



ANNUAL STATEMENT

For the Year Ended December 31, 2012
of the Condition and Affairs of the

FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA

NAIC Group Code.....0000, ,0000 (Current Period) (Prior Period)	NAIC Company Code..... 56340	Employer's ID Number..... 34-0220550
Organized under the Laws of OH	State of Domicile or Port of Entry OH	Country of Domicile US
Incorporated/Organized..... January 9, 1892	Commenced Business..... October 1, 1890	
Statutory Home Office	6611 ROCKSIDE ROAD..... INDEPENDENCE OH US <i>(Street and Number) (City or Town, State and Zip Code)</i>	
Main Administrative Office	6611 ROCKSIDE ROAD..... INDEPENDENCE OH US <i>(Street and Number) (City or Town, State and Zip Code)</i>	216-642-9406 <i>(Area Code) (Telephone Number)</i>
Mail Address	6611 ROCKSIDE ROAD..... INDEPENDENCE OH US <i>(Street and Number or P. O. Box) (City or Town, State and Zip Code)</i>	
Primary Location of Books and Records	6611 ROCKSIDE ROAD..... INDEPENDENCE OH US <i>(Street and Number) (City or Town, State and Zip Code)</i>	216-642-9406 <i>(Area Code) (Telephone Number)</i>
Internet Web Site Address	44131	
Statutory Statement Contact	KENNETH ANTHONY ARENDT <i>(Name)</i> FCSU@AOL.COM <i>(E-Mail Address)</i>	216-642-9406 <i>(Area Code) (Telephone Number) (Extension)</i> 216-642-4310 <i>(Fax Number)</i>

OFFICERS

Name	Title	Name	Title
1. ANDREW MATHEW RAJEC	PRESIDENT	2. KENNETH ANTHONY ARENDT	EXECUTIVE SECRETARY
3. GEORGE FRANCIS MATTA	TREASURER	4. ANDREW R. HARCAR SR	VICE PRESIDENT
OTHER			
GARY J. MATTA	GENERAL COUNSEL	EDWARD COWMAN	ACTUARY

DIRECTORS OR TRUSTEES

ANDREW MATHEW RAJEC	ANDREW R. HARCAR SR	KENNETH ANTHONY ARENDT	GEORGE FRANCIS MATTA
REV. THOMAS NASTA	RUDOLPH BERNATH	REGIS BREKOSKY	HENRY HASSAY
KAREN HUNKA	JAMES MARMOL	JOSEPH MINAROVICH	MILOS MITRO
DAMIAN NASTA	SUSAN ONDREJCO	CARL UNGVARSKY	

State of.....OHIO
County of.... CUYAHOGA

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

_____ (Signature) ANDREW MATHEW RAJEC	_____ (Signature) KENNETH ANTHONY ARENDT	_____ (Signature) GEORGE FRANCIS MATTA
1. (Printed Name) PRESIDENT	2. (Printed Name) EXECUTIVE SECRETARY	3. (Printed Name) TREASURER
_____ (Title)	_____ (Title)	_____ (Title)

Subscribed and sworn to before me
This 19TH day of FEBRUARY, 2013

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 _____

FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANA ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D).....	281,561,350		281,561,350	255,081,164
2. Stocks (Schedule D):				
2.1 Preferred stocks.....	700,000		700,000	2,927,429
2.2 Common stocks.....	3,178,369		3,178,369	2,757,043
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....	1,587,886		1,587,886	1,737,103
3.2 Other than first liens.....			0	
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....	1,020,772		1,020,772	1,074,301
4.2 Properties held for the production of income (less \$.....0 encumbrances).....	811,890		811,890	843,809
4.3 Properties held for sale (less \$.....0 encumbrances).....	562,675		562,675	562,675
5. Cash (\$.....7,916,511, Schedule E-Part 1), cash equivalents (\$.....0, Schedule E-Part 2) and short-term investments (\$.....0, Schedule DA).....	7,916,511		7,916,511	5,245,506
6. Contract loans (including \$.....0 premium notes).....	1,014,147		1,014,147	992,342
7. Derivatives (Schedule DB).....			0	
8. Other invested assets (Schedule BA).....	3,746,150		3,746,150	10,600,462
9. Receivables for securities.....			0	
10. Securities lending reinvested collateral assets (Schedule DL).....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	302,099,750	0	302,099,750	281,821,834
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	3,361,023		3,361,023	3,252,818
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	18,788		18,788	31,155
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....			0	
15.3 Accrued retrospective premiums.....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....			0	
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	
18.2 Net deferred tax asset.....			0	
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....			0	
21. Furniture and equipment, including health care delivery assets (\$.....0).....	10,250	10,250	0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....			0	
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other than invested assets.....	19,287	19,287	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	305,509,098	29,537	305,479,561	285,105,807
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. TOTALS (Lines 26 and 27).....	305,509,098	29,537	305,479,561	285,105,807

DETAILS OF WRITE-INS

1101.....			0	
1102.....			0	
1103.....			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Deposits 550, Book Inventory 18,737.....	19,287	19,287	0	
2502.....			0	
2503.....			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	19,287	19,287	0	0

FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANA LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Aggregate reserve for life certificates and contracts (Exhibit 5, Line 9999999) (including \$.....0 Modco Reserve).....	243,149,000	227,605,000
2. Aggregate reserve for accident and health contracts (Exhibit 6, Line 16, Col. 1) (including \$.....0 Modco Reserve).....		
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$.....0 Modco Reserve).....	29,587,520	26,045,653
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Column 1 less sum of Columns 9, 10 and 11).....	300,000	300,000
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Columns 9, 10 and 11).....		
5. Refunds due and unpaid (Exhibit 4, Line 10).....		
6. Provision for refunds payable in following calendar year-estimated amounts:		
6.1 Apportioned for payment.....	400,000	400,000
6.2 Not yet apportioned.....		
7. Premiums and annuity considerations for life and accident and health contracts received in advance less \$.....0 discount; including \$.....0 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of Lines 4 and 14).....	293,109	313,734
8. Contract liabilities not included elsewhere:		
8.1 Surrender values on canceled contracts.....		
8.2 Other amounts payable on reinsurance including \$.....0 assumed and \$.....0 ceded.....		
8.3 Interest Maintenance Reserve (IMR, Line 6).....	171,618	1,332,565
9. Commissions to fieldworkers due or accrued-life and annuity contracts \$.....0 ; accident and health \$.....0 and deposit-type contract funds \$.....0.....	14,903	25,692
10. Commissions and expense allowances payable on reinsurance assumed.....		
11. General expenses due or accrued (Exhibit 2, Line 12, Col. 7).....	562,268	364,187
12. Transfers to Separate Accounts due or accrued (net) (including \$.....0 accrued for expense allowances recognized in reserves).....		
13. Taxes, licenses and fees due or accrued (Exhibit 3, Line 8, Col. 6).....	21,858	24,066
14. Unearned investment income.....		
15. Amounts withheld or retained by Society as agent or trustee.....	7,022,497	7,140,958
16. Amounts held for fieldworkers' account, including \$.....0 fieldworkers' credit balances.....		
17. Remittances and items not allocated.....		
18. Net adjustment in assets and liabilities due to foreign exchange rates.....	9,511	10,000
19. Liability for benefits for employees and fieldworkers if not included above.....		
20. Borrowed money \$.....0 and interest thereon \$.....0.....		
21. Miscellaneous liabilities:		
21.1 Asset valuation reserve (AVR, Line 16, Col. 7).....	2,350,068	2,145,008
21.2 Reinsurance in unauthorized and certified (\$.....0) companies.....		
21.3 Funds held under reinsurance treaties with unauthorized and certified (\$.....0) reinsurers.....		
21.4 Payable to subsidiaries and affiliates.....		
21.5 Drafts outstanding.....		
21.6 Funds held under coinsurance.....		
21.7 Derivatives.....		
21.8 Payable for securities.....	535,709	
21.9 Payable for securities lending.....		
22. Aggregate write-ins for liabilities.....	414,927	414,927
23. Total liabilities excluding Separate Accounts business (Lines 1 to 22).....	284,832,989	266,121,790
24. From Separate Accounts statement.....		
25. Total liabilities (Lines 23 and 24).....	284,832,989	266,121,790
26. Aggregate write-ins for other than liabilities and surplus funds.....	0	0
27. Surplus notes.....		
28. Aggregate write-ins for surplus funds.....	0	0
29. Unassigned funds.....	20,646,572	18,984,017
30. Total (Lines 26 through 29) (Page 4, Line 47) (including \$.....0 in Separate Accounts statement).....	20,646,572	18,984,017
31. Totals (Lines 25 + 30) (Page 2, Line 28, Col. 3).....	305,479,561	285,105,807

DETAILS OF WRITE-INS

2201. Postretirement Reserve.....	228,960	228,960
2202. Security Deposits.....	10,967	10,967
2203. Special Marketing and Promotion Reserves.....	175,000	175,000
2298. Summary of remaining write-ins for Line 22 from overflow page.....	0	0
2299. Totals (Lines 2201 thru 2203 plus 2298) (Line 22 above).....	414,927	414,927
2601.		
2602.		
2603.		
2698. Summary of remaining write-ins for Line 26 from overflow page.....	0	0
2699. Totals (Lines 2601 thru 2603 plus 2698) (Line 26 above).....	0	0
2801.		
2802.		
2803.		
2898. Summary of remaining write-ins for Line 28 from overflow page.....	0	0
2899. Totals (Lines 2801 thru 2803 plus 2898) (Line 28 above).....	0	0

FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANA

SUMMARY OF OPERATIONS

	1 Current Year	2 Prior Year
1. Premiums and annuity considerations for life and accident and health contracts (Exhibit 1, Part 1, Line 20.4, Col. 1).....	19,650,874	15,290,804
2. Considerations for supplementary contracts with life contingencies.....		
3. Net investment income (Exhibit of Net Investment Income, Line 17).....	13,393,552	13,294,944
4. Amortization of Interest Maintenance Reserve (IMR, Line 5).....	310,954	293,139
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....		
6. Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1).....		
7. Reserve adjustments on reinsurance ceded.....		
8. Miscellaneous Income:		
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.....		
8.2 Charges and fees for deposit-type contracts.....		
8.3 Aggregate write-ins for miscellaneous income.....	79,911	54,655
9. Totals (Lines 1 to 8.3).....	33,435,291	28,933,542
10. Death benefits.....	2,696,560	3,043,177
11. Matured endowments (excluding guaranteed annual pure endowments).....		1,085
12. Annuity benefits.....	10,003,697	20,483,778
13. Disability benefits and benefits under accident and health contracts, including premiums waived \$.....0.....		
14. Surrender benefits and withdrawals for life contracts.....	659,904	545,361
15. Interest and adjustments on contract or deposit-type contracts funds.....	273,274	284,035
16. Payments on supplementary contracts with life contingencies.....		
17. Increase in aggregate reserve for life and accident and health contracts.....	15,544,000	799,000
18. Totals (Lines 10 to 17).....	29,177,435	25,156,436
19. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1 less Col. 5).....	216,199	220,845
20. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1 less Col. 5).....		
21. General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Cols. 1, 2, 3, 4 and 6).....	2,639,407	2,421,858
22. Insurance taxes, licenses and fees (Exhibit 3, Line 6, Cols. 1, 2, 3 and 5).....	141,005	80,954
23. Increase in loading on deferred and uncollected premiums.....		
24. Net transfers to or (from) Separate Accounts net of reinsurance.....		
25. Aggregate write-ins for deductions.....	(457,377)	(467,794)
26. Totals (Lines 18 to 25).....	31,716,669	27,412,299
27. Net gain from operations before refunds to members (Line 9 minus Line 26).....	1,718,622	1,521,243
28. Refunds to members (Exhibit 4, Line 17, Cols. 1 + 2).....	397,288	393,805
29. Net gain from operations after refunds to members and before realized capital gains (losses) (Line 27 minus Line 28).....	1,321,333	1,127,438
30. Net realized capital gains (losses) less capital gains tax of \$.....0 (excluding \$.....(849,993) transferred to the IMR).....	198,857	(1,269,681)
31. Net income (Lines 29 + 30).....	1,520,191	(142,243)
SURPLUS ACCOUNT		
32. Surplus, December 31, previous year (Page 3, Line 30, Col. 2).....	18,984,017	17,519,864
33. Net income from operations (Line 31).....	1,520,191	(142,243)
34. Change in net unrealized capital gains (losses) less capital gains tax of \$.....0.....	364,955	964,771
35. Change in net unrealized foreign exchange capital gain (loss).....		
36. Change in nonadmitted assets.....	9,823	20,162
37. Change in liability for reinsurance in unauthorized and certified companies.....		
38. Change in reserve on account of change in valuation basis, (increase) or decrease (Exhibit 5A, Line 9999999, Col. 4).....		
39. Change in asset valuation reserve.....	(205,060)	621,146
40. Surplus (contributed to) withdrawn from Separate Accounts during period.....		
41. Other changes in surplus in Separate Accounts statement.....		
42. Change in surplus notes.....		
43. Cumulative effect of changes in accounting principles.....		
44. Change in surplus as a result of reinsurance.....		
45. Aggregate write-ins for gains and losses in surplus.....	(27,352)	317
46. Net change in surplus for the year (Lines 33 through 45).....	1,662,556	1,464,153
47. Surplus December 31, current year (Lines 32 + 46) (Page 3, Line 30).....	20,646,573	18,984,017
DETAILS OF WRITE-INS		
08.301. ADVERTISING & SUBSCRIPTION INCOME.....	5,505	5,404
08.302. RENTAL INCOME ON GROUNDS @ ESTATES.....	5,000	14,000
08.303. MISCELLANEOUS INCOME.....	69,406	35,251
08.398. Summary of remaining write-ins for Line 8.3 from overflow page.....	0	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above).....	79,911	54,655
2501. NET CHANGE IN SETTLEMENT OPTION W/O LIFE.....	(191,356)	(182,186)
2502. NET CHANGE IN PENSION FUND.....	(266,021)	(285,608)
2503.		
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	(457,377)	(467,794)
4501. ACCRUAL & ASSET ADJUSTMENTS.....	(27,352)	317
4502.		
4503.		
4598. Summary of remaining write-ins for Line 45 from overflow page.....	0	0
4599. Totals (Lines 4501 thru 4503 plus 4598) (Line 45 above).....	(27,352)	317

FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANA CASH FLOW

	1 Current Year	2 Prior Year
CASH FROM OPERATIONS		
1. Premiums collected net of reinsurance.....	19,642,616	15,479,981
2. Net investment income.....	13,891,907	14,012,677
3. Miscellaneous income.....	79,911	54,655
4. Total (Lines 1 through 3).....	33,614,434	29,547,313
5. Benefit and loss related payments.....	13,633,435	23,889,642
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....		
7. Commissions, expenses paid and aggregate write-ins for deductions.....	2,351,942	2,719,886
8. Dividends paid to policyholders.....	397,288	393,805
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....		
10. Total (Lines 5 through 9).....	16,382,666	27,003,333
11. Net cash from operations (Line 4 minus Line 10).....	17,231,769	2,543,980
CASH FROM INVESTMENTS		
12. Proceeds from investments sold, matured or repaid:		
12.1 Bonds.....	80,882,048	63,958,801
12.2 Stocks.....	2,206,653	3,264,275
12.3 Mortgage loans.....	149,217	146,834
12.4 Real estate.....		
12.5 Other invested assets.....	9,096,001	
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....		
12.7 Miscellaneous proceeds.....	535,709	1,885,447
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	92,869,628	69,255,356
13. Cost of investments acquired (long-term only):		
13.1 Bonds.....	108,677,867	80,364,932
13.2 Stocks.....	99,200	296,300
13.3 Mortgage loans.....		
13.4 Real estate.....		
13.5 Other invested assets.....	1,999,118	6,000,000
13.6 Miscellaneous applications.....		
13.7 Total investments acquired (Lines 13.1 to 13.6).....	110,776,185	86,661,232
14. Net increase (decrease) in contract loans and premium notes.....	21,805	81,279
15. Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	(17,928,362)	(17,487,155)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
16. Cash provided (applied):		
16.1 Surplus notes, capital notes.....		
16.2 Capital and paid in surplus, less treasury stock.....		
16.3 Borrowed funds.....		
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....	3,530,934	10,822,491
16.5 Dividends to stockholders.....		
16.6 Other cash provided (applied).....	(163,335)	383,571
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	3,367,599	11,206,062
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11 plus Line 15 plus Line 17).....	2,671,006	(3,737,112)
19. Cash, cash equivalents and short-term investments:		
19.1 Beginning of year.....	5,245,505	8,982,617
19.2 End of year (Line 18 plus Line 19.1).....	7,916,511	5,245,505

Note: Supplemental disclosures of cash flow information for non-cash transactions:

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FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1 Total	Insurance					8 Fraternal	9 Expense
		2 Life Insurance	3 Individual Annuities	4 Supplementary Contracts	5 Accident and Health	6 Aggregate of All Other Lines of Business			7 Total (Columns 2 through 6)
1. Premiums and annuity considerations for life and accident and health contracts.....	19,650,874	1,560,739	18,090,136				19,650,874	
2. Considerations for supplementary contracts with life contingencies.....	0						0	
3. Net investment income.....	13,393,552	4,393,552	9,000,000				13,393,552	
4. Amortization of interest maintenance reserve (IMR).....	310,954	310,954					310,954	
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....	0						0	
6. Commissions and expense allowances on reinsurance ceded.....	0						0	
7. Reserve adjustments on reinsurance ceded.....	0						0	
8. Miscellaneous Income:								
8.1 Fees associated with income from investment management, administration and contract guarantees from Separate Accounts.....	0						0	
8.2 Charges and fees for deposit-type contracts.....	0						0	
8.3 Aggregate write-ins for miscellaneous income.....	79,911	79,911	0	0	0	0	79,911	0
9. Totals (Lines 1 to 8.3).....	33,435,291	6,345,156	27,090,136	0	0	0	33,435,291	0
10. Death benefits.....	2,696,560	2,696,560					2,696,560	
11. Matured endowments (excluding guaranteed annual pure endowments).....	0						0	
12. Annuity benefits.....	10,003,697		10,003,697				10,003,697	
13. Disability benefits and benefits under accident and health contracts, including premiums waived \$.....	0						0	
14. Surrender benefits and withdrawals for life contracts.....	659,904	659,904					659,904	
15. Interest and adjustments on contract or deposit-type contract funds.....	273,274		273,274				273,274	
16. Payments on supplementary contracts with life contingencies.....	0						0	
17. Increase in aggregate reserve for life and accident and health certificates and contracts.....	15,544,000	725,000	14,819,000				15,544,000	
18. Totals (Lines 10 to 17).....	29,177,435	4,081,464	25,095,971	0	0	0	29,177,435	0
19. Commissions on premiums and annuity considerations and deposit-type funds (direct business only).....	216,199	24,002	192,197				216,199	
20. Commissions and expense allowances on reinsurance assumed.....	0						0	
21. General insurance expenses and fraternal expenses.....	2,639,407	486,059	1,400,000				1,886,059	753,348
22. Insurance taxes, licenses and fees.....	141,005	141,005					141,005	
23. Increase in loading on deferred and uncollected premiums.....	0						0	
24. Net transfers to or (from) Separate Accounts net of reinsurance.....	0						0	
25. Aggregate write-ins for deductions.....	(457,377)	0	(457,377)	0	0	0	(457,377)	0
26. Totals (Lines 18 to 25).....	31,716,669	4,732,530	26,230,791	0	0	0	30,963,321	753,348
27. Net gain from operations before refunds to members (Line 9 minus Line 26).....	1,718,622	1,612,626	859,344	0	0	0	2,471,970	(753,348)
28. Refunds to members.....	397,288	397,288					397,288	
29. Net gain from operations after refunds to members and before realized capital gains or (losses) (Line 27 minus Line 28).....	1,321,334	1,215,338	859,344	0	0	0	2,074,682	(753,348)

DETAILS OF WRITE-INS

08.301. ADVERTISING & SUBSCRIPTION INCOME.....	5,505	5,505					5,505	
08.302. RENTAL INCOME ON GROUNDS @ ESTATES.....	5,000	5,000					5,000	
08.303. MISCELLANEOUS INCOME.....	69,406	69,406					69,406	
08.398. Summary of remaining write-ins for Item 8.3 from overflow page.....	0		0	0	0	0	0	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398 above) (Line 8.3 above).....	79,911	79,911	0	0	0	0	79,911	0
2501. NET CHANGE IN SETTLEMENT OPTION W/O LIFE.....	(191,356)		(191,356)				(191,356)	
2502. NET CHANGE IN PENSION FUND.....	(266,021)		(266,021)				(266,021)	
2503.	0						0	
2598. Summary of remaining write-ins for Item 25 from overflow page.....	0		0	0	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598 above) (Line 25 above).....	(457,377)	0	(457,377)	0	0	0	(457,377)	0

ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR

	1 Total	2 Life Insurance	3 Annuities	4 Supplementary Contracts
Involving Life or Disability Contingencies (Reserves)				
(Net of Reinsurance Ceded)				
1. Reserve December 31, prior year.....	227,605,000	72,658,000	154,947,000	
2. Tabular net premiums or considerations.....	19,634,899	1,544,763	18,090,136	
3. Present value of disability claims incurred.....	0			XXX
4. Tabular interest.....	10,464,618	3,794,900	6,669,718	
5. Tabular less actual reserve released.....	136,117		136,117	
6. Increase in reserve on account of change in valuation basis.....	0			
7. Other increases (net).....	200,000		200,000	
8. Totals (Lines 1 to 7).....	258,040,634	77,997,663	180,042,971	0
9. Tabular cost.....	3,104,956	3,104,956		XXX
10. Reserves released by death.....	808,968	808,968	XXX	XXX
11. Reserves released by other terminations (net).....	700,739	700,739		
12. Annuity, supplementary contract and disability payments involving life contingencies.....	10,276,971		10,276,971	
13. Net transfers to or (from) separate accounts.....	0			
14. Total deductions (Lines 9 to 13).....	14,891,634	4,614,663	10,276,971	0
15. Reserve December 31, current year.....	243,149,000	73,383,000	169,766,000	0

FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANA EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. government bonds.....	(a).....3,560,682	.....4,019,787
1.1 Bonds exempt from U.S. tax.....	(a).....	.....
1.2 Other bonds (unaffiliated).....	(a).....10,460,034	.....10,112,750
1.3 Bonds of affiliates.....	(a).....	.....
2.1 Preferred stocks (unaffiliated).....	(b).....172,752	.....168,439
2.11 Preferred stocks of affiliates.....	(b).....	.....
2.2 Common stocks (unaffiliated).....	.....85,333	.....86,030
2.21 Common stocks of affiliates.....	.....	.....
3. Mortgage loans.....	(c).....119,448	.....119,448
4. Real estate.....	(d).....300,858	.....300,858
5. Contract loans.....	.....58,103	.....58,103
6. Cash, cash equivalents and short-term investments.....	(e).....52,054	.....52,054
7. Derivative instruments.....	(f).....	.....
8. Other invested assets.....	.....35,688	.....35,688
9. Aggregate write-ins for investment income.....	(498,792)	(498,792)
10. Total gross investment income.....	14,346,160	14,454,365
11. Investment expenses.....	.....	(g).....895,626
12. Investment taxes, licenses and fees, excluding federal income taxes.....	.....	(g).....72,240
13. Interest expense.....	.....	(h).....
14. Depreciation on real estate and other invested assets.....	.....	(i).....92,947
15. Aggregate write-ins for deductions from investment income.....	.....	.....0
16. Total deductions (Lines 11 through 15).....	.....	1,060,813
17. Net investment income (Line 10 minus Line 16).....	.....	13,393,552

DETAILS OF WRITE-INS

0901. PENSION FUND EXPENSE.....	.....(498,792)	.....(498,792)
0902. ....	.....	.....
0903. ....	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	(498,792)	(498,792)
1501. ....	.....	.....
1502. ....	.....	.....
1503. ....	.....	.....
1598. Summary of remaining write-ins for Line 15 from overflow page.....	.....	.....0
1599. Totals (Lines 1501 thru 1503 plus 1598) (Line 15 above).....	.....	.....0

- (a) Includes \$.....10,751 accrual of discount less \$.....28,269 amortization of premium and less \$.....514,232 paid for accrued interest on purchases.
- (b) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.
- (c) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (d) Includes \$.....0 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.
- (e) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (f) Includes \$.....0 accrual of discount less \$.....0 amortization of premium.
- (g) Includes \$.....0 investment expenses and \$.....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to Segregated and Separate Accounts.
- (h) Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.
- (i) Includes \$.....92,947 depreciation on real estate and \$.....0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) on Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. government bonds.....	.....	.....	.....0	.....	.....
1.1 Bonds exempt from U.S. tax.....	.....	.....	.....0	.....	.....
1.2 Other bonds (unaffiliated).....	.....(829,216)	.....	.....(829,216)	.....230,620	.....
1.3 Bonds of affiliates.....	.....	.....	.....0	.....	.....
2.1 Preferred stocks (unaffiliated).....	.....(20,777)	.....	.....(20,777)	.....	.....
2.11 Preferred stocks of affiliates.....	.....	.....	.....0	.....	.....
2.2 Common stocks (unaffiliated).....	.....	.....	.....0	.....157,300	.....
2.21 Common stocks of affiliates.....	.....	.....	.....0	.....164,841	.....
3. Mortgage loans.....	.....	.....	.....0	.....	.....
4. Real estate.....	.....	.....	.....0	.....	.....
5. Contract loans.....	.....	.....	.....0	.....	.....
6. Cash, cash equivalents and short-term investments.....	.....	.....	.....0	.....	.....
7. Derivative instruments.....	.....	.....	.....0	.....	.....
8. Other invested assets.....	.....198,857	.....	.....198,857	.....(187,806)	.....
9. Aggregate write-ins for capital gains (losses).....	.....0	.....0	.....0	.....0	.....0
10. Total capital gains (losses).....	(651,136)	0	(651,136)	364,955	0

DETAILS OF WRITE-INS

0901. ....	.....0	.....	.....0	.....	.....
0902. ....	.....0	.....	.....0	.....	.....
0903. ....	.....0	.....	.....0	.....	.....
0998. Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0	.....0	.....0	.....0
0999. Totals (Lines 0901 thru 0903 plus 0998) (Line 9 above).....	.....0	.....0	.....0	.....0	.....0

EXHIBIT 1 - PART 1 - PREMIUMS AND ANNUITY CONSIDERATIONS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

	Insurance					7 Fraternal	8 Expense
	1 Total	2 Life Insurance	3 Individual Annuities	4 Accident and Health	5 Aggregate of All Other Lines of Business			6 Total (Columns 2 through 5)
FIRST YEAR (other than single)							
1. Uncollected.....	0					0	
2. Deferred and accrued.....	0					0	
3. Deferred, accrued & uncollected:							
3.1 Direct.....	0					0	
3.2 Reinsurance assumed.....	0					0	
3.3 Reinsurance ceded.....	0					0	
3.4 Net (Line 1 + Line 2).....	0	0	0	0	0	0	0
4. Advance.....	0					0	
5. Line 3.4 - Line 4.....	0	0	0	0	0	0	0
6. Collected during year:							
6.1 Direct.....	14,068,747	28,382	14,040,365			14,068,747	
6.2 Reinsurance assumed.....	0					0	
6.3 Reinsurance ceded.....	0					0	
6.4 Net.....	14,068,747	28,382	14,040,365	0	0	14,068,747	0
7. Line 5 + Line 6.4.....	14,068,747	28,382	14,040,365	0	0	14,068,747	0
8. Prior year (uncollected + deferred and accrued - advance).....	0					0	
9. First year premiums and considerations:							
9.1 Direct.....	14,068,747	28,382	14,040,365			14,068,747	
9.2 Reinsurance assumed.....	0					0	
9.3 Reinsurance ceded.....	0					0	
9.4 Net (Line 7 - Line 8).....	14,068,747	28,382	14,040,365	0	0	14,068,747	0
SINGLE							
10. Single premiums and considerations:							
10.1 Direct.....	765,451	765,451				765,451	
10.2 Reinsurance assumed.....	0					0	
10.3 Reinsurance ceded.....	0					0	
10.4 Net.....	765,451	765,451	0	0	0	765,451	0
RENEWAL							
11. Uncollected.....	18,788	18,788				18,788	
12. Deferred and accrued.....	0					0	
13. Deferred, accrued & uncollected:							
13.1 Direct.....	18,788	18,788				18,788	
13.2 Reinsurance assumed.....	0					0	
13.3 Reinsurance ceded.....	0					0	
13.4 Net (Line 11 + Line 12).....	18,788	18,788	0	0	0	18,788	0
14. Advance.....	293,109	293,109				293,109	
15. Line 13.4 - Line 14.....	(274,321)	(274,321)	0	0	0	(274,321)	0
16. Collected during year:							
16.1 Direct.....	4,825,830	776,059	4,049,771			4,825,830	
16.2 Reinsurance assumed.....	0					0	
16.3 Reinsurance ceded.....	17,412	17,412				17,412	
16.4 Net.....	4,808,418	758,647	4,049,771	0	0	4,808,418	0
17. Line 15 + Line 16.4.....	4,534,097	484,326	4,049,771	0	0	4,534,097	0
18. Prior year (uncollected + deferred and accrued - advance).....	(282,579)	(282,579)				(282,579)	
19. Renewal premiums and considerations:							
19.1 Direct.....	4,834,088	784,317	4,049,771			4,834,088	
19.2 Reinsurance assumed.....	0					0	
19.3 Reinsurance ceded.....	17,412	17,412				17,412	
19.4 Net (Line 17 - Line 18).....	4,816,676	766,905	4,049,771	0	0	4,816,676	0
TOTAL							
20. Total premiums and annuity considerations:							
20.1 Direct.....	19,668,286	1,578,151	18,090,136	0	0	19,668,286	0
20.2 Reinsurance assumed.....	0	0	0	0	0	0	0
20.3 Reinsurance ceded.....	17,412	17,412	0	0	0	17,412	0
20.4 Net (Lines 9.4 + 10.4 + 19.4).....	19,650,874	1,560,739	18,090,136	0	0	19,650,874	0

EXHIBIT 1 - PART 2 - REFUNDS APPLIED, REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES AND COMMISSIONS INCURRED (direct business only)

	1 Total	Insurance				6 Total (Columns 2 through 5)	7 Fraternal	8 Expense
		2 Life Insurance	3 Individual Annuities	4 Accident and Health	5 Aggregate of All Other Lines of Business			
REFUNDS APPLIED (included in Part 1)								
21. To pay renewal premiums.....	.872	.872				.872		
22. All other.....	396,416	396,416				396,416		
REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED								
23. First year (other than single):								
23.1 Reinsurance ceded.....	.0					.0		
23.2 Reinsurance assumed.....	.0					.0		
23.3 Net ceded less assumed.....	.0	.0	.0	.0	.0	.0	.0	.0
24. Single:								
24.1 Reinsurance ceded.....	.0					.0		
24.2 Reinsurance assumed.....	.0					.0		
24.3 Net ceded less assumed.....	.0	.0	.0	.0	.0	.0	.0	.0
25. Renewal:								
25.1 Reinsurance ceded.....	.0					.0		
25.2 Reinsurance assumed.....	.0					.0		
25.3 Net ceded less assumed.....	.0	.0	.0	.0	.0	.0	.0	.0
26. Totals:								
26.1 Reinsurance ceded (Page 6, Line 6).....	.0	.0	.0	.0	.0	.0	.0	.0
26.2 Reinsurance assumed.....	.0	.0	.0	.0	.0	.0	.0	.0
26.3 Net ceded less assumed.....	.0	.0	.0	.0	.0	.0	.0	.0
COMMISSIONS INCURRED (direct business only)								
27. First year (other than single).....	115,515	10,054	105,461			115,515		
28. Single.....	16,594	16,594				16,594		
29. Renewal.....	84,091	8,143	75,948			84,091		
30. Deposit-type contract funds.....	.0					.0		
31. Totals (to agree with Page 6, Line 19).....	216,199	34,791	181,408	.0	.0	216,199	.0	.0

FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANA
EXHIBIT 2 - GENERAL EXPENSES

	Insurance				5 Investment	6 Fraternal	7 Total
	1 Life	2 Accident and Health		4 Aggregate of All Other Lines of Business			
		2 Cost Containment	3 All Other				
1. Rent.....	120,346				2,000	15,057	137,403
2. Salaries and wages.....	761,773				47,000	36,000	844,773
3.11 Insured benefit plans for employees.....	150,276					20,000	170,276
3.12 Insured benefit plans for fieldworkers.....							.0
3.21 Uninsured benefit plans for employees.....	20,015						20,015
3.22 Uninsured benefit plans for fieldworkers.....							.0
3.31 Other employee welfare.....							.0
3.32 Other fieldworker welfare.....							.0
4.1 Legal fees and expenses.....	34,748					1,448	36,196
4.2 Medical examination fees.....	10,749						10,749
4.3 Inspection report fees.....							.0
4.4 Fees of public accountants and consulting actuaries.....	231,423					10,000	241,423
4.5 Expense of investigation and settlement of certificate claims.....							.0
5.1 Traveling expenses.....	47,663				3,000	20,000	70,663
5.2 Advertising.....	13,849					1,000	14,849
5.3 Postage, express, telegraph and telephone.....	72,810					15,000	87,810
5.4 Printing and stationery.....	45,020					6,000	51,020
5.5 Cost or depreciation of furniture and equipment.....	15,973					15,673	31,646
5.6 Rental of equipment.....	7,346						7,346
5.7 Cost or depreciation of EDP equipment and software.....	63,610					5,000	68,610
5.8 Lodge supplies less \$.....0 from sales.....							.0
6.1 Books and periodicals.....	12,477					2,800	15,277
6.2 Bureau and association dues.....	12,185					2,050	14,235
6.3 Insurance, except on real estate.....	61,024						61,024
6.4 Miscellaneous losses.....							.0
6.5 Collection and bank service charges.....	6,702						6,702
6.6 Sundry general expenses.....					74,407		74,407
7.1 Field expense allowance.....							.0
7.2 Fieldworkers' balances charged off (less \$.....0 recovered).....							.0
7.3 Field conferences other than local meetings.....							.0
8.1 Official publications.....						253,986	253,986
8.2 Expense of Supreme Lodge Meetings.....						206,079	206,079
9.1 Real estate expenses.....					105,466		105,466
9.2 Investment expenses not included elsewhere.....					663,753		663,753
9.3 Aggregate write-ins for expenses.....	.0	.0	.0	.0	.0	341,334	341,334
10. General Expenses Incurred.....	1,687,989	.0	.0	.0	895,626	(a) 951,427	(b) 3,535,042
11. General expenses unpaid December 31, prior year.....	64,187					300,000	364,187
12. General expenses unpaid December 31, current year.....	62,268					500,000	562,268
13. General expenses paid during year (Lines 10 + 11 - 12).....	1,689,908	.0	.0	.0	895,626	751,427	3,336,961

DETAILS OF WRITE-INS

09.301 SCHOLARSHIPS, DONATIONS, FRATERNAL AWARDS.....						341,334	341,334
09.302 .....							.0
09.303 .....							.0
09.398 Summary of remaining write-ins for Line 9.3 from overflow page.....	.0	.0	.0	.0	.0	.0	.0
09.399 Totals (Lines 09.301 thru 09.303 plus 09.398)(Line 9.3 above).....	.0	.0	.0	.0	.0	341,334	341,334

(a) Show the distribution of this amount in the following categories:

1. Charitable \$.....341,334; 2. Institutional \$.....0; 3. Recreational and Health \$.....0; 4. Educational \$.....256,786
5. Religious \$.....0; 6. Membership \$.....155,228; 7. Other \$.....0; 8. Total \$.....753,348

(b) Includes management fees of \$.....0 to affiliates and \$.....0 to non-affiliates.

EXHIBIT 3 - TAXES, LICENSES AND FEES

	Insurance			4 Investment	5 Fraternal	6 Total
	1 Life	2 Accident and Health				
		3 Aggregate of All Other Lines of Business				
1. Real estate taxes.....				72,240		72,240
2. State insurance department licenses and fees.....	74,506					74,506
3. Other state taxes, including \$.....0 for employee benefits.....	4,368					4,368
4. U.S. Social Security taxes.....	62,131					62,131
5. All other taxes.....						.0
6. Taxes, licenses and fees Incurred.....	141,005	.0	.0	72,240	.0	213,245
7. Taxes, licenses and fees unpaid December 31, prior year.....				24,066		24,066
8. Taxes, licenses and fees unpaid December 31, current year.....				21,858		21,858
9. Taxes, licenses and fees paid during year (Lines 6 + 7 - 8).....	141,005	.0	.0	74,448	.0	215,453

EXHIBIT 4 - DIVIDENDS OR REFUNDS

	1 Life	2 Accident and Health
	1. Applied to pay renewal premiums.....	872
2. Applied to shorten the endowment or premium-paying period.....		
3. Applied to provide paid-up additions.....	379,378	
4. Applied to provide paid-up annuities.....		
5. Total (Lines 1 to 4).....	380,251	.0
6. Paid-in cash.....	6,489	
7. Left on deposit.....	10,548	
8. Aggregate write-ins for dividend or refund.....	.0	.0
9. Total (Lines 5 to 8).....	397,288	.0
10. Amount due and unpaid.....		
11. Provision for dividends or refunds payable in the following calendar year.....	400,000	
12. Terminal dividends.....		
13. Provision for deferred dividend contracts.....		
14. Amount provisionally held for deferred dividend contracts not included in Line 13.....		
15. Total (Lines 10 through 14).....	400,000	.0
16. Total from prior year.....	400,000	
17. Total dividends or refunds (Line 9 + 15 - 16).....	397,288	.0

DETAILS OF WRITE-INS

0801.		
0802.		
0803.		
0898. Summary of remaining write-ins for Line 8 from overflow page.....	.0	.0
0899. Totals (Line 0801 thru 0803 plus 0898) (Line 8 above).....	.0	.0

FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANA
EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS

1	2	3	4	5	6
Valuation Standard	Total	Industrial	Ordinary	Credit (Group and Individual)	Group
Life Insurance:					
0100001. AE 4%, 3.5%, 3%.....	33,494		33,494		
0100002. AM(5) 3%.....	550,664		550,664		
0100003. 41 CSO 2.5%.....	5,456		5,456		
0100004. 58 CSO 3%, & 4.5%.....	3,027,111		3,027,111		
0100005. 80 CSO 4.5%.....	17,779,006		17,779,006		
0100006. 80 CSO 5%.....	1,346,737		1,346,737		
0100007. 80 CSO 5.5%.....	40,371,776		40,371,776		
0100008. 80 CSO 6%.....	7,491,732		7,491,732		
0100009. 2001 CSO 4.5%.....	134,613		134,613		
0100010. 2001 CSO 4.0%.....	2,602,219		2,602,219		
0100011. Voluntary Extra.....	0				
0100012. Rounding.....	192		192		
0199997. Totals (Gross).....	73,343,000	0	73,343,000	0	0
0199999. Totals (Net).....	73,343,000	0	73,343,000	0	0
Annuities (excluding supplementary contracts with life contingencies):					
0200001. SPDA, FPDA.....	162,361,549	XXX	162,361,549	XXX	
0200002. SPIA.....	1,161,112	XXX	1,161,112	XXX	
0200003. Home Office Pension.....	6,042,492	XXX	6,042,492	XXX	
0200004. Voluntary Extra.....	200,000	XXX	200,000	XXX	
0200005. Rounding.....	847	XXX	847	XXX	
0299997. Totals (Gross).....	169,766,000	XXX	169,766,000	XXX	0
0299999. Totals (Net).....	169,766,000	XXX	169,766,000	XXX	0
Disability - Active Lives:					
0500001. DIS ACTIVE.....	30,000		30,000		
0599997. Totals (Gross).....	30,000	0	30,000	0	0
0599999. Totals (Net).....	30,000	0	30,000	0	0
Disability - Disabled Lives:					
0600001. DIS DISABLED.....	10,000		10,000		
0699997. Totals (Gross).....	10,000	0	10,000	0	0
0699999. Totals (Net).....	10,000	0	10,000	0	0
9999999. Totals (Net) - Page 3, Line 1.....	243,149,000	0	243,149,000	0	0

EXHIBIT 5 - INTERROGATORIES

- 1.1 Has the reporting entity ever issued both participating and non-participating contracts? Yes [] No [X]
 1.2 If not, state which kind is issued
- 2.1 Does the reporting entity at present issue both participating and non-participating contracts? Yes [] No [X]
 2.2 If not, state which kind is issued
3. Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements? Yes [X] No []
 If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.
4. Has the reporting entity any assessment or stipulated premium contracts in force? If so, state: Yes [] No [X]
 4.1 Amount of insurance: \$.....
 4.2 Amount of reserve: \$.....
 4.3 Basis of reserve:

 4.4 Basis of regular assessments:

 4.5 Basis of special assessments:

 4.6 Assessments collected during year: \$.....
5. If the contract loan interest rate guaranteed in any one or more of its currently issued contracts is less than 5%, not in advance, state the contract loan rate guarantees on any such contracts.
6. Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis? Yes [] No [X]
 6.1 If so, state the amount of reserve on such contracts on the basis actually held: \$.....

 6.2 That would have been held (on an exact or approximate basis) using the actual ages of the annuitants; the interest rate(s) used in 6.1; and the same mortality basis used by the reporting entity for the valuation of comparable annuity benefits issued to standard lives. If the reporting entity has no comparable annuity benefits for standard lives to be valued, the mortality basis shall be the table most recently approved by the state of domicile for valuing individual annuity benefits: \$.....
 Attach statement of methods employed in their valuation.
7. Does the reporting entity have any Synthetic GIC contracts or agreements in effect as of December 31 of the current year? Yes [] No [X]
 7.1 If yes, state the total dollar amount of assets covered by these contracts or agreements: \$.....
 7.2 Specify the basis (fair value, amortized cost, etc.) for determining the amount:

 7.3 State the amount of reserves established for this business: \$.....
 7.4 Identify where the reserves are reported in the blank.
8. Does the reporting entity have any Contingent Deferred Annuity contracts or agreements in effect as of December of the current year? Yes [] No [X]
 8.1 If yes, state the total dollar amount of account value covered by these contracts or agreements. \$.....
 8.2 State the amount of reserves established for this business. \$.....
 8.3 Identify where the reserves are reported in the blank.
9. Does the reporting entity have any Guaranteed Lifetime Income Benefit contracts, agreements or riders in effect as of December 31 of the current year? Yes [] No [X]
 9.1 If yes, state the total dollar amount of any account value associated with these contracts, agreements or riders. \$.....
 9.2 State the amount of reserves established for this business. \$.....
 9.3 Identify where the reserves are reported in the blank.

EXHIBIT 5A - CHANGES IN BASES OF VALUATION DURING THE YEAR

1 Description of Valuation Class	Valuation Basis		4 Increase in Actuarial Reserve Due To Change
	2 Changed From	3 Changed To	

NONE

EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS

	1 Total	2 Collectively Renewable	Other Individual Contracts				7 All Other
			3 Non-Cancelable	4 Guaranteed Renewable	5 Non-Renewable for Stated Reasons Only	6 Other Accident Only	
ACTIVE LIFE RESERVE							
1. Unearned premium reserves.....	0						
2. Additional contract reserves (a).....	0						
3. Additional actuarial reserves-Asset/Liability analysis.....	0						
4. Reserve for future contingent benefits.....	0						
5. Aggregate write-ins for reserves.....	0	0	0	0	0	0	0
6. Totals (Gross).....	0	0	0	0	0	0	0
7. Reinsurance ceded.....	0						
8. Totals (Net).....	0	0	0	0	0	0	0
CLAIM RESERVE							
9. Present value of amounts not yet due on claims.....	0						
10. Additional actuarial reserves-Asset/Liability analysis.....	0						
11. Reserve for future contingent benefits.....	0						
12. Aggregate write-ins for reserves.....	0	0	0	0	0	0	0
13. Totals (Gross).....	0	0	0	0	0	0	0
14. Reinsurance ceded.....	0						
15. Totals (Net).....	0	0	0	0	0	0	0
16. TOTAL (Net).....	0	0	0	0	0	0	0
17. TABULAR FUND INTEREST.....	0						

NONE

DETAILS OF WRITE-INS							
0501.	0						
0502.	0						
0503.	0						
0598. Summary of remaining write-ins for Line 5 from overflow page.....	0	0	0	0	0	0	0
0599. Totals (Lines 0501 thru 0503 + 0598) (Line 5 above)	0	0	0	0	0	0	0
1201.	0						
1202.	0						
1203.	0						
1298. Summary of remaining write-ins for Line 12 from overflow page.....	0	0	0	0	0	0	0
1299. Totals (Lines 1201 thru 1203 + 1298) (Line 12 above)	0	0	0	0	0	0	0

(a) Attach statement as to valuation standard used in calculating this reserve, specify reserve bases, interest rates and method.

EXHIBIT 7 - DEPOSIT-TYPE CONTRACTS

	1 Total	2 Guaranteed Interest Contracts	3 Annuities Certain	4 Supplemental Contracts	5 Dividend Accumulations or Refunds	6 Premium and Other Deposit Funds
1. Balance at beginning of the year before reinsurance.....	26,045,653		858,097		187,556	25,000,000
2. Deposits received during the year.....	10,010,548				10,548	10,000,000
3. Investment earnings credited to the account.....	10,933				10,933	
4. Other net change in reserves.....	0					
5. Fees and other charges assessed.....	0					
6. Surrender charges.....	0					
7. Net surrender or withdrawal payments.....	6,479,614		191,356		10,669	6,277,589
8. Other net transfers to or (from) Separate Accounts.....	0					
9. Balance at the end of the current year before reinsurance (Lines 1 + 2 + 3 + 4 - 5 - 6 - 7 - 8).....	29,587,520	0	666,741	0	198,368	28,722,411
10. Reinsurance balance at the beginning of the year.....	0					
11. Net change in reinsurance assumed.....	0					
12. Net change in reinsurance ceded.....	0					
13. Reinsurance balance at the end of the year (Lines 10 + 11 - 12).....	0	0	0	0	0	0
14. Net balance at the end of current year after reinsurance (Lines 9 + 13).....	29,587,520	0	666,741	0	198,368	28,722,411

EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

PART 1 - Liability End of Current Year

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Due and unpaid:											
1.1 Direct.....	199,895		199,895								
1.2 Reinsurance assumed.....	.0										
1.3 Reinsurance ceded.....	.0										
1.4 Net.....	199,895	.0	199,895	.0	.0	.0	.0	.0	.0	.0	.0
2. In course of settlement:											
2.1 Resisted:											
2.11 Direct.....	.0										
2.12 Reinsurance assumed.....	.0										
2.13 Reinsurance ceded.....	.0										
2.14 Net.....	.0	.0	(b).....0	(b).....0	.0	(b).....0	(b).....0	.0	.0	.0	.0
2.2 Other:											
2.21 Direct.....	.0										
2.22 Reinsurance assumed.....	.0										
2.23 Reinsurance ceded.....	.0										
2.24 Net.....	.0	.0	(b).....0	(b).....0	.0	(b).....0	(b).....0	.0	(b).....0	(b).....0	(b).....0
3. Incurred but unreported:											
3.1 Direct.....	100,105		100,105								
3.2 Reinsurance assumed.....	.0										
3.3 Reinsurance ceded.....	.0										
3.4 Net.....	100,105	.0	(b).....100,105	(b).....0	.0	(b).....0	(b).....0	.0	(b).....0	(b).....0	(b).....0
4. Totals:											
4.1 Direct.....	300,000	.0	300,000	.0	.0	.0	.0	.0	.0	.0	.0
4.2 Reinsurance assumed.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4.3 Reinsurance ceded.....	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
4.4 Net.....	300,000	(a).....0	(a).....300,000	.0	.0	.0	(a).....0	.0	.0	.0	.0

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(a) Including matured endowments (but not guaranteed annual pure endowments) unpaid amounting to \$.....0 in Column 2, \$.....0 in Column 3 and \$.....0 in Column 7.

(b) Include only portion of disability and accident and health claim liabilities applicable to assumed "accrued" benefits. Reserves (including reinsurance assumed and net of reinsurance ceded) for unaccrued benefits for Ordinary Life Insurance \$.....0, Individual Annuities \$.....0, Credit Life (Group and Individual) \$.....0, and Group Life \$.....0, are included in Page 3, Line 1, (See Exhibit 5, Section on Disability Disabled Lives); and for Group Accident and Health \$.....0, Credit (Group and Individual) Accident and Health \$.....0 and Other Accident and Health \$.....0 are included in Page 3, Line 2, (See Exhibit 6, Claim Reserve).

EXHIBIT 8 - CONTRACT CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

PART 2 - Incurred During the Year

	1 Total	2 Industrial Life (a)	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance (b)	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance (c)	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Settlements during the year:											
1.1 Direct.....	12,700,257		2,696,560	10,003,697							
1.2 Reinsurance assumed.....	0										
1.3 Reinsurance ceded.....	0										
1.4 Net.....	(d) 12,700,257	0	2,696,560	10,003,697	0	0	0	0	0	0	0
2. Liability December 31, current year from Part 1:											
2.1 Direct.....	300,000		300,000								
2.2 Reinsurance assumed.....	0										
2.3 Reinsurance ceded.....	0										
2.4 Net.....	300,000	0	300,000	0	0	0	0	0	0	0	0
3. Amounts recoverable from reinsurers December 31, current year.....	275,832		275,832								
4. Liability December 31, prior year:											
4.1 Direct.....	300,000		300,000								
4.2 Reinsurance assumed.....	0										
4.3 Reinsurance ceded.....	0										
4.4 Net.....	300,000	0	300,000	0	0	0	0	0	0	0	0
5. Amounts recoverable from reinsurers December 31, prior year.....	275,832		275,832								
6. Incurred benefits:											
6.1 Direct.....	12,700,257	0	2,696,560	10,003,697	0	0	0	0	0	0	0
6.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0
6.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0	0
6.4 Net.....	12,700,257	0	2,696,560	10,003,697	0	0	0	0	0	0	0

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(a) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$.....0 in Line 1.1, \$.....0 in Line 1.4, \$.....0 in Line 6.1 and \$.....0 in line 6.4.

(b) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$.....0 in Line 1.1, \$.....0 in Line 1.4, \$.....0 in Line 6.1 and \$.....0 in line 6.4.

(c) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$.....0 in Line 1.1, \$.....0 in Line 1.4, \$.....0 in Line 6.1 and \$.....0 in line 6.4.

(d) Includes \$.....0 premiums waived under total and permanent disability benefits.

EXHIBIT OF NONADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....			.0
2. Stocks (Schedule D):			
2.1 Preferred stocks.....			.0
2.2 Common stocks.....			.0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens.....			.0
3.2 Other than first liens.....			.0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company.....			.0
4.2 Properties held for the production of income.....			.0
4.3 Properties held for sale.....			.0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....			.0
6. Contract loans.....			.0
7. Derivatives (Schedule DB).....			.0
8. Other invested assets (Schedule BA).....			.0
9. Receivables for securities.....			.0
10. Securities lending reinvested collateral assets (Schedule DL).....			.0
11. Aggregate write-ins for invested assets.....	.0	.0	.0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	.0	.0	.0
13. Title plants (for Title insurers only).....			.0
14. Investment income due and accrued.....			.0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection.....			.0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....			.0
15.3 Accrued retrospective premiums.....			.0
16. Reinsurance:			
16.1 Amounts recoverable from reinsurers.....			.0
16.2 Funds held by or deposited with reinsured companies.....			.0
16.3 Other amounts receivable under reinsurance contracts.....			.0
17. Amounts receivable relating to uninsured plans.....			.0
18.1 Current federal and foreign income tax recoverable and interest thereon.....			.0
18.2 Net deferred tax asset.....			.0
19. Guaranty funds receivable or on deposit.....			.0
20. Electronic data processing equipment and software.....			.0
21. Furniture and equipment, including health care delivery assets.....	10,250	20,073	9,823
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			.0
23. Receivables from parent, subsidiaries and affiliates.....			.0
24. Health care and other amounts receivable.....			.0
25. Aggregate write-ins for other than invested assets.....	19,287	19,287	.0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	29,537	39,360	9,823
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			.0
28. TOTALS (Lines 26 and 27).....	29,537	39,360	9,823

DETAILS OF WRITE-INS

1101.....			.0
1102.....			.0
1103.....			.0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	.0	.0	.0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above).....	.0	.0	.0
2501. Deposits 550, Book Inventory 18,737.....	19,287	19,287	.0
2502.....			.0
2503.....			.0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	.0	.0	.0
2599. Totals (Lines 2501 thru 2503 plus 2598) (Line 25 above).....	19,287	19,287	.0

NOTES TO FINANCIAL STATEMENTS

1. Significant Account Policies.

A. Accounting practices.

The financial statements of **First Catholic Slovak Union of the United States and Canada** are presented on the basis of accounting practices prescribed or permitted by the Ohio Insurance Department.

The Ohio Insurance Department recognizes only statutory accounting practices prescribed or permitted by the state of Ohio for determining and reporting the financial condition and results of operations of a Fraternal Benefit Society, for determining its solvency under the Ohio Insurance Law. The National Association of Insurance Commissioners' (NAIC) *Accounting Practices and Procedures* manual, (NAIC SAP), has been adopted as a component of prescribed or permitted practices by the state of Ohio. The state has adopted certain prescribed accounting practices that differ from those found in NAIC SAP. Specifically, 1) goodwill arising from the purchase of a subsidiary, controlled or affiliated entity is written off directly to surplus in the year it originates by Ohio domiciled companies. In NAIC SAP, goodwill in amounts not to exceed 10% of an insurer's capital and surplus may be capitalized and all amounts of goodwill are amortized to unrealized gains and losses on investments over periods not to exceed 10 years, and, 2) 100% of all fixed assets are admitted by Ohio domiciled Fraternal Benefit Societies. In NAIC SAP, fixed assets are not admitted. The Commissioner of Insurance has the right to permit other specific practices that deviate from prescribed practices.

A reconciliation of the Society's net income and capital and surplus between NAIC SAP and practices prescribed and permitted by the state of Ohio results in no change.

B. Use of Estimates in the Preparation of the Financial Statements.

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy.

Life premiums are recognized as income over the premium paying period of the related policies. Annuity considerations are recognized as revenue when received. Health premiums are earned ratable, over the term of the related insurance policies. Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred.

The amount of dividends to be paid to policyholders is determined annually by the Society's Board of Directors. The aggregate amount of policyholders' dividends is related to actual interest, mortality, morbidity, and expense experience for the year and judgment as to the appropriate level of statutory surplus to be retained by the Society.

In addition, the society uses the following accounting policies:

- (1) Short-term investments are stated at amortized cost.
- (2) Bonds: Not backed by other loans at amortized cost using the interest method: loan-backed bonds and structured securities at amortized cost using the interest method including anticipated prepayments at the date of purchase; significant changes in estimated cash flows from the original purchase assumptions are accounted for using the composite method. Bonds rated NAIC Class 6 are valued at market.
- (3) Common Stock: At market value except that investments in stocks of uncombined subsidiaries and affiliates in which the Society has an interest of 20% or more are carried on the equity basis.
- (4) Preferred Stock: Cost or Amortized Value in accordance with NAIC procedure.
- (5) Mortgage Loan on Real Estate: Aggregate unpaid balance. Other Investments: Equity basis.
- (6) Loan backed securities are handled the same as bonds as described in item C(2).
- (7) The Society has a wholly owned subsidiary: Jednota Inc.
- (8) The Society has no ownership interests in joint ventures.
- (9) The Society has no derivatives.
- (10) The Society has neither Individual Accident and Health Contracts, nor Group Accident and Health Contracts.
- (11) Unpaid losses and loss adjustment expenses include an amount determined from individual case estimated and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability are continually reviewed and any adjustments are reflected in the period determined. Because the Society is a

NOTES TO FINANCIAL STATEMENTS

life insurer, loss adjustment expenses are not a big factor nor large expense.
 (12) The Society has not modified its capitalization policy from the prior period.

2. Accounting Changes and Correction of Errors

A. During the current year's financial statement preparation, the Society made no adjustment for error in the prior year.

3. Business Combination and Goodwill:

- A. N/A
 B. The Society had no merger.
 C. The Society had no assumption reinsurance.
 D. The Society had no impairment loss.

4. Discontinued Operations: N/A

5. Investments.

A. Mortgage Loans, including Mezzanine Real Estate Loans.

(1) The maximum and minimum lending rate for mortgage loans during the current year were: 5%

Farm loans: None.

(2) During the current year, the society reduced interest rates of outstanding mortgage loans as follows: none.

(3) The maximum percentage of any one loan to the value of security at the time of the loan, exclusive of insured or guaranteed or purchase money mortgages was: 75%.

	<u>Current Year</u>	<u>Prior Year</u>
(4) As of year-end, the Society held Mortgages with interest more than 180 days past due with a recorded investment, excluding accrued interest.	None	None
Total interest due on mortgages With interest more than 180 days Past due.	None	None
(5) As of December 31, the amount which had been advanced but not repaid and not included in the mortgage loan total:	None	None
(6) Current year impaired loans with a related allowance for credit losses.	None	None
Related allowance for credit losses.	None	None
(7) Impaired mortgage loans without an allowance for credit losses.	None	None
(8) Average recorded investment in impaired loans.	None	None
(9) Interest income recognized during the period the loans were impaired.	None	None
(10) Amount of interest income recognized on a cash basis during the period the loans were impaired.	None	None
(11) Allowances for credit losses:	None	None
a) Balance at beginning of period.	None	None
b) Additions charged to operations.	None	None
c) Direct write-downs charged against the allowances.	None	None
d) Recoveries of amounts previously charged off.	None	None

NOTES TO FINANCIAL STATEMENTS

e) Balance at end of period. None None

(12) The Society recognizes interest income on its impaired loans upon receipt. At year-end, interest income on Impaired loans were: None None

B. Debt Restructuring

(1) The total recorded investment in restructured loans, as of year end. None None

(2) The realized capital losses related to these loans. None None

(3) Total contractual commitments to extend credit to debtors owning receivables whose terms have been modified in troubled debt restructuring. None None

(4) The Company accrues interest income on impaired loans to the extent it is deemed collectible (delinquent less than 90 days) and the loan continues to perform under its original or restructured contractual terms. Interest income on non-performing loans is generally recognized on a cash basis.

C. Reverse Mortgages: None

D. Loan-Backed Securities:

For Loan-Backed Securities, disclose the following:

(1) Prepayment assumptions for mortgage-backed/loan-backed/and structured securities were obtained from broker dealer survey values or internal estimates.

(2) The Society was required to recognize OTTI Adjustments during 2012.

(3) There are OTTI Adjustments for the current year in the amount of \$431,672.

(4) (a) 1 0
2 0
(b) 1 0
2 0

E. Repurchase Agreements: N/A

F. Real Estate Investments: None.

G. Investment LIHTC: None.

6. Joint Ventures, Partnerships and Limited Liability Companies.

A. The Society has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10% of its admitted assets.

B. The Society did not recognize any impairment write down for its investments in Joint Ventures, Partnerships and Limited Liability Companies during the statement periods.

7. Investment Income.

A. Due and accrued income was excluded from investment income on the following basis:

Mortgage loans: On loans in foreclosure or delinquent for more than 90 days.
Bonds: Where collection of interest is uncertain and/or the bond is in default.
Real Estate: Where rent is in arrears for more than three months.

B. Total Amount Excluded: 0.

8. Derivative Instruments: The Society owned no derivative instruments at the current year end.

9. Income Taxes: The Society, as a Fraternal Benefit Society, is not subject to income taxes.

10. Information Concerning Parent, Subsidiaries and Affiliates:

A. The Society is not directly or indirectly owned or controlled by any other company, corporation, group of companies, partnership or individual.

B. The Society does have an affiliate or subsidiary.

NOTES TO FINANCIAL STATEMENTS

- C. The Society does not hold any investments in its subsidiaries which are not included in Schedule D, Summary by Country.
- D. The Society has not made any agreements for the benefit of its subsidiaries which result in a material contingent exposure of the Society's assets.
- E. The Society has not given any commitment or guarantees to its subsidiary.
- F - L. N/A

11. Debt: The Society has no debt or borrowed money as of December 31, of the current year.
12. Retirement Plans, Deferred Compensation, Post-employment Benefits and Compensated Absences and Other Post-retirement Benefit Plans.

A. Defined Benefit Plan:

The society sponsors non-contributory defined benefit pension plans covering U.S. employees. As of December 31, 2012, the Society accrued in accordance with actuarially determined amounts with an offset to the pension cost accrual for the incremental asset amortization.

A summary of assets, obligations and assumptions of the Pension Plan are as follows at December 31, 2012:

	<u>Employees Pension</u>	
	<u>2011</u>	<u>2012</u>
(1) Change in benefit obligation:		
a. Benefit obligation at beginning of year.	6,026,612	6,137,849
b. Service cost.	138,472	137,531
c. Interest cost.	324,974	331,198
d. Contribution by plan participant.	0	0
e. Actuarial (gain) loss.	0	(638)
f. Foreign currency exchange rate changes.		
g. Benefits paid.	(238,437)	(232,132)
h. Plan amendments.	0	0
i. Business combinations, divestitures, curtailments, settlements and special termination benefits.	0	0
j. Benefit obligation at end of year.	6,251,621	6,373,808
(2) Change in plan assets:		
a. Fair value of plan assets at beginning of year.	5,180,107	5,775,832
b. Actual return on plan assets.	279,342	323,506
c. Foreign currency exchange rate changes.	0	0
d. Employer contribution.	200,000	210,000
e. Plan participants' contributions.	0	0
f. Benefits paid.	(238,437)	(238,132)
g. Business combinations, divestitures and settlements.	0	0
h. Fair value of plan assets at end of year.	5,775,832	6,042,492
(3) Funded status:		
a. Unamortized prior service cost.	0	0
b. Unrecognized net gain or (loss).	(483,979)	(397,839)
c. Remaining net (obligation) or net asset at initial date of application.	(305,935)	(244,747)
d. Prepaid assets or (accrued liabilities).	337,757	314,125
e. Intangible asset.	0	0
f. Funded status.	(475,789)	(331,316)
(4) Benefit obligation for non-vested employees:	5,483,562	5,788,057
(5) Non-vested Benefit Obligation as of (1/1)		
a. Non-vested Projected Benefit Obligation:	(27,638)	0
b. Non-vested Accumulated Benefit Obligation:	(24,243)	0
(6) Components of net periodic benefit cost:		

NOTES TO FINANCIAL STATEMENTS

a. Service cost.	138,472	137,531
b. Interest cost.	324,974	331,198
c. Expected return on plan assets.	(301,002)	(317,062)
d. Amortization of unrecognized transition obligation or (transition asset).	61,188	61,188
e. Amount of recognized (gains) and losses.	0	0
f. Amount of prior service cost recognized.	0	0
g. Amount of gain or loss recognized due to a settlement or curtailment.	0	0
h. Total net periodic benefit cost.	223,632	212,855

(7) Minimum pension liability adjustment is required when the actuarial present value of accumulated benefits exceeds plan assets and accrued pension liabilities. The minimum liability adjustment, less allowable intangible assets, net of tax benefit, is reported as income in the Income Statement. At December 31, 2012, the additional minimum liability was \$0.

(8) Weighted-average assumption as of December 31:

a. Discount rate:	5.5%	5.5%
b. Rate of compensation increase:	5.0%	5.0%
c. Expected long-term rate of return on plan assets:	5.5%	5.5%

(9) A measurement date of December 31, was used to determine the above.

(10) N/A

(11) N/A

(12) Asset Allocations

a. Debt securities	88.86%	90.43%
b. Equity Securities	3.21%	1.99%
c. Real Estate	.95%	.87%
d. Other	6.99%	6.71%
e. Total	100.00%	100.00%

(13) Expected future payments (non-lump sum basis)

a. 2013	\$317,711
b. 2014	\$313,474
c. 2015	\$317,033
d. 2016	\$314,229
e. 2017	\$392,852
f. Next five years	\$2,113,115

(14) Estimated contribution for next year: from \$200,000 to \$250,000

(15) Employer product or security

The amount of pension fund invested in the employer's Group Annuity:	\$5,775,832	\$6,042,492
----------------------------------------------------------------------	-------------	-------------

Others not applicable.

B. Defined Contribution Plan:

The Society does not have a Defined Contribution Plan.

C. Multi-employer Plans: N/A

D. Consolidated/holding Company Plans: N/A

E. Post-employment Benefits and Compensated Absences:

In addition to pension benefits, the Society provides certain Medicare Supplement benefits (post-retirement benefits) for retired employees. Substantially, all employees may become eligible for these benefits if they reach retirement age and have satisfied the service requirement. Except for 4 retirees, the Medicare premium to be paid by the Society for a retiree is a constant amount of \$85 per month. The monthly Medicare Supplement premium which is the excess of \$85 will be paid by the retiree.

In 1995 the Society changed its method of accounting for the costs of its retiree benefit plans to the accrual method, and elected to amortize its transition obligation for retirees and fully eligible or vested employees over the average future working lifetime of the employees but not less than

NOTES TO FINANCIAL STATEMENTS

20 years. The unrecognized transition obligation was \$25,400 and \$16,933 as of December 31, 2011 and December 31, 2012, respectively.

Net post-retirement benefit cost for the year ended December 31, 2012 was \$29,797 and includes the expected cost of such benefits for newly eligible or vested employees as of January 1, 2012, interest cost, gains and losses arising from differences between actuarial assumptions and actual experience, and amortization of the transition obligation. The Society's periodic post-retirement benefit cost was \$26,991 in 2011 and \$29,797 in 2012.

As of January 1, 2012 and January 1, 2011, the accumulated postretirement benefit obligation for retirees and other fully eligible or vested plan participants was \$241,196 and \$222,487, respectively; the accumulated postretirement benefit obligation for active non-vested employees was \$5,041 and \$6,473 as of January 1, 2012 and January 1, 2011, respectively. The discount rate used in determining the accumulated postretirement benefit obligations was 7%, and the health care cost trend rate was 6% during postretirement years for the 4 retirees whose premiums paid by the Society are not the constant amount of \$85 per month.

During 2012 and 2011, the postretirement benefit expense was \$9,189 and \$10,770 respectively. As of December 31, 2012, and December 31, 2011, the accrued postretirement benefit expense for plan participants included on page 3, line 2201 was \$265,000 and \$243,866 respectively.

Except for 1 current retiree at the beginning of the year, Medicare Supplement premiums to be paid by Employer is \$85 per month. Any increase in Medicare Supplement premium in future years will be borne by the participants. For the retirees, the premiums paid by Employer will be subject to the premium increases in future years.

13. Capital and surplus, Shareholders' Dividend Restrictions and Quasi-Reorganizations.

The Society is a Fraternal Benefit Society and issues no stock.

The Society had no advances to surplus.

The Society has no special surplus funds.

The Society has no surplus notes.

14. Contingencies.

The Society had no contingencies.

15. Leases

The Society does not have any material lease obligations at this time.

16. Information about financial Instruments with Off-Balance Sheet Risk.

The Society has no financial instruments with off-balance sheet Risk.

17. Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities: None

18. Gain or Loss to the Reporting Entity from uninsured Plans and the Uninsured Portion of Partially Insured Plans: None

19. Direct Premium Written/Produced by Managing General Agents/Third Party Administrators:

The Society has no direct premium written/produced by managing general agents/third party administrators.

20. Fair Value Measurement

(1) Fair Value Measurements at Reporting Date

Description for each class of asset or liability	(Level 1)	(Level 2)	(Level 3)	Total
a. Assets at fair value				
Perpetual Preferred stock				
Industrial and Misc	\$ (a) 880	\$	\$	\$ 880
Parent, Subsidiaries and Affiliates				

NOTES TO FINANCIAL STATEMENTS

Total Perpetual Preferred Stocks	\$ 880	\$	\$	\$ 880
Bonds				
U.S. Governments	\$ 691,452	\$	\$	\$ 691,452
Industrial and Misc				
Hybrid Securities				
Parent, Subsidiaries and Affiliates				
Total Bonds	\$ 691,452	\$	\$	\$ 691,452
Common Stock				
Industrial and Misc	\$3,178,369	\$	\$	\$3,178,369
Parent, Subsidiaries and Affiliates				
Total Common Stock	\$3,178,369	\$	\$	\$
Derivative assets				
Interest rate contracts	\$	\$	\$	\$
Foreign exchange contracts				
Credit contracts				
Commodity futures contracts				
Commodity forward contracts				
Total Derivatives	\$	\$	\$	\$
Separate account assets	\$	\$	\$	\$
Total assets at fair value	\$	\$	\$	\$
b. Liabilities at fair value				
Derivative liabilities	\$	\$	\$	\$
Total liabilities at fair value	\$	\$	\$	\$

Example Footnote: None

(a) \$0 transferred from Level 1 to Level 2 as an alternative method was utilized to determine fair value as active market price was not readily accessible.

21. Other Items:

The Society has no items that require reporting (Paragraphs A through F), except Paragraph G, Sub-prime Mortgage-Related Risk Exposure.

G. Sub-prime Mortgage-Related Risk Exposure:

The Society has completed careful analysis of the Disclosure Requirement regarding Sub-prime Mortgages. It had determined that it has no reportable or direct exposure transactions. The Society has contacted its brokerage firms relative to sub-prime exposure among the issues of Mortgage Backed Securities in its portfolio. The brokerage firms report that the Society has no sub-prime exposure among the Mortgage Backed Securities owned by the Society.

H. Retained Assets - The Society has no retained assets.

22. Events Subsequent:

The Society has made a determination after careful review of its assets and by obtaining opinions of its investment officers, managers and advisors that the Society has nothing to report as Events Subsequent including no recovery of business interruption insurance.

23. Reinsurance:

A. Ceded Reinsurance Report:

Section 1 - General interrogatories

1. Are any of the reinsurers, listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, with directly or indirectly, by the society or by any representative, officer, trustee, or director of the society? NO
2. Have any certificate issued by the society been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) which is owned in excess of 10% or controlled directly by an insured, a beneficiary, a creditor or an insured or any other person not primarily engaged in the insurance business? NO

Section 2 - Ceded Reinsurance Report - Part A

1. Does the society have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium

NOTES TO FINANCIAL STATEMENTS

or other similar credits? NO

a. N/A

b. N/A

2. Does the society have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts which, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured certificates? NO

Section 3 - Ceded Reinsurance Report - Part B

1. What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the society may consider the current or anticipated experience of the business reinsured in making this estimate. \$0

2. Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include certificates or contracts which were in force or which had existing reserves established by the company as of the effective date of the agreement? NO

3. Uncollectible Reinsurance:

The Society has no uncollectible reinsurance.

4. Commutation of Ceded Reinsurance: None

24. Retrospectively Rated Contracts & Contracts Subject to Redetermination:

The Society has no retrospectively rated contracts or contracts subject to redetermination.

25. Change in Incurred Losses and Loss Adjustment Expenses:

The Society has no change in incurred losses or loss adjustment expenses.

26. Intercompany Pooling Arrangements:

The Society has no Intercompany pooling arrangements.

27. Structured Settlement: The Society has no Structured Settlements.

28. Health Care Receivables: The Society has no Health Care Receivables.

29. Participating Policies:

- A. 100% of life insurance is participating.
 B. The portfolio average method is applied, recognizing plan of insurance, amount of insurance, year of issue and age at issue.
 C. The Society paid dividends in the amount shown on Exhibit 4, to policyholders.
 D. The Society did not allocate any additional income to its policyholders.

30. Premium Deficiency Reserves: Not Applicable.

31. Reserves for Life Contracts and Deposit-type Contracts:

- (1) The society authorizes deductions of deferred fractional premium upon death of the insured and returns any portion of the fractional premium beyond the date of death. Surrender values are not promised in excess of regularly computed reserves.
- (2) Extra premiums are charged for substandard lives for certificates issued, plus the gross premium at a rated age.

NOTES TO FINANCIAL STATEMENTS

Regular reserves are computed by the regular reserve for the plan at a rated age and holding in addition one-half of the extra premium charge for one year.

- (3) As of December 31, current year, the Society had no insurance-in-force for which the gross premiums are less than the net premium according to the standard valuation set by the State of OH.
- (4) The Tabular Interest (Page 7, Line4) has been determined from basic policy data. The Tabular Less Actual Reserve Released (Page 7, Line5) has been determined by formula as described in the instructions for Page 7 by formula.
- (5) The Tabular Cost (Page 7, Line 9) has been determined by formula as described in the instructions for Page 7. For the determination of Tabular Interest on funds not involving life contingencies under Page 7, Annuity, Line 3, for each valuation rate of interest, the Tabular Interest is calculated as one-hundredth of the product of such valuation rate of interest times the mean of the amount of funds subject to such valuation rate of interest held at the beginning and the end of the year of valuation. The total amount of all such products is entered under Page 7, Line 3.
- (6) The details for "Other Increases" (net) under Page 7, Line 7, are: None

Deposit Type Contracts

The Society is a member of the Federal Home Loan Bank (FHLB) of Cincinnati. Through its membership, the Society has funding agreements to the FHLB Cincinnati in exchange for cash advances in the amount of \$29,000,000. The Society uses the funds in an investment spread strategy, consistent with its other investment spread operations. As such, the Society applies SSAP No. 52 accounting treatment to these funds, consistent with its other deposit-type contracts. It is not part of the Society's strategy to utilize these funds for operation and any funds obtained from the FHLB Cincinnati for use in the general operations would be accounted for consistent with SSAP No. 15 as borrowed money. The Table below indicates the amount of FHLB Cincinnati stock purchased, collateral pledged, assets & liabilities related to the agreement with FHLB Cincinnati.

	(1)	(2)
	<u>Current Year</u>	<u>Prior Year</u>
FHLB Stock Purchased/Owned as part of this Agreement:	1,027,700	928,500
Collateral Pledged to FHLB:	36,110,989	27,324,105
Funding Capacity Currently Available:	29,000,000	25,000,000
Total Reserves Related to Funding Agreement:	29,000,000	25,000,000
<u>Agreement Assets & Liabilities:</u>		
General Account Assets:	29,406,203	25,928,500
General Account Liabilities:	28,722,656	25,000,000

32. Analysis of Annuity Actuarial Reserves and Deposit Liabilities by Withdrawal Characteristics:

	<u>Amount</u>	<u>% of Total</u>
A. Subject to discretionary withdrawal:		
(1) with fair value adjustment:		
(2) book value less current surrender charges of 5% or more:	32,800,456	18.34%
(3) at fair value:	1,161,112	.6%
(4) total with adjustments or at fair value, (total 1 - 3):	33,961,568	17.1%
(5) at book value without adjustment:	129,561,098	65.0%
B. Not subject to discretionary withdrawal provision:	35,830,012	18.0%
C. Total Gross:	199,352,672	100.00%
D. Reinsurance ceded:	0	
E. Total (Net) *(C)-(D)	199,352,672	100.00%

NOTES TO FINANCIAL STATEMENTS

*Reconciliation of Total Annuity Actuarial Reserves and Deposit Fund Liabilities.

F. Annual Statement:

1. Exh. 5, Annuities, Totals (Net):	168,604,041
2. Exh. 5, Suppl. Contracts w/Life Contingencies, Total (Net):	1,161,112
3. Exh. 7, L14, Col. 1:	29,587,520
4. Subtotal:	199,352,673

33. Premium and Annuity Considerations Deferred and Uncollected:

The Society's uncollected premiums are shown on Page 2, Line 12.1, Column 1 and on Exhibit 1.

34. Separate Accounts:

The Society does not have any separate accounts.

35. Loss/Claim Adjustment Expenses: Not required.

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES - GENERAL

- 1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [X] No []
- 1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [X] No [] N/A []
- 1.3 State regulating? STATE OF OHIO
- 2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]
- 2.2 If yes, date of change: _____
- 3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2010
- 3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2010
- 3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 06/30/2011
- 3.4 By what department or departments?
STATE OF OHIO, DEPT. OF INSURANCE

- 3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with departments? Yes [X] No [] N/A []
- 3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] No [] N/A []
- 4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
- 4.11 sales of new business? Yes [] No [X]
- 4.12 renewals? Yes [] No [X]
- 4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:
- 4.21 sales of new business? Yes [] No [X]
- 4.22 renewals? Yes [] No [X]
- 5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
- 5.2 If yes, provide the name of the entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1 Name of Entity	2 NAIC Co. Code	3 State of Domicile

- 6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]
- 6.2 If yes, give full information: _____

- 7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]
- 7.2 If yes,
- 7.21 State the percentage of foreign control%
- 7.22 State the nationality(ies) of the foreign person(s) or entity(ies); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(ies) (e.g., individual, corporation, government, manager or attorney-in-fact)

1 Nationality	2 Type of Entity

- 8.1 Is the company a subsidiary of a bank holding company regulated by the Federal Reserve Board? Yes [] No [X]
- 8.2 If response to 8.1 is yes, please identify the name of the bank holding company. _____

- 8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]
- 8.4 If response to 8.3 is yes, please provide the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

1 Affiliate Name	2 Location (City, State)	3 FRB	4 OCC	5 FDIC	6 SEC

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
HOSACK, SPECHT, MUETZEL, & WOOD, LLP 305 MT. LEBANON BLVD., PITTSBURGH PA 15234-1500
- 10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [] No [X]
- 10.2 If the response to 10.1 is yes, provide information related to this exemption: _____
- 10.3 Has the insurer been granted any exemptions related to the other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 17A of the Model Regulation, or substantially similar state law or regulation? Yes [] No [X]
- 10.4 If the response to 10.3 is yes, provide information related to this exemption: _____
- 10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [X] No [] N/A []
- 10.6 If the answer to 10.5 is no or n/a, please explain. _____

11. What is the name, address and affiliation (officer/employee of the reporting entity or actuary/consultant associated with an actuarial consulting firm) of the individual providing the statement of actuarial opinion/certification?
EDWARD F COWMAN, FSA, MAA BRUCE & BRUCE COMPANY, CONSULTING ACTUARIES 916 SHERWOOD DRIVE, LAKE BLUFF, IL 60044

GENERAL INTERROGATORIES

12.1 Does the reporting entity own any securities of a real estate holding company or otherwise hold real estate indirectly? Yes [] No [X]

12.11 Name of real estate holding company

12.12 Number of parcels involved

12.13 Total book/adjusted carrying value

12.2 If yes, provide explanation.

13. FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIES ONLY:

13.1 What changes have been made during the year in the United States manager or the United States trustees of the reporting entity?

N/A

13.2 Does this statement contain all business transacted for the reporting entity through its United States Branch on risks wherever located? Yes [] No []

13.3 Have there been any changes made to any of the trust indentures during the year? Yes [] No []

13.4 If answer to (13.3) is yes, has the domiciliary or entry state approved the changes? Yes [] No [] N/A []

14.1 Are the senior officers (principal executive officer, principal financial officer, principal accounting officer or controller, or persons performing similar functions) of the reporting entity subject to a code of ethics, which includes the following standards? Yes [X] No []

- a. Honest and ethical conduct, including the ethical handling of actual or apparent conflicts of interest between personal and professional relationships;
- b. Full, fair, accurate, timely and understandable disclosure in the periodic reports required to be filed by the reporting entity;
- c. Compliance with applicable governmental laws, rules and regulations;
- d. The prompt internal reporting of violations to an appropriate person or persons identified in the code; and
- e. Accountability for adherence to the code.

14.11 If the response to 14.1 is no, please explain:

14.2 Has the code of ethics for senior managers been amended? Yes [] No [X]

14.21 If the response to 14.2 is yes, provide information related to amendment(s).

14.3 Have any provisions of the code of ethics been waived for any of the specified officers? Yes [] No [X]

14.31 If the response to 14.3 is yes, provide the nature of any waiver(s).

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List? Yes [] No [X]

15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

1 American Bankers Association (ABA) Routing Number	2 Issuing or Confirming Bank Name	3 Circumstances That Can Trigger the Letter of Credit	4 Amount

PART 1 - COMMON INTERROGATORIES - BOARD OF DIRECTORS

16. Is the purchase or sale of all investments of the reporting entity passed upon either by the Board of Directors or a subordinate committee thereof? Yes [X] No []

17. Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors and all subordinate committees thereof? Yes [X] No []

18. Has the reporting entity an established procedure for disclosure to its Board of Directors or trustees of any material interest or affiliation on the part of any of its officers, directors, trustees or responsible employees that is in conflict or is likely to conflict with the official duties of such person? Yes [X] No []

PART 1 - COMMON INTERROGATORIES - FINANCIAL

19. Has this statement been prepared using a basis of accounting other than Statutory Accounting Principles (e.g., Generally Accepted Accounting Principles)? Yes [] No [X]

20.1 Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):

20.11 To directors or other officers \$.....0

20.12 To stockholders not officers \$.....0

20.13 Trustees, supreme or grand (Fraternal only) \$.....0

20.2 Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive of policy loans):

20.21 To directors or other officers \$.....0

20.22 To stockholders not officers \$.....0

20.23 Trustees, supreme or grand (Fraternal only) \$.....0

21.1 Were any assets reported in this statement subject to a contractual obligation to transfer to another party without the liability for such obligation being reported in the statement? Yes [] No [X]

21.2 If yes, state the amount thereof at December 31 of the current year:

21.21 Rented from others

21.22 Borrowed from others

21.23 Leased from others

21.24 Other

22.1 Does this statement include payments for assessments as described in the Annual Statement Instructions other than guaranty fund or guaranty association assessments? Yes [] No [X]

22.2 If answer is yes:

22.21 Amount paid as losses or risk adjustment

22.22 Amount paid as expenses

22.23 Other amounts paid

23.1 Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page 2 of this statement? Yes [] No [X]

23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount.

PART 1 - COMMON INTERROGATORIES - INVESTMENT

24.01 Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date (other than securities lending programs addressed in 24.03)? Yes [X] No []

24.02 If no, give full and complete information relating thereto.

PART 1 - COMMON INTERROGATORIES - INVESTMENT

24.03 For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet (an alternative is to reference Note 17 where this information is also provided).

24.04 Does the company's security lending program meet the requirements for a conforming program as outlined in the Risk-Based Capital Instructions? Yes [] No [] N/A [X]

24.05 If answer to 24.04 is yes, report amount of collateral for conforming programs.

24.06 If answer to 24.04 is no, report amount of collateral for other programs.

24.07 Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract? Yes [] No [] N/A [X]

24.08 Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%? Yes [] No [] N/A [X]

24.09 Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending? Yes [] No [] N/A [X]

24.10 For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:

24.101 Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.

24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2.

24.103 Total payable for securities lending reported on the liability page.

25.1 Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is currently in force? (Exclude securities subject to Interrogatory 21.1 and 24.03) Yes [] No [X]

25.2 If yes, state the amount thereof at December 31 of the current year:

25.21 Subject to repurchase agreements

25.22 Subject to reverse repurchase agreements

25.23 Subject to dollar repurchase agreements

25.24 Subject to reverse dollar repurchase agreements

25.25 Pledged as collateral

25.26 Placed under option agreements

25.27 Letter stock or securities restricted as to sale

25.28 On deposit with state or other regulatory body

25.29 Other

25.3 For category (25.27) provide the following:

1 Nature of Restriction	2 Description	3 Amount
----------------------------	------------------	-------------

26.1 Does the reporting entity have any hedging transactions reported on Schedule DB? Yes [] No [X]

26.2 If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? Yes [] No [] N/A [X]
If no, attach a description with this statement.

27.1 Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity? Yes [] No [X]

27.2 If yes, state the amount thereof at December 31 of the current year:

28. Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions Custodial or Safekeeping Agreements of the NAIC Financial Condition Examiners Handbook? Yes [X] No []

28.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1 Name of Custodian(s)	2 Custodian's Address
---------------------------	--------------------------

KEYBANK NA 127 PUBLIC SQUARE CLEVELAND OH 44114-1306

28.02 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)
--------------	------------------	------------------------------

28.03 Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year? Yes [] No [X]

28.04 If yes, give full and complete information relating thereto:

1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason
--------------------	--------------------	---------------------	-------------

28.05 Identify all investment advisors, brokers/dealers or individuals acting on behalf of broker/dealers that have access to the investment accounts, handle securities and have authority to make investments on behalf of the reporting entity:

1 Central Registration Depository Number(s)	2 Name	3 Address
------------------------------------------------	-----------	--------------

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D-Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])? Yes [] No [X]

29.2 If yes, complete the following schedule:

1 CUSIP #	2 Name of Mutual Fund	3 Book/Adj. Carrying Value
--------------	--------------------------	-------------------------------

29.2999. TOTAL 0

29.3 For each mutual fund listed in the table above, complete the following schedule:

1 Name of Mutual Fund (from the above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to Holding	4 Date of Valuation
-------------------------------------------------	-----------------------------------------------------	-----------------------------------------------------------------------------------	------------------------

30. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds.....	281,808,320	306,919,755	25,111,435
30.2 Preferred stocks.....	700,000	695,520	(4,480)
30.3 Totals.....	282,508,320	307,615,275	25,106,955

30.4 Describe the sources or methods utilized in determining the fair values:
SVO AVS SERVICE, BROKERS, & TRADE PUBLICATIONS

PART 1 - COMMON INTERROGATORIES - INVESTMENT

- 31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D? Yes [X] No []
- 31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source? Yes [X] No []
- 31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D.
-
- 32.1 Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Securities Valuation Office been followed? Yes [X] No []
- 32.2 If no, list exceptions:
-

PART 1 - COMMON INTERROGATORIES - OTHER

- 33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? \$.....0
- 33.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid

- 34.1 Amount of payments for legal expenses, if any? \$.....36,196
- 34.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
JAMES E. ARNOLD & ASSOCIATES	14,331
BUCHANAN INGERSOLL & ROONEY PC	22,805

- 35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? \$.....0
- 35.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid

GENERAL INTERROGATORIES

PART 2 - FRATERNAL INTERROGATORIES

- 1.1 Does the reporting entity have any direct Medicare Supplement Insurance in force? Yes [] No [X]
- 1.2 If yes, indicate premium earned on U.S. business only
- 1.3 What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?
 - 1.31 Reason for excluding

- 1.4 Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.
- 1.5 Indicate total incurred claims on all Medicare Supplement insurance.
- 1.6 Individual policies:
 - Most current three years:
 - 1.61 Total premium earned
 - 1.62 Total incurred claims
 - 1.63 Number of covered lives
 - All years prior to most current three years:
 - 1.64 Total premium earned
 - 1.65 Total incurred claims
 - 1.66 Number of covered lives
- 1.7 Group policies:
 - Most current three years:
 - 1.71 Total premium earned
 - 1.72 Total incurred claims
 - 1.73 Number of covered lives
 - All years prior to most current three years:
 - 1.74 Total premium earned
 - 1.75 Total incurred claims
 - 1.76 Number of covered lives
- 2.1 Does this reporting entity have Separate Accounts? Yes [] No [X]
- 2.2 If yes, has a Separate Accounts statement been filed with this Department? Yes [] No [] N/A [X]
- 2.3 What portion of capital and surplus funds of the reporting entity covered by assets in the Separate Accounts statement, is not currently distributable from the Separate Accounts to the general account for use by the general account?
- 2.4 State the authority under which Separate Accounts are maintained:

- 2.5 Was any of the reporting entity's Separate Accounts business reinsured as of December 31? Yes [] No [X]
- 2.6 Has the reporting entity assumed by reinsurance any Separate Accounts business as of December 31? Yes [] No [X]
- 2.7 If the reporting entity has assumed Separate Accounts business, how much, if any, reinsurance assumed receivable for reinsurance of Separate Accounts reserve expense allowances is included as a negative amount in the liability for "Transfers to Separate Accounts due or accrued (net)?"
- 3. Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative form of government? Yes [X] No []
- 4. How often are meetings of the subordinate branches required to be held?
ANNUALLY

- 5. How are the subordinate branches represented in the supreme or governing body?
BY DELEGATES

- 6. What is the basis of representation in the governing body?
EACH LODGE HAVING 50 MEMBERS IS ENTITLED TO ONE DELEGATE & AN ADDITIONAL DELEGATE FOR EACH 100 MEMBERS ABOVE 50.

- 7.1 How often are regular meetings of the governing body held?
QUADRENNIALLY

- 7.2 When was the last regular meeting of the governing body held?08/15/2010
- 7.3 When and where will the next regular or special meeting of the governing body be held?
UNDETERMINED AT THIS TIME

- 7.4 How many members of the governing body attended the last regular meeting?337
- 7.5 How many of the same were delegates of the subordinate branches?299
- 8. How are the expenses of the governing body defrayed?
FROM THE GENERAL FUND OF THE SOCIETY

- 9. When and by whom are the officers and directors elected?
BY THE DELEGATES AT THE CONVENTION

- 10. What are the qualifications for membership?
SLOVAK DESCENT (OR MARRIAGE), CATHOLIC FAITH, U.S. OR CANADIAN RESIDENCY

- 11. What are the limiting ages for admission?
80 YEARS

- 12. What is the minimum and maximum insurance that may be issued on any one life?
NONE

- 13. Is a medical examination required before issuing a benefit certificate to applicants? Yes [X] No []
- 14. Are applicants admitted to membership without filing an application with and becoming a member of a local branch by ballot and initiation? Yes [] No [X]
- 15.1 Are notices of the payments required sent to the members? Yes [X] No [] N/A []
- 15.2 If yes, do the notices state the purpose for which the money is to be used? Yes [X] No []
- 16. What proportion of first and subsequent years' payments may be used for management expenses?
 - 16.11 First year0.0 %
 - 16.12 Subsequent years0.0 %

GENERAL INTERROGATORIES

PART 2 - FRATERNAL INTERROGATORIES

17.1 Is any part of the mortuary, disability, emergency or reserve fund, or the accretions from or payments for the same, used for expenses? Yes [] No [X]
 17.2 If so, what amount and for what purpose?

18.1 Does the reporting entity pay an old age disability benefit? Yes [] No [X]
 18.2 If yes, at what age does the benefit commence?
 19.1 Has the constitution or have the laws of the reporting entity been amended during the year? Yes [] No [X]
 19.2 If yes, when?

20. Have you filed with this Department all forms of benefit certificates issued, a copy of the constitution and of all the laws, rules and regulations in force at the present time? If not, please do so. Yes [X] No []
 21.1 State whether all or a portion of the regular insurance contributions were waived during the current year under premium-paying certificates on account of meeting attained age or membership requirements? Yes [] No [X]
 21.2 If so, was an additional reserve included in Exhibit 5? Yes [] No [X] N/A []
 21.3 If yes, explain

22.1 Has the reporting entity reinsured, amalgamated with, or absorbed any company, order, society, or association during the year? Yes [] No [X]
 22.2 If yes, was there any contract agreement, or understanding, written or oral, expressed or implied, by means of which any officer, director, trustee, or any other person, or firm, corporation, society or association, received or is to receive any fee, commission, emolument, or compensation of any nature whatsoever in connection with, or on account of such reinsurance, amalgamation, absorption, or transfer of membership or funds? Yes [] No [] N/A [X]
 23. Has any present or former officer, director, trustee, incorporator, or any other persons, or any firm, corporation, society or association, any claims of any nature whatsoever against this reporting entity, which is not included in the liabilities on Page 3 of this statement? Yes [] No [X]
 24.1 Does the company have variable annuities with guaranteed benefits? Yes [] No [X]
 24.2 If 24.1 is yes, complete the following table for each type of guaranteed benefit.

Type		3	4	5	6	7	8	9
1	2	Waiting Period Remaining	Account Value Related to Col. 3	Total Related Account Values	Gross Amount of Reserve	Location of Reserve	Portion Reinsured	Reinsurance Reserve Credit
Guaranteed Death Benefit	Guaranteed Living Benefit							

25. For reporting entities having sold annuities to another insurer when the insurer purchasing the annuities has obtained a release of liability from the claimant (payee) as the result of the purchase of an annuity from the reporting entity only:
 25.1 Amount of loss reserves established by these annuities during the current year? \$.....0
 25.2 List the name and location of the insurance company purchasing the annuities and the statement value on the purchase date of the annuities.

1	2
P&C Insurance Company and Location	Statement Value on Purchase Date of Annuities (i.e., Present Value)
	\$

26.1 Do you act as a custodian for health savings account? Yes [] No [X]
 26.2 If yes, please provide the amount of custodial funds held as of the reporting date.
 26.3 Do you act as an administrator for health savings accounts? Yes [] No [X]
 26.4 If yes, please provide the balance of the funds administered as of the reporting date.
 27.1 Does the reporting entity have outstanding assessments in the form of liens against policy benefits that have increased surplus? Yes [] No [X]
 27.2 If yes, what is the date(s) of the original lien and the total outstanding balance of liens that remain in surplus?

Date	Outstanding Lien Amount

FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANA FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.
Amounts of life insurance in this exhibit should be shown in thousands (omit 000).

	1 2012	2 2011	3 2010	4 2009	5 2008
Life Insurance in Force (Exhibit of Life Insurance)					
1. Total (Line 21, Column 2).....	333,570	330,337	331,154	330,245	330,824
New Business Issued (Exhibit of Life Insurance)					
2. Total (Line 2, Column 2).....	9,294	7,111	7,893	7,542	9,147
Premium Income (Exhibit 1, Part 1)					
3. Life insurance - first year (Line 9.4, Column 2).....	28,382	22,970	31,943	41,982	52,735
4. Life insurance - single and renewal (Lines 10.4 and 19.4, Column 2).....	1,532,357	1,394,064	1,485,213	1,285,262	1,412,534
5. Annuity (Line 20.4, Column 3).....	18,090,136	14,055,956	32,118,507	16,348,878	6,560,316
6. Accident and health (Line 20.4, Column 4).....					
7. Aggregate of all other lines of business (Line 20.4, Column 5).....					
8. Total (Line 20.4, Column 1).....	19,650,874	15,472,990	33,635,663	17,676,121	8,025,584
Balance Sheet Items (Pages 2 and 3)					
9. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3).....	305,479,561	285,105,807	272,289,975	234,794,912	201,036,525
10. Total liabilities excluding Separate Accounts business (Page 3, Line 23).....	284,832,989	266,121,790	254,770,111	221,625,900	191,976,933
11. Aggregate reserve for life certificates and contracts (Page 3, Line 1).....	243,149,000	227,605,000	226,806,000	196,855,000	179,732,000
12. Aggregate reserve for accident and health certificates (Page 3, Line 2).....					
13. Deposit-type contract funds (Page 3, Line 3).....	29,587,520	26,045,653	15,213,178	12,370,600	1,501,974
14. Asset valuation reserve (Page 3, Line 21.1).....	2,350,068	2,145,008	2,766,154	2,514,121	235,339
15. Surplus (Page 3, Line 30).....	20,646,572	18,984,017	17,519,864	13,169,012	9,059,592
Cash Flow (Page 5)					
16. Net cash from operations (Line 11).....	17,231,769	2,543,980	30,411,388	18,357,004	5,015,534
Risk-Based Capital Analysis					
17. Total Adjusted Capital.....	23,196,640	21,329,025	20,486,018	15,883,133	9,494,931
18. 50% of the Calculated RBC Amount.....	3,620,987	3,262,383	3,070,331	3,359,003	3,441,972
Percentage Distribution of Cash, Cash Equivalent and Invested Assets (Page 2, Col. 3) (Line No. ÷ Page 2, Line 12, Col. 3) x 100.0					
19. Bonds (Line 1).....	93.2	90.5	88.9	83.0	79.7
20. Stocks (Lines 2.1 and 2.2).....	1.3	2.0	3.2	4.3	5.0
21. Mortgage loans on real estate (Lines 3.1 and 3.2).....	0.5	0.6	0.7	0.9	1.1
22. Real estate (Lines 4.1, 4.2 and 4.3).....	0.8	0.9	1.0	1.1	1.4
23. Cash, cash equivalents and short-term investments (Line 5).....	2.6	1.9	3.3	1.9	11.7
24. Contract loans (Line 6).....	0.3	0.4	0.3	0.4	0.4
25. Derivatives (Line 7).....				XXX	XXX
26. Other invested assets (Line 8).....	1.2	3.8	1.9	8.3	0.8
27. Receivable for securities (Line 9).....			0.7	0.1	
28. Securities lending reinvested collateral assets (Line 10).....				XXX	XXX
29. Aggregate write-ins for invested assets (Line 11).....					
30. Cash, cash equivalents and invested assets (Line 12).....	100.0	100.0	100.0	100.0	100.0
Investments in Subsidiaries and Affiliates					
31. Affiliated bonds (Schedule D Summary, Line 12, Col. 1).....					
32. Affiliated preferred stock (Schedule D Summary, Line 18, Col. 1).....					
33. Affiliated common stock (Schedule D Summary, Line 24, Col. 1).....	559,432	394,606	358,574	120,647	120,647
34. Affiliated short-term investments (subtotals included in Sch. DA, Verif., Col. 5, Line 10).....					
35. Affiliated mortgage loans on real estate.....					
36. All other affiliated.....					
37. Total of above Lines 31 to 36.....	559,432	394,606	358,574	120,647	120,647
38. Total investment in parent included in Lines 31 to 36 above.....					
Total Nonadmitted Assets and Admitted Assets					
39. Total nonadmitted assets (Page 2, Line 28, Col. 2).....	29,537	39,360	59,522	37,107	41,005
40. Total admitted assets (Page 2, Line 28, Col. 3).....	305,479,561	285,105,807	272,289,975	234,794,912	201,036,525
Investment Data					
41. Net investment income (Exhibit of Net Investment Income, Line 17).....	13,393,552	13,294,943	14,325,257	14,943,839	12,053,864
42. Realized capital gains (losses) (Page 4, Line 30, Column 1).....	198,857	(1,269,681)	(855,477)		
43. Unrealized capital gains (losses) (Page 4, Line 34, Column 1).....	364,955	964,771	3,646,259	2,193,793	
44. Total of above Lines 41, 42 and 43.....	13,957,364	12,990,033	17,116,040	17,137,632	12,053,864

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2012	2 2011	3 2010	4 2009	5 2008
Benefits and Reserve Increases (Page 6)					
45. Total Certificate Benefits - Life (Lines 10, 11, 12, 13 and 14, Column 7 less Line 13, Column 5).....	13,360,161	23,605,607	12,432,385	7,935,365	12,122,393
46. Total Certificate Benefits - Accident and Health (Line 13, Column 5).....					
47. Increase in Life Reserves (Line 17, Column 2).....	725,000	200,000	918,000	764,000	940,000
48. Increase in Accident and Health Reserves (Line 17, Column 5).....					
49. Refunds to Members (Line 28, Column 1).....	397,288	393,805	402,047	359,336	398,195
Operating Percentages					
50. Insurance Expense Percent (Page 6, Column 1, Lines 19, 20 and 21 less Line 6, Column 1) + (Page 6 Column 1, Line 1) x 100.0.....	14.5	17.1	8.9	15.3	32.9
51. Lapse Percent [(Exhibit of Life Insurance, Column 2, Lines 14 and 15) + 1/2 (Exhibit of Life Insurance, Column 2, Lines 1 and 21)] x 100.0.....	7.7	2.4	2.1	2.8	2.7
52. Accident and Health Loss Percent (Schedule H, Part 1, Lines 5 and 6, Column 2).....					
53. A&H cost containment percent (Schedule H, Part 1, Line 4, Column 2).....					
54. Accident and Health Expense Percent Excluding Cost Containment Expenses (Schedule H, Part 1, Line 10, Column 2).....					
Accident and Health Reserve Adequacy					
55. Incurred Losses on Prior Years' Claims (Schedule H, Part 3, Line 3.1, Column 1).....					
56. Prior Years' Liability and Reserve (Schedule H, Part 3, Line 3.2, Column 1).....					
Net Gains from Operations After Refunds to Members by Lines of Business (Page 6, Line 29)					
57. Life Insurance (Column 2).....	1,215,338	1,036,748	1,622,583	1,439,264	1,143,651
58. Annuity (Column 3).....	859,344	90,690	239,215	3,362,429	1,134,357
59. Supplementary Contracts (Column 4).....					
60. Accident and Health (Column 5).....					
61. Aggregate of All Other Lines of Business (Column 6).....			2	3	3
62. Fraternal (Column 8).....	(753,348)			(492,227)	(850,489)
63. Expense (Column 9).....					
64. Total (Column 1).....	1,321,334	1,127,438	1,861,798	4,309,466	1,427,520

NOTE: If a party to a merger, have the two most recent years of this exhibit been restated due to a merger in compliance with the disclosure requirements of SSAP No. 3, Accounting Changes and Correction of Errors?

Yes [] No []

If no, please explain:

Annual Statement for the year 2012 of the **FIRST CATHOLIC SLOVAK UNION OF THE UNITED STATES OF AMERICA & CANADA**
EXHIBIT OF LIFE INSURANCE

	1 Number of Certificates	2 Amount of Insurance (a)
1. In force end of prior year.....	61,874	330,337
2. Issued during year.....	622	9,294
3. Reinsurance assumed.....		
4. Revived during year.....	112	2,501
5. Increased during year (net).....	164	2,433
6. Subtotals, Lines 2 to 5.....	898	14,228
7. Additions by refunds during year.....	XXX	19,417
8. Aggregate write-ins for increases.....	0	0
9. Totals (Line 1 plus Line 6 to Line 8).....	62,772	363,982
Deductions During Year:		
10. Death.....	1,033	2,431
11. Maturity.....	55	41
12. Disability.....		
13. Expiry.....	184	2,285
14. Surrender.....	461	1,432
15. Lapse.....	318	24,133
16. Conversion.....	14	90
17. Decreased (net).....		
18. Reinsurance.....		
19. Aggregate write-ins for decreases.....	0	0
20. Totals (Lines 10 to 19).....	2,065	30,412
21. In force end of year (b) (Line 9 minus 20).....	60,707	333,570
22. Reinsurance ceded end of year.....	XXX	6,148
23. Line 21 minus Line 22.....	XXX	327,422

DETAILS OF WRITE-INS

0801.		
0802.		
0803.		
0898. Summary of remaining write-ins for Line 8 from overflow page.....	0	0
0899. Totals (Lines 0801 thru 0803 plus 0898) (Line 8 above).....	0	0
1901.		
1902.		
1903.		
1998. Summary of remaining write-ins for Line 19 from overflow page.....	0	0
1999. Totals (Lines 1901 thru 1903 plus 1998) (Line 19 above).....	0	0

(a) Amounts of life insurance in this exhibit shall be shown in thousands (omit 000).

(b) Paid-up insurance included in the final totals of Line 21 (including additions to certificates), number of certificates....52,274 , Amount, \$....216,820.

Additional accidental death benefits included in life certificates were in amount, \$.....0. Does the society collect any contributions from members for general expenses of the society under fully paid-up certificates? Yes [] No [X]
 If not, how are such expenses met?.....EXCESS INTEREST EARNINGS AND MORTALITY SAVINGS

**EXHIBIT OF NUMBERS OF CERTIFICATES FOR SUPPLEMENTARY CONTRACTS,
 ANNUITIES AND ACCIDENT AND HEALTH INSURANCE**

	1 Supplementary Contracts (Involving Life Contingencies)	2 Supplementary Contracts (Not Involving Life Contingencies)	3 Individual Annuities	4 Accident & Health Insurance
1. In force end of prior year.....			4,971	
2. Issued during year.....				
3. Reinsurance assumed.....				
4. Increased during year (net).....			468	
5. TOTALS (Lines 1 to 4).....	0	0	5,439	0
Deduction during year:				
6. Decreased during year (net).....			263	
7. Reinsurance ceded.....				
8. TOTALS (Lines 6 and 7).....	0	0	263	0
9. In force end of year (Line 5 minus Line 8).....	0	0	5,176	0
10. Amount on deposit.....				XXX
Income now payable:				
11. Amount of income payable.....				XXX
Deferred: fully paid:				
12. Deferred: fully paid - account balance.....	XXX	XXX	10,206,746	XXX
Deferred: not fully paid:				
13. Deferred: not fully paid - account balance.....	XXX	XXX	151,800,055	XXX

SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS

Allocated by States and Territories

States, Etc.	1	Direct Business					
		Life Contracts		4 Accident and Health Insurance Premiums, Including Policy, Mem- bership and Other Fees	5 Other Considerations	6 Total Columns 2 through 5	7 Deposit-Type Contracts
		2 Life Insurance Premiums	3 Annuity Considerations				
1. Alabama.....AL	N						
2. Alaska.....AK	N						
3. Arizona.....AZ	L						
4. Arkansas.....AR	N						
5. California.....CA	N						
6. Colorado.....CO	L						
7. Connecticut.....CT	L	27,750	104,020			131,770	
8. Delaware.....DE	N						
9. District of Columbia.....DC	N						
10. Florida.....FL	L	6,869	19,562			26,431	
11. Georgia.....GA	L						
12. Hawaii.....HI	N						
13. Idaho.....ID	N						
14. Illinois.....IL	L	62,702	1,376,658			1,439,360	
15. Indiana.....IN	L	6,302	98,341			104,643	
16. Iowa.....IA	L						
17. Kansas.....KS	N						
18. Kentucky.....KY	L						
19. Louisiana.....LA	N						
20. Maine.....ME	N						
21. Maryland.....MD	L						
22. Massachusetts.....MA	L	1,918				1,918	
23. Michigan.....MI	L	40,346	74,423			114,769	
24. Minnesota.....MN	L	3,558	121,642			125,200	
25. Mississippi.....MS	N						
26. Missouri.....MO	L	83				83	
27. Montana.....MT	N						
28. Nebraska.....NE	L						
29. Nevada.....NV	L						
30. New Hampshire.....NH	N						
31. New Jersey.....NJ	L	164,304	106,571			270,875	
32. New Mexico.....NM	N						
33. New York.....NY	L	64,701	465,913			530,614	
34. North Carolina.....NC	L						
35. North Dakota.....ND	N						
36. Ohio.....OH	L	321,636	10,500,736			10,822,372	
37. Oklahoma.....OK	N						
38. Oregon.....OR	N						
39. Pennsylvania.....PA	L	838,818	4,937,984			5,776,802	
40. Rhode Island.....RI	N						
41. South Carolina.....SC	L						
42. South Dakota.....SD	N						
43. Tennessee.....TN	L						
44. Texas.....TX	L						
45. Utah.....UT	N						
46. Vermont.....VT	N						
47. Virginia.....VA	L						
48. Washington.....WA	N						
49. West Virginia.....WV	L	6,151	105,000			111,151	
50. Wisconsin.....WI	L	7,343	179,287			186,630	
51. Wyoming.....WY	N						
52. American Samoa.....AS	N						
53. Guam.....GU	N						
54. Puerto Rico.....PR	N						
55. US Virgin Islands.....VI	N						
56. Northern Mariana Islands.....MP	N						
57. Canada.....CAN	N						
58. Aggregate Other Alien.....OT	XXX	0	0	0	0	0	0
59. Subtotal.....	(a).....27	1,552,481	18,090,136	0	0	19,642,616	0
90. Reporting entity contributions for employee benefit plans.....	XXX						
91. Dividends or refunds applied to purchase paid-up additions and annuities.....	XXX						
92. Dividends or refunds applied to shorten endowment or premium paying period.....	XXX						
93. Premium or annuity considerations waived under disability or other contract provisions.....	XXX						
94. Aggregate other amounts not allocable by State.....	XXX	0	0	0	0	0	0
95. Totals (Direct Business).....	XXX	1,552,481	18,090,136	0	0	19,642,616	0
96. Plus Reinsurance Assumed.....	XXX						
97. Totals (All Business).....	XXX	1,552,481	18,090,136	0	0	19,642,616	0
98. Less Reinsurance Ceded.....	XXX						
99. Totals (All Business) less reinsurance ceded.....	XXX	1,552,481	18,090,136	(b).....0	0	19,642,616	0

DETAILS OF WRITE-INS

58001.....	XXX						
58002.....	XXX						
58003.....	XXX						
58998. Summ. of remaining write-ins for line 58 from overflow.....	XXX	0	0	0	0	0	0
58999. Total (Lines 58001 thru 58003 plus 58998) (Line 58).....	XXX	0	0	0	0	0	0
9401.....	XXX						
9402.....	XXX						
9403.....	XXX						
9498. Summ. of remaining write-ins for line 94 from overflow.....	XXX	0	0	0	0	0	0
9499. Total (Lines 9401 thru 9403 plus 9498) (Line 94 above).....	XXX	0	0	0	0	0	0

(L) - Licensed or Chartered - Licensed Insurance Carrier or Domiciled RRG; (R) - Registered - Non-domiciled RRGs; (Q) - Qualified - Qualified or Accredited Reinsurer; (E) - Eligible - Reporting Entities eligible or approved to write Surplus Lines in the state; (N) - None of the above - Not allowed to write business in the state.

Explanation of basis of allocation by states, etc., of premiums and annuity considerations.

(a) Insert the number of L responses except for Canada and Other Alien.

(b) Column 4 should balance with Exhibit 1, Lines 6.4, 10.4 and 16.4, Col. 4 or with Schedule H, Part 1, Column 1, Line 1. Indicate which:

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP

PART 1 – ORGANIZATIONAL CHART

Holding Company System Annual Regulation Statement

FCSU - NAIC 56340
A Fraternal benefit Society
E.I.N. 34-0220550

Filed with the Insurance Department of the State of Ohio by JEDNOTA, INC. on behalf of the following insurer:

First Catholic Slovak Union
6611 Rockside Road
Independence, OH 44131-2398
Domicile: Ohio

September 29, 1986

Correspondence should be addressed:
Mr. George Matta
C/O: First Catholic Slovak Union
6611 Rockside Road
Independence, OH 44131-2398

Organizational Chart

JEDNOTA, INC. 100% owned by First Catholic Slovak Union, A Fraternal Benefit Society

Subsidiaries: JEDNOTA Properties, INC.
JEDNOTA General Company

**2012 ALPHABETICAL INDEX
FRATERNAL ANNUAL STATEMENT BLANK**

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