,140
13. Transfers .....	151,716	(151,716)	0	334,293	(334,293)	0	0
14. Voluntary contribution .....	0	0	0	0	0	0	0
15. Adjustment down to maximum/up to zero .....	(818,701)	0	(818,701)	0	0	0	(818,701)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	17,276,554	3,479,781	20,756,335	1,926,380	839,724	2,766,104	23,522,439

ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

**ASSET VALUATION RESERVE**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**DEFAULT COMPONENT**

Line Number	NAIC Designation	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)
LONG-TERM BONDS												
1.		Exempt Obligations	28,823,305	XXX	XXX	28,823,305	0.0000	0	0.0000	0	0.0000	0
2.1	1	NAIC Designation Category 1.A	100,961,389	XXX	XXX	100,961,389	0.0005	50,481	0.0016	161,538	0.0033	333,173
2.2	1	NAIC Designation Category 1.B	41,631,566	XXX	XXX	41,631,566	0.0005	20,816	0.0016	66,611	0.0033	137,384
2.3	1	NAIC Designation Category 1.C	85,235,118	XXX	XXX	85,235,118	0.0005	42,618	0.0016	136,376	0.0033	281,276
2.4	1	NAIC Designation Category 1.D	114,241,661	XXX	XXX	114,241,661	0.0005	57,121	0.0016	182,787	0.0033	376,997
2.5	1	NAIC Designation Category 1.E	95,165,982	XXX	XXX	95,165,982	0.0005	47,583	0.0016	152,266	0.0033	314,048
2.6	1	NAIC Designation Category 1.F	242,744,097	XXX	XXX	242,744,097	0.0005	121,372	0.0016	388,391	0.0033	801,056
2.7	1	NAIC Designation Category 1.G	199,785,763	XXX	XXX	199,785,763	0.0005	99,893	0.0016	319,657	0.0033	659,293
2.8		Subtotal NAIC 1 (2.1+2.2+2.3+2.4+2.5+2.6+2.7)	879,765,576	XXX	XXX	879,765,576	XXX	439,883	XXX	1,407,625	XXX	2,903,226
3.1	2	NAIC Designation Category 2.A	247,095,056	XXX	XXX	247,095,056	0.0021	518,900	0.0064	1,581,408	0.0106	2,619,208
3.2	2	NAIC Designation Category 2.B	416,977,312	XXX	XXX	416,977,312	0.0021	875,652	0.0064	2,668,655	0.0106	4,419,960
3.3	2	NAIC Designation Category 2.C	235,867,221	XXX	XXX	235,867,221	0.0021	495,321	0.0064	1,509,550	0.0106	2,500,193
3.4		Subtotal NAIC 2 (3.1+3.2+3.3)	899,939,589	XXX	XXX	899,939,589	XXX	1,889,873	XXX	5,759,613	XXX	9,539,360
4.1	3	NAIC Designation Category 3.A	36,592,224	XXX	XXX	36,592,224	0.0099	362,263	0.0263	962,375	0.0376	1,375,868
4.2	3	NAIC Designation Category 3.B	19,021,354	XXX	XXX	19,021,354	0.0099	188,311	0.0263	500,262	0.0376	715,203
4.3	3	NAIC Designation Category 3.C	14,517,168	XXX	XXX	14,517,168	0.0099	143,720	0.0263	381,802	0.0376	545,846
4.4		Subtotal NAIC 3 (4.1+4.2+4.3)	70,130,746	XXX	XXX	70,130,746	XXX	694,294	XXX	1,844,439	XXX	2,636,916
5.1	4	NAIC Designation Category 4.A	1,407,866	XXX	XXX	1,407,866	0.0245	34,493	0.0572	80,530	0.0817	115,023
5.2	4	NAIC Designation Category 4.B	11,007,606	XXX	XXX	11,007,606	0.0245	269,686	0.0572	629,635	0.0817	899,321
5.3	4	NAIC Designation Category 4.C	104,986	XXX	XXX	104,986	0.0245	2,572	0.0572	6,005	0.0817	8,577
5.4		Subtotal NAIC 4 (5.1+5.2+5.3)	12,520,458	XXX	XXX	12,520,458	XXX	306,751	XXX	716,170	XXX	1,022,921
6.1	5	NAIC Designation Category 5.A	2,604,592	XXX	XXX	2,604,592	0.0630	164,089	0.1128	293,798	0.1880	489,663
6.2	5	NAIC Designation Category 5.B	2,214,531	XXX	XXX	2,214,531	0.0630	139,515	0.1128	249,799	0.1880	416,332
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 5 (6.1+6.2+6.3)	4,819,123	XXX	XXX	4,819,123	XXX	303,605	XXX	543,597	XXX	905,995
7.	6	NAIC 6	330,418	XXX	XXX	330,418	0.0000	0	0.2370	78,309	0.2370	78,309
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)	1,896,329,215	XXX	XXX	1,896,329,215	XXX	3,634,406	XXX	10,349,753	XXX	17,086,728
PREFERRED STOCKS												
10.	1	Highest Quality	13,000,000	XXX	XXX	13,000,000	0.0005	6,500	0.0016	20,800	0.0033	42,900
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)	15,000,000	XXX	XXX	15,000,000	XXX	10,700	XXX	33,600	XXX	64,100

ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

**ASSET VALUATION RESERVE (Continued)**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**DEFAULT COMPONENT**

Line Number	NAIC Designation	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)
<b>SHORT-TERM BONDS</b>												
18.		Exempt Obligations	0	XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
19.1	1	NAIC Designation Category 1.A	0	XXX	XXX	0	0.0005	0	0.0016	0	0.0033	0
19.2	1	NAIC Designation Category 1.B	0	XXX	XXX	0	0.0005	0	0.0016	0	0.0033	0
19.3	1	NAIC Designation Category 1.C	0	XXX	XXX	0	0.0005	0	0.0016	0	0.0033	0
19.4	1	NAIC Designation Category 1.D	16,396,195	XXX	XXX	16,396,195	0.0005	8,198	0.0016	26,234	0.0033	54,107
19.5	1	NAIC Designation Category 1.E	17,301,059	XXX	XXX	17,301,059	0.0005	8,651	0.0016	27,682	0.0033	57,093
19.6	1	NAIC Designation Category 1.F	0	XXX	XXX	0	0.0005	0	0.0016	0	0.0033	0
19.7	1	NAIC Designation Category 1.G	0	XXX	XXX	0	0.0005	0	0.0016	0	0.0033	0
19.8		Subtotal NAIC 1 (19.1+19.2+19.3+19.4+19.5+19.6+19.7)	33,697,254	XXX	XXX	33,697,254	XXX	16,849	XXX	53,916	XXX	111,201
20.1	2	NAIC Designation Category 2.A	0	XXX	XXX	0	0.0021	0	0.0064	0	0.0106	0
20.2	2	NAIC Designation Category 2.B	0	XXX	XXX	0	0.0021	0	0.0064	0	0.0106	0
20.3	2	NAIC Designation Category 2.C	0	XXX	XXX	0	0.0021	0	0.0064	0	0.0106	0
20.4		Subtotal NAIC 2 (20.1+20.2+20.3)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
21.1	3	NAIC Designation Category 3.A	0	XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
21.2	3	NAIC Designation Category 3.B	0	XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
21.3	3	NAIC Designation Category 3.C	0	XXX	XXX	0	0.0099	0	0.0263	0	0.0376	0
21.4		Subtotal NAIC 3 (21.1+21.2+21.3)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
22.1	4	NAIC Designation Category 4.A	0	XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
22.2	4	NAIC Designation Category 4.B	0	XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
22.3	4	NAIC Designation Category 4.C	0	XXX	XXX	0	0.0245	0	0.0572	0	0.0817	0
22.4		Subtotal NAIC 4 (22.1+22.2+22.3)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
23.1	5	NAIC Designation Category 5.A	0	XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
23.2	5	NAIC Designation Category 5.B	0	XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
23.3	5	NAIC Designation Category 5.C	0	XXX	XXX	0	0.0630	0	0.1128	0	0.1880	0
23.4		Subtotal NAIC 5 (23.1+23.2+23.3)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
24.	6	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)	33,697,254	XXX	XXX	33,697,254	XXX	16,849	XXX	53,916	XXX	111,201
<b>DERIVATIVE INSTRUMENTS</b>												
26.		Exchange Traded	0	XXX	XXX	0	0.0005	0	0.0016	0	0.0033	0
27.	1	Highest Quality	4,401,414	XXX	XXX	4,401,414	0.0005	2,201	0.0016	7,042	0.0033	14,525
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	4,401,414	XXX	XXX	4,401,414	XXX	2,201	XXX	7,042	XXX	14,525
34.		Total (Lines 9 + 17 + 25 + 33)	1,949,427,883	XXX	XXX	1,949,427,883	XXX	3,664,156	XXX	10,444,311	XXX	17,276,553

**ASSET VALUATION RESERVE (Continued)**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**DEFAULT COMPONENT**

Line Number	NAIC Designation	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)
MORTGAGE LOANS												
In Good Standing:												
35.		Farm Mortgages - CM1 - Highest Quality .....	0	0	XXX	0	0.0011	0	0.0057	0	0.0074	0
36.		Farm Mortgages - CM2 - High Quality .....	0	0	XXX	0	0.0040	0	0.0114	0	0.0149	0
37.		Farm Mortgages - CM3 - Medium Quality .....	0	0	XXX	0	0.0069	0	0.0200	0	0.0257	0
38.		Farm Mortgages - CM4 - Low Medium Quality .....	0	0	XXX	0	0.0120	0	0.0343	0	0.0428	0
39.		Farm Mortgages - CM5 - Low Quality .....	0	0	XXX	0	0.0183	0	0.0486	0	0.0628	0
40.		Residential Mortgages - Insured or Guaranteed .....	0	0	XXX	0	0.0003	0	0.0007	0	0.0011	0
41.		Residential Mortgages - All Other .....	891,361	0	XXX	891,361	0.0015	1,337	0.0034	3,031	0.0046	4,100
42.		Commercial Mortgages - Insured or Guaranteed .....	0	0	XXX	0	0.0003	0	0.0007	0	0.0011	0
43.		Commercial Mortgages - All Other - CM1 - Highest Quality .....	375,495,319	0	XXX	375,495,319	0.0011	413,045	0.0057	2,140,323	0.0074	2,778,665
44.		Commercial Mortgages - All Other - CM2 - High Quality .....	42,641,825	0	XXX	42,641,825	0.0040	170,567	0.0114	486,117	0.0149	635,363
45.		Commercial Mortgages - All Other - CM3 - Medium Quality .....	2,398,947	0	XXX	2,398,947	0.0069	16,553	0.0200	47,979	0.0257	61,653
46.		Commercial Mortgages - All Other - CM4 - Low Medium Quality .....	0	0	XXX	0	0.0120	0	0.0343	0	0.0428	0
47.		Commercial Mortgages - All Other - CM5 - Low Quality .....	0	0	XXX	0	0.0183	0	0.0486	0	0.0628	0
Overdue, Not in Process:												
48.		Farm Mortgages .....	0	0	XXX	0	0.0480	0	0.0868	0	0.1371	0
49.		Residential Mortgages - Insured or Guaranteed .....	0	0	XXX	0	0.0006	0	0.0014	0	0.0023	0
50.		Residential Mortgages - All Other .....	0	0	XXX	0	0.0029	0	0.0066	0	0.0103	0
51.		Commercial Mortgages - Insured or Guaranteed .....	0	0	XXX	0	0.0006	0	0.0014	0	0.0023	0
52.		Commercial Mortgages - All Other .....	0	0	XXX	0	0.0480	0	0.0868	0	0.1371	0
In Process of Foreclosure:												
53.		Farm Mortgages .....	0	0	XXX	0	0.0000	0	0.1942	0	0.1942	0
54.		Residential Mortgages - Insured or Guaranteed .....	0	0	XXX	0	0.0000	0	0.0046	0	0.0046	0
55.		Residential Mortgages - All Other .....	0	0	XXX	0	0.0000	0	0.0149	0	0.0149	0
56.		Commercial Mortgages - Insured or Guaranteed .....	0	0	XXX	0	0.0000	0	0.0046	0	0.0046	0
57.		Commercial Mortgages - All Other .....	0	0	XXX	0	0.0000	0	0.1942	0	0.1942	0
58.		Total Schedule B Mortgages (Sum of Lines 35 through 57)	421,427,452	0	XXX	421,427,452	XXX	601,502	XXX	2,677,450	XXX	3,479,782
59.		Schedule DA Mortgages	0	0	XXX	0	0.0034	0	0.0114	0	0.0149	0
60.		Total Mortgage Loans on Real Estate (Lines 58 + 59)	421,427,452	0	XXX	421,427,452	XXX	601,502	XXX	2,677,450	XXX	3,479,782

**ASSET VALUATION RESERVE**  
**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS**  
**EQUITY AND OTHER INVESTED ASSET COMPONENT**

Line Number	NAIC Designation	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)
<b>COMMON STOCK</b>												
1.		Unaffiliated - Public .....	11,408,010	XXX	XXX	11,408,010	0.0000	0	0.2431 (a)	2,773,287	0.2431 (a)	2,773,287
2.		Unaffiliated - Private .....	0	XXX	XXX	0	0.0000	0	0.1945	0	0.1945	0
3.		Federal Home Loan Bank .....	10,482,600	XXX	XXX	10,482,600	0.0000	0	0.0061	63,944	0.0097	101,681
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/Near Default .....	0	0	0	0	XXX	0	XXX	0	XXX	0
12.		Unaffiliated Common Stock - Public .....	0	0	0	0	0.0000	0	0.1580 (a)	0	0.1580 (a)	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	0.0000 (b)	0	0.0000 (b)	0	0.0000 (b)	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.		<b>Total Common Stock (Sum of Lines 1 through 16)</b>	<b>21,890,610</b>	<b>0</b>	<b>0</b>	<b>21,890,610</b>	<b>XXX</b>	<b>0</b>	<b>XXX</b>	<b>2,837,231</b>	<b>XXX</b>	<b>2,874,968</b>
<b>REAL ESTATE</b>												
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.		<b>Total Real Estate (Sum of Lines 18 through 20)</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>XXX</b>	<b>0</b>	<b>XXX</b>	<b>0</b>	<b>XXX</b>	<b>0</b>
<b>OTHER INVESTED ASSETS</b>												
<b>INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS</b>												
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.		<b>Total with Bond Characteristics (Sum of Lines 22 through 28)</b>	<b>0</b>	<b>XXX</b>	<b>XXX</b>	<b>0</b>	<b>XXX</b>	<b>0</b>	<b>XXX</b>	<b>0</b>	<b>XXX</b>	<b>0</b>

ANNUAL STATEMENT FOR THE YEAR 2021 OF 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 Designation	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 PREFERRED STOCKS												
30.	1	Highest Quality .....	25,836,309	XXX	XXX	25,836,309	0.0005	12,918	0.0016	41,338	0.0033	85,260
31.	2	High Quality .....	4,484,666	XXX	XXX	4,484,666	0.0021	9,418	0.0064	28,702	0.0106	47,537
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)	30,320,975	XXX	XXX	30,320,975	XXX	22,336	XXX	70,040	XXX	132,797
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	0.0000 (c)	0	0.0000 (c)	0	0.0000 (c)	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

ANNUAL STATEMENT FOR THE YEAR 2021 OF 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 Designation	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	0.1580 (a)	0	0.1580 (a)	0
66.		Unaffiliated Private .....	3,299,574	XXX	XXX	3,299,574	0.0000	0	0.1945	641,767	0.1945	641,767
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 & 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)	3,299,574	XXX	XXX	3,299,574	XXX	0	XXX	641,767	XXX	641,767
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 .....	412,405	XXX	0	412,405	0.0000	0	0.1580	65,160	0.1580	65,160
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) .....	412,405	XXX	0	412,405	XXX	0	XXX	65,160	XXX	65,160
86.		Total Other Invested Assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80 and 85)	34,032,954	0	0	34,032,954	XXX	22,336	XXX	776,967	XXX	839,724

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

**BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS REPLICATIONS (SYNTHETIC) ASSETS**

1 RSAT Number	2 Type	3 CUSIP	4 Description of Asset(s)	5 NAIC Designation or Other Description of Asset	6 Value of Asset	7 AVR Basic Contribution	8 AVR Reserve Objective	9 AVR Maximum Reserve
<b>NONE</b>								
0599999 - Total								

ANNUAL STATEMENT FOR THE YEAR 2021 OF 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
0599999. Death Claims - Disposed Of				0	0	0	XXX
1099999. Additional Accidental Death Benefits Claims - Disposed Of				0	0	0	XXX
1599999. Disability Benefits Claims - Disposed Of				0	0	0	XXX
2099999. Matured Endowments Claims - Disposed Of				0	0	0	XXX
2599999. Annuities with Life Contingency Claims - Disposed Of				0	0	0	XXX
2699999. Claims Disposed of During Current Year				0	0	0	XXX
6830848	6036	PA	2009	100,000	0	100,000	Claim resisted due to suicide within the first 2 policy years. Refund of premium paid.
06042516	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.
06046123	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 with interest
2799999. Death Claims - Ordinary				3,460,000	0	3,460,000	XXX
3199999. Death Claims - Resisted				3,460,000	0	3,460,000	XXX
3699999. Additional Accidental Death Benefits Claims - Resisted				0	0	0	XXX
4199999. Disability Benefits Claims - Resisted				0	0	0	XXX
4699999. Matured Endowments Claims - Resisted				0	0	0	XXX
5199999. Annuities with Life Contingencies Claims - Resisted				0	0	0	XXX
5299999. Claims Resisted During Current Year				3,460,000	0	3,460,000	XXX
5399999 - Totals				3,460,000	0	3,460,000	XXX

ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

**SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT**

	Total		Group Accident and Health		Credit Accident and Health (Group and Individual)		Collectively Renewable		Other Individual Contracts									
	1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other	
									9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
<b>PART 1. - ANALYSIS OF UNDERWRITING OPERATIONS</b>																		
1. Premiums written	26,926,372	XXX	0	XXX	0	XXX	0	XXX	26,145,374	XXX	589,947	XXX	191,051	XXX	0	XXX	0	XXX
2. Premiums earned	28,012,420	XXX	0	XXX	0	XXX	0	XXX	27,257,089	XXX	601,520	XXX	153,811	XXX	0	XXX	0	XXX
3. Incurred claims	16,811,856	60.0	0	0.0	0	0.0	0	0.0	16,802,682	61.6	1,307	0.2	7,867	5.1	0	0.0	0	0.0
4. Cost containment expenses	185,586	0.7	0	0.0	0	0.0	0	0.0	184,622	0.7	691	0.1	273	0.2	0	0.0	0	0.0
5. Incurred claims and cost containment expenses (Lines 3 and 4)	16,997,442	60.7	0	0.0	0	0.0	0	0.0	16,987,304	62.3	1,998	0.3	8,140	5.3	0	0.0	0	0.0
6. Increase in contract reserves	(159,877)	(0.6)	0	0.0	0	0.0	0	0.0	165,890	0.6	(306,220)	(50.9)	(19,547)	(12.7)	0	0.0	0	0.0
7. Commissions (a)	4,790,440	17.1	0	0.0	0	0.0	0	0.0	4,734,866	17.4	52,022	8.6	3,552	2.3	0	0.0	0	0.0
8. Other general insurance expenses	10,519,269	37.6	0	0.0	0	0.0	0	0.0	10,280,499	37.7	136,782	22.7	101,988	66.3	0	0.0	0	0.0
9. Taxes, licenses and fees	1,294,893	4.6	0	0.0	0	0.0	0	0.0	1,265,501	4.6	16,838	2.8	12,554	8.2	0	0.0	0	0.0
10. Total other expenses incurred	16,604,602	59.3	0	0.0	0	0.0	0	0.0	16,280,866	59.7	205,642	34.2	118,094	76.8	0	0.0	0	0.0
11. Aggregate write-ins for deductions	3,280,512	11.7	0	0.0	0	0.0	0	0.0	3,086,423	11.3	194,089	32.3	0	0.0	0	0.0	0	0.0
12. Gain from underwriting before dividends or refunds	(8,710,259)	(31.1)	0	0.0	0	0.0	0	0.0	(9,263,394)	(34.0)	506,011	84.1	47,124	30.6	0	0.0	0	0.0
13. Dividends or refunds	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
14. Gain from underwriting after dividends or refunds	(8,710,259)	(31.1)	0	0.0	0	0.0	0	0.0	(9,263,394)	(34.0)	506,011	84.1	47,124	30.6	0	0.0	0	0.0
<b>DETAILS OF WRITE-INS</b>																		
1101. Surrenders/ROP Benefits	3,280,512	11.7	0	0.0	0	0.0	0	0.0	3,086,423	11.3	194,089	32.3	0	0.0	0	0.0	0	0.0
1102. ....																		
1103. ....																		
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	3,280,512	11.7	0	0.0	0	0.0	0	0.0	3,086,423	11.3	194,089	32.3	0	0.0	0	0.0	0	0.0

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION  
**SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)**

	1 Total	2 Group Accident and Health	3 Credit Accident and Health (Group and Individual)	4 Collectively Renewable	Other Individual Contracts				
					5 Non-Cancelable	6 Guaranteed Renewable	7 Non-Renewable for Stated Reasons Only	8 Other Accident Only	9 All Other
<b>PART 2. - RESERVES AND LIABILITIES</b>									
A. Premium Reserves:									
1. Unearned premiums .....	50,042	0	0	0	0	80,717	(30,675)	0	0
2. Advance premiums .....	365,829	0	0	0	362,060	3,387	382	0	0
3. Reserve for rate credits .....	0	0	0	0	0	0	0	0	0
4. Total premium reserves, current year .....	415,871	0	0	0	362,060	84,104	(30,293)	0	0
5. Total premium reserves, prior year .....	783,042	0	0	0	754,898	95,677	(67,533)	0	0
6. Increase in total premium reserves .....	(367,171)	0	0	0	(392,838)	(11,573)	37,240	0	0
B. Contract Reserves:									
1. Additional reserves (a) .....	20,220,769	0	0	0	18,012,246	1,986,878	221,645	0	0
2. Reserve for future contingent benefits .....	0	0	0	0	0	0	0	0	0
3. Total contract reserves, current year .....	20,220,769	0	0	0	18,012,246	1,986,878	221,645	0	0
4. Total contract reserves, prior year .....	20,380,646	0	0	0	17,846,356	2,293,098	241,192	0	0
5. Increase in contract reserves .....	(159,877)	0	0	0	165,890	(306,220)	(19,547)	0	0
C. Claim Reserves and Liabilities:									
1. Total current year .....	70,041,606	0	0	0	69,689,466	252,332	99,808	0	0
2. Total prior year .....	64,284,656	0	0	0	63,762,150	424,327	98,179	0	0
3. Increase .....	5,756,950	0	0	0	5,927,316	(171,995)	1,629	0	0

<b>PART 3. - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES</b>									
1. Claims paid during the year:									
1.1 On claims incurred prior to current year .....	10,951,465	0	0	0	10,773,607	171,620	6,238	0	0
1.2 On claims incurred during current year .....	103,441	0	0	0	101,759	1,682	0	0	0
2. Claim reserves and liabilities, December 31, current year:									
2.1 On claims incurred prior to current year .....	59,527,433	0	0	0	59,419,325	108,108	0	0	0
2.2 On claims incurred during current year .....	10,514,173	0	0	0	10,270,141	144,224	99,808	0	0
3. Test:									
3.1 Lines 1.1 and 2.1 .....	70,478,898	0	0	0	70,192,932	279,728	6,238	0	0
3.2 Claim reserves and liabilities, December 31, prior year .....	64,284,656	0	0	0	63,762,150	424,327	98,179	0	0
3.3 Line 3.1 minus Line 3.2 .....	6,194,242	0	0	0	6,430,782	(144,599)	(91,941)	0	0

<b>PART 4. - REINSURANCE</b>									
A. Reinsurance Assumed:									
1. Premiums written .....	180,400	0	0	0	155,573	24,348	479	0	0
2. Premiums earned .....	178,439	0	0	0	154,175	23,753	511	0	0
3. Incurred claims .....	319,713	0	0	0	337,523	(16,810)	(1,000)	0	0
4. Commissions .....	13,314	0	0	0	11,356	1,919	39	0	0
B. Reinsurance Ceded:									
1. Premiums written .....	16,758,114	0	0	0	16,526,814	85	231,215	0	0
2. Premiums earned .....	16,103,216	0	0	0	15,872,022	26	231,168	0	0
3. Incurred claims .....	19,372,705	0	0	0	19,329,283	28,654	14,768	0	0
4. Commissions .....	5,333,342	0	0	0	5,282,533	25	50,784	0	0

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

ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

**SCHEDULE H - PART 5 - HEALTH CLAIMS**

	1 Medical	2 Dental	3 Other	4 Total
<b>A. Direct:</b>				
1. Incurred Claims .....	0	0	35,864,849	35,864,849
2. Beginning Claim Reserves and Liabilities .....	0	0	153,513,904	153,513,904
3. Ending Claim Reserves and Liabilities .....	0	0	164,559,670	164,559,670
4. Claims Paid	0	0	24,819,083	24,819,083
<b>B. Assumed Reinsurance:</b>				
5. Incurred Claims .....	0	0	319,714	319,714
6. Beginning Claim Reserves and Liabilities .....	0	0	4,570,964	4,570,964
7. Ending Claim Reserves and Liabilities .....	0	0	3,912,266	3,912,266
8. Claims Paid	0	0	978,412	978,412
<b>C. Ceded Reinsurance:</b>				
9. Incurred Claims .....	0	0	19,372,706	19,372,706
10. Beginning Claim Reserves and Liabilities .....	0	0	97,535,739	97,535,739
11. Ending Claim Reserves and Liabilities .....	0	0	101,114,221	101,114,221
12. Claims Paid	0	0	15,794,224	15,794,224
<b>D. Net:</b>				
13. Incurred Claims .....	0	0	16,811,857	16,811,857
14. Beginning Claim Reserves and Liabilities .....	0	0	60,549,129	60,549,129
15. Ending Claim Reserves and Liabilities .....	0	0	67,357,715	67,357,715
16. Claims Paid	0	0	10,003,271	10,003,271
<b>E. Net Incurred Claims and Cost Containment Expenses:</b>				
17. Incurred Claims and Cost Containment Expenses .....	0	0	16,997,443	16,997,443
18. Beginning Reserves and Liabilities .....	0	0	60,555,567	60,555,567
19. Ending Reserves and Liabilities .....	0	0	67,363,734	67,363,734
20. Paid Claims and Cost Containment Expenses	0	0	10,189,276	10,189,276

ANNUAL STATEMENT FOR THE YEAR 2021 OF 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 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Type of Business Assumed	8 Amount of In Force at End of Year	9 Reserve	10 Premiums	11 Reinsurance Payable on Paid and Unpaid Losses	12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
<b>NONE</b>												
9999999 - Totals												

ANNUAL STATEMENT FOR THE YEAR 2021 OF 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 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Type of Business Assumed	8 Premiums	9 Unearned Premiums	10 Reserve Liability Other Than for Unearned Premiums	11 Reinsurance Payable on Paid and Unpaid Losses	12 Modified Coinsurance Reserve	13 Funds Withheld Under Coinsurance
0399999. Total - U.S. Affiliates							0	0	0	0	0	0
0699999. Total - Non-U.S. Affiliates							0	0	0	0	0	0
0799999. Total - Affiliates							0	0	0	0	0	0
61301	47-0098400	05/01/1985	Ameritas Life Insurance Corporation	NE	QA/I	LTDI	49,643	6,298	1,188,908	7,248	0	0
64017	75-0300900	11/23/1987	Jefferson National Life Insurance Company	TX	QA/I	LTDI	67,639	12,601	2,556,189	40,370	0	0
57320	47-0339250	09/09/1990	Woodmen of the World	NE	QA/I	LTDI	67,444	5,170	817,038	18,506	0	0
0899999. U.S. Non-Affiliates							184,726	24,069	4,562,135	66,124	0	0
1099999. Total - Non-Affiliates							184,726	24,069	4,562,135	66,124	0	0
1199999. Total U.S. (Sum of 0399999 and 0899999)							184,726	24,069	4,562,135	66,124	0	0
1299999. Total Non-U.S. (Sum of 0699999 and 0999999)							0	0	0	0	0	0
9999999 - Totals							184,726	24,069	4,562,135	66,124	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

**SCHEDULE S - PART 2**

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
13575	26-3791519	05/01/2011	Montgomery Re	VT	0	1,326,953
13575	26-3791519	07/01/2012	Montgomery Re	VT	0	4,800,746
15363	80-0955278	12/31/2013	Kenwood Re	VT	0	13,423,309
15855	47-4249160	12/31/2015	Camargo Re	OH	0	7,033,725
15855	47-4249160	12/31/2018	Camargo Re	OH	0	138,494
<b>0199999. Life and Annuity - U.S. Affiliates - Captive</b>					0	26,723,227
67172	31-0397080	10/01/2006	The Ohio National Life Insurance Comp	OH	0	40,123
67172	31-0397080	10/01/2009	The Ohio National Life Insurance Comp	OH	0	407,523
67172	31-0397080	09/01/2014	The Ohio National Life Insurance Comp	OH	0	87,953
<b>0299999. Life and Annuity - U.S. Affiliates - Other</b>					0	535,599
<b>0399999. Total Life and Annuity - U.S. Affiliates</b>					0	27,258,826
<b>0699999. Total Life and Annuity - Non-U.S. Affiliates</b>					0	0
<b>0799999. Total Life and Annuity - Affiliates</b>					0	27,258,826
90611	41-1366075	01/01/2003	Allianz Life Insurance Co. of North Amer	MN	18,000	153,000
90611	41-1366075	01/01/2003	Allianz Life Insurance Co. of North Amer	MN	0	15,339
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North Amer	MN	0	90,000
90611	41-1366075	04/01/2003	Allianz Life Insurance Co. of North Amer	MN	0	283,077
90611	41-1366075	04/15/1999	Allianz Life Insurance Co. of North Amer	MN	0	242,260
90611	41-1366075	07/01/2002	Allianz Life Insurance Co. of North Amer	MN	0	318,431
90611	41-1366075	07/31/2001	Allianz Life Insurance Co. of North Amer	MN	15,003	30,006
86258	13-2572994	04/01/2004	General Re Life Corp	CT	161,281	0
86258	13-2572994	10/10/2009	General Re Life Corp	CT	34,591	1,188,388
88340	59-2859797	01/01/2006	Hannover Life Reassurance Comp of America	FL	135,000	22,500
88340	59-2859797	01/01/2010	Hannover Life Reassurance Comp of America	FL	6,272	47,458
88340	59-2859797	11/01/2016	Hannover Life Reassurance Comp of America	FL	89,999	0
66346	58-0828824	01/01/2003	Munich American Reassurance Company	GA	18,000	153,000
66346	58-0828824	01/01/2003	Munich American Reassurance Company	GA	0	15,339
66346	58-0828824	01/01/2006	Munich American Reassurance Company	GA	135,000	22,500
66346	58-0828824	01/19/2005	Munich American Reassurance Company	GA	0	90,000
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	67,500	225,000
66346	58-0828824	04/01/2003	Munich American Reassurance Company	GA	0	283,077
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	90,000	90,000
66346	58-0828824	04/01/2004	Munich American Reassurance Company	GA	161,281	0
66346	58-0828824	04/15/1999	Munich American Reassurance Company	GA	0	45,000
66346	58-0828824	06/04/2007	Munich American Reassurance Company	GA	1,100,000	3,262,500
66346	58-0828824	07/01/2002	Munich American Reassurance Company	GA	0	458,957
66346	58-0828824	07/01/2005	Munich American Reassurance Company	GA	0	67,500
66346	58-0828824	07/31/2001	Munich American Reassurance Company	GA	60,012	60,012
66346	58-0828824	09/01/2000	Munich American Reassurance Company	GA	149,796	0
66346	58-0828824	10/01/2007	Munich American Reassurance Company	GA	51,373	0
66346	58-0828824	10/10/2009	Munich American Reassurance Company	GA	0	273,721
93572	43-1235868	01/01/1994	RGA Reinsurance Company	MO	0	30,000
93572	43-1235868	01/01/2003	RGA Reinsurance Company	MO	18,000	153,000
93572	43-1235868	01/01/2003	RGA Reinsurance Company	MO	0	15,339
93572	43-1235868	04/01/2003	RGA Reinsurance Company	MO	0	283,077
93572	43-1235868	04/15/1999	RGA Reinsurance Company	MO	0	45,000
93572	43-1235868	07/01/2002	RGA Reinsurance Company	MO	0	477,787
93572	43-1235868	07/31/2001	RGA Reinsurance Company	MO	14,994	29,988
93572	43-1235868	07/01/2019	RGA Reinsurance Company	MO	1,732,170	749,805
93572	43-1235868	09/01/2000	RGA Reinsurance Company	MO	74,907	0
93572	43-1235868	10/01/1995	RGA Reinsurance Company	MO	70,516	204,187
93572	43-1235868	10/01/2007	RGA Reinsurance Company	MO	0	512,444
93572	43-1235868	10/10/2009	RGA Reinsurance Company	MO	0	1,179,455
64688	75-6020048	10/01/2007	SCOR Global Life American Reins Co.	DE	70,780	0
64688	75-6020048	10/10/2009	SCOR Global Life American Reins Co.	DE	34,591	273,721
87572	23-2038295	01/01/2006	Scottish Re USA Inc.	DE	45,794	10,031
68713	84-0499703	01/01/1994	Security Life of Denver Insurance Co.	CO	0	30,000
68713	84-0499703	01/01/2002	Security Life of Denver Insurance Co.	CO	42,540	0
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Co.	CO	18,000	153,000
68713	84-0499703	01/01/2003	Security Life of Denver Insurance Co.	CO	0	15,339
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Co.	CO	40,500	135,000
68713	84-0499703	04/01/2003	Security Life of Denver Insurance Co.	CO	0	283,077
68713	84-0499703	04/01/2004	Security Life of Denver Insurance Co.	CO	161,281	0
68713	84-0499703	04/01/2004	Security Life of Denver Insurance Co.	CO	189,000	54,000
68713	84-0499703	05/01/2002	Security Life of Denver Insurance Co.	CO	277,713	442,923
68713	84-0499703	07/01/1997	Security Life of Denver Insurance Co.	CO	200,000	0
68713	84-0499703	07/01/2002	Security Life of Denver Insurance Co.	CO	0	618,313
68713	84-0499703	07/31/2001	Security Life of Denver Insurance Co.	CO	60,012	30,006
68713	84-0499703	10/01/1995	Security Life of Denver Insurance Co.	CO	70,516	204,187
82627	06-0839705	01/01/1987	Swiss Re Life & Health America, Inc.	MO	396,416	0
82627	06-0839705	01/01/1994	Swiss Re Life & Health America, Inc.	MO	0	90,000
82627	06-0839705	01/01/2006	Swiss Re Life & Health America, Inc.	MO	36,774	20,062
82627	06-0839705	01/01/2010	Swiss Re Life & Health America, Inc.	MO	6,272	47,458
82627	06-0839705	06/04/2007	Swiss Re Life & Health America, Inc.	MO	175,000	3,262,500
82627	06-0839705	07/01/1997	Swiss Re Life & Health America, Inc.	MO	1,020,000	0
82627	06-0839705	07/01/2002	Swiss Re Life & Health America, Inc.	MO	0	477,787
82627	06-0839705	09/05/2000	Swiss Re Life & Health America, Inc.	MO	0	60,935
82627	06-0839705	10/01/1995	Swiss Re Life & Health America, Inc.	MO	211,548	612,559
65676	35-0472300	01/01/2003	The Lincoln National Life Insurance Comp	IN	18,000	153,000
65676	35-0472300	01/01/2003	The Lincoln National Life Insurance Comp	IN	0	15,339
65676	35-0472300	04/15/1999	The Lincoln National Life Insurance Comp	IN	0	45,000
65676	35-0472300	07/01/2002	The Lincoln National Life Insurance Comp	IN	0	318,712
65676	35-0472300	07/31/2001	The Lincoln National Life Insurance Comp	IN	29,988	29,988
65676	35-0472300	09/01/2000	The Lincoln National Life Insurance Comp	IN	149,796	0
65676	35-0472300	09/05/2000	The Lincoln National Life Insurance Comp	IN	0	60,935
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	IA	75,000	0
86231	39-0989781	01/01/2006	Transamerica Life Insurance Company	IA	567,000	27,000
86231	39-0989781	10/01/2007	Transamerica Life Insurance Company	IA	70,780	0
80659	82-4533188	01/19/2005	US Business of Canada Life Assurance Company	MI	0	36,000
80659	82-4533188	04/01/2004	US Business of Canada Life Assurance Company	MI	0	36,000
80659	82-4533188	07/01/2005	US Business of Canada Life Assurance Company	MI	0	27,000
<b>0899999. Life and Annuity - U.S. Non-Affiliates</b>					8,170,996	18,687,019
00000	AA-3190770	01/01/2006	Chubb Tempest Reins Ltd.	BMU	37,500	0
<b>0999999. Life and Annuity - Non-U.S. Non-Affiliates</b>					37,500	0
<b>1099999. Total Life and Annuity - Non-Affiliates</b>					8,208,496	18,687,019
<b>1199999. Total Life and Annuity</b>					8,208,496	45,945,845
<b>1499999. Total Accident and Health - U.S. Affiliates</b>					0	0
<b>1799999. Total Accident and Health - Non-U.S. Affiliates</b>					0	0
<b>1899999. Total Accident and Health - Affiliates</b>					0	0
39845	48-0921045	09/01/1967	Westport Ins. Corp	MO	86,622	0
86258	13-2572994	01/01/1999	General Re Life Corporation	CT	64,108	66,419
66346	58-0828824	01/01/1999	Munich American Reassurance Company	GA	62,369	302,431
82627	06-0839705	02/01/1981	Swiss Re Life & Health America, Inc	MO	2,145,629	687,498
67598	04-1768571	11/01/1988	Paul Revere Life Insurance Company	MA	325,162	39,871

ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

**SCHEDULE S - PART 2**

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
1999999			Accident and Health - U.S. Non-Affiliates		2,683,890	1,096,219
2199999			Total Accident and Health - Non-Affiliates		2,683,890	1,096,219
2299999			Total Accident and Health		2,683,890	1,096,219
2399999			Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)		10,854,886	47,042,064
2499999			Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)		37,500	0
9999999			Totals - Life, Annuity and Accident and Health		10,892,386	47,042,064

ANNUAL STATEMENT FOR THE YEAR 2021 OF 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 Domi- ciliary Juris- diction	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		
15855	47-4249160	12/31/2015	Camargo Re Captive Inc.	OH	CO/I	XXXL	41,693,663,843	303,656,947	264,260,643	60,528,950	0	0	0	0
15855	47-4249160	12/31/2015	Camargo Re Captive Inc.	OH	CO/I	DIS	0	8,348,586	6,715,649	1,664,151	0	0	0	0
15855	47-4249160	12/31/2018	Camargo Re Captive Inc.	OH	CO/I	XXXL	7,669,669,929	25,794,011	18,938,124	5,141,606	0	0	0	0
15855	47-4249160	12/31/2018	Camargo Re Captive Inc.	OH	CO/I	DIS	0	792,838	591,174	158,039	0	0	0	0
0199999. General Account - Authorized U.S. Affiliates - Captive							49,363,333,772	338,592,382	290,505,590	67,492,746	0	0	0	0
67172	31-0397080	10/04/2006	Ohio Natl Life Ins Co	OH	CO/I	OL	290,083,865	169,325,497	166,391,661	0	0	0	0	0
67172	31-0397080	10/01/2009	Ohio Natl Life Ins Co	OH	CO/I	OL	1,185,723,562	493,492,805	493,978,924	0	0	0	0	0
67172	31-0397080	09/01/2014	Ohio Natl Life Ins Co	OH	CO/I	OL	650,635,912	255,235,541	250,180,505	0	0	0	0	0
0299999. General Account - Authorized U.S. Affiliates - Other							2,126,443,339	918,053,843	910,551,090	0	0	0	0	0
0399999. Total General Account - Authorized U.S. Affiliates							51,489,777,111	1,256,646,225	1,201,056,680	67,492,746	0	0	0	0
0699999. Total General Account - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0	0
0799999. Total General Account - Authorized Affiliates							51,489,777,111	1,256,646,225	1,201,056,680	67,492,746	0	0	0	0
90611	41-1366075	11/01/1983	Allianz Life Insurance Co of N Amer	MN	YRT/I	OL	311,625	5,253	4,795	4,112	0	0	0	0
90611	41-1366075	01/01/1987	Allianz Life Insurance Co of N Amer	MN	YRT/I	OL	2,799,409	50,182	68,818	39,284	0	0	0	0
90611	41-1366075	06/01/1988	Allianz Life Insurance Co of N Amer	MN	YRT/I	OL	275,000	4,173	5,477	3,267	0	0	0	0
90611	41-1366075	02/01/1999	Allianz Life Insurance Co of N Amer	MN	YRT/I	OL	2,393,535	33,294	39,007	26,063	0	0	0	0
90611	41-1366075	02/01/1999	Allianz Life Insurance Co of N Amer	MN	CO/I	DIS	0	279	257	10	0	0	0	0
90611	41-1366075	04/15/1999	Allianz Life Insurance Co of N Amer	MN	CO/I	OL	1,435,500	14,798	20,072	2,267	0	0	0	0
90611	41-1366075	04/15/1999	Allianz Life Insurance Co of N Amer	MN	YRT/I	OL	35,770,390	352,936	384,279	276,287	0	0	0	0
90611	41-1366075	04/15/1999	Allianz Life Insurance Co of N Amer	MN	CO/I	DIS	0	30,955	159,242	1,096	0	0	0	0
90611	41-1366075	03/15/2000	Allianz Life Insurance Co of N Amer	MN	YRT/I	OL	99,975	294	388	230	0	0	0	0
90611	41-1366075	09/01/2000	Allianz Life Insurance Co of N Amer	MN	YRT/I	OL	181,280	1,595	8,592	1,248	0	0	0	0
90611	41-1366075	09/01/2000	Allianz Life Insurance Co of N Amer	MN	CO/I	DIS	0	160	167	6	0	0	0	0
90611	41-1366075	09/30/2000	Allianz Life Insurance Co of N Amer	MN	YRT/I	OL	7,283,185	118,804	113,124	93,002	0	0	0	0
90611	41-1366075	07/31/2001	Allianz Life Insurance Co of N Amer	MN	CO/I	XXXL	249,147,901	1,537,734	3,384,854	235,619	0	0	0	0
90611	41-1366075	07/31/2001	Allianz Life Insurance Co of N Amer	MN	YRT/I	OL	15,724,518	124,552	114,789	97,502	0	0	0	0
90611	41-1366075	07/31/2001	Allianz Life Insurance Co of N Amer	MN	CO/I	DIS	0	135,444	138,826	4,794	0	0	0	0
90611	41-1366075	01/01/2002	Allianz Life Insurance Co of N Amer	MN	YRT/I	OL	19,723,570	172,115	158,781	134,736	0	0	0	0
90611	41-1366075	07/01/2002	Allianz Life Insurance Co of N Amer	MN	YRT/I	OL	12,050,599	174,377	178,621	136,507	0	0	0	0
90611	41-1366075	01/01/2003	Allianz Life Insurance Co of N Amer	MN	CO/I	XXXL	67,733,730	924,468	1,380,062	141,651	0	0	0	0
90611	41-1366075	01/01/2003	Allianz Life Insurance Co of N Amer	MN	YRT/I	OL	9,459,679	97,449	95,992	76,286	0	0	0	0
90611	41-1366075	01/01/2003	Allianz Life Insurance Co of N Amer	MN	CO/I	DIS	0	17,292	16,555	612	0	0	0	0
90611	41-1366075	04/01/2003	Allianz Life Insurance Co of N Amer	MN	CO/I	XXXL	428,298,858	6,789,653	9,253,967	1,040,343	0	0	0	0
90611	41-1366075	04/01/2003	Allianz Life Insurance Co of N Amer	MN	YRT/I	OL	66,378,789	841,015	823,263	658,367	0	0	0	0
90611	41-1366075	04/01/2003	Allianz Life Insurance Co of N Amer	MN	CO/I	DIS	0	242,213	191,487	8,573	0	0	0	0
86258	13-2572994	07/01/1982	General Re Life Corp	CT	YRT/I	OL	51,938	2,693	2,412	1,927	0	0	0	0
86258	13-2572994	01/01/1987	General Re Life Corp	CT	YRT/I	OL	483,019	11,800	36,400	8,443	0	0	0	0
86258	13-2572994	10/01/1988	General Re Life Corp	CT	YRT/I	OL	25,969	163	148	116	0	0	0	0
86258	13-2572994	04/01/2004	General Re Life Corp	CT	YRT/I	OL	32,637,783	437,398	426,160	312,949	0	0	0	0
86258	13-2572994	04/01/2004	General Re Life Corp	CT	CO/I	DIS	0	409	354	77	0	0	0	0
86258	13-2572994	01/19/2005	General Re Life Corp	CT	YRT/I	OL	42,412,036	485,540	447,034	347,393	0	0	0	0
86258	13-2572994	01/19/2005	General Re Life Corp	CT	CO/I	DIS	0	0	4,238	0	0	0	0	0
86258	13-2572994	12/01/2005	General Re Life Corp	CT	YRT/I	OL	13,784,635	51,839	73,137	37,090	0	0	0	0
86258	13-2572994	12/01/2005	General Re Life Corp	CT	CO/I	DIS	0	1,893	1,922	356	0	0	0	0
86258	13-2572994	01/01/2006	General Re Life Corp	CT	YRT/I	OL	227,274,327	1,326,591	1,362,906	949,146	0	0	0	0
86258	13-2572994	01/01/2006	General Re Life Corp	CT	CO/I	DIS	0	40,056	42,432	7,537	0	0	0	0
88340	59-2859797	01/19/2005	Hannover Life Reassur Co of Amer	FL	YRT/I	OL	4,525,719	12,448	10,028	13,469	0	0	0	0
88340	59-2859797	09/01/2005	Hannover Life Reassur Co of Amer	FL	CO/I	XXXL	133,209,810	2,740,262	3,155,650	145,543	0	0	0	0
88340	59-2859797	09/01/2005	Hannover Life Reassur Co of Amer	FL	CO/I	DIS	0	125,275	85,874	6,044	0	0	0	0
88340	59-2859797	12/01/2005	Hannover Life Reassur Co of Amer	FL	CO/I	XXXL	46,791,470	978,973	1,256,219	51,996	0	0	0	0
88340	59-2859797	12/01/2005	Hannover Life Reassur Co of Amer	FL	CO/I	DIS	0	11,885	12,003	573	0	0	0	0
88340	59-2859797	01/01/2006	Hannover Life Reassur Co of Amer	FL	CO/I	XXXL	862,584,168	18,901,130	20,915,590	1,003,891	0	0	0	0
88340	59-2859797	01/01/2006	Hannover Life Reassur Co of Amer	FL	YRT/I	OL	15,492,097	43,888	33,820	47,487	0	0	0	0
88340	59-2859797	01/01/2006	Hannover Life Reassur Co of Amer	FL	CO/I	DIS	0	352,849	356,653	17,023	0	0	0	0
88340	59-2859797	01/01/2010	Hannover Life Reassur Co of Amer	FL	YRT/I	OL	227,031,518	340,216	307,323	368,110	0	0	0	0
88340	59-2859797	01/01/2014	Hannover Life Reassur Co of Amer	FL	YRT/I	OL	20,064,792	125,446	104,910	135,731	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF 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 Domi- ciliary Juris- diction	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		
88340	59-2859797	11/01/2016	Hannover Life Reassur Co of Amer	FL	YRT/I	OL	22,484,942	66,250	64,864	71,682	0	0	0	0
88340	59-2859797	01/01/2017	Hannover Life Reassur Co of Amer	FL	YRT/I	OL	258,425,554	218,689	157,026	236,619	0	0	0	0
88340	59-2859797	01/01/2017	Hannover Life Reassur Co of Amer	FL	CO/I	DIS	0	4,713	2,033	227	0	0	0	0
88340	59-2859797	01/01/2019	Hannover Life Reassur Co of Amer	FL	YRT/I	OL	0	0	5,271	0	0	0	0	0
65676	35-0472300	03/18/1982	Lincoln Natl Life Ins Co	IN	YRT/I	OL	2,679,946	152,565	194,512	127,097	0	0	0	0
65676	35-0472300	03/09/1998	Lincoln Natl Life Ins Co	IN	YRT/I	OL	3,219,607	88,527	99,520	73,749	0	0	0	0
65676	35-0472300	06/01/1998	Lincoln Natl Life Ins Co	IN	YRT/I	OL	4,203,990	77,788	71,427	64,803	0	0	0	0
65676	35-0472300	06/01/1998	Lincoln Natl Life Ins Co	IN	CO/I	DIS	0	0	0	0	0	0	0	0
65676	35-0472300	08/01/1998	Lincoln Natl Life Ins Co	IN	YRT/I	OL	32,461	2,115	1,925	1,762	0	0	0	0
65676	35-0472300	02/01/1999	Lincoln Natl Life Ins Co	IN	YRT/I	OL	4,368,961	41,119	45,960	34,255	0	0	0	0
65676	35-0472300	02/01/1999	Lincoln Natl Life Ins Co	IN	CO/I	DIS	0	279	257	1	0	0	0	0
65676	35-0472300	04/15/1999	Lincoln Natl Life Ins Co	IN	CO/I	OL	1,435,500	14,798	20,072	862	0	0	0	0
65676	35-0472300	04/15/1999	Lincoln Natl Life Ins Co	IN	YRT/I	OL	44,480,738	388,295	431,365	323,475	0	0	0	0
65676	35-0472300	04/15/1999	Lincoln Natl Life Ins Co	IN	CO/I	DIS	0	30,955	159,268	153	0	0	0	0
65676	35-0472300	03/01/2000	Lincoln Natl Life Ins Co	IN	CO/I	XXXL	1,575,000	12,895	17,751	751	0	0	0	0
65676	35-0472300	03/01/2000	Lincoln Natl Life Ins Co	IN	CO/I	DIS	0	1,033	1,003	5	0	0	0	0
65676	35-0472300	03/15/2000	Lincoln Natl Life Ins Co	IN	YRT/I	OL	100,050	294	388	245	0	0	0	0
65676	35-0472300	03/15/2000	Lincoln Natl Life Ins Co	IN	CO/I	DIS	0	0	0	0	0	0	0	0
65676	35-0472300	09/01/2000	Lincoln Natl Life Ins Co	IN	CO/I	XXXL	7,146,316	49,115	1,122,762	2,861	0	0	0	0
65676	35-0472300	09/01/2000	Lincoln Natl Life Ins Co	IN	YRT/I	OL	181,440	1,596	13,641	1,330	0	0	0	0
65676	35-0472300	09/01/2000	Lincoln Natl Life Ins Co	IN	CO/I	DIS	0	2,234	104,145	11	0	0	0	0
65676	35-0472300	09/05/2000	Lincoln Natl Life Ins Co	IN	YRT/I	OL	35,043,172	268,188	263,082	223,418	0	0	0	0
65676	35-0472300	09/30/2000	Lincoln Natl Life Ins Co	IN	YRT/I	OL	21,611,542	169,140	154,586	140,905	0	0	0	0
65676	35-0472300	07/01/2001	Lincoln Natl Life Ins Co	IN	YRT/I	OL	69,401	382	3,153	318	0	0	0	0
65676	35-0472300	07/31/2001	Lincoln Natl Life Ins Co	IN	CO/I	XXXL	246,349,579	1,522,276	3,334,318	88,664	0	0	0	0
65676	35-0472300	07/31/2001	Lincoln Natl Life Ins Co	IN	YRT/I	OL	14,129,740	97,812	89,814	81,484	0	0	0	0
65676	35-0472300	07/31/2001	Lincoln Natl Life Ins Co	IN	CO/I	DIS	0	134,433	137,885	665	0	0	0	0
65676	35-0472300	01/01/2002	Lincoln Natl Life Ins Co	IN	YRT/I	OL	19,761,006	174,745	161,754	145,574	0	0	0	0
65676	35-0472300	07/01/2002	Lincoln Natl Life Ins Co	IN	YRT/I	OL	12,056,472	174,512	178,760	145,380	0	0	0	0
65676	35-0472300	01/01/2003	Lincoln Natl Life Ins Co	IN	CO/I	XXXL	67,733,730	924,468	1,380,062	53,845	0	0	0	0
65676	35-0472300	01/01/2003	Lincoln Natl Life Ins Co	IN	YRT/I	OL	8,857,597	89,639	89,210	74,675	0	0	0	0
65676	35-0472300	01/01/2003	Lincoln Natl Life Ins Co	IN	CO/I	DIS	0	17,292	16,555	86	0	0	0	0
65676	35-0472300	01/19/2005	Lincoln Natl Life Ins Co	IN	YRT/I	OL	7,043,529	45,777	42,978	38,135	0	0	0	0
76694	23-2044256	12/31/2009	Canada Life Reins Co	PA	YRT/I	OL	4,030,497,214	0	0	52,437,119	0	0	0	0
66346	58-0828824	04/01/1984	Munich Amer Reassur Co	GA	YRT/I	OL	83,100	983	889	764	0	0	0	0
66346	58-0828824	03/01/1998	Munich Amer Reassur Co	GA	YRT/I	OL	464,322	3,848	7,703	2,990	0	0	0	0
66346	58-0828824	03/09/1998	Munich Amer Reassur Co	GA	YRT/I	OL	3,219,613	88,527	99,520	68,797	0	0	0	0
66346	58-0828824	06/01/1998	Munich Amer Reassur Co	GA	YRT/I	OL	4,203,986	77,788	71,427	60,452	0	0	0	0
66346	58-0828824	06/01/1998	Munich Amer Reassur Co	GA	CO/I	DIS	0	0	0	0	0	0	0	0
66346	58-0828824	08/01/1998	Munich Amer Reassur Co	GA	YRT/I	OL	32,461	2,115	1,925	1,644	0	0	0	0
66346	58-0828824	02/01/1999	Munich Amer Reassur Co	GA	YRT/I	OL	2,393,539	33,294	38,955	25,874	0	0	0	0
66346	58-0828824	02/01/1999	Munich Amer Reassur Co	GA	CO/I	DIS	0	279	257	17	0	0	0	0
66346	58-0828824	04/15/1999	Munich Amer Reassur Co	GA	CO/I	OL	1,435,500	14,798	20,072	941	0	0	0	0
66346	58-0828824	04/15/1999	Munich Amer Reassur Co	GA	YRT/I	OL	36,583,220	356,024	358,321	276,677	0	0	0	0
66346	58-0828824	04/15/1999	Munich Amer Reassur Co	GA	CO/I	DIS	0	30,955	159,242	1,864	0	0	0	0
66346	58-0828824	03/15/2000	Munich Amer Reassur Co	GA	YRT/I	OL	99,975	294	388	229	0	0	0	0
66346	58-0828824	03/15/2000	Munich Amer Reassur Co	GA	CO/I	DIS	0	0	0	0	0	0	0	0
66346	58-0828824	09/01/2000	Munich Amer Reassur Co	GA	CO/I	XXXL	6,409,500	40,705	1,115,435	2,588	0	0	0	0
66346	58-0828824	09/01/2000	Munich Amer Reassur Co	GA	YRT/I	OL	261,280	2,299	12,383	1,786	0	0	0	0
66346	58-0828824	09/01/2000	Munich Amer Reassur Co	GA	CO/I	DIS	0	2,304	104,219	139	0	0	0	0
66346	58-0828824	09/30/2000	Munich Amer Reassur Co	GA	YRT/I	OL	25,045,012	223,665	205,540	173,817	0	0	0	0
66346	58-0828824	07/31/2001	Munich Amer Reassur Co	GA	CO/I	XXXL	492,993,812	3,046,369	6,672,619	193,686	0	0	0	0
66346	58-0828824	07/31/2001	Munich Amer Reassur Co	GA	YRT/I	OL	24,559,291	162,055	151,458	125,938	0	0	0	0
66346	58-0828824	07/31/2001	Munich Amer Reassur Co	GA	CO/I	DIS	0	268,983	275,842	16,198	0	0	0	0
66346	58-0828824	01/01/2002	Munich Amer Reassur Co	GA	YRT/I	OL	32,561,951	266,737	245,684	207,289	0	0	0	0
66346	58-0828824	07/01/2002	Munich Amer Reassur Co	GA	YRT/I	OL	19,048,559	256,127	262,325	199,044	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF 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 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
66346	58-0828824	01/01/2003	Munich Amer Reassur Co	GA	CO/I	XXXL	68,533,729	937,992	1,398,782	59,637	0	0	0	0
66346	58-0828824	01/01/2003	Munich Amer Reassur Co	GA	YRT/I	OL	10,470,200	108,295	107,414	84,159	0	0	0	0
66346	58-0828824	01/01/2003	Munich Amer Reassur Co	GA	CO/I	DIS	0	17,292	16,555	1,041	0	0	0	0
66346	58-0828824	04/01/2003	Munich Amer Reassur Co	GA	CO/I	XXXL	1,060,981,212	16,243,901	22,086,350	1,032,775	0	0	0	0
66346	58-0828824	04/01/2003	Munich Amer Reassur Co	GA	YRT/I	OL	102,332,137	927,822	990,319	721,039	0	0	0	0
66346	58-0828824	04/01/2003	Munich Amer Reassur Co	GA	CO/I	DIS	0	499,065	359,569	30,054	0	0	0	0
66346	58-0828824	04/01/2004	Munich Amer Reassur Co	GA	CO/I	XXXL	1,016,551,156	20,237,008	24,548,102	1,286,654	0	0	0	0
66346	58-0828824	04/01/2004	Munich Amer Reassur Co	GA	YRT/I	OL	85,632,735	637,491	602,996	495,413	0	0	0	0
66346	58-0828824	04/01/2004	Munich Amer Reassur Co	GA	CO/I	DIS	0	214,157	270,896	12,897	0	0	0	0
66346	58-0828824	01/19/2005	Munich Amer Reassur Co	GA	CO/I	XXXL	552,319,721	11,880,970	13,380,908	755,383	0	0	0	0
66346	58-0828824	01/19/2005	Munich Amer Reassur Co	GA	YRT/I	OL	119,814,342	1,057,541	968,507	821,847	0	0	0	0
66346	58-0828824	01/19/2005	Munich Amer Reassur Co	GA	CO/I	DIS	0	382,088	355,973	23,010	0	0	0	0
66346	58-0828824	07/01/2005	Munich Amer Reassur Co	GA	CO/I	XXXL	70,024,547	1,806,900	2,054,417	114,881	0	0	0	0
66346	58-0828824	07/01/2005	Munich Amer Reassur Co	GA	YRT/I	OL	54,124,200	255,428	201,876	198,501	0	0	0	0
66346	58-0828824	07/01/2005	Munich Amer Reassur Co	GA	CO/I	DIS	0	26,082	29,688	1,571	0	0	0	0
66346	58-0828824	09/01/2005	Munich Amer Reassur Co	GA	CO/I	XXXL	112,617,923	2,606,699	3,121,647	165,732	0	0	0	0
66346	58-0828824	09/01/2005	Munich Amer Reassur Co	GA	YRT/I	OL	85,787,754	308,387	273,087	239,657	0	0	0	0
66346	58-0828824	09/01/2005	Munich Amer Reassur Co	GA	CO/I	DIS	0	206,125	166,730	12,413	0	0	0	0
66346	58-0828824	12/01/2005	Munich Amer Reassur Co	GA	CO/I	XXXL	35,157,916	818,679	1,093,415	52,051	0	0	0	0
66346	58-0828824	12/01/2005	Munich Amer Reassur Co	GA	YRT/I	OL	37,931,495	143,577	165,931	111,578	0	0	0	0
66346	58-0828824	12/01/2005	Munich Amer Reassur Co	GA	CO/I	DIS	0	18,440	18,653	1,110	0	0	0	0
66346	58-0828824	01/01/2006	Munich Amer Reassur Co	GA	CO/I	XXXL	439,298,288	8,497,143	9,802,799	540,242	0	0	0	0
66346	58-0828824	01/01/2006	Munich Amer Reassur Co	GA	YRT/I	OL	83,544,370	752,328	934,865	584,657	0	0	0	0
66346	58-0828824	01/01/2006	Munich Amer Reassur Co	GA	CO/I	DIS	0	207,870	214,535	12,518	0	0	0	0
66346	58-0828824	06/04/2007	Munich Amer Reassur Co	GA	YRT/I	OL	1,387,500	5,411	5,540	4,205	0	0	0	0
66346	58-0828824	10/01/2007	Munich Amer Reassur Co	GA	YRT/I	OL	91,343,051	926,037	904,164	719,652	0	0	0	0
66346	58-0828824	10/01/2007	Munich Amer Reassur Co	GA	CO/I	DIS	0	19,726	858	1,188	0	0	0	0
66346	58-0828824	10/10/2009	Munich Amer Reassur Co	GA	YRT/I	OL	299,742,280	2,124,300	1,842,981	1,650,858	0	0	0	0
66346	58-0828824	10/10/2009	Munich Amer Reassur Co	GA	CO/I	DIS	0	23,683	21,319	1,426	0	0	0	0
66346	58-0828824	04/01/2011	Munich Amer Reassur Co	GA	CO/I	XXXL	6,483,859,840	137,745,626	144,262,737	8,757,766	0	0	0	0
66346	58-0828824	04/01/2011	Munich Amer Reassur Co	GA	CO/I	DIS	0	1,840,768	1,596,095	110,852	0	0	0	0
66346	58-0828824	01/01/2014	Munich Amer Reassur Co	GA	YRT/I	OL	68,591,624	227,419	208,004	176,734	0	0	0	0
66346	58-0828824	01/01/2014	Munich Amer Reassur Co	GA	CO/I	DIS	0	0	0	0	0	0	0	0
66346	58-0828824	01/01/2017	Munich Amer Reassur Co	GA	YRT/I	OL	302,767,587	184,270	127,497	143,202	0	0	0	0
66346	58-0828824	01/01/2017	Munich Amer Reassur Co	GA	CO/I	DIS	0	11,585	5,708	698	0	0	0	0
93572	43-1235868	01/01/1977	RGA Reins Co	MO	YRT/I	OL	665,000	9,446	14,877	10,360	0	0	0	0
93572	43-1235868	01/01/1983	RGA Reins Co	MO	YRT/I	OL	0	0	6,761	0	0	0	0	0
93572	43-1235868	01/01/1983	RGA Reins Co	MO	CO/I	DIS	0	0	279,670	0	0	0	0	0
93572	43-1235868	02/01/1983	RGA Reins Co	MO	YRT/I	OL	2,130,264	57,225	57,877	62,759	0	0	0	0
93572	43-1235868	01/01/1984	RGA Reins Co	MO	YRT/I	OL	498,601	6,239	5,900	6,842	0	0	0	0
93572	43-1235868	06/01/1984	RGA Reins Co	MO	YRT/I	OL	2,285,253	31,840	175,422	34,919	0	0	0	0
93572	43-1235868	01/01/1987	RGA Reins Co	MO	YRT/I	OL	39,828,296	866,313	992,748	950,091	0	0	0	0
93572	43-1235868	05/01/1988	RGA Reins Co	MO	YRT/I	OL	425,000	6,857	6,235	7,520	0	0	0	0
93572	43-1235868	05/01/1988	RGA Reins Co	MO	CO/I	DIS	0	0	0	0	0	0	0	0
93572	43-1235868	11/14/1991	RGA Reins Co	MO	YRT/I	OL	6,914,481	65,632	58,272	71,980	0	0	0	0
93572	43-1235868	01/01/1994	RGA Reins Co	MO	YRT/I	OL	10,279,725	160,126	149,185	175,612	0	0	0	0
93572	43-1235868	10/01/1995	RGA Reins Co	MO	YRT/I	OL	18,149,420	444,733	431,405	487,742	0	0	0	0
93572	43-1235868	10/01/1995	RGA Reins Co	MO	CO/I	DIS	0	17,267	17,846	(390)	0	0	0	0
93572	43-1235868	07/01/1997	RGA Reins Co	MO	YRT/I	OL	12,515,433	288,229	370,444	316,103	0	0	0	0
93572	43-1235868	07/01/1997	RGA Reins Co	MO	CO/I	DIS	0	0	0	0	0	0	0	0
93572	43-1235868	03/09/1998	RGA Reins Co	MO	YRT/I	OL	13,315,912	247,656	264,084	271,606	0	0	0	0
93572	43-1235868	06/01/1998	RGA Reins Co	MO	YRT/I	OL	9,446,731	158,868	145,787	174,232	0	0	0	0
93572	43-1235868	06/01/1998	RGA Reins Co	MO	CO/I	DIS	0	0	0	0	0	0	0	0
93572	43-1235868	08/01/1998	RGA Reins Co	MO	YRT/I	OL	64,922	4,231	3,849	4,640	0	0	0	0
93572	43-1235868	02/01/1999	RGA Reins Co	MO	YRT/I	OL	4,593,601	62,350	68,748	68,380	0	0	0	0
93572	43-1235868	02/01/1999	RGA Reins Co	MO	CO/I	DIS	0	419	385	(9)	0	0	0	0

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
93572	43-1235868	04/15/1999	RGA Reins Co	MO	CO/I	OL	1,435,500	14,798	20,072	(17,837)	0	0	0	0
93572	43-1235868	04/15/1999	RGA Reins Co	MO	YRT/I	OL	67,484,518	666,408	659,624	730,854	0	0	0	0
93572	43-1235868	04/15/1999	RGA Reins Co	MO	CO/I	DIS	0	30,955	176,841	(700)	0	0	0	0
93572	43-1235868	03/15/2000	RGA Reins Co	MO	YRT/I	OL	150,000	441	582	484	0	0	0	0
93572	43-1235868	03/15/2000	RGA Reins Co	MO	CO/I	DIS	0	0	0	0	0	0	0	0
93572	43-1235868	09/01/2000	RGA Reins Co	MO	CO/I	XXXL	6,409,500	40,705	1,115,435	(49,065)	0	0	0	0
93572	43-1235868	09/01/2000	RGA Reins Co	MO	YRT/I	OL	272,000	2,393	12,891	2,624	0	0	0	0
93572	43-1235868	09/01/2000	RGA Reins Co	MO	CO/I	DIS	0	2,314	104,229	(52)	0	0	0	0
93572	43-1235868	09/30/2000	RGA Reins Co	MO	YRT/I	OL	32,172,437	687,547	628,197	754,038	0	0	0	0
93572	43-1235868	07/31/2001	RGA Reins Co	MO	CO/I	XXXL	255,749,579	1,551,874	3,414,270	(1,870,588)	0	0	0	0
93572	43-1235868	07/31/2001	RGA Reins Co	MO	YRT/I	OL	35,579,304	265,692	266,832	291,386	0	0	0	0
93572	43-1235868	07/31/2001	RGA Reins Co	MO	CO/I	DIS	0	134,470	137,966	(3,039)	0	0	0	0
93572	43-1235868	01/01/2002	RGA Reins Co	MO	YRT/I	OL	32,499,272	548,308	1,040,406	601,334	0	0	0	0
93572	43-1235868	07/01/2002	RGA Reins Co	MO	YRT/I	OL	18,988,236	464,602	452,366	509,532	0	0	0	0
93572	43-1235868	01/01/2003	RGA Reins Co	MO	CO/I	XXXL	69,358,730	983,343	1,463,418	(1,185,296)	0	0	0	0
93572	43-1235868	01/01/2003	RGA Reins Co	MO	YRT/I	OL	14,018,888	151,124	149,066	165,738	0	0	0	0
93572	43-1235868	01/01/2003	RGA Reins Co	MO	CO/I	DIS	0	17,292	16,555	(391)	0	0	0	0
93572	43-1235868	04/01/2003	RGA Reins Co	MO	YRT/I	OL	56,551,681	886,103	1,457,728	971,795	0	0	0	0
93572	43-1235868	04/01/2003	RGA Reins Co	MO	CO/I	DIS	0	55,739	57,078	(1,260)	0	0	0	0
93572	43-1235868	04/01/2004	RGA Reins Co	MO	YRT/I	OL	98,524,423	1,226,700	1,096,795	1,345,331	0	0	0	0
93572	43-1235868	04/01/2004	RGA Reins Co	MO	CO/I	DIS	0	409	354	(9)	0	0	0	0
93572	43-1235868	01/19/2005	RGA Reins Co	MO	YRT/I	OL	64,667,017	855,662	781,523	938,410	0	0	0	0
93572	43-1235868	01/19/2005	RGA Reins Co	MO	CO/I	DIS	0	0	4,238	0	0	0	0	0
93572	43-1235868	06/04/2007	RGA Reins Co	MO	YRT/I	OL	6,393,762	9,981	9,594	10,946	0	0	0	0
93572	43-1235868	10/01/2007	RGA Reins Co	MO	YRT/I	OL	105,481,809	1,130,922	1,133,579	1,240,290	0	0	0	0
93572	43-1235868	10/01/2007	RGA Reins Co	MO	CO/I	DIS	0	19,336	494	(437)	0	0	0	0
93572	43-1235868	07/01/2008	RGA Reins Co	MO	YRT/I	OL	8,771,121	29,831	27,822	32,715	0	0	0	0
93572	43-1235868	10/10/2009	RGA Reins Co	MO	YRT/I	OL	262,366,964	2,553,475	2,254,741	2,800,415	0	0	0	0
93572	43-1235868	10/10/2009	RGA Reins Co	MO	CO/I	DIS	0	21,636	20,857	(489)	0	0	0	0
93572	43-1235868	01/01/2014	RGA Reins Co	MO	YRT/I	OL	45,964,208	295,204	266,172	323,752	0	0	0	0
93572	43-1235868	01/01/2017	RGA Reins Co	MO	YRT/I	OL	474,467,918	477,676	339,500	523,870	0	0	0	0
93572	43-1235868	01/01/2017	RGA Reins Co	MO	CO/I	DIS	0	20,463	9,368	(463)	0	0	0	0
93572	43-1235868	07/01/2019	RGA Reins Co	MO	CO/I	OL	1,734,419,744	1,089,952,658	1,073,820,299	1,431,546	0	0	0	0
93572	43-1235868	10/01/2021	RGA Reins Co	MO	CO/I	DIS	0	829	0	(19)	0	0	0	0
93572	43-1235868	10/01/2021	RGA Reins Co	MO	YRT/I	OL	21,583,672	11,125	0	12,201	0	0	0	0
93572	43-1235868	11/01/2021	RGA Reins Co	MO	YRT/I	OL	652,492	268	0	293	0	0	0	0
64688	75-6020048	04/01/2004	SCOR Global Life Amer Reins Co	DE	YRT/I	OL	3,346,078	33,977	29,950	32,291	0	0	0	0
64688	75-6020048	01/19/2005	SCOR Global Life Amer Reins Co	DE	YRT/I	OL	1,337,392	6,322	5,189	6,008	0	0	0	0
64688	75-6020048	01/01/2006	SCOR Global Life Amer Reins Co	DE	YRT/I	OL	6,571,401	34,614	30,392	32,896	0	0	0	0
64688	75-6020048	10/01/2007	SCOR Global Life Amer Reins Co	DE	YRT/I	OL	43,525,697	735,988	719,438	699,462	0	0	0	0
64688	75-6020048	10/01/2007	SCOR Global Life Amer Reins Co	DE	CO/I	DIS	0	19,023	0	1,904	0	0	0	0
64688	75-6020048	10/10/2009	SCOR Global Life Amer Reins Co	DE	YRT/I	OL	140,558,785	2,335,805	2,073,246	2,219,883	0	0	0	0
64688	75-6020048	10/10/2009	SCOR Global Life Amer Reins Co	DE	CO/I	DIS	0	19,816	20,396	1,983	0	0	0	0
64688	75-6020048	01/01/2014	SCOR Global Life Amer Reins Co	DE	YRT/I	OL	62,118,230	283,532	251,366	269,461	0	0	0	0
97071	13-3126819	06/04/2007	SCOR Global Life USA Reins Co	DE	YRT/I	OL	9,332,191	29,322	26,639	33,990	0	0	0	0
97071	13-3126819	10/01/2007	SCOR Global Life USA Reins Co	DE	YRT/I	OL	12,944,688	43,794	46,461	50,766	0	0	0	0
97071	13-3126819	10/01/2007	SCOR Global Life USA Reins Co	DE	CO/I	DIS	0	188	297	172	0	0	0	0
97071	13-3126819	10/10/2009	SCOR Global Life USA Reins Co	DE	YRT/I	OL	219,045,766	1,746,931	1,570,554	2,025,027	0	0	0	0
97071	13-3126819	10/10/2009	SCOR Global Life USA Reins Co	DE	CO/I	DIS	0	21,599	20,857	19,789	0	0	0	0
97071	13-3126819	01/01/2017	SCOR Global Life USA Reins Co	DE	YRT/I	OL	710,080,375	359,372	251,696	416,581	0	0	0	0
97071	13-3126819	01/01/2017	SCOR Global Life USA Reins Co	DE	CO/I	DIS	0	28,310	10,916	25,937	0	0	0	0
97071	13-3126819	06/01/2021	SCOR Global Life USA Reins Co	DE	CO/I	DIS	0	3,736	0	3,423	0	0	0	0
97071	13-3126819	06/01/2021	SCOR Global Life USA Reins Co	DE	YRT/I	OL	128,928,578	12,515	0	14,507	0	0	0	0
97071	13-3126819	11/01/2021	SCOR Global Life USA Reins Co	DE	CO/I	DIS	0	552	0	505	0	0	0	0
97071	13-3126819	11/01/2021	SCOR Global Life USA Reins Co	DE	YRT/I	OL	28,901,899	5,446	0	6,313	0	0	0	0
87572	23-2038295	01/19/2005	Scottish Re US Inc	DE	YRT/I	OL	7,043,522	45,777	42,978	34,472	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF 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 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
87572	23-2038295	01/01/2006	Scottish Re US Inc	DE	YRT/I	OL	61,781,356	276,950	261,606	208,556	0	0	0	0
88713	84-0499703	08/01/1993	Security Life of Denver Ins Co	CO	YRT/I	OL	452,376	17,317	16,730	16,353	0	0	0	0
88713	84-0499703	01/01/1994	Security Life of Denver Ins Co	CO	YRT/I	OL	7,947,728	111,697	106,562	105,476	0	0	0	0
88713	84-0499703	10/01/1995	Security Life of Denver Ins Co	CO	YRT/I	OL	19,422,319	549,809	525,434	519,185	0	0	0	0
88713	84-0499703	10/01/1995	Security Life of Denver Ins Co	CO	CO/I	DIS	0	17,267	17,846	322	0	0	0	0
88713	84-0499703	07/01/1997	Security Life of Denver Ins Co	CO	YRT/I	OL	9,831,168	313,518	462,407	296,055	0	0	0	0
88713	84-0499703	07/01/1997	Security Life of Denver Ins Co	CO	CO/I	DIS	0	0	0	0	0	0	0	0
88713	84-0499703	03/09/1998	Security Life of Denver Ins Co	CO	YRT/I	OL	6,439,212	177,054	198,823	167,192	0	0	0	0
88713	84-0499703	06/01/1998	Security Life of Denver Ins Co	CO	YRT/I	OL	9,557,462	167,368	154,637	158,046	0	0	0	0
88713	84-0499703	06/01/1998	Security Life of Denver Ins Co	CO	CO/I	DIS	0	20,388	21,039	380	0	0	0	0
88713	84-0499703	06/08/1998	Security Life of Denver Ins Co	CO	CO/I	OL	2,025,000	27,821	25,472	1,568	0	0	0	0
88713	84-0499703	06/08/1998	Security Life of Denver Ins Co	CO	YRT/I	OL	2,908,958	39,075	36,936	36,898	0	0	0	0
88713	84-0499703	06/08/1998	Security Life of Denver Ins Co	CO	CO/I	DIS	0	14,472	21,048	270	0	0	0	0
88713	84-0499703	08/01/1998	Security Life of Denver Ins Co	CO	YRT/I	OL	106,472	5,498	4,983	5,191	0	0	0	0
88713	84-0499703	02/01/1999	Security Life of Denver Ins Co	CO	YRT/I	OL	3,715,856	50,308	58,880	47,506	0	0	0	0
88713	84-0499703	02/01/1999	Security Life of Denver Ins Co	CO	CO/I	DIS	0	419	385	8	0	0	0	0
88713	84-0499703	04/15/1999	Security Life of Denver Ins Co	CO	YRT/I	OL	39,571,467	552,898	533,940	522,102	0	0	0	0
88713	84-0499703	04/15/1999	Security Life of Denver Ins Co	CO	CO/I	DIS	0	0	52,772	0	0	0	0	0
88713	84-0499703	03/15/2000	Security Life of Denver Ins Co	CO	YRT/I	OL	150,000	441	582	417	0	0	0	0
88713	84-0499703	03/15/2000	Security Life of Denver Ins Co	CO	CO/I	DIS	0	0	0	0	0	0	0	0
88713	84-0499703	09/01/2000	Security Life of Denver Ins Co	CO	YRT/I	OL	352,000	3,097	20,165	2,924	0	0	0	0
88713	84-0499703	09/01/2000	Security Life of Denver Ins Co	CO	CO/I	DIS	0	311	325	6	0	0	0	0
88713	84-0499703	09/30/2000	Security Life of Denver Ins Co	CO	YRT/I	OL	21,780,594	386,447	350,742	364,922	0	0	0	0
88713	84-0499703	07/31/2001	Security Life of Denver Ins Co	CO	CO/I	XXXL	204,605,386	1,239,604	3,336,324	69,881	0	0	0	0
88713	84-0499703	07/31/2001	Security Life of Denver Ins Co	CO	YRT/I	OL	20,554,464	156,235	164,261	147,533	0	0	0	0
88713	84-0499703	07/31/2001	Security Life of Denver Ins Co	CO	CO/I	DIS	0	128,943	138,121	2,404	0	0	0	0
88713	84-0499703	01/01/2002	Security Life of Denver Ins Co	CO	CO/I	XXXL	20,474,095	443,886	645,656	25,023	0	0	0	0
88713	84-0499703	01/01/2002	Security Life of Denver Ins Co	CO	YRT/I	OL	32,800,042	403,713	372,396	381,227	0	0	0	0
88713	84-0499703	01/01/2002	Security Life of Denver Ins Co	CO	CO/I	DIS	0	8,125	7,668	151	0	0	0	0
88713	84-0499703	05/01/2002	Security Life of Denver Ins Co	CO	YRT/I	OL	133,377,591	2,119,298	2,297,979	2,001,256	0	0	0	0
88713	84-0499703	05/01/2002	Security Life of Denver Ins Co	CO	CO/I	DIS	0	13,784	0	257	0	0	0	0
88713	84-0499703	07/01/2002	Security Life of Denver Ins Co	CO	YRT/I	OL	20,863,919	375,030	514,438	354,141	0	0	0	0
88713	84-0499703	01/01/2003	Security Life of Denver Ins Co	CO	CO/I	XXXL	50,259,635	661,330	993,809	37,282	0	0	0	0
88713	84-0499703	01/01/2003	Security Life of Denver Ins Co	CO	YRT/I	OL	15,109,456	278,546	265,081	263,031	0	0	0	0
88713	84-0499703	01/01/2003	Security Life of Denver Ins Co	CO	CO/I	DIS	0	9,166	8,887	171	0	0	0	0
88713	84-0499703	04/01/2003	Security Life of Denver Ins Co	CO	CO/I	XXXL	633,789,286	9,689,969	13,172,733	546,260	0	0	0	0
88713	84-0499703	04/01/2003	Security Life of Denver Ins Co	CO	YRT/I	OL	68,879,564	863,220	844,752	815,139	0	0	0	0
88713	84-0499703	04/01/2003	Security Life of Denver Ins Co	CO	CO/I	DIS	0	321,195	237,811	5,988	0	0	0	0
88713	84-0499703	04/01/2003	Security Life of Denver Ins Co	CO	CO/I	AXXX	0	10,832,488	11,343,224	610,668	0	0	0	0
88713	84-0499703	04/01/2004	Security Life of Denver Ins Co	CO	CO/I	XXXL	618,495,488	12,199,556	14,835,074	687,734	0	0	0	0
88713	84-0499703	04/01/2004	Security Life of Denver Ins Co	CO	YRT/I	OL	59,335,696	958,505	878,977	905,117	0	0	0	0
88713	84-0499703	04/01/2004	Security Life of Denver Ins Co	CO	CO/I	DIS	0	128,214	162,006	2,390	0	0	0	0
82627	06-0839705	11/01/1981	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	197,363	1,203	1,003	984	0	0	0	0
82627	06-0839705	01/01/1982	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	360,000	3,325	3,044	2,720	0	0	0	0
82627	06-0839705	01/01/1982	Swiss Re Life & Hlth Amer Inc	MO	CO/I	DIS	0	0	0	0	0	0	0	0
82627	06-0839705	06/06/1983	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	103,875	2,148	3,296	1,758	0	0	0	0
82627	06-0839705	06/01/1984	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	1,881,626	74,002	68,871	60,545	0	0	0	0
82627	06-0839705	06/01/1984	Swiss Re Life & Hlth Amer Inc	MO	CO/I	DIS	0	0	16,077	0	0	0	0	0
82627	06-0839705	01/01/1987	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	23,867,998	592,195	666,852	484,511	0	0	0	0
82627	06-0839705	01/01/1990	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	900,000	6,774	6,124	5,542	0	0	0	0
82627	06-0839705	01/01/1990	Swiss Re Life & Hlth Amer Inc	MO	CO/I	DIS	0	89	0	6	0	0	0	0
82627	06-0839705	11/14/1991	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	6,942,524	117,784	118,934	96,366	0	0	0	0
82627	06-0839705	10/16/1992	Swiss Re Life & Hlth Amer Inc	MO	CO/I	DIS	0	0	0	0	0	0	0	0
82627	06-0839705	10/16/1992	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	0	0	0	0	0	0	0	0
82627	06-0839705	08/01/1993	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	867,877	27,928	26,110	22,850	0	0	0	0
82627	06-0839705	01/01/1994	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	26,003,786	363,314	347,050	297,249	0	0	0	0

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**SCHEDULE S - PART 3 - SECTION 1**

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1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	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	10/01/1995	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	50,552,949	1,278,708	1,251,451	1,046,189	0	0	0	0
82627	06-0839705	10/01/1995	Swiss Re Life & Hlth Amer Inc	MO	CO/I	DIS	0	51,800	53,959	3,752	0	0	0	0
82627	06-0839705	07/01/1997	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	25,470,814	586,557	817,117	479,898	0	0	0	0
82627	06-0839705	07/01/1997	Swiss Re Life & Hlth Amer Inc	MO	CO/I	DIS	0	0	0	0	0	0	0	0
82627	06-0839705	03/09/1998	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	14,176,862	368,653	411,379	301,617	0	0	0	0
82627	06-0839705	06/01/1998	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	17,231,460	317,585	291,250	259,835	0	0	0	0
82627	06-0839705	06/01/1998	Swiss Re Life & Hlth Amer Inc	MO	CO/I	DIS	0	0	0	0	0	0	0	0
82627	06-0839705	08/01/1998	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	129,844	8,461	7,699	6,923	0	0	0	0
82627	06-0839705	02/01/1999	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	3,622,369	50,040	58,448	40,941	0	0	0	0
82627	06-0839705	02/01/1999	Swiss Re Life & Hlth Amer Inc	MO	CO/I	DIS	0	419	385	30	0	0	0	0
82627	06-0839705	04/15/1999	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	39,892,441	541,800	530,037	443,279	0	0	0	0
82627	06-0839705	04/15/1999	Swiss Re Life & Hlth Amer Inc	MO	CO/I	DIS	0	0	52,772	0	0	0	0	0
82627	06-0839705	03/15/2000	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	150,000	441	582	361	0	0	0	0
82627	06-0839705	03/15/2000	Swiss Re Life & Hlth Amer Inc	MO	CO/I	DIS	0	0	0	0	0	0	0	0
82627	06-0839705	09/01/2000	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	272,000	2,393	12,891	1,958	0	0	0	0
82627	06-0839705	09/01/2000	Swiss Re Life & Hlth Amer Inc	MO	CO/I	DIS	0	241	251	17	0	0	0	0
82627	06-0839705	09/05/2000	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	35,043,084	268,187	263,081	219,420	0	0	0	0
82627	06-0839705	09/29/2000	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	0	0	89,216	0	0	0	0	0
82627	06-0839705	09/30/2000	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	10,541,611	177,529	170,072	145,248	0	0	0	0
82627	06-0839705	10/02/2000	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	1,903,938	14,063	13,400	11,506	0	0	0	0
82627	06-0839705	07/31/2001	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	10,178,306	92,718	92,883	75,858	0	0	0	0
82627	06-0839705	07/31/2001	Swiss Re Life & Hlth Amer Inc	MO	CO/I	DIS	0	111	245	8	0	0	0	0
82627	06-0839705	01/01/2002	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	23,842,216	252,299	232,380	206,421	0	0	0	0
82627	06-0839705	07/01/2002	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	13,276,415	242,154	248,917	198,121	0	0	0	0
82627	06-0839705	01/01/2003	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	11,159,832	137,345	134,893	112,370	0	0	0	0
82627	06-0839705	01/19/2005	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	7,043,533	45,777	42,978	37,453	0	0	0	0
82627	06-0839705	01/01/2006	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	123,562,766	553,900	523,213	453,179	0	0	0	0
82627	06-0839705	07/01/2008	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	12,932,498	44,790	41,646	36,645	0	0	0	0
82627	06-0839705	01/01/2010	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	227,118,008	340,114	307,220	278,268	0	0	0	0
82627	06-0839705	07/01/2011	Swiss Re Life & Hlth Amer Inc	MO	CO/I	XXXL	6,483,859,675	137,745,623	144,262,738	8,808,787	0	0	0	0
82627	06-0839705	07/01/2011	Swiss Re Life & Hlth Amer Inc	MO	CO/I	DIS	0	1,840,768	1,596,095	133,313	0	0	0	0
82627	06-0839705	03/19/2013	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	10,387,514	2,955	2,816	2,418	0	0	0	0
82627	06-0839705	01/01/2014	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	100,123,850	575,904	508,769	471,182	0	0	0	0
82627	06-0839705	01/01/2017	Swiss Re Life & Hlth Amer Inc	MO	CO/I	DIS	0	17,202	7,371	1,246	0	0	0	0
82627	06-0839705	01/01/2017	Swiss Re Life & Hlth Amer Inc	MO	YRT/I	OL	651,561,407	382,229	255,740	312,724	0	0	0	0
82627	06-0839705	07/31/2021	Swiss Re Life & Hlth Amer Inc	MO	CO/I	DIS	0	5,639	0	408	0	0	0	0
82627	06-0839705	07/31/2021	Swiss Re Life & Hlth Amer Inc	MO	CO/I	XXXL	41,892,516	283,589	0	18,135	0	0	0	0
86231	39-0989781	01/01/2006	Transamerica Life Ins Co	IA	CO/I	XXXL	1,101,644,014	23,749,666	26,238,482	3,140,568	0	0	0	0
86231	39-0989781	01/01/2006	Transamerica Life Ins Co	IA	YRT/I	OL	109,742,837	1,574,328	1,431,589	1,805,239	0	0	0	0
86231	39-0989781	01/01/2006	Transamerica Life Ins Co	IA	CO/I	DIS	0	429,265	433,076	21,591	0	0	0	0
86231	39-0989781	06/04/2007	Transamerica Life Ins Co	IA	YRT/I	OL	3,281,401	11,688	11,321	13,402	0	0	0	0
86231	39-0989781	10/01/2007	Transamerica Life Ins Co	IA	YRT/I	OL	106,425,978	1,315,127	1,255,637	1,508,021	0	0	0	0
86231	39-0989781	10/01/2007	Transamerica Life Ins Co	IA	CO/I	DIS	0	19,399	593	976	0	0	0	0
80659	82-4533188	08/01/1982	US Business of Canada Life Assur Co	MI	YRT/I	OL	519,376	15,192	13,873	15,343	0	0	0	0
80659	82-4533188	09/10/1987	US Business of Canada Life Assur Co	MI	YRT/I	OL	155,813	6,903	6,145	6,971	0	0	0	0
80659	82-4533188	04/01/2004	US Business of Canada Life Assur Co	MI	CO/I	XXXL	404,741,643	7,900,575	9,620,210	129,265	0	0	0	0
80659	82-4533188	04/01/2004	US Business of Canada Life Assur Co	MI	YRT/I	OL	15,315,081	71,611	64,240	72,322	0	0	0	0
80659	82-4533188	04/01/2004	US Business of Canada Life Assur Co	MI	CO/I	DIS	0	88,574	110,886	2,388	0	0	0	0
80659	82-4533188	01/19/2005	US Business of Canada Life Assur Co	MI	CO/I	XXXL	311,311,635	6,977,570	7,942,984	114,163	0	0	0	0
80659	82-4533188	01/19/2005	US Business of Canada Life Assur Co	MI	YRT/I	OL	10,947,955	29,331	25,851	29,622	0	0	0	0
80659	82-4533188	01/19/2005	US Business of Canada Life Assur Co	MI	CO/I	DIS	0	170,112	154,530	4,587	0	0	0	0
80659	82-4533188	07/01/2005	US Business of Canada Life Assur Co	MI	CO/I	XXXL	118,960,822	3,572,813	4,061,176	58,456	0	0	0	0
80659	82-4533188	07/01/2005	US Business of Canada Life Assur Co	MI	CO/I	DIS	0	17,035	17,840	459	0	0	0	0
80659	82-4533188	09/01/2005	US Business of Canada Life Assur Co	MI	CO/I	XXXL	141,717,847	3,051,118	3,708,411	49,921	0	0	0	0
80659	82-4533188	09/01/2005	US Business of Canada Life Assur Co	MI	CO/I	DIS	0	112,526	81,718	3,034	0	0	0	0
80659	82-4533188	01/01/2014	US Business of Canada Life Assur Co	MI	YRT/I	OL	54,033,444	269,819	246,400	272,499	0	0	0	0

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
80659	82-4533188	11/01/2016	US Business of Canada Life Assur Co	MI	YRT/I	OL	22,543,792	66,434	65,047	67,094	0	0	0	0
80659	82-4533188	01/01/2017	US Business of Canada Life Assur Co	MI	YRT/I	OL	419,060,925	223,426	143,680	225,646	0	0	0	0
80659	82-4533188	01/01/2017	US Business of Canada Life Assur Co	MI	CO/I	DIS	0	8,675	3,436	234	0	0	0	0
93572	43-1235868	07/01/2019	RGA Reins Co	MO	CO/I	FA	0	18,177,969	20,260,982	0	0	0	0	0
0899999. General Account - Authorized U.S. Non-Affiliates							36,961,983,165	1,629,355,174	1,677,101,731	131,119,592	0	0	0	0
1099999. Total General Account - Authorized Non-Affiliates							36,961,983,165	1,629,355,174	1,677,101,731	131,119,592	0	0	0	0
1199999. Total General Account Authorized							88,451,760,276	2,886,001,399	2,878,158,411	198,612,338	0	0	0	0
15363	80-0955278	12/31/2013	Kenwood Re Inc	VT	CO/I	DIS	0	7,207,449	6,610,487	1,245,743	0	0	0	0
15363	80-0955278	12/31/2013	Kenwood Re Inc	VT	CO/I	XXXL	40,931,380,286	558,972,142	560,961,223	46,475,017	0	0	0	0
13575	26-3791519	05/01/2011	Montgomery Re Inc	VT	CO/I	AXXX	400,776,411	185,808,635	190,506,355	4,692,918	0	0	0	0
13575	26-3791519	07/01/2012	Montgomery Re Inc	VT	CO/I	DIS	0	935,442	858,160	87,719	0	0	0	0
13575	26-3791519	07/01/2012	Montgomery Re Inc	VT	CO/I	XXXL	6,410,649,962	114,835,655	122,250,564	10,768,496	0	0	0	0
1299999. General Account - Unauthorized U.S. Affiliates - Captive							47,742,806,659	867,759,323	881,186,789	63,269,893	0	0	0	0
1499999. Total General Account - Unauthorized U.S. Affiliates							47,742,806,659	867,759,323	881,186,789	63,269,893	0	0	0	0
1799999. Total General Account - Unauthorized Non-U.S. Affiliates							0	0	0	0	0	0	0	0
1899999. Total General Account - Unauthorized Affiliates							47,742,806,659	867,759,323	881,186,789	63,269,893	0	0	0	0
00000	AA-3190770	01/01/2006	Chubb Tempest Reins LTD	BMU	YRT/I	OL	35,432,303	379,571	368,739	379,017	0	0	0	0
2099999. General Account - Unauthorized Non-U.S. Non-Affiliates							35,432,303	379,571	368,739	379,017	0	0	0	0
2199999. Total General Account - Unauthorized Non-Affiliates							35,432,303	379,571	368,739	379,017	0	0	0	0
2299999. Total General Account Unauthorized							47,778,238,962	868,138,894	881,555,528	63,648,910	0	0	0	0
2599999. Total General Account - Certified U.S. Affiliates							0	0	0	0	0	0	0	0
2899999. Total General Account - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0	0
2999999. Total General Account - Certified Affiliates							0	0	0	0	0	0	0	0
00000	CR-1460100	12/31/2021	New Reins Co LTD	CHE	YRT/I	OL	7,992,876,671	1,342,920	0	0	0	0	0	0
3199999. General Account - Certified Non-U.S. Non-Affiliates							7,992,876,671	1,342,920	0	0	0	0	0	0
3299999. Total General Account - Certified Non-Affiliates							7,992,876,671	1,342,920	0	0	0	0	0	0
3399999. Total General Account Certified							7,992,876,671	1,342,920	0	0	0	0	0	0
3699999. Total General Account - Reciprocal Jurisdiction U.S. Affiliates							0	0	0	0	0	0	0	0
3999999. Total General Account - Reciprocal Jurisdiction Non-U.S. Affiliates							0	0	0	0	0	0	0	0
4099999. Total General Account - Reciprocal Jurisdiction Affiliates							0	0	0	0	0	0	0	0
4399999. Total General Account - Reciprocal Jurisdiction Non-Affiliates							0	0	0	0	0	0	0	0
4499999. Total General Account Reciprocal Jurisdiction							0	0	0	0	0	0	0	0
4599999. Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction and Certified							144,222,875,909	3,755,483,213	3,759,713,939	262,261,248	0	0	0	0
4899999. Total Separate Accounts - Authorized U.S. Affiliates							0	0	0	0	0	0	0	0
5199999. Total Separate Accounts - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0	0
5299999. Total Separate Accounts - Authorized Affiliates							0	0	0	0	0	0	0	0
5599999. Total Separate Accounts - Authorized Non-Affiliates							0	0	0	0	0	0	0	0
5699999. Total Separate Accounts Authorized							0	0	0	0	0	0	0	0
5999999. Total Separate Accounts - Unauthorized U.S. Affiliates							0	0	0	0	0	0	0	0
6299999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates							0	0	0	0	0	0	0	0
6399999. Total Separate Accounts - Unauthorized Affiliates							0	0	0	0	0	0	0	0
6699999. Total Separate Accounts - Unauthorized Non-Affiliates							0	0	0	0	0	0	0	0
6799999. Total Separate Accounts Unauthorized							0	0	0	0	0	0	0	0
7099999. Total Separate Accounts - Certified U.S. Affiliates							0	0	0	0	0	0	0	0
7399999. Total Separate Accounts - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0	0
7499999. Total Separate Accounts - Certified Affiliates							0	0	0	0	0	0	0	0
7799999. Total Separate Accounts - Certified Non-Affiliates							0	0	0	0	0	0	0	0
7899999. Total Separate Accounts Certified							0	0	0	0	0	0	0	0
8199999. Total Separate Accounts - Reciprocal Jurisdiction U.S. Affiliates							0	0	0	0	0	0	0	0
8499999. Total Separate Accounts - Reciprocal Jurisdiction Non-U.S. Affiliates							0	0	0	0	0	0	0	0
8599999. Total Separate Accounts - Reciprocal Jurisdiction Affiliates							0	0	0	0	0	0	0	0
8899999. Total Separate Accounts - Reciprocal Jurisdiction Non-Affiliates							0	0	0	0	0	0	0	0
8999999. Total Separate Accounts Reciprocal Jurisdiction							0	0	0	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF 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 Domi- ciliary Juris- diction	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			
9099999. Total Separate Accounts Authorized, Unauthorized, Reciprocal Jurisdiction and Certified								0	0	0	0	0	0	0	0
9199999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)								136,194,566,935	3,753,760,722	3,759,345,200	261,882,231	0	0	0	0
9299999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999)								8,028,308,974	1,722,491	368,739	379,017	0	0	0	0
9999999 - Totals								144,222,875,909	3,755,483,213	3,759,713,939	262,261,248	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

**SCHEDULE S - PART 3 - SECTION 2**

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsur- ance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11 Current Year	12 Prior Year		
0399999. Total General Account - Authorized U.S. Affiliates							0	0	0	0	0	0	0
0699999. Total General Account - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0
0799999. Total General Account - Authorized Affiliates							0	0	0	0	0	0	0
86258	13-2572994	01/01/1999	General Re Life Corporation	CT	QA/I	LTDI	5,056,145	2,691,495	9,592,204	0	0	0	0
66346	58-0828824	01/01/1999	Munich American Reassurance Company	GA	QA/I	LTDI	8,615,204	4,307,175	15,384,371	0	0	0	0
82627	06-0839705	02/01/1981	Swiss Re Life & Health America, Inc.	MO	QA/I	LTDI	2,838,815	1,388,746	74,029,727	0	0	0	0
67598	04-1768571	11/01/1988	Paul Revere Life Ins Co	MA	QA/I	LTDI	247,950	113,395	9,469,227	0	0	0	0
0899999. General Account - Authorized U.S. Non-Affiliates							16,758,114	8,500,811	108,475,529	0	0	0	0
1099999. Total General Account - Authorized Non-Affiliates							16,758,114	8,500,811	108,475,529	0	0	0	0
1199999. Total General Account Authorized							16,758,114	8,500,811	108,475,529	0	0	0	0
1499999. Total General Account - Unauthorized U.S. Affiliates							0	0	0	0	0	0	0
1799999. Total General Account - Unauthorized Non-U.S. Affiliates							0	0	0	0	0	0	0
1899999. Total General Account - Unauthorized Affiliates							0	0	0	0	0	0	0
2199999. Total General Account - Unauthorized Non-Affiliates							0	0	0	0	0	0	0
2299999. Total General Account Unauthorized							0	0	0	0	0	0	0
2599999. Total General Account - Certified U.S. Affiliates							0	0	0	0	0	0	0
2899999. Total General Account - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0
2999999. Total General Account - Certified Affiliates							0	0	0	0	0	0	0
3299999. Total General Account - Certified Non-Affiliates							0	0	0	0	0	0	0
3399999. Total General Account Certified							0	0	0	0	0	0	0
3699999. Total General Account - Reciprocal Jurisdiction U.S. Affiliates							0	0	0	0	0	0	0
3999999. Total General Account - Reciprocal Jurisdiction Non-U.S. Affiliates							0	0	0	0	0	0	0
4099999. Total General Account - Reciprocal Jurisdiction Affiliates							0	0	0	0	0	0	0
4399999. Total General Account - Reciprocal Jurisdiction Non-Affiliates							0	0	0	0	0	0	0
4499999. Total General Account Reciprocal Jurisdiction							0	0	0	0	0	0	0
4599999. Total General Account Authorized, Unauthorized, Reciprocal Jurisdiction and Certified							16,758,114	8,500,811	108,475,529	0	0	0	0
4899999. Total Separate Accounts - Authorized U.S. Affiliates							0	0	0	0	0	0	0
5199999. Total Separate Accounts - Authorized Non-U.S. Affiliates							0	0	0	0	0	0	0
5299999. Total Separate Accounts - Authorized Affiliates							0	0	0	0	0	0	0
5599999. Total Separate Accounts - Authorized Non-Affiliates							0	0	0	0	0	0	0
5699999. Total Separate Accounts Authorized							0	0	0	0	0	0	0
5999999. Total Separate Accounts - Unauthorized U.S. Affiliates							0	0	0	0	0	0	0
6299999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates							0	0	0	0	0	0	0
6399999. Total Separate Accounts - Unauthorized Affiliates							0	0	0	0	0	0	0
6699999. Total Separate Accounts - Unauthorized Non-Affiliates							0	0	0	0	0	0	0
6799999. Total Separate Accounts Unauthorized							0	0	0	0	0	0	0
7099999. Total Separate Accounts - Certified U.S. Affiliates							0	0	0	0	0	0	0
7399999. Total Separate Accounts - Certified Non-U.S. Affiliates							0	0	0	0	0	0	0
7499999. Total Separate Accounts - Certified Affiliates							0	0	0	0	0	0	0
7799999. Total Separate Accounts - Certified Non-Affiliates							0	0	0	0	0	0	0
7899999. Total Separate Accounts Certified							0	0	0	0	0	0	0
8199999. Total Separate Accounts - Reciprocal Jurisdiction U.S. Affiliates							0	0	0	0	0	0	0
8499999. Total Separate Accounts - Reciprocal Jurisdiction Non-U.S. Affiliates							0	0	0	0	0	0	0
8599999. Total Separate Accounts - Reciprocal Jurisdiction Affiliates							0	0	0	0	0	0	0
8899999. Total Separate Accounts - Reciprocal Jurisdiction Non-Affiliates							0	0	0	0	0	0	0
8999999. Total Separate Accounts Reciprocal Jurisdiction							0	0	0	0	0	0	0
9099999. Total Separate Accounts Authorized, Unauthorized, Reciprocal Jurisdiction and Certified							0	0	0	0	0	0	0
9199999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3699999, 4199999, 4899999, 5399999, 5999999, 6499999, 7099999, 7599999, 8199999 and 8699999)							16,758,114	8,500,811	108,475,529	0	0	0	0
9299999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 3999999, 4299999, 5199999, 5499999, 6299999, 6599999, 7399999, 7699999, 8499999 and 8799999)							0	0	0	0	0	0	0
9999999 - Totals							16,758,114	8,500,811	108,475,529	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF 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
15363	80-0955278	12/31/2013	Kenwood Re Inc	7,207,449	0	0	7,207,449	0		8,009,628	0	0	0	7,207,449
15363	80-0955278	12/31/2013	Kenwood Re Inc	558,972,142	13,423,309	0	572,395,451	0		256,366,783	0	341,704,284	4,660,140	572,395,451
13575	26-3791519	05/01/2011	Montgomery Re	185,808,635	1,326,953	0	187,135,588	0		189,220,973	0	98,360,559	421,349	187,135,588
13575	26-3791519	07/01/2012	Montgomery Re	935,442	0	0	935,442	0		1,993,863	0	0	0	935,442
13575	26-3791519	07/01/2012	Montgomery Re	114,835,655	4,800,746	0	119,636,401	0		120,969,595	0	62,882,231	993,413	119,636,401
0199999. General Account - Life and Annuity U.S. Affiliates - Captive				867,759,323	19,551,008	0	887,310,331	0	XXX	576,560,842	0	502,947,074	6,074,902	887,310,331
0399999. Total General Account - Life and Annuity U.S. Affiliates				867,759,323	19,551,008	0	887,310,331	0	XXX	576,560,842	0	502,947,074	6,074,902	887,310,331
0699999. Total General Account - Life and Annuity Non-U.S. Affiliates				0	0	0	0	0	XXX	0	0	0	0	0
0799999. Total General Account - Life and Annuity Affiliates				867,759,323	19,551,008	0	887,310,331	0	XXX	576,560,842	0	502,947,074	6,074,902	887,310,331
00000	AA-3190770	01/01/2006	Chubb Tempest Reins LTD	379,571	0	0	379,571	377,000		0	0	0	49,706	379,571
0999999. General Account - Life and Annuity Non-U.S. Non-Affiliates				379,571	0	0	379,571	377,000	XXX	0	0	0	49,706	379,571
1099999. Total General Account - Life and Annuity Non-Affiliates				379,571	0	0	379,571	377,000	XXX	0	0	0	49,706	379,571
1199999. Total General Account Life and Annuity				868,138,894	19,551,008	0	887,689,902	377,000	XXX	576,560,842	0	502,947,074	6,124,608	887,689,902
1499999. Total General Account - Accident and Health U.S. Affiliates				0	0	0	0	0	XXX	0	0	0	0	0
1799999. Total General Account - Accident and Health Non-U.S. Affiliates				0	0	0	0	0	XXX	0	0	0	0	0
1899999. Total General Account - Accident and Health Affiliates				0	0	0	0	0	XXX	0	0	0	0	0
2199999. Total General Account - Accident and Health Non-Affiliates				0	0	0	0	0	XXX	0	0	0	0	0
2299999. Total General Account Accident and Health				0	0	0	0	0	XXX	0	0	0	0	0
2399999. Total General Account				868,138,894	19,551,008	0	887,689,902	377,000	XXX	576,560,842	0	502,947,074	6,124,608	887,689,902
2699999. Total Separate Accounts - U.S. Affiliates				0	0	0	0	0	XXX	0	0	0	0	0
2999999. Total Separate Accounts - Non-U.S. Affiliates				0	0	0	0	0	XXX	0	0	0	0	0
3099999. Total Separate Accounts - Affiliates				0	0	0	0	0	XXX	0	0	0	0	0
3399999. Total Separate Accounts - Non-Affiliates				0	0	0	0	0	XXX	0	0	0	0	0
3499999. Total Separate Accounts				0	0	0	0	0	XXX	0	0	0	0	0
3599999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2699999 and 3199999)				867,759,323	19,551,008	0	887,310,331	0	XXX	576,560,842	0	502,947,074	6,074,902	887,310,331
3699999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2999999 and 3299999)				379,571	0	0	379,571	377,000	XXX	0	0	0	49,706	379,571
9999999 - Totals				868,138,894	19,551,008	0	887,689,902	377,000	XXX	576,560,842	0	502,947,074	6,124,608	887,689,902

(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	37,700
0001	2	021000089	Citibank, N.A.	37,700
0001	2	021000021	JPMorgan Chase Bank, N.A.	37,700
0001	2	026009593	Bank of America, N.A.	37,700
0001	2	026002574	Barclays Bank PLC	28,275
0001	2	021001088	HSBC Bank USA, National Association	28,275
0001	2	026009632	The Bank of Tokyo-Mitsubishi UFJ, LTD	37,700
0001	2	026009917	Australia and New Zealand Banking Group Limited	18,850
0001	2	121000248	Wells Fargo Bank, National Association as Fronting Bank for ING Bank N.V., London Branch	28,275
0001	2	011000028	State Street Bank and Trust Company	18,850
0001	2	026004093	Royal Bank of Canada	28,275
0001	2	026002561	Standard Chartered Bank	18,850
0001	2	021000018	The Bank of New York Mellon	18,850



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

**SCHEDULE S - PART 6**

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

	1 2021	2 2020	3 2019	4 2018	5 2017
<b>A. OPERATIONS ITEMS</b>					
1. Premiums and annuity considerations for life and accident and health contracts .....	279,019	282,363	300,459	275,201	281,952
2. Commissions and reinsurance expense allowances .....	35,516	51,133	64,291	30,383	37,530
3. Contract claims .....	302,045	276,181	284,378	258,364	210,299
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 reserve for life and accident and health contracts .....	1,797	7,992	1,117,089	86,456	106,074
<b>B. BALANCE SHEET ITEMS</b>					
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 .....	3,872,460	3,870,663	3,862,670	2,745,582	2,659,125
10. Liability for deposit-type contracts .....	0	0	0	0	0
11. Contract claims unpaid .....	47,042	35,988	35,348	39,509	19,060
12. Amounts recoverable on reinsurance .....	10,892	17,181	21,400	11,686	9,708
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
<b>C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
18. Funds deposited by and withheld from (F) .....	0	0	0	0	0
19. Letters of credit (L) .....	377	354	463	357	356
20. Trust agreements (T) .....	576,561	574,299	542,682	501,528	497,505
21. Other (O) .....	502,947	515,569	521,277	500,647	471,325
<b>D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
22. Multiple Beneficiary Trust .....	0	0	0	0	0
23. Funds deposited by and withheld from (F) .....	134	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

ANNUAL STATEMENT FOR THE YEAR 2021 OF 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)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	2,647,564,179	0	2,647,564,179
2. Reinsurance (Line 16) .....	15,967,278	(15,967,278)	0
3. Premiums and considerations (Line 15) .....	126,689,831	0	126,689,831
4. Net credit for ceded reinsurance .....	XXX	3,919,009,813	3,919,009,813
5. All other admitted assets (balance) .....	62,098,398	0	62,098,398
6. Total assets excluding Separate Accounts (Line 26) .....	2,852,319,686	3,903,042,535	6,755,362,221
7. Separate Account assets (Line 27) .....	329,060,690	0	329,060,690
8. Total assets (Line 28) .....	3,181,380,376	3,903,042,535	7,084,422,911
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
9. Contract reserves (Lines 1 and 2) .....	2,218,233,392	3,872,459,551	6,090,692,943
10. Liability for deposit-type contracts (Line 3) .....	180,115,773	0	180,115,773
11. Claim reserves (Line 4) .....	28,534,758	47,042,064	75,576,822
12. Policyholder dividends/member refunds/reserves (Lines 5 through 7) .....	0	0	0
13. Premium & annuity considerations received in advance (Line 8) .....	995,497	0	995,497
14. Other contract liabilities (Line 9) .....	36,041,061	(16,459,080)	19,581,981
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) .....	141,587,659	0	141,587,659
20. Total liabilities excluding Separate Accounts (Line 26) .....	2,605,508,140	3,903,042,535	6,508,550,675
21. Separate Account liabilities (Line 27) .....	329,060,690	0	329,060,690
22. Total liabilities (Line 28) .....	2,934,568,830	3,903,042,535	6,837,611,365
23. Capital & surplus (Line 38) .....	246,811,545	XXX	246,811,545
24. Total liabilities, capital & surplus (Line 39) .....	3,181,380,375	3,903,042,535	7,084,422,910
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
25. Contract reserves .....	3,872,459,551		
26. Claim reserves .....	47,042,064		
27. Policyholder dividends/reserves .....	0		
28. Premium & annuity considerations received in advance .....	0		
29. Liability for deposit-type contracts .....	0		
30. Other contract liabilities .....	(16,459,080)		
31. Reinsurance ceded assets .....	15,967,278		
32. Other ceded reinsurance recoverables .....	0		
33. Total ceded reinsurance recoverables .....	3,919,009,813		
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 payable/offsets .....	0		
41. Total net credit for ceded reinsurance .....	3,919,009,813		

ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

**SCHEDULE T - PART 2**  
**INTERSTATE COMPACT - EXHIBIT OF PREMIUMS WRITTEN**

Allocated by States and Territories

			Direct Business Only				6	
			1	2	3	4		5
States, Etc.			Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	Deposit-Type Contracts	Totals
1. Alabama	AL		5,020,501	240	881,688	0	0	5,902,429
2. Alaska	AK		365,984	0	73,021	0	0	439,005
3. Arizona	AZ		6,020,866	0	765,828	0	0	6,786,694
4. Arkansas	AR		2,875,260	0	255,659	0	0	3,130,919
5. California	CA		40,124,585	0	1,017,792	0	0	41,142,377
6. Colorado	CO		10,275,540	0	1,240,308	0	0	11,515,848
7. Connecticut	CT		5,646,717	0	382,708	0	0	6,029,425
8. Delaware	DE		642,209	0	83,737	0	0	725,946
9. District of Columbia	DC		843,016	0	147,515	0	0	990,531
10. Florida	FL		36,425,175	0	6,300,652	0	0	42,725,827
11. Georgia	GA		11,318,661	8,183	914,146	0	0	12,240,990
12. Hawaii	HI		228,066	0	83,396	0	0	311,462
13. Idaho	ID		3,541,057	0	330,206	0	0	3,871,263
14. Illinois	IL		12,815,197	0	1,459,235	0	250,000	14,524,432
15. Indiana	IN		6,046,245	0	524,677	0	0	6,570,922
16. Iowa	IA		4,209,153	0	258,913	0	0	4,468,066
17. Kansas	KS		6,189,066	3,000	636,375	0	0	6,828,441
18. Kentucky	KY		4,586,197	0	385,832	0	0	4,972,029
19. Louisiana	LA		4,417,014	0	603,339	0	0	5,020,353
20. Maine	ME		1,014,369	0	85,840	0	0	1,100,209
21. Maryland	MD		8,661,211	1,185	922,564	0	0	9,584,960
22. Massachusetts	MA		9,187,314	0	854,971	0	0	10,042,285
23. Michigan	MI		13,741,975	0	1,361,086	0	0	15,103,061
24. Minnesota	MN		6,250,861	0	520,137	0	255,000	7,025,998
25. Mississippi	MS		2,429,796	0	203,387	0	0	2,633,183
26. Missouri	MO		6,411,546	0	751,575	0	0	7,163,121
27. Montana	MT		2,504,274	0	143,729	0	0	2,648,003
28. Nebraska	NE		4,109,021	0	247,355	0	89,018	4,445,394
29. Nevada	NV		1,810,072	0	226,023	0	0	2,036,095
30. New Hampshire	NH		2,306,804	0	198,176	0	0	2,504,980
31. New Jersey	NJ		10,451,327	0	1,494,138	0	0	11,945,465
32. New Mexico	NM		1,117,241	0	102,096	0	0	1,219,337
33. New York	NY		885,384	0	412,884	0	0	1,298,268
34. North Carolina	NC		11,190,283	7,680	2,075,403	0	0	13,273,366
35. North Dakota	ND		1,028,521	0	99,188	0	0	1,127,709
36. Ohio	OH		29,325,359	0	2,325,298	0	91,913,684	123,564,341
37. Oklahoma	OK		4,651,727	0	628,383	0	0	5,280,110
38. Oregon	OR		5,302,131	0	527,119	0	0	5,829,250
39. Pennsylvania	PA		13,992,843	71,674	1,904,346	0	0	15,968,863
40. Rhode Island	RI		1,728,304	0	151,621	0	0	1,879,925
41. South Carolina	SC		4,406,607	0	629,501	0	0	5,036,108
42. South Dakota	SD		416,941	0	135,635	0	0	552,576
43. Tennessee	TN		14,443,225	0	2,073,196	0	0	16,516,421
44. Texas	TX		32,865,948	0	3,193,087	0	0	36,059,035
45. Utah	UT		7,110,818	0	777,698	0	0	7,888,516
46. Vermont	VT		555,856	0	94,453	0	0	650,309
47. Virginia	VA		9,506,892	255	873,038	0	107,609	10,487,794
48. Washington	WA		7,584,631	0	845,035	0	0	8,429,666
49. West Virginia	WV		1,477,556	10,000	258,673	0	0	1,746,229
50. Wisconsin	WI		5,661,657	0	762,287	0	0	6,423,944
51. Wyoming	WY		1,150,818	0	63,373	0	0	1,214,191
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		3,772,894	0	1,248,669	0	0	5,021,563
55. U.S. Virgin Islands	VI		1,740	0	2,499	0	0	4,239
56. Northern Mariana Islands	MP		0	0	0	0	0	0
57. Canada	CAN		4,711	0	1,295	0	0	6,006
58. Aggregate Other Alien	OT		9,235	0	5,615	0	0	14,850
59. Total			388,734,393	102,217	42,544,400	0	92,615,311	523,996,321

ANNUAL STATEMENT FOR THE YEAR 2021 OF 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? (Yes/No)	*
.0704	Ohio National Mutual Holdings, Inc.	.00000	31-1614095	0	0		Ohio National Mutual Holdings, Inc.	OH	UIP		Ownership, Board of Directors, Management	0.000		NO	0
.0704	Ohio National Mutual Holdings, Inc.	.00000	31-1614097	0	0		Ohio National Financial Services, Inc.	OH	UIP	Ohio National Mutual Holdings, Inc.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.	NO	0
.0704	Ohio National Mutual Holdings, Inc.	.00000	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.	NO	0
.0704	Ohio National Mutual Holdings, Inc.	.00000	46-5464819	0	0		ON Tech, SMLLC	DE	NIA	Ohio National Financial Services, Inc.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.	NO	0
.0704	Ohio National Mutual Holdings, Inc.	.00000	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.	NO	0
.0704	Ohio National Mutual Holdings, Inc.	.00000	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.	NO	0
.0704	Ohio National Mutual Holdings, Inc.	.00000	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.	NO	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.	NO	0
.0704	Ohio National Mutual Holdings, Inc.	.00000	46-3873878	0	0		Ohio National Foreign Holdings, SMLLC	DE	NIA	The Ohio National Life Insurance Company	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.	NO	0
.0704	Ohio National Mutual Holdings, Inc.	.00000		0	0		ON Overseas Holding B.V.	NLD	NIA	Ohio National Foreign Holdings, SMLLC	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.	NO	0
.0704	Ohio National Mutual Holdings, Inc.	.00000		0	0		ON Netherlands Holdings B.V.	NLD	NIA	ON Overseas Holding B.V.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.	NO	0
.0704	Ohio National Mutual Holdings, Inc.	.00000		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.	NO	0
.0704	Ohio National Mutual Holdings, Inc.	.00000	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.	NO	0
.0704	Ohio National Mutual Holdings, Inc.	.00000		0	0		Ohio National Sudamerica S.A.	CHL	NIA	ON Global Holdings, SMLLC	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.	NO	0
.0704	Ohio National Mutual Holdings, Inc.	.00000		0	0		Ohio National Seguros de Vida S.A. O.N. Internacional do Brasil Participações Ltda.	CHL	NIA	Ohio National Sudamerica S.A.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.	NO	0
.0704	Ohio National Mutual Holdings, Inc.	.00000		0	0			BRA	NIA	ON Netherlands Holdings B.V.	Ownership, Board of Directors, Management	100.000	Ohio National Mutual Holdings, Inc.	NO	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.	NO	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.	NO	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.	NO	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.	NO	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.	NO	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.	NO	0
.0704	Ohio National Mutual Holdings, Inc.	.00000	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.	YES	0
.0704	Ohio National Mutual Holdings, Inc.	.00000	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.	YES	0
.0704	Ohio National Mutual Holdings, Inc.	.00000	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.	YES	0
.0704	Ohio National Mutual Holdings, Inc.	.00000	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.	NO	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF 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? (Yes/No)	*
..0704 .....	Ohio National Mutual Holdings, Inc. ....	.....00000 .....	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. ....	.....NO.....	.....0 .....

Asterisk	Explanation

ANNUAL STATEMENT FOR THE YEAR 2021 OF 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)
67172	31-0397080	The Ohio National Life Insurance Company	0	0	0	0	53,403,447	(24,706,550)		0	28,696,897	(918,589,442)
89206	31-0962495	Ohio National Life Assurance Corporation	0	0	0	0	(53,403,447)	53,929,693		0	526,246	2,151,664,374
13575	26-3791519	Montgomery Re, Inc.	0	0	0	0	0	(6,408,426)		0	(6,408,426)	(307,707,431)
15363	80-0955278	Kenwood Re, Inc	0	0	0	0	0	(5,967,352)		0	(5,967,352)	(579,602,900)
15855	47-4249160	Camargo Re Captive, Inc.	0	0	0	0	0	(16,847,365)		0	(16,847,365)	(345,764,601)
9999999 Control Totals			0	0	0	0	0	0	XXX	0	0	0



## 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.

	Responses
<b>MARCH FILING</b>	
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
<b>APRIL FILING</b>	
5. Will Management's Discussion and Analysis be filed by April 1? .....	YES
6. Will the Life, Health & Annuity Guaranty Association Assessable Premium Exhibit - Parts 1 and 2 be filed with the state of domicile and the NAIC by April 1? (Not applicable to fraternal benefit societies) .....	YES
7. Will the Supplemental Investment Risks Interrogatories be filed by April 1? .....	YES
<b>JUNE FILING</b>	
8. Will an audited financial report be filed by June 1? .....	YES
9. Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1? .....	YES

The following supplemental reports are required to be filed as part of your annual 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.

<b>MARCH FILING</b>	
10. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1? (Not applicable to fraternal benefit societies) ...	NO
11. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1? .....	NO
12. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1? .....	NO
13. 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
14. 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
15. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1? .....	YES
16. 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
17. 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
18. 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
19. 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
20. 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
21. 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
22. 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
23. 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
24. 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
25. 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



ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

24. C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]



25. Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]



26. Modified Guaranteed Annuity Model Regulation [Document Identifier 453]



28. Workers' Compensation Carve-Out Supplement [Document Identifier 495]



30. Medicare Part D Coverage Supplement [Document Identifier 365]



31. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]



32. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]



33. Relief from the Requirements for Audit Committees [Document Identifier 226]



35. Health Care Receivables Supplement [Document Identifier 470]



37. Long-Term Care Experience Reporting Forms [Document Identifier 306]



38. Credit Insurance Experience Exhibit [Document Identifier 230]



40. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]



41. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]



42. Actuarial Memorandum Required by Actuarial Guideline XXXVIII 8D [Document Identifier 435]



44. Variable Annuities Supplement [Document Identifier 286]



47. Variable Annuities Summary of the PBR Actuarial Report [Document Identifier 459]



**OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Summary of Operations Line 8.3

	1 Current Year	2 Prior Year
08.304. Administrative Charges .....	353,298	125,038
08.305. VUL Gain (Loss) .....	31,289	(484,375)
08.397. Summary of remaining write-ins for Line 8.3 from overflow page	384,587	(359,337)

ANNUAL STATEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION  
**OVERFLOW PAGE FOR WRITE-INS**

Additional Write-ins for Analysis of Operations - Summary Line 8.3

	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 .....	353,300	359,208	0	4,024	0	(9,932)	0	0	0
08.305. VUL Gain (Loss) .....	31,289	31,289	0	0	0	0	0	0	0
08.397. Summary of remaining write-ins for Line 8.3 from overflow page	384,589	390,497	0	4,024	0	(9,932)	0	0	0

Additional Write-ins for Analysis of Operations - Individual Life Insurance Line 8.3

	1	2	3	4	5	6	7	8	9	10	11	12
	Total	Industrial Life	Whole Life	Term Life	Indexed Life	Universal Life	Universal Life With Secondary Guarantees	Variable Life	Variable Universal Life	Credit Life (c)	Other Individual Life	YRT Mortality Risk Only
08.304. Administrative Charges .....	359,207	0	(236)	1,850	(21,169)	(183,875)	(43)	0	562,680	0	0	0
08.305. VUL Gain (Loss) .....	31,289	0	0	0	0	0	0	0	31,289	0	0	0
08.397. Summary of remaining write-ins for Line 8.3 from overflow page	390,496	0	(236)	1,850	(21,169)	(183,875)	(43)	0	593,969	0	0	0



SUPPLEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

**VM-20 RESERVES SUPPLEMENT – PART 1A**

Life Insurance Reserves Valued According to VM-20 by Product Type  
 For The Year Ended December 31, 2021  
 (To Be Filed by March 1)

NAIC Group Code 0704

NAIC Company Code 89206

	Prior Year	Current Year	
	1 Reported Reserve	2 Reported Reserve	3 Due and Deferred Premium Asset
1. Post-Reinsurance-Ceded Reserve			
1.1. Term Life Insurance.....	2,621,431	9,798,091	3,220,737
1.2. Universal Life With Secondary Guarantee .....	5,106,818	15,203,073	.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 .....	543,161	.0	.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-Ceded Reserve (Sum of Lines 1.1 through 1.9)	8,271,410	25,001,164	XXX
3. Pre-Reinsurance-Ceded Reserve			
3.1. Term Life Insurance.....	3,016,556	10,517,906	3,220,737
3.2. Universal Life With Secondary Guarantee .....	5,306,139	15,572,585	.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 .....	543,346	.0	.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)	8,866,041	26,090,491	XXX
5. Total Reserves Ceded (Line 4 minus Line 2)	594,631	1,089,327	XXX
<b>DETAILS OF WRITE-INS</b>			
1.901. ....			
1.902. ....			
1.903. ....			
1.998. Summary of remaining write-ins for Line 1.9 from overflow page .....	.0	.0	.0
1.999. Totals (Lines 1.901 thru 1.903 plus 1.998) (Line 1.9 above)	0	0	0
3.901. ....			
3.902. ....			
3.903. ....			
3.998. Summary of remaining write-ins for Line 3.9 from overflow page .....	.0	.0	.0
3.999. Totals (Lines 3.901 thru 3.903 plus 3.998) (Line 3.9 above)	0	0	0

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SUPPLEMENT FOR THE YEAR 2021 OF 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, 2021  
 (To Be Filed by March 1)  
 (\$000 Omitted for Face Amounts)

	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	3,305,797	6,577,346	.XXX	.XXX	.XXX	.XXX	.XXX
1.2. Universal Life With Secondary Guarantee	0	0	0	.XXX	.XXX	0	0	.XXX	.XXX	15,203,073	.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	0	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 Reserve												
3.1. Term Life Insurance	0	0	0	0	0	3,305,797	7,297,161	12,863	10,310,781	.XXX	0	0
3.2. Universal Life With Secondary Guarantee	0	0	0	0	0	0	0	0	0	15,572,585	5,522	1,189,340
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	0	0	0	0	0	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
<b>DETAILS OF WRITE-INS</b>												
1.901.				.XXX	.XXX			.XXX	.XXX		.XXX	.XXX
1.902.				.XXX	.XXX			.XXX	.XXX		.XXX	.XXX
1.903.				.XXX	.XXX			.XXX	.XXX		.XXX	.XXX
1.998. Summary of remaining write-ins for Line 1.9 from overflow page	0	0	0	.XXX	.XXX	0	0	.XXX	.XXX	0	.XXX	.XXX
1.999. Totals (Lines 1.901 thru 1.903 plus 1.998) (Line 1.9 above)	0	0	0	.XXX	.XXX	0	0	.XXX	.XXX	0	.XXX	.XXX
3.901.												
3.902.												
3.903.												
3.998. Summary of remaining write-ins for Line 3.9 from overflow page	0	0	0	0	0	0	0	0	0	0	0	0
3.999. Totals (Lines 3.901 thru 3.903 plus 3.998) (Line 3.9 above)	0	0	0	0	0	0	0	0	0	0	0	0

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**VM-20 RESERVES SUPPLEMENT – PART 2**

Life PBR Exemption  
 For The Year Ended December 31, 2021  
 (To Be Filed by March 1)

<b>Life PBR Exemption as defined in the NAIC adopted Valuation Manual (VM)</b>	
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, 2021  
 (To Be Filed by March 1)

- 1A. Has the company filed and been granted a Single State Exemption from the reserve requirements of VM-20 of the Valuation Manual by their state of domicile? ..... Yes [ ] No [ X ]
- 1B. If the answer to question 1A is "Yes" please discuss any business not covered under the Single State Exemption.  
 .....
- 2A. If the answer to question 1A is "Yes", does the company have risks for policies issued outside its state of domicile? ..... Yes [ ] No [ ]
- 2B. If the answer to question 2A is "Yes" please discuss the risks for policies issued outside the state of domicile, how those risks came to be a responsibility of the company, and why the company would still be considered a Single State Company with such risks.  
 .....
- 3. Is all of the company's individual ordinary life insurance business excluded from the requirements of VM-20 pursuant to Section II.B of the Valuation Manual? ..... Yes [ ] No [ X ]



SUPPLEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION  
**SCHEDULE O SUPPLEMENT**

For The Year Ended December 31, 2021  
 (To Be Filed by March 1)

Of The OHIO NATIONAL LIFE ASSURANCE CORPORATION  
 ADDRESS (City, State and Zip Code) Cincinnati, OH 45242  
 NAIC Group Code 0704 NAIC Company Code 89206 Employer's Identification Number (FEIN) 31-0962495

**SUPPLEMENTAL SCHEDULE O - PART 1**

**Development of Incurred Losses**  
 (\$000 Omitted)

**Section A - Group Accident and Health**

Years in Which Losses Were Incurred	Cumulative Net Amounts Paid Policyholders				
	1 2017	2 2018	3 2019	4 2020	5 2021(a)
1. Prior	<b>NONE</b>				
2. 2017					
3. 2018					
4. 2019					
5. 2020					
6. 2021					

**Section B - Other Accident and Health**

Years in Which Losses Were Incurred	1 2017	2 2018	3 2019	4 2020	5 2021(a)
1. Prior	29	(730)	236	(2,192)	10,343
2. 2017	86	632	592	916	96
3. 2018	XXX	171	305	578	130
4. 2019	XXX	XXX	256	474	149
5. 2020	XXX	XXX	XXX	150	234
6. 2021	XXX	XXX	XXX	XXX	103

**Section C - Credit Accident and Health**

1. Prior	<b>NONE</b>				
2. 2017					
3. 2018					
4. 2019					
5. 2020					
6. 2021					

**Section D -**

1. Prior	<b>NONE</b>				
2. 2017					
3. 2018					
4. 2019					
5. 2020					
6. 2021					

**Section E -**

1. Prior	<b>NONE</b>				
2. 2017					
3. 2018					
4. 2019					
5. 2020					
6. 2021					

**Section F -**

1. Prior	<b>NONE</b>				
2. 2017					
3. 2018					
4. 2019					
5. 2020					
6. 2021					

**Section G -**

1. Prior	<b>NONE</b>				
2. 2017					
3. 2018					
4. 2019					
5. 2020					
6. 2021					

(a) See the Annual Audited Financial Reports section of the annual statement instructions.

SUPPLEMENT FOR THE YEAR 2021 OF 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**

Years in Which Losses Were Incurred	Net Amounts Paid for Cost Containment Expenses				
	1 2017	2 2018	3 2019	4 2020	5 2021
1. Prior .....	<b>NONE</b>				
2. 2017 .....					
3. 2018 .....					
4. 2019 .....					
5. 2020 .....					
6. 2021 .....					

**Section B - Other Accident and Health**

1. Prior .....	0	0	0	0	0
2. 2017 .....	136	0	0	0	0
3. 2018 .....	XXX	237	0	0	0
4. 2019 .....	XXX	XXX	203	0	0
5. 2020 .....	XXX	XXX	XXX	231	0
6. 2021 .....	XXX	XXX	XXX	XXX	186

**Section C - Credit Accident and Health**

1. Prior .....	<b>NONE</b>				
2. 2017 .....					
3. 2018 .....					
4. 2019 .....					
5. 2020 .....					
6. 2021 .....					

**Section D -**

1. Prior .....	<b>NONE</b>				
2. 2017 .....					
3. 2018 .....					
4. 2019 .....					
5. 2020 .....					
6. 2021 .....					

**Section E -**

1. Prior .....	<b>NONE</b>				
2. 2017 .....					
3. 2018 .....					
4. 2019 .....					
5. 2020 .....					
6. 2021 .....					

**Section F -**

1. Prior .....	<b>NONE</b>				
2. 2017 .....					
3. 2018 .....					
4. 2019 .....					
5. 2020 .....					
6. 2021 .....					

**Section G -**

1. Prior .....	<b>NONE</b>				
2. 2017 .....					
3. 2018 .....					
4. 2019 .....					
5. 2020 .....					
6. 2021 .....					

SUPPLEMENT FOR THE YEAR 2021 OF 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**

Years in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
	1 2017	2 2018	3	4 2020	5 2021
1. 2017	<b>NONE</b>				
2. 2018	XXX				XXX
3. 2019	XXX	XXX			
4. 2020	XXX	XXX	XXX		
5. 2021	XXX	XXX	XXX	XXX	

**Section B - Other Accident and Health**

1. 2017	5,005	3,338	2,795	XXX	XXX
2. 2018	XXX	6,091	3,610	2,400	XXX
3. 2019	XXX	XXX	9,640	6,536	5,684
4. 2020	XXX	XXX	XXX	7,474	6,833
5. 2021	XXX	XXX	XXX	XXX	10,618

**Section C - Credit Accident and Health**

1. 2017				XXX	XXX
2. 2018	XXX				XXX
3. 2019	XXX				
4. 2020	XXX	XX	XXX		
5. 2021	XXX	XX	XXX	XXX	

**Section D -**

1. 2017				XXX	XXX
2. 2018	XXX				XXX
3. 2019	XXX				
4. 2020	XXX	XX	XXX		
5. 2021	XXX	XX	XXX	XXX	

**Section E -**

1. 2017				XXX	XXX
2. 2018	XXX				XXX
3. 2019	XXX				
4. 2020	XXX	XX	XXX		
5. 2021	XXX	XXX	XXX	XXX	

**Section F -**

1. 2017				XXX	XXX
2. 2018	XXX				XXX
3. 2019	XXX				
4. 2020	XXX	XX	XXX		
5. 2021	XXX	XX	XXX	XXX	

**Section G -**

1. 2017				XXX	XXX
2. 2018	XXX				XXX
3. 2019	XXX				
4. 2020	XXX	XX	XXX		
5. 2021	XXX	XX	XXX	XXX	

**SCHEDULE O SUPPLEMENT**

**SUPPLEMENTAL SCHEDULE O - PART 4**

**Development of Incurred Losses  
(\$000 Omitted)**

**Section A - Group Accident and Health**

Years in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1 2017	2 2018	3	4 2020	5 2021
1. 2017	<b>NONE</b>				
2. 2018					
3. 2019					
4. 2020					
5. 2021					

**Section B - Other Accident and Health**

Years in Which Losses Were Incurred	1 2017	2 2018	3	4 2020	5 2021
1. 2017	5,005	3,338	2,795	3,075	2,021
2. 2018	XXX	6,091	3,610	2,400	2,138
3. 2019	XXX	XXX	9,640	6,536	5,684
4. 2020	XXX	XXX	XXX	7,474	6,833
5. 2021	XXX	XXX	XXX	XXX	10,618

**Section C - Credit Accident and Health**

Years in Which Losses Were Incurred	1 2017	2 2018	3	4 2020	5 2021
1. 2017	<b>NONE</b>				
2. 2018					
3. 2019					
4. 2020					
5. 2021					

**Section D -**

Years in Which Losses Were Incurred	1 2017	2 2018	3	4 2020	5 2021
1. 2017	<b>NONE</b>				
2. 2018					
3. 2019					
4. 2020					
5. 2021					

**Section E -**

Years in Which Losses Were Incurred	1 2017	2 2018	3	4 2020	5 2021
1. 2017	<b>NONE</b>				
2. 2018					
3. 2019					
4. 2020					
5. 2021					

**Section F -**

Years in Which Losses Were Incurred	1 2017	2 2018	3	4 2020	5 2021
1. 2017	<b>NONE</b>				
2. 2018					
3. 2019					
4. 2020					
5. 2021					

**Section G -**

Years in Which Losses Were Incurred	1 2017	2 2018	3	4 2020	5 2021
1. 2017	<b>NONE</b>				
2. 2018					
3. 2019					
4. 2020					
5. 2021					

**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	27,861
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	70,042
11. Total		97,903



SUPPLEMENT FOR THE YEAR 2021 OF OHIO NATIONAL LIFE ASSURANCE CORPORATION

**HEALTH CARE RECEIVABLES SUPPLEMENT**

For The Year Ended December 31, 2021  
(To Be Filed by March 1)

Of The OHIO NATIONAL LIFE ASSURANCE CORPORATION .....  
Address ( City, State and Zip Code) Cincinnati , OH 45242 .....  
NAIC Group Code 0704 ..... NAIC Company Code 89206 ..... Employer's ID Number 31-0962495 .....

**EXHIBIT 3 - HEALTH CARE RECEIVABLES**

1 Name of Debtor	2 1 - 30 Days	3 31 - 60 Days	4 61 - 90 Days	5 Over 90 Days	6 Nonadmitted	7 Admitted
0799999 Gross health care receivables						