56340201420100100

ANNUAL STATEMENT

For the Year Ended December 31, 2014

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 ..... 44131 *(Street and Number) (City or Town, State, Country and Zip Code)*	
Main Administrative Office	6611 ROCKSIDE ROAD….. INDEPENDENCE ..... OH ..... US..... 44131 *(Street and Number) (City or Town, State, Country and Zip Code)*	216-642-9406 *(Area Code) (Telephone Number)*
Mail Address	6611 ROCKSIDE ROAD….. INDEPENDENCE ..... OH ..... US ..... 44131 *(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)*	
Primary Location of Books and Records	6611 ROCKSIDE ROAD….. INDEPENDENCE ..... OH ..... US ..... 44131 *(Street and Number) (City or Town, State, Country and Zip Code)*	216-642-9406 *(Area Code) (Telephone Number)*
Internet Web Site Address	WWW.FCSU.COM	
Statutory Statement Contact	KENNETH ANTHONY ARENDT *(Name)*	216-642-9406 *(Area Code) (Telephone Number) (Extension)*
	FCSU@AOL.COM *(E-Mail Address)*	216-642-4310 *(Fax Number)*

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

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

Subscribed and sworn to before me
This 10TH day of FEBRUARY 2015

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

ASSETS

	Current Year 1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	Prior Year 4 Net Admitted Assets
1. Bonds (Schedule D)	310,841,123		310,841,123	300,535,784
2. Stocks (Schedule D):				
2.1 Preferred stocks			0	200,000
2.2 Common stocks	3,392,431		3,392,431	5,756,573
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens	1,233,860		1,233,860	1,416,745
3.2 Other than first liens			0	
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less $..........0 encumbrances)	982,322		982,322	1,009,340
4.2 Properties held for the production of income (less $..........0 encumbrances)	733,770		733,770	772,830
4.3 Properties held for sale (less $..........0 encumbrances)	697,050		697,050	562,675
5. Cash ($.....18,176,699, Schedule E-Part 1), cash equivalents ($..........0, Schedule E-Part 2) and short-term investments ($..........0, Schedule DA)	18,176,699		18,176,699	11,129,071
6. Contract loans (including $..........0 premium notes)	1,095,600		1,095,600	1,046,960
7. Derivatives (Schedule DB)			0	
8. Other invested assets (Schedule BA)	10,084,740		10,084,740	10,133,875
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)	347,237,594	0	347,237,594	332,563,852
13. Title plants less $..........0 charged off (for Title insurers only)			0	
14. Investment income due and accrued	4,170,118		4,170,118	3,840,970
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	18,837		18,837	26,470
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)			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	550	550	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)	351,427,099	550	351,426,549	336,431,292
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	
28. TOTALS (Lines 26 and 27)	351,427,099	550	351,426,549	336,431,292

DETAILS OF WRITE-INS

	1	2	3	4
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	550	550	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)	550	550	0	0

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)	274,860,000	261,839,000
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)	42,849,920	40,717,575
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)	286,400	286,787
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)	646,991	609,141
9. Commissions to fieldworkers due or accrued-life and annuity contracts $..........0 ; accident and health $...........0 and deposit-type contract funds $..........0	28,595	7,223
10. Commissions and expense allowances payable on reinsurance assumed		
11. General expenses due or accrued (Exhibit 2, Line 12, Col. 7)	90,961	65,127
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)	13,589	22,835
14. Unearned investment income		
15. Amounts withheld or retained by Society as agent or trustee	5,106,290	6,010,086
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	9,511
19. Liability for benefits for employees and fieldworkers if not included above		
20. Borrowed money $..........0 and interest thereon $..........0		
21. Miscellaneous liabilities:		
21.1 Asset valuation reserve (AVR, Line 16, Col. 7)	2,311,775	2,461,429
21.2 Reinsurance in unauthorized and certified ($..........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		
21.9 Payable for securities lending		
22. Aggregate write-ins for liabilities	372,835	1,020,967
23. Total liabilities excluding Separate Accounts business (Lines 1 to 22)	327,276,867	313,749,681
24. From Separate Accounts statement		
25. Total liabilities (Lines 23 and 24)	327,276,867	313,749,681
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	24,149,682	22,681,610
30. Total (Lines 26 through 29) (Page 4, Line 47) (including $..........0 in Separate Accounts statement)	24,149,682	22,681,610
31. Totals (Lines 25 + 30) (Page 2, Line 28, Col. 3)	351,426,549	336,431,291

DETAILS OF WRITE-INS

2201. Postretirement Reserve	311,868	285,000
2202. Security Deposits	10,967	10,967
2203. Special Marketing and Promotion Reserves		
2298. Summary of remaining write-ins for Line 22 from overflow page	50,000	725,000
2299. Totals (Lines 2201 thru 2203 plus 2298) (Line 22 above)	372,835	1,020,967
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

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)	16,870,446	22,216,307
2. Considerations for supplementary contracts with life contingencies		
3. Net investment income (Exhibit of Net Investment Income, Line 17)	14,710,566	14,149,981
4. Amortization of Interest Maintenance Reserve (IMR, Line 5)	476,440	380,661
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	21,467	203,442
9. Totals (Lines 1 to 8.3)	32,078,919	36,950,391
10. Death benefits	2,933,628	2,430,466
11. Matured endowments (excluding guaranteed annual pure endowments)		3,270
12. Annuity benefits	10,266,961	9,947,089
13. Disability benefits and benefits under accident and health contracts, including premiums waived $..........0		
14. Surrender benefits and withdrawals for life contracts	923,246	823,140
15. Interest and adjustments on contract or deposit-type contracts funds	159,895	211,732
16. Payments on supplementary contracts with life contingencies		
17. Increase in aggregate reserve for life and accident and health contracts	13,021,000	18,690,000
18. Totals (Lines 10 to 17)	27,304,730	32,105,697
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)	183,350	263,752
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)	2,867,853	2,840,415
22. Insurance taxes, licenses and fees (Exhibit 3, Line 6, Cols. 1, 2, 3 and 5)	100,024	127,719
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	(151,245)	(247,883)
26. Totals (Lines 18 to 25)	30,304,712	35,089,700
27. Net gain from operations before refunds to members (Line 9 minus Line 26)	1,774,207	1,860,690
28. Refunds to members (Exhibit 4, Line 17, Cols. 1 + 2)	405,722	405,055
29. Net gain from operations after refunds to members and before realized capital gains (losses) (Line 27 minus Line 28)	1,368,485	1,455,635
30. Net realized capital gains (losses) less capital gains tax of $..........0 (excluding $.....514,290 transferred to the IMR)	690,629	553,505
31. Net income (Lines 29 + 30)	2,059,114	2,009,140
SURPLUS ACCOUNT		
32. Surplus, December 31, previous year (Page 3, Line 30, Col. 2)	22,681,611	20,646,573
33. Net income from operations (Line 31)	2,059,114	2,009,140
34. Change in net unrealized capital gains (losses) less capital gains tax of $..........0	(723,683)	192,118
35. Change in net unrealized foreign exchange capital gain (loss)		
36. Change in nonadmitted assets	6,414	(22,573)
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		
39. Change in asset valuation reserve	149,654	(111,361)
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	(23,428)	(32,287)
46. Net change in surplus for the year (Lines 33 through 45)	1,468,071	2,035,037
47. Surplus December 31, current year (Lines 32 + 46) (Page 3, Line 30)	24,149,682	22,681,611

DETAILS OF WRITE-INS

08.301. ADVERTISING & SUBSCRIPTION INCOME	4,865	5,060
08.302. RENTAL INCOME ON GROUNDS @ ESTATES	10,000	10,000
08.303. MISCELLANOUS INCOME	6,602	13,382
08.398. Summary of remaining write-ins for Line 8.3 from overflow page	0	175,000
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)	21,467	203,442
2501. NET CHANGE IN SETTLEMENT OPTIONS W/O LIFE	133,316	25,949
2502. NET CHANGE IN PENSION FUND	(311,429)	(273,832)
2503. NET INCREASE IN POST-RETIREMENT RESERVE	26,868	
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)	(151,245)	(247,883)
4501. ACCRUAL & ASSET ADJUSTMENTS	(23,428)	(32,287)
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)	(23,428)	(32,287)

CASH FLOW

		1 Current Year	2 Prior Year
	CASH FROM OPERATIONS		
1.	Premiums collected net of reinsurance	16,877,692	22,202,303
2.	Net investment income	15,342,750	14,765,912
3.	Miscellaneous income	21,467	28,442
4.	Total (Lines 1 through 3)	32,241,909	36,996,657
5.	Benefit and loss related payments	14,283,730	13,415,697
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7.	Commissions, expenses paid and aggregate write-ins for deductions	3,800,558	2,909,949
8.	Dividends paid to policyholders	405,722	405,056
9.	Federal and foreign income taxes paid (recovered) net of $..........0 tax on capital gains (losses)		
10.	Total (Lines 5 through 9)	18,490,010	16,730,703
11.	Net cash from operations (Line 4 minus Line 10)	13,751,899	20,265,954
	CASH FROM INVESTMENTS		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds	49,542,548	101,945,609
	12.2 Stocks	3,614,053	1,472,246
	12.3 Mortgage loans	365,770	171,141
	12.4 Real estate		
	12.5 Other invested assets		3,000,000
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
	12.7 Miscellaneous proceeds		(535,709)
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	53,522,371	106,053,287
13.	Cost of investments acquired (long-term only):		
	13.1 Bonds	60,109,420	121,133,701
	13.2 Stocks	1,159,341	3,004,357
	13.3 Mortgage loans		
	13.4 Real estate	139,908	
	13.5 Other invested assets		8,500,000
	13.6 Miscellaneous applications		535,709
	13.7 Total investments acquired (Lines 13.1 to 13.6)	61,408,669	133,173,767
14.	Net increase (decrease) in contract loans and premium notes	46,521	34,932
15.	Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14)	(7,932,819)	(27,155,412)
	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	2,132,344	11,130,055
	16.5 Dividends to stockholders		
	16.6 Other cash provided (applied)	(903,796)	(1,028,037)
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	1,228,548	10,102,018
	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)	7,047,628	3,212,561
19.	Cash, cash equivalents and short-term investments:		
	19.1 Beginning of year	11,129,071	7,916,511
	19.2 End of year (Line 18 plus Line 19.1)	18,176,699	11,129,071

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

20.0001			

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1	Insurance						8	9
		2	3	4	5	6	7		
	Total	Life Insurance	Individual Annuities	Supplementary Contracts	Accident and Health	Aggregate of All Other Lines of Business	Total (Columns 2) through 6)	Fraternal	Expense
1. Premiums and annuity considerations for life and accident and health contracts	16,870,446	1,529,057	15,341,389				16,870,446		
2. Considerations for supplementary contracts with life contingencies	0						0		
3. Net investment income	14,710,566	4,710,566	10,000,000				14,710,566		
4. Amortization of interest maintenance reserve (IMR)	476,440	476,440					476,440		
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	21,467	21,467	0	0	0	0	21,467	0	0
9. Totals (Lines 1 to 8.3)	32,078,919	6,737,530	25,341,389	0	0	0	32,078,919	0	0
10. Death benefits	2,933,628	2,933,628					2,933,628		
11. Matured endowments (excluding guaranteed annual pure endowments)	0						0		
12. Annuity benefits	10,266,961		10,266,961				10,266,961		
13. Disability benefits and benefits under accident and health contracts, including premiums waived $ 0	0						0		
14. Surrender benefits and withdrawals for life contracts	923,246	923,246					923,246		
15. Interest and adjustments on contract or deposit-type contract funds	159,895	159,895					159,895		
16. Payments on supplementary contracts with life contingencies	0						0		
17. Increase in aggregate reserve for life and accident and health certificates and contracts	13,021,000	678,000	12,343,000				13,021,000		
18. Totals (Lines 10 to 17)	27,304,730	4,694,769	22,609,961	0	0	0	27,304,730	0	0
19. Commissions on premiums and annuity considerations and deposit-type funds (direct business only)	183,350	50,590	132,760				183,350		
20. Commissions and expense allowances on reinsurance assumed	0						0		
21. General insurance expenses and fraternal expenses	2,867,853	504,033	1,300,000				1,804,033	1,063,820	
22. Insurance taxes, licenses and fees	100,024	100,024					100,024		
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	(151,245)	(151,245)	0	0	0	0	(151,245)	0	0
26. Totals (Lines 18 to 25)	30,304,712	5,198,171	24,042,721	0	0	0	29,240,892	1,063,820	0
27. Net gain from operations before refunds to members (Line 9 minus Line 26)	1,774,207	1,539,359	1,298,668	0	0	0	2,838,027	(1,063,820)	0
28. Refunds to members	405,722	405,722					405,722		
29. Net gain from operations after refunds to members and before realized capital gains or (losses) (Line 27 minus Line 28)	1,368,485	1,133,637	1,298,668	0	0	0	2,432,305	(1,063,820)	0

DETAILS OF WRITE-INS

	1	2	3	4	5	6	7	8	9
08.301. ADVERTISING & SUBSCRIPTION INCOME	4,865	4,865					4,865		
08.302. RENTAL INCOME ON GROUNDS @ ESTATES	10,000	10,000					10,000		
08.303. MISCELLANEOUS INCOME	6,602	6,602					6,602		
08.398. Summary of remaining write-ins for Item 8.3 from overflow page	0	0	0	0	0	0	0	0	0
08.399. Totals (Lines 08.301 thru 08.303 plus 08.398 above) (Line 8.3 above)	21,467	21,467	0	0	0	0	21,467	0	0
2501. NET CHANGE IN SETTLEMENT OPTIONS W/O LIFE	133,316	133,316					133,316		
2502. NET CHANGE IN PENSION FUND	(311,429)	(311,429)					(311,429)		
2503. NET INCREASE IN POST-RETIREMENT RESERVE	26,868	26,868					26,868		
2598. Summary of remaining write-ins for Item 25 from overflow page	0	0	0	0	0	0	0	0	0
2599. Totals (Lines 2501 thru 2503 plus 2598 above) (Line 25 above)	(151,245)	(151,245)	0	0	0	0	(151,245)	0	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	261,839,000	74,466,000	187,373,000	
2. Tabular net premiums or considerations	16,870,029	1,528,640	15,341,389	
3. Present value of disability claims incurred	0			XXX
4. Tabular interest	11,002,780	3,879,579	7,123,201	
5. Tabular less actual reserve released	145,371		145,371	
6. Increase in reserve on account of change in valuation basis	0			
7. Other increases (net)	0			
8. Totals (Lines 1 to 7)	289,857,180	79,874,219	209,982,961	0
9. Tabular cost	2,883,861	2,883,861		XXX
10. Reserves released by death	909,424	909,424	XXX	XXX
11. Reserves released by other terminations (net)	936,934	936,934		
12. Annuity, supplementary contract and disability payments involving life contingencies	10,266,961		10,266,961	
13. Net transfers to or (from) separate accounts	0			
14. Total deductions (Lines 9 to 13)	14,997,180	4,730,219	10,266,961	0
15. Reserve December 31, current year	274,860,000	75,144,000	199,716,000	0

EXHIBIT OF NET INVESTMENT INCOME

		1 Collected During Year	2 Earned During Year
1.	U.S. government bonds	(a) 1,887,878	1,833,296
1.1	Bonds exempt from U.S. tax	(a)	
1.2	Other bonds (unaffiliated)	(a) 13,578,142	13,964,156
1.3	Bonds of affiliates	(a)	
2.1	Preferred stocks (unaffiliated)	(b) 9,900	9,900
2.11	Preferred stocks of affiliates	(b)	
2.2	Common stocks (unaffiliated)	113,108	110,824
2.21	Common stocks of affiliates	200,000	200,000
3.	Mortgage loans	(c) 95,530	95,530
4.	Real estate	(d) 351,758	351,758
5.	Contract loans	63,378	63,378
6.	Cash, cash equivalents and short-term investments	(e) 18,050	18,050
7.	Derivative instruments	(f)	
8.	Other invested assets		
9.	Aggregate write-ins for investment income	(560,141)	(560,141)
10.	Total gross investment income	15,757,603	16,086,751
11.	Investment expenses		(g) 1,206,145
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g) 70,418
13.	Interest expense		(h)
14.	Depreciation on real estate and other invested assets		(i) 99,622
15.	Aggregate write-ins for deductions from investment income		0
16.	Total deductions (Lines 11 through 15)		1,376,185
17.	Net investment income (Line 10 minus Line 16)		14,710,566

DETAILS OF WRITE-INS

0901.	PENSION FUND EXPENSE	(560,141)	(560,141)
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)	(560,141)	(560,141)
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 $.....174,236 accrual of discount less $.....1,058,782 amortization of premium and less $.....560,141 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 $.....144,690 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 $.....99,622 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)	661,511		661,511	(38,500)	
1.3	Bonds of affiliates			0		
2.1	Preferred stocks (unaffiliated)			0		
2.11	Preferred stocks of affiliates			0		
2.2	Common stocks (unaffiliated)	543,406		543,406	(643,229)	
2.21	Common stocks of affiliates			0	7,181	
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			0	(49,135)	
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)	1,204,917	0	1,204,917	(723,683)	0

DETAILS OF WRITE-INS

0901.				0		
0902.				0		
0903.				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

	1	Insurance					7	8
		2	3	4	5	6		
	Total	Life Insurance	Individual Annuities	Accident and Health	Aggregate of All Other Lines of Business	Total (Columns 2 through 5)	Fraternal	Expense
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	0
4. Advance	0					0		
5. Line 3.4 - Line 4	0	0	0	0	0	0	0	0
6. Collected during year:								
6.1 Direct	11,724,305	31,364	11,692,941			11,724,305		
6.2 Reinsurance assumed	0					0		
6.3 Reinsurance ceded	0					0		
6.4 Net	11,724,305	31,364	11,692,941	0	0	11,724,305	0	0
7. Line 5 + Line 6.4	11,724,305	31,364	11,692,941	0	0	11,724,305	0	0
8. Prior year (uncollected + deferred and accrued - advance)	0					0		
9. First year premiums and considerations:								
9.1 Direct	11,724,305	31,364	11,692,941			11,724,305		
9.2 Reinsurance assumed	0					0		
9.3 Reinsurance ceded	0					0		
9.4 Net (Line 7 - Line 8)	11,724,305	31,364	11,692,941	0	0	11,724,305	0	0
SINGLE								
10. Single premiums and considerations:								
10.1 Direct	748,679	743,496	5,183			748,679		
10.2 Reinsurance assumed	0					0		
10.3 Reinsurance ceded	0					0		
10.4 Net	748,679	743,496	5,183	0	0	748,679	0	0
RENEWAL								
11. Uncollected	18,837	18,837				18,837		
12. Deferred and accrued	0					0		
13. Deferred, accrued & uncollected:								
13.1 Direct	18,837	18,837				18,837		
13.2 Reinsurance assumed	0					0		
13.3 Reinsurance ceded	0					0		
13.4 Net (Line 11 + Line 12)	18,837	18,837	0	0	0	18,837	0	0
14. Advance	286,400	286,400				286,400		
15. Line 13.4 - Line 14	(267,563)	(267,563)	0	0	0	(267,563)	0	0
16. Collected during year:								
16.1 Direct	4,434,483	791,219	3,643,264			4,434,483		
16.2 Reinsurance assumed	0					0		
16.3 Reinsurance ceded	25,492	25,492				25,492		
16.4 Net	4,408,991	765,727	3,643,264	0	0	4,408,991	0	0
17. Line 15 + Line 16.4	4,141,428	498,164	3,643,264	0	0	4,141,428	0	0
18. Prior year (uncollected + deferred and accrued - advance)	(256,034)	(256,034)				(256,034)		
19. Renewal premiums and considerations:								
19.1 Direct	4,422,858	779,594	3,643,264			4,422,858		
19.2 Reinsurance assumed	0					0		
19.3 Reinsurance ceded	25,492	25,492				25,492		
19.4 Net (Line 17 - Line 18)	4,397,462	754,198	3,643,264	0	0	4,397,462	0	0
TOTAL								
20. Total premiums and annuity considerations:								
20.1 Direct	16,895,842	1,554,454	15,341,389	0	0	16,895,842	0	0
20.2 Reinsurance assumed	0	0	0	0	0	0	0	0
20.3 Reinsurance ceded	25,492	25,492	0	0	0	25,492	0	0
20.4 Net (Lines 9.4 + 10.4 + 19.4)	16,870,446	1,529,057	15,341,389	0	0	16,870,446	0	0

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

	1	Insurance					7	8
	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)	Fraternal	Expense
REFUNDS APPLIED (included in Part 1)								
21. To pay renewal premiums	947	947				947		
22. All other	404,775	404,775				404,775		
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)	134,818	33,455	101,363			134,818		
28. Single	13,412	13,412				13,412		
29. Renewal	35,120	3,723	31,397			35,120		
30. Deposit-type contract funds	0					0		
31. Totals (to agree with Page 6, Line 19)	183,350	50,590	132,760	0	0	183,350	0	0

EXHIBIT 2 - GENERAL EXPENSES

		Insurance				5	6	7
		1	Accident and Health		4			
			2 Cost Containment	3 All Other	Aggregate of All Other Lines of Business			
		Life				Investment	Fraternal	Total
1.	Rent	129,633				2,000	15,057	146,690
2.	Salaries and wages	901,723				47,000	36,000	984,723
3.11	Insured benefit plans for employees	112,446					20,000	132,446
3.12	Insured benefit plans for fieldworkers							0
3.21	Uninsured benefit plans for employees	11,220						11,220
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	1,776					74	1,850
4.2	Medical examination fees	9,390						9,390
4.3	Inspection report fees							0
4.4	Fees of public accountants and consulting actuaries	222,290					10,000	232,290
4.5	Expense of investigation and settlement of certificate claims							0
5.1	Traveling expenses	68,064				3,000	20,000	91,064
5.2	Advertising	17,240					1,000	18,240
5.3	Postage, express, telegraph and telephone	81,367					15,000	96,367
5.4	Printing and stationery	69,229					6,000	75,229
5.5	Cost or depreciation of furniture and equipment	11,859					46,058	57,917
5.6	Rental of equipment	8,175						8,175
5.7	Cost or depreciation of EDP equipment and software	63,485					5,000	68,485
5.8	Lodge supplies less $..........0 from sales							0
6.1	Books and periodicals	13,559					2,800	16,359
6.2	Bureau and association dues	11,185					2,050	13,235
6.3	Insurance, except on real estate	54,852						54,852
6.4	Miscellaneous losses							0
6.5	Collection and bank service charges	16,540						16,540
6.6	Sundry general expenses					78,338		78,338
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						243,482	243,482
8.2	Expense of Supreme Lodge Meetings						276,301	276,301
9.1	Real estate expenses					148,197		148,197
9.2	Investment expenses not included elsewhere					927,610		927,610
9.3	Aggregate write-ins for expenses	0	0	0	0	0	364,999	364,999
10.	General Expenses Incurred	1,804,033	0	0	0	1,206,145	(a)...1,063,821	(b).....4,073,998
11.	General expenses unpaid December 31, prior year						65,127	65,127
12.	General expenses unpaid December 31, current year						90,961	90,961
13.	General expenses paid during year (Lines 10 + 11 - 12)	1,804,033	0	0	0	1,206,145	1,037,987	4,048,164

DETAILS OF WRITE-INS

09.301	SCHOLARSHIPS. DONATION, FRATERNAL AWARDS, ATHLETI(						364,999	364,999
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	364,999	364,999

(a) Show the distribution of this amount in the following categories:
1. Charitable $..........0; 2. Institutional $.....364,999; 3. Recreational and Health $..........0; 4. Educational $.....246,282
5. Religious $..........0; 6. Membership $.....452,540; 7. Other $..........0; 8. Total $.....1,063,821
(b) Includes management fees of $..........0 to affiliates and $..........0 to non-affiliates.

EXHIBIT 3 - TAXES, LICENSES AND FEES

		Insurance			4	5	6
		1	2	3			
		Life	Accident and Health	Aggregate of All Other Lines of Business	Investment	Fraternal	Total
1.	Real estate taxes				70,418		70,418
2.	State insurance department licenses and fees	21,030					21,030
3.	Other state taxes, including $..........0 for employee benefits	4,388					4,388
4.	U.S. Social Security taxes	74,605					74,605
5.	All other taxes						0
6.	Taxes, licenses and fees Incurred	100,024	0	0	70,418	0	170,442
7.	Taxes, licenses and fees unpaid December 31, prior year				22,835		22,835
8.	Taxes, licenses and fees unpaid December 31, current year				13,589		13,589
9.	Taxes, licenses and fees paid during year (Lines 6 + 7 - 8)	100,024	0	0	79,664	0	179,688

EXHIBIT 4 - DIVIDENDS OR REFUNDS

		1 Life	2 Accident and Health
1.	Applied to pay renewal premiums	947	
2.	Applied to shorten the endowment or premium-paying period		
3.	Applied to provide paid-up additions	389,222	
4.	Applied to provide paid-up annuities		
5.	Total (Lines 1 to 4)	390,169	0
6.	Paid-in cash	5,065	
7.	Left on deposit	10,488	
8.	Aggregate write-ins for dividend or refund	0	0
9.	Total (Lines 5 to 8)	405,722	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)	405,722	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

EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS

1 Valuation Standard	2 Total	3 Industrial	4 Ordinary	5 Credit (Group and Individual)	6 Group
Life Insurance:					
0100001. AE 4%, 3.5%, 3%	22,821		22,821		
0100002. AM(5) 3%	518,716		518,716		
0100003. 41 CSO 2.5%	5,630		5,630		
0100004. 58 CSO 3% & 4.5%	2,939,314		2,939,314		
0100005. 80 CSO 4.5%	18,160,503		18,160,503		
0100006. 80 CSO 5%	1,414,151		1,414,151		
0100007. 80 CSO 5.5%	40,302,231		40,302,231		
0100008. 80 CSO 6%	7,650,306		7,650,306		
0100009. 2001 CSO 4.5%	153,061		153,061		
0100010. 2001 CSO 4.0%	3,334,945		3,334,945		
0100011. 2001 CSO 3.5%	604,342		604,342		
0100012. Voluntary Extra	0				
0100013. Rounding	980		980		
0199997. Totals (Gross)	75,107,000	0	75,107,000	0	0
0199999. Totals (Net)	75,107,000	0	75,107,000	0	0
Annuities (excluding supplementary contracts with life contingencies):					
0200001. SPDA, FPDA	191,793,794	XXX	191,793,794	XXX	
0200002. SPIA	1,094,400	XXX	1,094,400	XXX	
0200003. Home Office Pension	6,627,754	XXX	6,627,754	XXX	
0200004. Voluntary Extra	200,000	XXX	200,000	XXX	
0200005. C-3, Rounding	52	XXX	52	XXX	
0299997. Totals (Gross)	199,716,000	XXX	199,716,000	XXX	0
0299999. Totals (Net)	199,716,000	XXX	199,716,000	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 52 dis & 58 cso 2.5%	7,000		7,000		
0699997. Totals (Gross)	7,000	0	7,000	0	0
0699999. Totals (Net)	7,000	0	7,000	0	0
9999999. Totals (Net) - Page 3, Line 1	274,860,000	0	274,860,000	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	Valuation Basis		4
	2	3	Increase in Actuarial
Description of Valuation Class	Changed From	Changed To	Reserve Due To Change

NONE

EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS

NONE

	1	2	Other Individual Contracts				
			3	4	5	6	7
	Total	Collectively Renewable	Non-Cancelable	Guaranteed Renewable	Non-Renewable for Stated Reasons Only	Other Accident Only	All Other
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
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						
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	2	3	4	5	6
	Total	Guaranteed Interest Contracts	Annuities Certain	Supplemental Contracts	Dividend Accumulations or Refunds	Premium and Other Deposit Funds
1. Balance at beginning of the year before reinsurance	40,717,576		692,690		206,003	39,818,883
2. Deposits received during the year	7,337,750		327,263		10,487	7,000,000
3. Investment earnings credited to the account	11,856				11,856	
4. Other net change in reserves	0					
5. Fees and other charges assessed	0					
6. Surrender charges	0					
7. Net surrender or withdrawal payments	5,217,262		194,816		13,837	5,008,609
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)	42,849,920	0	825,137	0	214,509	41,810,274
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)	42,849,920	0	825,137	0	214,509	41,810,274

EXHIBIT 8 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

PART 1 - Liability End of Current Year

	1	2	Ordinary			6	Group		Accident and Health		
			3	4	5		7	8	9	10	11
	Total	Industrial Life	Life Insurance	Individual Annuities	Supplementary Contracts	Credit Life (Group and Individual)	Life Insurance	Annuities	Group	Credit (Group and Individual)	Other
1. Due and unpaid:											
1.1 Direct	196,835		196,835								
1.2 Reinsurance assumed	0										
1.3 Reinsurance ceded	0										
1.4 Net	196,835	0	196,835	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	103,165		103,165								
3.2 Reinsurance assumed	0										
3.3 Reinsurance ceded	0										
3.4 Net	103,165	0	(b) 103,165	(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

(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	2	Ordinary			6	Group		Accident and Health		
			3	4	5		7	8	9	10	11
	Total	Industrial Life (a)	Life Insurance (b)	Individual Annuities	Supplementary Contracts	Credit Life (Group and Individual)	Life Insurance (c)	Annuities	Group	Credit (Group and Individual)	Other
1. Settlements during the year:											
1.1 Direct	13,200,589		2,933,628	10,266,961							
1.2 Reinsurance assumed	0										
1.3 Reinsurance ceded	0										
1.4 Net	(d) 13,200,589	0	2,933,628	10,266,961	0	0	0	0	0	0	0
2. Liability December 31, current year from Part 1:											
2.1 Direct	300,000	0	300,000	0	0	0	0	0	0	0	0
2.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0	0
2.4 Net	300,000	0	300,000	0	0	0	0	0	0	0	0
3. Amounts recoverable from reinsurers Dec. 31, current year	0										
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	0										
6. Incurred benefits:											
6.1 Direct	13,200,589	0	2,933,628	10,266,961	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	13,200,589	0	2,933,628	10,266,961	0	0	0	0	0	0	0

(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		2,119	2,119
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	550	0	(550)
12. Subtotals, cash and invested assets (Lines 1 to 11)	550	2,119	1,569
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		4,295	4,295
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	0	550	550
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25)	550	6,964	6,414
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0
28. TOTALS (Lines 26 and 27)	550	6,964	6,414

DETAILS OF WRITE-INS

1101. Deposits 550	550		(550)
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)	550	0	(550)
2501. Deposits 550		550	550
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)	0	550	550

NOTES TO FINANCIAL STATEMENTS

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

A. Accounting Practices

	State of Domicile	2014	2013
NET INCOME			
(1) First Catholic Slovak Union of the United States of America & Canada state basis (Page 4, Line 31, Columns 1 & 2)	OH	2,085,982	2,009,140
(2) State Prescribed Practices that increase/(decrease) NAIC SAP			
(3) State Permitted Practices that increase/(decrease) NAIC SAP			
(4) NAIC SAP (1 – 2 – 3 = 4)	OH	2,085,982	2,009,140
SURPLUS			
(5) First Catholic Slovak Union of the United States of America & Canada state basis (Page 3, line 30, Columns 1 & 2)	OH	24,177,101	22,681,610
(6) State Prescribed Practices that increase/(decrease) NAIC SAP			
(7) State Permitted Practices that increase/(decrease) NAIC SAP			
(8) NAIC SAP (5 – 6 – 7 = 8)	OH	24,177,101	22,681,610

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

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. 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 policy holders 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 anticipate 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 or 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) above.

7. The Society has a wholly-owned subsidiary; Jednota, Inc.

8. The Society has ownership interests in joint ventures as shown on Schedule BA Part 1.

9. The Society has no derivatives.

10. The Society has neither Individual Accident and Heath Contracts; nor Group Accident and Health Contracts. The Society is not currently marketing individual accident and health contracts.

11. Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates 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 life insurer, loss adjustment expenses are neither a big factor nor a large expense.

12. The Society has not modified its capitalization policy from the prior period.

NOTE 2 – ACCOUNTING CHANGES AND CORRECTIONS OF ERRORS

During the current year's financial statement preparation, there were no adjustments.

NOTE 3 – BUSINESS COMBINATIONS AND GOODWILL

Statutory Purchase Method: The Society has neither business combination nor taken credit for goodwill.

NOTES TO FINANCIAL STATEMENTS

NOTE 4 – DISCONTINUED OPERATIONS

The Society has no discontinued operations.

NOTE 5 – INVESTMENTS

A. Mortgage Loans, including Mezzanine Real Estate Loans

(1) The maximum and minimum lending rates for mortgage loans during 2014 were: 7.25% to 3.9%

Farm Loans: None Purchase Money Mortgages: None

(2) 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 mortgage was 75%.

		Current Year	Prior Year
(3)	Taxes, assessments and any amounts advanced and not included in the mortgage loan total		

(4) Age Analysis of Mortgage Loans:

					Residential		Commercial			
				Farm	Insured	All Other	Insured	All Other	Mezzanine	Total
a.	Current Year									
	1.	Recorded Investment (All)								
		(a)	Current		1,233,860					1,233,860
		(b)	30-59 Days Past Due							
		(c)	60-89 Days Past Due							
		(d)	90-179 Days Past Due							
		(e)	180+ Days Past Due							
	2.	Accruing Interest 90-179 Days Past Due								
		(a)	Recorded Investment							
		(b)	Interest Accrued							
	3.	Accruing Interest 180+ Days Past Due								
		(a)	Recorded Investment							
		(b)	Interest Accrued							
	4.	Interest Reduced								
		(a)	Recorded Investment							
		(b)	Number of Loans							
		(c)	Percent Reduced	0.000	0.000	0.000	0.000	0.000	0.000	0.000
b.	Prior Year									
	1.	Recorded Investment (All)								
		(a)	Current		1,416,745					1,416,745
		(b)	30-59 Days Past Due							
		(c)	60-89 Days Past Due							
		(d)	90-179 Days Past Due							
		(e)	180+ Days Past Due							
	2.	Accruing Interest 90-179 Days Past Due								
		(a)	Recorded Investment							
		(b)	Interest Accrued							
	3.	Accruing Interest 180+ Days Past Due								
		(a)	Recorded Investment							
		(b)	Interest Accrued							
	4.	Interest Reduced								
		(a)	Recorded Investment							
		(b)	Number of Loans							
		(c)	Percent Reduced	0.000	0.000	0.000	0.000	0.000	0.000	0.000

NOTE 6 – JOINT VENTURES, PARTNERSHIPS AND LIMITED LIABILITY COMPANIES

A. The Society has no investments in Joint Ventures, Partnerships or Limited Liability Companies.

NOTE 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

NOTE 8 – DERIVATIVE INSTRUMENTS

The Society owned no derivative instruments at December 31, of the current year.

NOTE 9 – INCOME TAXES

The Society, as a Fraternal Benefit Society, is not subject to income taxes.

NOTE 10 – INFORMATION CONCERNING PARENT, SUBSIDIARIES, AFFILIATES AND OTHER RELATED PARTIES

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

NOTES TO FINANCIAL STATEMENTS

NOTE 11 – DEBT

A. The Society has no debt borrowed money as of December 31, of the current year.

(1) N/A

(2) N/A

(3) N/A

(4) N/A

(5) N/A

(6) N/A

(7) N/A

(8) N/A

(9) N/A

(10) N/A

(11) N/A

(12) N/A

B. FHLB (Federal Home Loan Bank) Agreements - N/A

(1) N/A

(2) FHLB Capital Stock

a. Aggregate Totals

1. Current Year - N/A

	1 Total 2 + 3	2 General Account	3 Separate Accounts
(a) Membership Stock – Class A	504,647	504,647	
(b) Membership Stock – Class B			
(c) Activity Stock	911,353	911,353	
(d) Excess Stock			
(e) Aggregate Total	1,416,000	1,416,000	
(f) Actual or estimated borrowing capacity as determined by the insurer		XXX	XXX

2. Prior Year - N/A

	1 Total 2 + 3	2 General Account	3 Separate Accounts
(a) Membership Stock – Class A	458,220	458,220	
(b) Membership Stock – Class B			
(c) Activity Stock	911,280	911,280	
(d) Excess Stock			
(e) Aggregate Total	1,369,500	1,369,500	
(f) Actual or estimated borrowing capacity as determined by the insurer	40,884,580	XXX	XXX

b. Membership Stock (Class A and B) Eligible for Redemption - N/A

Membership Stock	Current Year Total	Not Eligible for Redemption	Less than 6 Months	6 Months to Less than 1 Year	1 to Less than 3 Years	3 to 5 Years
1. Class A	1,416,000	1,416,000				
2. Class B						

(3) Collateral Pledged to FHLB - N/A

a. Amount Pledged as of Reporting Date - N/A

1. Current Year Total General and Separate Accounts

	Fair Value	Carrying Value	Aggregate Total Borrowing
Total Collateral Pledged	59,298,000	98,665,042	41,738,886

2. Current Year General Account

	Fair Value	Carrying Value	Aggregate Total Borrowing
Total Collateral Pledged	59,298,000	98,665,042	41,738,886

3. Current Year Separate Accounts

	Fair Value	Carrying Value	Aggregate Total Borrowing
Total Collateral Pledged			

4. Prior Year Total General and Separate Accounts

	Fair Value	Carrying Value	Aggregate Total

			Borrowing
Total Collateral Pledged	45,871,381	98,996,484	39,818,882

b. Maximum Amount Pledged During Reporting Period - N/A

1. Current Year Total General and Separate Accounts

	Fair Value	Carrying Value	Amount Borrowed at Time of Maximum Collateral
Total Collateral Pledged	59,298,000	98,665,042	42,241,267

2. Current Year General Account

	Fair Value	Carrying Value	Amount Borrowed at Time of Maximum Collateral
Total Collateral Pledged	59,298,000	98,665,042	42,241,267

3. Current Year Separate Accounts

	Fair Value	Carrying Value	Amount Borrowed at Time of Maximum Collateral
Total Collateral Pledged			

4. Prior Year Total General and Separate Accounts

	Fair Value	Carrying Value	Amount Borrowed at Time of Maximum Collateral
Total Collateral Pledged	45,871,381	98,996,484	39,818,882

(4) Borrowing from FHLB - N/A

a. Amount as of the Reporting Date - N/A

1. Current Year

	1 Total 2 + 3	2 General Account	3 Separate Account	4 Funding Agreements Reserves Established
(a) Debt				XXX
(b) Funding Agreements				
(c) Other	42,026,409	42,026,409		XXX
(d) Aggregate Total	42,026,409	42,026,409		

2. Prior Year

	1 Total 2 + 3	2 General Account	3 Separate Account	4 Funding Agreements Reserves Established
(a) Debt				XXX
(b) Funding Agreements				
(c) Other	39,818,882	39,818,882		XXX
(d) Aggregate Total	39,818,882	39,818,882		

b. Maximum Amount During Reporting Period (Current Year) - N/A

	1 Total 2 + 3	2 General Account	3 Separate Accounts
1. Debt			
2. Funding Agreements			
3. Other	42,026,409	42,026,409	
4. Aggregate Total	42,026,409	42,026,409	

c. FHLB – Prepayment Obligations - N/A

	Does the Company have Prepayment Obligations under the Following Arrangements (YES/NO)
1. Debt	NO
2. Funding Agreements	NO
3. Other	NO

NOTE 12 – RETIREMENT PLANS, DEFERRED COMPENSATION, POSTEMPLOYMENT BENEFITS AND COMPENSATED ABSENCES AND OTHER POSTRETIREMENT BENEFIT PLANS

A. Defined Benefit Plan

(1) Change in Benefit Obligation	Overfunded		Underfunded	
a. Pension Benefits	2014	2013	2014	2013
1. Benefit obligation at beginning of year	6,274,630	6,051,306		
2. Service cost	81,147	87,341		
3. Interest cost	338,780	326,359		
4. Continuation by plan participants				
5. Actuarial gain (loss)	21,453	44,584		
6. Foreign currency exchange rate changes				

NOTES TO FINANCIAL STATEMENTS

			Overfunded 2014	Overfunded 2013	Underfunded 2014	Underfunded 2013
	7.	Benefits paid	231,017	234,960		
	8.	Plan amendments				
	9.	Business combinations, divestitures, curtailments, settlements and special termination benefits				
	10.	Benefit obligation at end of year	6,484,993	6,274,630		

			Overfunded		Underfunded	
b.	Postretirement Benefits		2014	2013	2014	2013
	1.	Benefit obligation at beginning of year	284,160	298,288		
	2.	Service cost	3,724	3,001		
	3.	Interest cost	17,050	17,897		
	4.	Continuation by plan participants				
	5.	Actuarial gain (loss)	18,154	(21,806)		
	6.	Foreign currency exchange rate changes				
	7.	Benefits paid	11,220	13,220		
	8.	Plan amendments				
	9.	Business combinations, divestitures, curtailments, settlements and special termination benefits				
	10.	Benefit obligation at end of year	311,868	284,160		

			Overfunded		Underfunded	
c.	Postemployment & Compensated Absence Benefits		2014	2013	2014	2013
	1.	Benefit obligation at beginning of year				
	2.	Service cost				
	3.	Interest cost				
	4.	Continuation by plan participants				
	5.	Actuarial gain (loss)				
	6.	Foreign currency exchange rate changes				
	7.	Benefits paid				
	8.	Plan amendments				
	9.	Business combinations, divestitures, curtailments, settlements and special termination benefits				
	10.	Benefit obligation at end of year				

(2)	Change in plan assets	Pension Benefits		Postretirement Benefits		Postemployment	
		2014	2013	2014	2013	2014	2013
a.	Fair value of plan assets at beginning of year	6,316,324	6,042,492	265,000	265,000		
b.	Actual return on plan assets	292,447	288,792				
c.	Foreign currency exchange rate changes						
d.	Reporting entity contribution	250,000	220,000	32,380	32,380		
e.	Plan participants' contributions						
f.	Benefits paid	231,017	234,960	13,220	13,220		
g.	Business combinations, divestitures and settlements						
h.	Fair value of plan assets at end of year	6,627,754	6,316,324	284,160	284,160		

(3)	Funded status		Pension Benefits		Postretirement Benefits	
	Overfunded:		2014	2013	2014	2013
a.	Assets (nonadmitted)					
	1.	Prepaid benefit costs	505,140	388,307	298,640	280,619
	2.	Overfunded plans assets	(362,379)	(346,613)	13,228	3,541
	3.	Total assets (nonadmited)	142,761	41,694	311,868	284,160
	Underfunded:					
b.	Liabilities recognized					
	1.	Accrued benefits costs				(284,160)
	2.	Liability for pension benefits				284,160
	3.	Total liabilities recognized				
c.	Unrecognized liabilities					3,541

(4)	Components of net periodic benefit cost	Pension Benefits		Postretirement Benefits		Postemployment	
		2014	2013	2014	2013	2014	2013
a.	Service cost	81,147	87,341	3,724	3,001		
b.	Interest cost	338,780	326,359	16,450	17,297		
c.	Expected return on plan assets	(347,948)	(331,925)	600	600		
d.	Transition asset or obligation	61,188	61,188	8,467	8,467		
e.	Gains and losses						

NOTES TO FINANCIAL STATEMENTS

f.	Prior service cost or credit						
g.	Gain or loss recognized due to a settlements curtailment						
h.	Total net periodic benefit cost	133,167	142,963	29,241	29,365		

(5)	Amounts in unassigned funds (surplus) recognized as components of net periodic benefit cost	Pension Benefits		Postretirement Benefits	
		2014	2013	2014	2013
a.	Items not yet recognized as a component of net periodic cost – prior year			3,541	33,814
b.	Net transition asset or obligation recognized			(8,467)	(8,467)
c.	Net prior service cost or credit arising during the period				
d.	Net prior service cost or credit recognized				
e.	Net gain and loss arising during the period			18,154	(21,806)
f.	Net gain and loss recognized				
g.	Items not yet recognized as a component of net periodic cost – current year			13,228	3,541

(6)	Amounts in unassigned funds (surplus) expected to be recognized in the next fiscal year as components of net periodic benefit cost	Pension Benefits		Postretirement Benefits	
		2014	2013	2014	2013
a.	Net transition asset or obligations				(8,467)
b.	Net prior service cost or credit				
c.	Net recognized gains and losses				

(7)	Amounts in unassigned funds (surplus) that have not yet been recognized as components of net periodic benefit cost	Pension Benefits		Postretirement Benefits	
		2014	2013	2014	2013
a.	Net transition asset or obligations				(8,467)
b.	Net prior service cost or credit				
c.	Net recognized gains and losses			13,225	(4,925)

(8)	Weighted-average assumptions used to determine net periodic benefit cost as of December 31	2014	2013
a.	Weighted-average discount rate	5.500	5.500
b.	Expected long-term rate of return on plan assets	5.500	5.500
c.	Rate of compensation increase	2.500	2.500
	Weighted-average assumptions used to determine projected benefit obligations as of December 31		
d.	Weighted-average discount rate	5.500	5.500
e.	Rate of compensation increase	2.500	2.500

(9) The amount of the accumulated benefit obligation for defined benefit pension plans was $6,242,265 for the current year and $6,081,666 for the prior year.

(10) The Society does not have multiple non-pension postretirement plans or healthcare plans.

(11)	Assumed health care cost trend rates have a significant effect on the amounts reported for the health care plans. A one-percentage point change in assumed health care cost trend rates would have the following effects:	1 Percentage Point Increase	1 Percentage Point Decrease
a.	Effect on total of service and interest cost components		
b.	Effect on postretirement benefit obligation		

(12) Estimated future payments, which reflect expected future service, as appropriate, are expected to be paid in the years indicated:

	Year(s)	Amount
a.	2015	332,339
b.	2016	329,914
c.	2017	409,171
d.	2018	421,031
e.	2019	423,043
f.	2020 through 2024	2,333,254

(13) The Society does not have any regulatory contribution requirements for 2014, however, the Society currently intends to make voluntary contributions to the defined benefit pension plan in an amount between $200,000 to $300,000.

(14) Employer Group Annuity or Direct Participation Account:

The amount of pension fund invested in the Employer's Group Annuity is:

2014	2013
$6,627,754	$6,316,324

The employer has earmarked Postretirements amounts as a liability in the general account.

2014	2013

write in:

(15) N/A

(16) N/A

(17) N/A

(18) N/A

(19) N/A

(20) N/A

(21) The Society at this time, has elected not to apply the transition guidelines as set forth in SSAP102.

B. Investment Policies and Strategies - None

C. Fair Value of Plan Assets

(1) Fair Value Measurements of Plans Assets at Reporting Date

Description for each class of plan assets	(Level 1)	(Level 2)	(Level 3)	Total
Total	536,229	6,024,706	66,819	6,627,754
Total Plan Assets	536,229	6,024,706	66,819	6,627,754

Allocation estimate based on beginning of year pattern.

End of year pattern not available before completion of report.

(2) Fair Value Measurements in Level 3 of the Fair Value Hierarchy

Amount not material and data not available at the time to meet deadline.

Description for each class of plan assets	Beginning Balance at 1/1/2014	Transfers into Level 3	Transfers out of Level 3	Return on Assets Still Held	Return on Assets Sold	Purchases	Issuances	Sales	Settlements	Ending Balance at 12/31/2014
Total Plan Assets										

(3) Fair Value was determined by applying the same percentage of Bond Fair Value to Bond Value as is shown by the rate of Fair Value to Statement Value as shown in question 30 of the interrogatories or the Society elected to use statement value of its bonds for the Pension Fund Assets.

D. Basis Used to Determine Expected Long-Term Rate-of-Return

The rate on return as per the past few years results was used to determine the overall expected long-term rate of return on asset assumption, which has produced consistent annual results. The net investment rate of return has been computed annually and the trend studied to determine there is no significant deviations. Based on the consistent trend there was determined no adjustment was required.

E. Defined Contribution Plans

The Society does not have a Defined Contribution Plan

F. Multiemployer Plans

The Society does not have Multiemployer Plans.

G. Consolidated/Holding Company Plans

The Society does not have Consolidated/Holding Company Plans.

H. Postemployment Benefits and Compensated Absences

The Society does not provide Postemployment Benefits or Compensated Absences.

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

(1) None

(2) None

(3) None

NOTE 13 – CAPITAL AND SURPLUS, DIVIDEND RESTRICTIONS AND QUASI-REORGANIZATIONS

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

NOTE 14 – LIABILITIES, CONTINGENCIES AND ASSESSMENTS

The Society had no liabilities, contingencies or assessments.

NOTE 15 – LEASES

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

NOTE 16 – INFORMATION ABOUT FINANCIAL INSTRUMENTS WITH OFF-BALANCE SHEET RISK AND FINANCIAL INSTRUMENTS WITH CONCENTRATIONS OF CREDIT RISK

The Society had no Off-Balance Sheet Risk and Financial Instruments with Concerns of Credit Risks.

NOTES TO FINANCIAL STATEMENTS

NOTE 17 – SALE, TRANSFER AND SERVICING OF FINANCIAL ASSETS AND EXTINGUISHMENTS OF LIABILITIES

None

NOTE 18 – GAIN OR LOSS TO THE REPORTING ENTITY FROM UNINSURED PLANS AND THE PORTION OF PARTIALLY INSURED PLANS

None

NOTE 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.

NOTE 20 – FAIR VALUE MEASUREMENTS

A.

(1) Fair Value Measurements at Reporting Date

Assets at Fair Value	Level 1	Level 2	Level 3	Total
Common Stock	3,392,431			3,392,431
Bonds-Parent, Subsidiaries	61,500			61,500
Total	3,453,931			3,453,931
Liabilities at Fair Value	Level 1	Level 2	Level 3	Total
Total				

(2-5) None

B-D. N/A

NOTE 21 – OTHER ITEMS

The Society has no other items that require reporting.

NOTE 22 – EVENTS SUBSEQUENT

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

NOTE 23. – REINSURANCE

As reported in Schedule S of the 2014 Annual Statement.

NOTE 24. – RETROSPECTIVELY RATED CONTRACTS AND CONTRACTS SUBJECT TO REDTERMINATION

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

NOTE 25. – CHANGE IN INCURRED LOSSES AND LOSS ADJUSTMENT EXPENSES

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

NOTE 26. – INTERCOMPANY POOLING ARRANGEMENTS

The Society has no Intercompany pooling arrangements.

NOTE 27. –STRUCTURED SETTLEMENTS

The Society has no Structured Settlements.

NOTE 28. –HEALTH CARE RECEIVABLES

The Society has no Health Care Receivables.

NOTE 29. – PARTICIPATING POLICIES

100% of life insurance is participating.

The portfolio average method is applied, recognizing plan of insurance, amount of insurance, year of issue and age at issue.

The Society paid dividends in the amount shown on Exhibit 4, to policyholders.

The Society did not allocate any additional income to its policyholders.

NOTE 30. – PREMIUM DEFICIENCY RESERVES

1. Liability carried for premium deficiency reserve: N/A
2. Date of most recent evaluation of this liability: N/A
3. Was anticipated investment income utilized in the calculation? N/A

NOTES TO FINANCIAL STATEMENTS

NOTE 31. – RESERVES FOR LIFE CONTRACTS AND ANNUITY CONRACTS

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.

(1) Extra premiums are charged for substandard lives for certificates issued, plus the gross premium at a rated age.

(2) 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, of the 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 Ohio.

(4) The Tabular Interest (Page 7, Line 4) has been determined from basic policy data. The Tabular Less Actual Reserve Released (Page 7, Line 5) has been determined by formula as described in the instructions for Page 7.

(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 changes: N/A

			ORDINARY				GROUP	
Item	Total	Industrial Life	Life Insurance	Individual Annuities	Supplementary Contracts	Credit Life Group and Individual	Life Insurance	Annuities
Total								

NOTE 32. – ANALYSIS OF ANNUITY ACTUARIAL RESERVES AND DEPOSIT LIABILITIES BY WITHDRAWAL CHARACTERISTICS

			General Accounts	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	% of Total
A.	Subject to Discretionary Withdrawal:						
	(1)	With fair value adjustment					0.000
	(2)	At book value less current surrender charge of 5% or more	35,445,463			35,445,463	14.613
	(3)	At fair value	1,508,909			1,508,909	0.622
	(4)	Total with adjustment or at fair value (total of 1 through 3)	36,954,372			36,954,372	15.235
	(5)	At book value without adjustment (minimal or no charge or adjustment)	156,348,383			156,348,383	64.456
B.	Not subject to discretionary withdrawal		49,263,165			49,263,165	20.309
C.	Total (gross: direct + assumed)		242,565,920			242,565,920	100.000
D.	Reinsurance ceded						
E.	Total (net (C) - (D)		242,565,920			242,565,920	

F. Life and Accident & Health Annual Statement:

(1)	Exhibit 5, Annuities, Total (net)	199,716,000
(2)	Exhibit 5, Supplementary contracts with life contingencies, Total (net)	
(3)	Exhibit 7, Deposit-type contracts, Line 14, Column 1	42,849,920
(4)	Subtotal	242,565,920
Separate Accounts Statement:		
(5)	Exhibit 3, Line 0299999, Column 2	
(6)	Exhibit 3, Line 0399999, Column 2	
(7)	Policyholder dividend and coupon accumulations	
(8)	Policyholder premiums	
(9)	Guaranteed interest contracts	
(10)	Other contract deposit funds	
(11)	Subtotal	
(12)	Combined Total	242,565,920

NOTE 33. –PREMIUM AND ANNUITY CONSIDERATIONS DEFERRED AND UNCOLLECTED

A. Deferred and uncollected life insurance premiums and annuity considerations as of December 31, 2014 were:

		Gross	Net of Loading
(1)	Industrial		
(2)	Ordinary new business		
(3)	Ordinary renewal		
(4)	Credit life		
(5)	Group life		
(6)	Group annuity		
(7)	Totals		

NOTES TO FINANCIAL STATEMENTS

NOTE 34. – SEPARATE ACCOUNTS

The Society does not have any separate accounts.

NOTE 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 [ ]

If yes, complete Schedule Y, Parts 1, 1A and 2.

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. 01/02/2014

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. 12/31/2013

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). 07/10/2014

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:

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES - GENERAL

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

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?

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 ....

PART 1 - COMMON INTERROGATORIES - FINANCIAL

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.

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 Placed under option agreements ....
- 25.26 Letter stock or securities restricted as to sale - excluding FHLB Capital Stock ....
- 25.27 FHLB Capital Stock ....
- 25.28 On deposit with states ....
- 25.29 On deposit with other regulatory bodies ....
- 25.30 Pledged as collateral - excluding collateral pledged to an FHLB ....
- 25.31 Pledged as collateral to FHLB - including assets backing funding agreements ....
- 25.32 Other ....

25.3 For category (25.26) 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]

PART 1 - COMMON INTERROGATORIES - INVESTMENT

29.2 If yes, complete the following schedule:

1	2	3
CUSIP #	Name of Mutual Fund	Book/Adjusted Carrying Value
29.2999. TOTAL		0

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

1	2	3	4
Name of Mutual Fund (from the above table)	Name of Significant Holding of the Mutual Fund	Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to Holding	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	2	3
	Statement (Admitted) Value	Fair Value	Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1 Bonds	310,841,123	333,051,992	22,210,869
30.2 Preferred stocks		2,000	2,000
30.3 Totals	310,841,123	333,053,992	22,212,869

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

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? $13,235

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
AMERICAN FRATERNAL ALLIANCE	7,659

34.1 Amount of payments for legal expenses, if any? $8,818

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
SHLESINGER ARKWRIGHT & GARVEY	6,059

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
	0

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 $...........................0

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. $...........................0

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?
QUADRENIALLY

7.2 When was the last regular meeting of the governing body held? 08/18/2014

7.3 When and where will the next regular or special meeting of the governing body be held?
UNDETERMINED

7.4 How many members of the governing body attended the last regular meeting? 328

7.5 How many of the same were delegates of the subordinate branches? 290

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 year ....0.0 %

16.12 Subsequent years ....0.0 %

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 Guaranteed Death Benefit	2 Guaranteed Living Benefit	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

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 P&C Insurance Company and Location	2 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

28.1 Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers? Yes [ ] No [ ] N/A [X]

28.2 If the answer to 28.1 is yes, please provide the following:

1	2	3	4	Assets Supporting Reserve Credit		
Company Name	NAIC Company Code	Domiciliary Jurisdiction	Reserve Credit	5 Letters of Credit	6 Trust Agreements	7 Other

29. Provide the following for Individual Ordinary Life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded):

29.1	Direct Premium Written	$.............1,558,833
29.2	Total incurred claims	$.............2,933,628
29.3	Number of covered lives	57,914

*Ordinary Life Insurance Includes:
Term (whether full underwriting, limited underwriting, jet issue, "short form app")
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")
Variable Life (with or without secondary guarantee)
Universal Life (with or without secondary guarantee)
Variable Universal Life (with or without secondary guarantee)

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 2014	2 2013	3 2012	4 2011	5 2010
Life Insurance in Force (Exhibit of Life Insurance)					
1. Total (Line 21, Column 2)	334,473	335,092	333,570	330,337	331,154
New Business Issued (Exhibit of Life Insurance)					
2. Total (Line 2, Column 2)	6,548	8,626	9,294	7,111	7,893
Premium Income (Exhibit 1, Part 1)					
3. Life insurance - first year (Line 9.4, Column 2)	31,364	30,463	28,382	22,970	31,943
4. Life insurance - single and renewal (Lines 10.4 and 19.4, Column 2)	1,497,693	1,484,606	1,532,357	1,394,064	1,485,213
5. Annuity (Line 20.4, Column 3)	15,341,389	20,701,238	18,090,136	14,055,956	32,118,507
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)	16,870,446	22,216,307	19,650,874	15,472,990	33,635,663
Balance Sheet Items (Pages 2 and 3)					
9. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3)	351,426,549	336,431,292	305,479,561	285,105,807	272,289,975
10. Total liabilities excluding Separate Accounts business (Page 3, Line 23)	327,276,867	313,749,681	284,832,989	266,121,790	254,770,111
11. Aggregate reserve for life certificates and contracts (Page 3, Line 1)	274,860,000	261,839,000	243,149,000	227,605,000	226,806,000
12. Aggregate reserve for accident and health certificates (Page 3, Line 2)					
13. Deposit-type contract funds (Page 3, Line 3)	42,849,920	40,717,575	29,587,520	26,045,653	15,213,178
14. Asset valuation reserve (Page 3, Line 21.1)	2,311,775	2,461,429	2,350,068	2,145,008	2,766,154
15. Surplus (Page 3, Line 30)	24,149,682	22,681,610	20,646,572	18,984,017	17,519,864
Cash Flow (Page 5)					
16. Net cash from operations (Line 11)	13,751,899	20,265,954	17,231,769	2,543,980	30,411,388
Risk-Based Capital Analysis					
17. Total Adjusted Capital	26,661,457	25,143,039	23,196,640	21,329,025	20,486,018
18. 50% of the Calculated RBC Amount	2,789,667	5,003,178	3,620,987	3,262,383	3,070,331
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)	89.5	90.4	93.2	90.5	88.9
20. Stocks (Lines 2.1 and 2.2)	1.0	1.8	1.3	2.0	3.2
21. Mortgage loans on real estate (Lines 3.1 and 3.2)	0.4	0.4	0.5	0.6	0.7
22. Real estate (Lines 4.1, 4.2 and 4.3)	0.7	0.7	0.8	0.9	1.0
23. Cash, cash equivalents and short-term investments (Line 5)	5.2	3.3	2.6	1.9	3.3
24. Contract loans (Line 6)	0.3	0.3	0.3	0.4	0.3
25. Derivatives (Line 7)					
26. Other invested assets (Line 8)	2.9	3.0	1.2	3.8	1.9
27. Receivable for securities (Line 9)					0.7
28. Securities lending reinvested collateral assets (Line 10)					
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)	600,804	593,623	559,432	394,606	358,574
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	600,804	593,623	559,432	394,606	358,574
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)	550	6,964	29,537	39,360	59,522
40. Total admitted assets (Page 2, Line 28, Col. 3)	351,426,549	336,431,292	305,479,561	285,105,807	272,289,975
Investment Data					
41. Net investment income (Exhibit of Net Investment Income, Line 17)	14,710,566	14,149,981	13,393,552	13,294,943	14,325,257
42. Realized capital gains (losses) (Page 4, Line 30, Column 1)	690,629	553,505	198,857	(1,269,681)	(855,477)
43. Unrealized capital gains (losses) (Page 4, Line 34, Column 1)	(723,683)	192,118	364,955	964,771	3,646,259
44. Total of above Lines 41, 42 and 43	14,677,512	14,895,604	13,957,364	12,990,033	17,116,040

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2014	2 2013	3 2012	4 2011	5 2010
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)	14,123,835	13,203,965	13,360,161	23,605,607	12,432,385
46. Total Certificate Benefits - Accident and Health (Line 13, Column 5)					
47. Increase in Life Reserves (Line 17, Column 2)	678,000	1,083,000	725,000	200,000	918,000
48. Increase in Accident and Health Reserves (Line 17, Column 5)					
49. Refunds to Members (Line 28, Column 1)	405,722	405,055	397,288	393,805	402,047
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	18.1	14.0	14.5	17.1	8.9
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	1.9	2.2	7.7	2.4	2.1
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)	1,133,637	1,958,823	1,215,338	1,036,748	1,622,583
58. Annuity (Column 3)	1,298,668	308,099	859,344	90,690	239,215
59. Supplementary Contracts (Column 4)					
60. Accident and Health (Column 5)					
61. Aggregate of All Other Lines of Business (Column 6)					2
62. Fraternal (Column 8)	(1,063,820)	(811,287)	(753,348)		
63. Expense (Column 9)					
64. Total (Column 1)	1,368,485	1,455,635	1,321,334	1,127,438	1,861,798

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:

EXHIBIT OF LIFE INSURANCE

	1 Number of Certificates	2 Amount of Insurance (a)
1. In force end of prior year	59,399	335,092
2. Issued during year	392	6,548
3. Reinsurance assumed		
4. Revived during year	96	1,812
5. Increased during year (net)	142	2,927
6. Subtotals, Lines 2 to 5	630	11,287
7. Additions by refunds during year	XXX	
8. Aggregate write-ins for increases	0	0
9. Totals (Line 1 plus Line 6 to Line 8)	60,029	346,379
Deductions During Year:		
10. Death	1,178	2,599
11. Maturity	42	40
12. Disability		
13. Expiry	159	2,055
14. Surrender	430	1,731
15. Lapse	295	4,772
16. Conversion	11	709
17. Decreased (net)		
18. Reinsurance		
19. Aggregate write-ins for decreases	0	0
20. Totals (Lines 10 to 19)	2,115	11,906
21. In force end of year (b) (Line 9 minus 20)	57,914	334,473
22. Reinsurance ceded end of year	XXX	10,389
23. Line 21 minus Line 22	XXX	324,084

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..........0 , Amount, $..........0.
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 [ ]
If not, how are such expenses met?...............

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			5,446	
2. Issued during year			434	
3. Reinsurance assumed				
4. Increased during year (net)				
5. TOTALS (Lines 1 to 4)	0	0	5,880	0
Deduction during year:				
6. Decreased during year (net)			316	
7. Reinsurance ceded				
8. TOTALS (Lines 6 and 7)	0	0	316	0
9. In force end of year (Line 5 minus Line 8)	0	0	5,564	0
10. Amount on deposit				XXX
Income now payable:				
11. Amount of income payable			1,919,438	XXX
Deferred fully paid:				
12. Account balance	XXX	XXX	4,907,852	XXX
Deferred not fully paid:				
13. Account balance	XXX	XXX	189,476,348	XXX

SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS

Allocated by States and Territories

	1	Direct Business					
		Life Contracts		4	5	6	7
States, Etc.	Active Status	2 Life Insurance Premiums	3 Annuity Considerations	Accident and Health Insurance Premiums, Including Policy, Membership and Other Fees	Other Considerations	Total Columns 2 through 5	Deposit-Type Contracts
1. Alabama AL	N					0	
2. Alaska AK	N					0	
3. Arizona AZ	L		553,423			553,423	
4. Arkansas AR	N					0	
5. California CA	N					0	
6. Colorado CO	L	12	76,375			76,387	
7. Connecticut CT	L	32,021	114,909			146,930	
8. Delaware DE	N					0	
9. District of Columbia DC	N					0	
10. Florida FL	L	8,563	104,838			113,401	
11. Georgia GA	L	2,010				2,010	
12. Hawaii HI	N					0	
13. Idaho ID	N					0	
14. Illinois IL	L	73,935	1,573,116			1,647,051	
15. Indiana IN	L	4,912	240,073			244,985	
16. Iowa IA	L		338,024			338,024	
17. Kansas KS	N					0	
18. Kentucky KY	L					0	
19. Louisiana LA	N					0	
20. Maine ME	N					0	
21. Maryland MD	L		28,500			28,500	
22. Massachusetts MA	L	2,229	21,000			23,229	
23. Michigan MI	L	41,243	464,881			506,125	
24. Minnesota MN	L	52,067	131,386			183,454	
25. Mississippi MS	N					0	
26. Missouri MO	L	74	100,000			100,074	
27. Montana MT	N					0	
28. Nebraska NE	L					0	
29. Nevada NV	L					0	
30. New Hampshire NH	N					0	
31. New Jersey NJ	L	61,240	460,433			521,673	
32. New Mexico NM	N					0	
33. New York NY	L	65,670	396,081			461,751	
34. North Carolina NC	L					0	
35. North Dakota ND	N					0	
36. Ohio OH	L	200,755	1,882,123			2,082,878	
37. Oklahoma OK	N					0	
38. Oregon OR	N					0	
39. Pennsylvania PA	L	616,428	7,349,775			7,966,203	
40. Rhode Island RI	N					0	
41. South Carolina SC	L					0	
42. South Dakota SD	N					0	
43. Tennessee TN	L		72,068			72,068	
44. Texas TX	L	68				68	
45. Utah UT	N					0	
46. Vermont VT	N					0	
47. Virginia VA	L	4,094	110,800			114,894	
48. Washington WA	N					0	
49. West Virginia WV	L	5,392	22,500			27,892	
50. Wisconsin WI	L	6,144	1,301,084			1,307,229	
51. Wyoming WY	N					0	
52. American Samoa AS	N					0	
53. Guam GU	N					0	
54. Puerto Rico PR	N					0	
55. US Virgin Islands VI	N					0	
56. Northern Mariana Islands MP	N					0	
57. Canada CAN	N					0	
58. Aggregate Other Alien OT	XXX	0	0	0	0	0	0
59. Subtotal	(a) 27	1,176,857	15,341,389	0	0	16,518,246	0
90. Reporting entity contributions for employee benefit plans.	XXX					0	
91. Dividends or refunds applied to purchase paid-up additions and annuities	XXX	389,222				389,222	
92. Dividends or refunds applied to shorten endowment or premium paying period	XXX					0	
93. Premium or annuity considerations waived under disability or other contract provisions	XXX					0	
94. Aggregate other amounts not allocable by State	XXX	0	0	0	0	0	0
95. Totals (Direct Business)	XXX	1,566,079	15,341,389	0	0	16,907,468	0
96. Plus Reinsurance Assumed	XXX					0	
97. Totals (All Business)	XXX	1,566,079	15,341,389	0	0	16,907,468	0
98. Less Reinsurance Ceded	XXX	25,492				25,492	
99. Totals (All Business) less reinsurance ceded	XXX	1,540,587	15,341,389	(b) 0	0	16,881,976	0
DETAILS OF WRITE-INS							
58001.	XXX					0	
58002.	XXX					0	
58003.	XXX					0	
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					0	
9402.	XXX					0	
9403.	XXX					0	
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

2013 ALPHABETICAL INDEX
FRATERNAL ANNUAL STATEMENT BLANK