FRATERNAL ORDERS - ASSOCIATION EDITION

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ANNUAL STATEMENT

For the Year Ended December 31, 2015

of the Condition and Affairs of the

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

NAIC Group Code..... 0, 0 (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 F. MATTA II	TREASURER	4. ANDREW R. HARCAR SR	VICE PRESIDENT

OTHER

GARY J. MATTA	GENERAL COUNSEL	EDWARD COWMAN	ACTUARY

DIRECTORS OR TRUSTEES

ANDREW MATHEW RAJEC	ANDREW R. HARCAR SR	KENNETH ANTHONY ARENDT	GEORGE F. MATTA II #
REV. THOMAS NASTA	RUDOLPH BERNATH	SABINA SABADOS #	HENRY HASSAY
KAREN HUNKA	JAMES MARMOL	MARTHA ZAVADA-WOJCIK #	MILOS MITRO
DAMIAN NASTA	RUDOLF ONDREJCO #	MICHAEL LAKO #	

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 F. MATTA II
1. (Printed Name)	2. (Printed Name)	3. (Printed Name)
PRESIDENT	EXECUTIVE SECRETARY	TREASURER
(Title)	(Title)	(Title)

Subscribed and sworn to before me
This 11TH day of FEBRUARY, 2016

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			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D)	337,753,840		337,753,840	310,841,123
2. Stocks (Schedule D):				
2.1 Preferred stocks			0	
2.2 Common stocks	2,253,872		2,253,872	3,392,431
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens	1,050,016		1,050,016	1,233,860
3.2 Other than first liens			0	
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less $.....0 encumbrances)	921,760		921,760	982,322
4.2 Properties held for the production of income (less $.....0 encumbrances)	694,710		694,710	733,770
4.3 Properties held for sale (less $.....0 encumbrances)	753,488		753,488	697,050
5. Cash ($.....12,383,475, Schedule E-Part 1), cash equivalents ($.....0, Schedule E-Part 2) and short-term investments ($.....0, Schedule DA)	12,383,475		12,383,475	18,176,699
6. Contract loans (including $.....0 premium notes)	1,093,309		1,093,309	1,095,600
7. Derivatives (Schedule DB)			0	
8. Other invested assets (Schedule BA)	5,334,377		5,334,377	10,084,740
9. Receivables for securities	4,626		4,626	
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)	362,243,472	0	362,243,472	347,237,594
13. Title plants less $.....0 charged off (for Title insurers only)			0	
14. Investment income due and accrued	4,597,179		4,597,179	4,170,118
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection	27,655		27,655	18,837
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) and contracts subject to redetermination ($.....0)			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers			0	
16.2 Funds held by or deposited with reinsured companies			0	
16.3 Other amounts receivable under reinsurance contracts			0	
17. Amounts receivable relating to uninsured plans			0	
18.1 Current federal and foreign income tax recoverable and interest thereon			0	
18.2 Net deferred tax asset			0	
19. Guaranty funds receivable or on deposit			0	
20. Electronic data processing equipment and software			0	
21. Furniture and equipment, including health care delivery assets ($.....0)	13,622	13,622	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)	366,882,478	14,172	366,868,306	351,426,549
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0	
28. TOTALS (Lines 26 and 27)	366,882,478	14,172	366,868,306	351,426,549
DETAILS OF WRITE-INS				
1101.			0	
1102.			0	
1103.			0	
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)	0	0	0	0
2501. Deposits 550	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)	287,620,117	275,090,990
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)	44,046,110	42,849,920
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)	55,184	55,410
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)	329,048	646,991
9.	Commissions to fieldworkers due or accrued-life and annuity contracts $.....0 ; accident and health $.....0 and deposit-type contract funds $.....0	18,128	28,595
10.	Commissions and expense allowances payable on reinsurance assumed		
11.	General expenses due or accrued (Exhibit 2, Line 12, Col. 7)	72,211	90,961
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)	17,949	13,589
14.	Unearned investment income		
15.	Amounts withheld or retained by Society as agent or trustee	4,838,147	5,106,290
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 $.....0		
21.	Miscellaneous liabilities:		
	21.1 Asset valuation reserve (AVR, Line 16, Col. 7)	2,191,650	2,311,775
	21.2 Reinsurance in unauthorized and certified ($.....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	572,835	372,835
23.	Total liabilities excluding Separate Accounts business (Lines 1 to 22)	340,470,890	327,276,867
24.	From Separate Accounts statement		
25.	Total liabilities (Lines 23 and 24)	340,470,890	327,276,867
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	26,397,416	24,149,682
30.	Total (Lines 26 through 29) (Page 4, Line 47) (including $.....0 in Separate Accounts statement)	26,397,416	24,149,682
31.	Totals (Lines 25 + 30) (Page 2, Line 28, Col. 3)	366,868,306	351,426,549

DETAILS OF WRITE-INS

2201.	Postretirement Reserve	311,868	311,868
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	250,000	50,000
2299.	Totals (Lines 2201 thru 2203 plus 2298) (Line 22 above)	572,835	372,835
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)	18,573,260	16,870,446
2.	Considerations for supplementary contracts with life contingencies		
3.	Net investment income (Exhibit of Net Investment Income, Line 17)	15,210,049	14,710,566
4.	Amortization of Interest Maintenance Reserve (IMR, Line 5)	485,630	476,440
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	498,789	21,467
9.	Totals (Lines 1 to 8.3)	34,767,728	32,078,919
10.	Death benefits	2,585,278	2,933,628
11.	Matured endowments (excluding guaranteed annual pure endowments)	6,511	
12.	Annuity benefits	12,877,281	10,266,961
13.	Disability benefits and benefits under accident and health contracts, including premiums waived $.....0		
14.	Surrender benefits and withdrawals for life contracts	632,257	923,246
15.	Interest and adjustments on contract or deposit-type contracts funds	145,400	159,895
16.	Payments on supplementary contracts with life contingencies		
17.	Increase in aggregate reserve for life and accident and health contracts	12,760,117	13,021,000
18.	Totals (Lines 10 to 17)	29,006,843	27,304,730
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)	268,813	183,350
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)	3,031,054	2,867,853
22.	Insurance taxes, licenses and fees (Exhibit 3, Line 6, Cols. 1, 2, 3 and 5)	108,167	100,024
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	(212,353)	(151,245)
26.	Totals (Lines 18 to 25)	32,202,524	30,304,712
27.	Net gain from operations before refunds to members (Line 9 minus Line 26)	2,565,204	1,774,207
28.	Refunds to members (Exhibit 4, Line 17, Cols. 1 + 2)	411,659	405,722
29.	Net gain from operations after refunds to members and before realized capital gains (losses) (Line 27 minus Line 28)	2,153,545	1,368,485
30.	Net realized capital gains (losses) less capital gains tax of $.....0 (excluding $.....167,687 transferred to the IMR)	(638,711)	690,629
31.	Net income (Lines 29 + 30)	1,514,834	2,059,114
	SURPLUS ACCOUNT		
32.	Surplus, December 31, previous year (Page 3, Line 30, Col. 2)	24,149,682	22,681,611
33.	Net income from operations (Line 31)	1,514,834	2,059,114
34.	Change in net unrealized capital gains (losses) less capital gains tax of $.....0	409,181	(723,683)
35.	Change in net unrealized foreign exchange capital gain (loss)		
36.	Change in nonadmitted assets	(13,622)	6,414
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	120,125	149,654
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	217,216	(23,428)
46.	Net change in surplus for the year (Lines 33 through 45)	2,247,734	1,468,071
47.	Surplus December 31, current year (Lines 32 + 46) (Page 3, Line 30)	26,397,416	24,149,682
	DETAILS OF WRITE-INS		
08.301.	ADVERTISING & SUBSCRIPTION INCOME	4,295	4,865
08.302.	RENTAL INCOME ON GROUNDS @ ESTATES	10,000	10,000
08.303.	MISCELLANOUS INCOME	484,494	6,602
08.398.	Summary of remaining write-ins for Line 8.3 from overflow page	0	0
08.399.	Totals (Lines 08.301 thru 08.303 plus 08.398) (Line 8.3 above)	498,789	21,467
2501.	NET CHANGE IN SETTLEMENT OPTIONS W/O LIFE	54,897	133,316
2502.	NET CHANGE IN PENSION FUND	(267,250)	(311,429)
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)	(212,353)	(151,245)
4501.	ACCRUAL & ASSET ADJUSTMENTS	(23,817)	(23,428)
4502.	TRF OF UNEARNED PREM RESRV & REINS CR TO RESERVES	241,033	
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)	217,216	(23,428)

CASH FLOW

		1 Current Year	2 Prior Year
	CASH FROM OPERATIONS		
1.	Premiums collected net of reinsurance	18,573,260	16,877,692
2.	Net investment income	16,147,268	15,342,750
3.	Miscellaneous income	498,789	21,467
4.	Total (Lines 1 through 3)	35,219,317	32,241,909
5.	Benefit and loss related payments	16,246,727	14,283,730
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7.	Commissions, expenses paid and aggregate write-ins for deductions	3,170,001	3,800,558
8.	Dividends paid to policyholders	411,659	405,722
9.	Federal and foreign income taxes paid (recovered) net of $.....0 tax on capital gains (losses)		
10.	Total (Lines 5 through 9)	19,828,386	18,490,010
11.	Net cash from operations (Line 4 minus Line 10)	15,390,930	13,751,899
	CASH FROM INVESTMENTS		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds	24,776,319	49,542,548
	12.2 Stocks	1,482,884	3,614,053
	12.3 Mortgage loans	198,844	365,770
	12.4 Real estate		
	12.5 Other invested assets	5,695,063	
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
	12.7 Miscellaneous proceeds		
	12.8 Total investment proceeds (Lines 12.1 to 12.7)	32,153,110	53,522,371
13.	Cost of investments acquired (long-term only):		
	13.1 Bonds	52,683,304	60,109,420
	13.2 Stocks	537,029	1,159,341
	13.3 Mortgage loans	15,000	
	13.4 Real estate	56,437	139,908
	13.5 Other invested assets	1,020,000	
	13.6 Miscellaneous applications	4,626	
	13.7 Total investments acquired (Lines 13.1 to 13.6)	54,316,396	61,408,669
14.	Net increase (decrease) in contract loans and premium notes	(2,291)	46,521
15.	Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14)	(22,160,995)	(7,932,819)
	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	1,196,190	2,132,344
	16.5 Dividends to stockholders		
	16.6 Other cash provided (applied)	(219,350)	(903,796)
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	976,840	1,228,548
	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)	(5,793,225)	7,047,628
19.	Cash, cash equivalents and short-term investments:		
	19.1 Beginning of year	18,176,699	11,129,071
	19.2 End of year (Line 18 plus Line 19.1)	12,383,475	18,176,699

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	18,573,261	1,541,720	17,031,541				18,573,261		
2. Considerations for supplementary contracts with life contingencies	0						0		
3. Net investment income	15,210,049	5,028,249	10,181,800				15,210,049		
4. Amortization of interest maintenance reserve (IMR)	485,630	485,630					485,630		
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	498,789	498,789	0	0	0	0	498,789	0	0
9. Totals (Lines 1 to 8.3)	34,767,729	7,554,388	27,213,341	0	0	0	34,767,729	0	0
10. Death benefits	2,585,278	2,585,278					2,585,278		
11. Matured endowments (excluding guaranteed annual pure endowments)	6,511	6,511					6,511		
12. Annuity benefits	12,877,281		12,877,281				12,877,281		
13. Disability benefits and benefits under accident and health contracts, including premiums waived $ 0	0						0		
14. Surrender benefits and withdrawals for life contracts	632,257	632,257					632,257		
15. Interest and adjustments on contract or deposit-type contract funds	145,400	145,400					145,400		
16. Payments on supplementary contracts with life contingencies	0						0		
17. Increase in aggregate reserve for life and accident and health certificates and contracts	12,760,117	1,183,440	11,576,677				12,760,117		
18. Totals (Lines 10 to 17)	29,006,844	4,552,886	24,453,958	0	0	0	29,006,844	0	0
19. Commissions on premiums and annuity considerations and deposit-type funds (direct business only)	268,813	39,779	229,034				268,813		
20. Commissions and expense allowances on reinsurance assumed	0						0		
21. General insurance expenses and fraternal expenses	3,031,054	672,880	1,347,790				2,020,670	1,010,384	
22. Insurance taxes, licenses and fees	108,167	108,167					108,167		
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	(212,353)	(212,353)	0	0	0	0	(212,353)	0	0
26. Totals (Lines 18 to 25)	32,202,525	5,161,359	26,030,782	0	0	0	31,192,141	1,010,384	0
27. Net gain from operations before refunds to members (Line 9 minus Line 26)	2,565,204	2,393,029	1,182,559	0	0	0	3,575,588	(1,010,384)	0
28. Refunds to members	411,659	411,659					411,659		
29. Net gain from operations after refunds to members and before realized capital gains or (losses) (Line 27 minus Line 28)	2,153,545	1,981,370	1,182,559	0	0	0	3,163,929	(1,010,384)	0
DETAILS OF WRITE-INS									
08.301. ADVERTISING & SUBSCRIPTION INCOME	4,295	4,295					4,295		
08.302. RENTAL INCOME ON GROUNDS @ ESTATES	10,000	10,000					10,000		
08.303. MISCELLANEOUS INCOME	484,494	484,494					484,494		
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)	498,789	498,789	0	0	0	0	498,789	0	0
2501. NET CHANGE IN SETTLEMENT OPTIONS W/O LIFE	54,897	54,897					54,897		
2502. NET CHANGE IN PENSION FUND	(267,250)	(267,250)					(267,250)		
2503. NET INCREASE IN POST-RETIREMENT RESERVE	0						0		
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)	(212,353)	(212,353)	0	0	0	0	(212,353)	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	274,860,000	75,144,000	199,716,000	
2. Tabular net premiums or considerations	18,547,495	1,515,954	17,031,541	
3. Present value of disability claims incurred	0			XXX
4. Tabular interest	11,025,859	3,849,362	7,176,497	
5. Tabular less actual reserve released	245,920		245,920	
6. Increase in reserve on account of change in valuation basis	0			
7. Other increases (net)	241,033	241,033		
8. Totals (Lines 1 to 7)	304,920,307	80,750,349	224,169,958	0
9. Tabular cost	2,982,707	2,982,707		XXX
10. Reserves released by death	801,436	801,436	XXX	XXX
11. Reserves released by other terminations (net)	638,766	638,766		
12. Annuity, supplementary contract and disability payments involving life contingencies	12,877,281		12,877,281	
13. Net transfers to or (from) separate accounts	0			
14. Total deductions (Lines 9 to 13)	17,300,190	4,422,909	12,877,281	0
15. Reserve December 31, current year	287,620,117	76,327,440	211,292,677	0

EXHIBIT OF NET INVESTMENT INCOME

		1 Collected During Year	2 Earned During Year
1.	U.S. government bonds	(a) 1,215,725	1,182,523
1.1	Bonds exempt from U.S. tax	(a)	
1.2	Other bonds (unaffiliated)	(a) 14,872,568	15,270,924
1.3	Bonds of affiliates	(a)	
2.1	Preferred stocks (unaffiliated)	(b)	
2.11	Preferred stocks of affiliates	(b)	
2.2	Common stocks (unaffiliated)	84,421	84,451
2.21	Common stocks of affiliates	150,000	150,000
3.	Mortgage loans	(c) 82,301	82,301
4.	Real estate	(d) 339,366	339,366
5.	Contract loans	61,613	61,613
6.	Cash, cash equivalents and short-term investments	(e) 30,459	30,459
7.	Derivative instruments	(f)	
8.	Other invested assets		
9.	Aggregate write-ins for investment income	(574,574)	(574,574)
10.	Total gross investment income	16,261,879	16,627,063
11.	Investment expenses		(g) 1,228,810
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g) 88,582
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)		1,417,014
17.	Net investment income (Line 10 minus Line 16)		15,210,049

DETAILS OF WRITE-INS

0901.	PENSION FUND EXPENSE	(574,574)	(574,574)
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)	(574,574)	(574,574)
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 $.....143,140 accrual of discount less $.....1,341,560 amortization of premium and less $.....456,142 paid for accrued interest on purchases.
(b) Includes $.....0 accrual of discount less $.....0 amortization of premium and less $.....0 paid for accrued dividends on purchases.
(c) Includes $.....0 accrual of discount less $.....0 amortization of premium and less $.....0 paid for accrued interest on purchases.
(d) Includes $.....0 for company's occupancy of its own buildings; and excludes $.....0 interest on encumbrances.
(e) Includes $.....0 accrual of discount less $.....0 amortization of premium and less $.....0 paid for accrued interest on purchases.
(f) Includes $.....0 accrual of discount less $.....0 amortization of premium.
(g) Includes $.....1,228,810 investment expenses and $.....88,582 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)	167,686		167,686	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)	(638,710)		(638,710)	384,710	
2.21	Common stocks of affiliates			0	61,271	
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	(75,300)	
9.	Aggregate write-ins for capital gains (losses)	0	0	0	0	0
10.	Total capital gains (losses)	(471,024)	0	(471,024)	409,181	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	12,874,641	23,768	12,850,873			12,874,641		
6.2 Reinsurance assumed	0					0		
6.3 Reinsurance ceded	0					0		
6.4 Net	12,874,641	23,768	12,850,873	0	0	12,874,641	0	0
7. Line 5 + Line 6.4	12,874,641	23,768	12,850,873	0	0	12,874,641	0	0
8. Prior year (uncollected + deferred and accrued - advance)	0					0		
9. First year premiums and considerations:								
9.1 Direct	12,874,641	23,768	12,850,873			12,874,641		
9.2 Reinsurance assumed	0					0		
9.3 Reinsurance ceded	0					0		
9.4 Net (Line 7 - Line 8)	12,874,641	23,768	12,850,873	0	0	12,874,641	0	0
SINGLE								
10. Single premiums and considerations:								
10.1 Direct	719,558	719,558				719,558		
10.2 Reinsurance assumed	0					0		
10.3 Reinsurance ceded	0					0		
10.4 Net	719,558	719,558	0	0	0	719,558	0	0
RENEWAL								
11. Uncollected	27,655	27,655				27,655		
12. Deferred and accrued	0					0		
13. Deferred, accrued & uncollected:								
13.1 Direct	27,655	27,655				27,655		
13.2 Reinsurance assumed	0					0		
13.3 Reinsurance ceded	0					0		
13.4 Net (Line 11 + Line 12)	27,655	27,655	0	0	0	27,655	0	0
14. Advance	55,184	55,184				55,184		
15. Line 13.4 - Line 14	(27,529)	(27,529)	0	0	0	(27,529)	0	0
16. Collected during year:								
16.1 Direct	4,999,748	819,080	4,180,668			4,999,748		
16.2 Reinsurance assumed	0					0		
16.3 Reinsurance ceded	21,261	21,261				21,261		
16.4 Net	4,978,487	797,819	4,180,668	0	0	4,978,487	0	0
17. Line 15 + Line 16.4	4,950,958	770,290	4,180,668	0	0	4,950,958	0	0
18. Prior year (uncollected + deferred and accrued - advance)	(28,104)	(28,104)				(28,104)		
19. Renewal premiums and considerations:								
19.1 Direct	5,000,322	819,654	4,180,668			5,000,322		
19.2 Reinsurance assumed	0					0		
19.3 Reinsurance ceded	21,261	21,261				21,261		
19.4 Net (Line 17 - Line 18)	4,979,062	798,394	4,180,668	0	0	4,979,062	0	0
TOTAL								
20. Total premiums and annuity considerations:								
20.1 Direct	18,594,521	1,562,980	17,031,541	0	0	18,594,521	0	0
20.2 Reinsurance assumed	0	0	0	0	0	0	0	0
20.3 Reinsurance ceded	21,261	21,261	0	0	0	21,261	0	0
20.4 Net (Lines 9.4 + 10.4 + 19.4)	18,573,261	1,541,720	17,031,541	0	0	18,573,261	0	0

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

	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
REFUNDS APPLIED (included in Part 1)								
21. To pay renewal premiums	994	994				994		
22. All other	410,665	410,665				410,665		
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)	222,878	26,450	196,428			222,878		
28. Single	9,752	9,752				9,752		
29. Renewal	36,183	3,577	32,606			36,183		
30. Deposit-type contract funds	0					0		
31. Totals (to agree with Page 6, Line 19)	268,813	39,779	229,034	0	0	268,813	0	0

EXHIBIT 2 - GENERAL EXPENSES

		Insurance				5	6	7
		1	Accident and Health		4			
			2	3	Aggregate of			
		Life	Cost Containment	All Other	All Other Lines of Business	Investment	Fraternal	Total
1.	Rent	124,876				2,000	15,057	141,933
2.	Salaries and wages	951,550				47,000	36,000	1,034,550
3.11	Insured benefit plans for employees	118,295					20,000	138,295
3.12	Insured benefit plans for fieldworkers							0
3.21	Uninsured benefit plans for employees	39,140						39,140
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	113,470					4,728	118,198
4.2	Medical examination fees	10,265						10,265
4.3	Inspection report fees							0
4.4	Fees of public accountants and consulting actuaries	202,009					10,000	212,009
4.5	Expense of investigation and settlement of certificate claims							0
5.1	Traveling expenses	83,893				3,000	20,000	106,893
5.2	Advertising	31,675					1,000	32,675
5.3	Postage, express, telegraph and telephone	77,810					15,000	92,810
5.4	Printing and stationery	46,707					6,000	52,707
5.5	Cost or depreciation of furniture and equipment	5,638					34,414	40,052
5.6	Rental of equipment	15,817						15,817
5.7	Cost or depreciation of EDP equipment and software	71,860					5,000	76,860
5.8	Lodge supplies less $.....0 from sales							0
6.1	Books and periodicals	8,911					2,800	11,711
6.2	Bureau and association dues	12,600					2,050	14,650
6.3	Insurance, except on real estate	71,365						71,365
6.4	Miscellaneous losses							0
6.5	Collection and bank service charges	25,208						25,208
6.6	Sundry general expenses					106,717		106,717
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						218,225	218,225
8.2	Expense of Supreme Lodge Meetings						205,155	205,155
9.1	Real estate expenses					128,141		128,141
9.2	Investment expenses not included elsewhere					941,952		941,952
9.3	Aggregate write-ins for expenses	0	0	0	0	0	424,535	424,535
10.	General Expenses Incurred	2,011,089	0	0	0	1,228,810	(a) 1,019,964	(b) 4,259,863
11.	General expenses unpaid December 31, prior year						90,961	90,961
12.	General expenses unpaid December 31, current year						72,211	72,211
13.	General expenses paid during year (Lines 10 + 11 - 12)	2,011,089	0	0	0	1,228,810	1,038,714	4,278,613
	DETAILS OF WRITE-INS							
09.301	SCHOLARSHIPS,DONATIONS,ATHLETICS,FRATERNAL AWAR						424,535	424,535
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	424,535	424,535

(a) Show the distribution of this amount in the following categories:
1. Charitable $.....0; 2. Institutional $.....424,534; 3. Recreational and Health $.....0; 4. Educational $.....0
5. Religious $.....221,026; 6. Membership $.....374,406; 7. Other $.....0; 8. Total $.....1,019,966

(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				88,582		88,582
2.	State insurance department licenses and fees	29,166					29,166
3.	Other state taxes, including $.....0 for employee benefits	5,085					5,085
4.	U.S. Social Security taxes	73,916					73,916
5.	All other taxes						0
6.	Taxes, licenses and fees Incurred	108,167	0	0	88,582	0	196,749
7.	Taxes, licenses and fees unpaid December 31, prior year				13,589		13,589
8.	Taxes, licenses and fees unpaid December 31, current year				17,949		17,949
9.	Taxes, licenses and fees paid during year (Lines 6 + 7 - 8)	108,167	0	0	84,222	0	192,389

EXHIBIT 4 - DIVIDENDS OR REFUNDS

		1	2
		Life	Accident and Health
1.	Applied to pay renewal premiums	994	
2.	Applied to shorten the endowment or premium-paying period		
3.	Applied to provide paid-up additions	392,400	
4.	Applied to provide paid-up annuities		
5.	Total (Lines 1 to 4)	393,393	0
6.	Paid-in cash	7,600	
7.	Left on deposit	10,665	
8.	Aggregate write-ins for dividend or refund	0	0
9.	Total (Lines 5 to 8)	411,659	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)	411,659	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%	21,285		21,285		
0100002. AM(5) 3%	504,174		504,174		
0100003. 41 CSO 2.5%	5,826		5,826		
0100004. 58 CSO 3% & 4.5%	2,912,287		2,912,287		
0100005. 80 CSO 4.5%	18,375,713		18,375,713		
0100006. 80 CSO 5%	1,434,651		1,434,651		
0100007. 80 CSO 5.5%	40,335,120		40,335,120		
0100008. 80 CSO 6%	7,725,536		7,725,536		
0100009. 2001 CSO 4.5%	160,778		160,778		
0100010. 2001 CSO 4.0%	3,721,435		3,721,435		
0100011. 2001 CSO 3.5%	889,602		889,602		
0100012. Unearned Premium Reserve	227,858		227,858		
0100013. Reinsurance Reserve Credit	(23,825)		(23,825)		
0199997. Totals (Gross)	76,290,440	0	76,290,440	0	0
0199999. Totals (Net)	76,290,440	0	76,290,440	0	0
Annuities (excluding supplementary contracts with life contingencies):					
0200001. SPDA, FPDA	203,229,595	XXX	203,229,595	XXX	
0200002. SPIA	968,078	XXX	968,078	XXX	
0200003. Home Office Pension	6,895,004	XXX	6,895,004	XXX	
0200004. Voluntary Extra	200,000	XXX	200,000	XXX	
0299997. Totals (Gross)	211,292,677	XXX	211,292,677	XXX	0
0299999. Totals (Net)	211,292,677	XXX	211,292,677	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	287,620,117	0	287,620,117	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	
Description of Valuation Class	Changed From	Changed To	Increase in Actuarial Reserve Due To Change

NONE

EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS

	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	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

NONE

(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	42,849,920		825,137		214,509	41,810,274
2. Deposits received during the year	1,196,190		193,796		14,477	987,917
3. Investment earnings credited to the account	0					
4. Other net change in reserves	0					
5. Fees and other charges assessed	0					
6. Surrender charges	0					
7. Net surrender or withdrawal payments	0					
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)	44,046,110	0	1,018,933	0	228,986	42,798,191
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)	44,046,110	0	1,018,933	0	228,986	42,798,191

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	150,330		150,330								
1.2 Reinsurance assumed	0										
1.3 Reinsurance ceded	0										
1.4 Net	150,330	0	150,330	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	149,670		149,670								
3.2 Reinsurance assumed	0										
3.3 Reinsurance ceded	0										
3.4 Net	149,670	0	(b) 149,670	(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	15,469,070		2,591,789	12,877,281							
1.2 Reinsurance assumed	0										
1.3 Reinsurance ceded	0										
1.4 Net	(d) 15,469,070	0	2,591,789	12,877,281	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	15,469,070	0	2,591,789	12,877,281	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	15,469,070	0	2,591,789	12,877,281	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 $.....6,511 in Line 1.1, $.....0 in Line 1.4, $.....0 in Line 6.1 and $.....0 in line 6.4.

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

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

EXHIBIT OF NONADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D)			0
2. Stocks (Schedule D):			
2.1 Preferred stocks			0
2.2 Common stocks			0
3. Mortgage loans on real estate (Schedule B):			
3.1 First liens			0
3.2 Other than first liens			0
4. Real estate (Schedule A):			
4.1 Properties occupied by the company			0
4.2 Properties held for the production of income			0
4.3 Properties held for sale			0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA)			0
6. Contract loans			0
7. Derivatives (Schedule DB)			0
8. Other invested assets (Schedule BA)			0
9. Receivables for securities			0
10. Securities lending reinvested collateral assets (Schedule DL)			0
11. Aggregate write-ins for invested assets	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11)	0	0	0
13. Title plants (for Title insurers only)			0
14. Investment income due and accrued			0
15. Premiums and considerations:			
15.1 Uncollected premiums and agents' balances in the course of collection			0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due			0
15.3 Accrued retrospective premiums and contracts subject to redetermination			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	13,622		(13,622)
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	550	550	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25)	14,172	550	(13,622)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0
28. TOTALS (Lines 26 and 27)	14,172	550	(13,622)

DETAILS OF WRITE-INS

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

NOTES TO FINANCIAL STATEMENTS

NOTE 1 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES AND GOING CONCERN

A. Accounting Practices

	State of Domicile	2015	PRIOYEAR
NET INCOME			
(1) First Catholic Slovak Union of the United States of America & Canada state basis (Page 4, Line 35, Columns 1 & 2)	OH	$ 1,514,834	$ 2,059,114
(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	$ 1,514,834	$ 2,059,114
SURPLUS			
(5) First Catholic Slovak Union of the United States of America & Canada state basis (Page 3, line 37, Columns 1 & 2)	OH	$ 26,397,416	$ 24,149,682
(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	$ 26,397,416	$ 24,149,682

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 tot he 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.

Going Concern - Not Applicable

NOTES TO FINANCIAL STATEMENTS

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.

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 2015 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:

				Farm	Residential		Commercial		Mezzanine	Total
					Insured	All Other	Insured	All Other		
a.	Current Year									
	1.	Recorded Investment (All)								
		(a)	Current		1,050,016					1,050,016
		(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							
b.	Prior 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							

NOTE 6 – JOINT VENTURES, PARTNERSHIPS AND LIMITED LIABILITY COMPANIES

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

NOTES TO FINANCIAL STATEMENTS

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.

NOTE 11 – DEBT

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

(1-12) 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	301,711	301,711	
(b) Membership Stock – Class B			
(c) Activity Stock	1,134,889	1,134,889	
(d) Excess Stock			
(e) Aggregate Total	1,436,600	1,436,600	
(f) Actual or estimated borrowing capacity as determined by the insurer	48,249,291	XXX	XXX

2. Prior 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	52,012,318	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	1,436,600	1,436,600				
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

NOTES TO FINANCIAL STATEMENTS

	Fair Value	Carrying Value	Aggregate Total Borrowing
Total Collateral Pledged	60,813,295	57,222,367	42,799,096

2. Current Year General Account

	Fair Value	Carrying Value	Aggregate Total Borrowing
Total Collateral Pledged	60,813,295	57,222,367	42,799,096

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	59,298,000	62,000,000	41,738,886

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	60,813,295	57,222,367	42,799,096

2. Current Year General Account

	Fair Value	Carrying Value	Amount Borrowed at Time of Maximum Collateral
Total Collateral Pledged	60,813,295	57,222,367	42,799,096

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	59,298,000	62,000,000	41,738,886

(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	42,799,096	42,799,096		XXX
(d) Aggregate Total	42,799,096	42,799,096		

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	42,026,409	42,026,409		XXX
(d) Aggregate Total	42,026,409	42,026,409		

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	46,407,119	46,407,119	
4. Aggregate Total	46,407,119	46,407,119	

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

NOTES TO FINANCIAL STATEMENTS

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		2015	2014	2015	2014
	1.	Benefit obligation at beginning of year	6,484,993	6,274,630		
	2.	Service cost	117,242	81,147		
	3.	Interest cost	348,205	338,780		
	4.	Continuation by plan participants				
	5.	Actuarial gain (loss)	193,371	21,453		
	6.	Foreign currency exchange rate changes				
	7.	Benefits paid	(307,324)	231,017		
	8.	Plan amendments				
	9.	Business combinations, divestitures, curtailments, settlements and special termination benefits				
	10.	Benefit obligation at end of year	6,836,847	6,484,993		

			Overfunded		Underfunded	
b.	Postretirement Benefits		2015	2014	2015	2014
	1.	Benefit obligation at beginning of year	311,868	284,160		
	2.	Service cost	3,095	3,724		
	3.	Interest cost	18,712	17,050		
	4.	Continuation by plan participants				
	5.	Actuarial gain (loss)	54,865	18,154		
	6.	Foreign currency exchange rate changes				
	7.	Benefits paid	(13,920)	11,220		
	8.	Plan amendments				
	9.	Business combinations, divestitures, curtailments, settlements and special termination benefits				
	10.	Benefit obligation at end of year	379,620	311,868		

			Overfunded		Underfunded	
c.	Postemployment & Compensated Absence Benefits		2015	2014	2015	2014
	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	
			2015	2014	2015	2014	2015	2014
	a.	Fair value of plan assets at beginning of year	6,627,754	6,316,324	284,160	265,000		
	b.	Actual return on plan assets		292,447	0			
	c.	Foreign currency exchange rate changes						
	d.	Reporting entity contribution	267,250	250,000	0	32,380		
	e.	Plan participants' contributions						
	f.	Benefits paid		231,017	13,920	13,220		
	g.	Business combinations, divestitures and settlements			0			
	h.	Fair value of plan assets at end of year	6,895,004	6,627,754	270,240	284,160		

(3)	Funded status		Pension Benefits		Postretirement Benefits	
	Overfunded:		2015	2014	2015	2014
	a.	Assets (nonadmitted)				
		1. Prepaid benefit costs	617,124	505,140	306,526	298,640

NOTES TO FINANCIAL STATEMENTS

	2.	Overfunded plans assets	(558,607)	(362,379)	38,342	13,228
	3.	Total assets (nonadmited)	58,517	142,761	344,868	311,868
Underfunded:						
b.	Liabilities recognized					
	1.	Accrued benefits costs				
	2.	Liability for pension benefits				
	3.	Total liabilities recognized				
c.	Unrecognized liabilities					

(4)

	Components of net periodic benefit cost	Pension Benefits		Postretirement Benefits		Postemployment	
		2015	2014	2015	2014	2015	2014
a.	Service cost	117,242	81,147	3,095	3,724		
b.	Interest cost	348,205	338,780	18,232	16,450		
c.	Expected return on plan assets	(363,619)	(347,948)	480	600		
d.	Transition asset or obligation	61,188	61,188		8,467		
e.	Gains and losses						
f.	Prior service cost or credit						
g.	Gain or loss recognized due to a settlements curtailment						
h.	Total net periodic benefit cost	163,016	133,167	21,807	29,241		

(5)

	Amounts in unassigned funds (surplus) recognized as components of net periodic benefit cost	Pension Benefits		Postretirement Benefits	
		2015	2014	2015	2014
a.	Items not yet recognized as a component of net periodic cost – prior year	(362,379)	(346,613)	13,228	3,541
b.	Net transition asset or obligation recognized	61,188	61,188	1	(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	(257,416)	(76,954)	59,865	18,154
f.	Net gain and loss recognized				
g.	Items not yet recognized as a component of net periodic cost – current year	(558,607)	(362,379)	73,094	13,228

(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	
		2015	2014	2015	2014
a.	Net transition asset or obligations	61,183	61,188		
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	
		2015	2014	2015	2014
a.	Net transition asset or obligations	61,183	122,371		
b.	Net prior service cost or credit				
c.	Net recognized gains and losses	497,424	240,008	73,094	13,225

(8)

	Weighted-average assumptions used to determine net periodic benefit cost as of December 31	2015	2014
a.	Weighted-average discount rate	5.50%	5.50%
b.	Expected long-term rate of return on plan assets	5.50%	5.50%
c.	Rate of compensation increase	2.50%	2.50%
	Weighted-average assumptions used to determine projected benefit obligations as of December 31		
d.	Weighted-average discount rate	5.50%	5.50%
e.	Rate of compensation increase	2.50%	2.50%

(9) The amount of the accumulated benefit obligation for defined benefit pension plans was $6,546,419 for the current year and $6,242,265 for the prior year.

(10) N/A

(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 N/A		
b.	Effect on postretirement benefit obligation N/A		

NOTES TO FINANCIAL STATEMENTS

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

	Year(s)	Amount
a.	2016	347,030
b.	2017	426,394
c.	2018	435,920
d.	2019	435,545
e.	2020	453,152
f.	2021 through 2025	2,469,010

(13) The Society does not have any regulatory contribution requirements for 2015, however, the Society currently intends to make voluntary contributions to the defined benefit pension plan in an amount that is considered appropriate.

(14) Employer Group Annuity or Direct Participation Account:

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

2015	2014
$6,895,004	$6,627,754

(15-21) N/A

B. Investment Policies and Strategies - None

C. Fair Value of Plan Assets

(1) Fair Value Measurements of Plans Assets at Reporting Date: Group Annuity has similiar components as general account description of each class of plan assets.

(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.

(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 or 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)

(1-3) 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.

NOTES TO FINANCIAL STATEMENTS

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.

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	2,253,872			2,253,872
Bonds-Parent, Subsidaries	61,271			61,271
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.

NOTES TO FINANCIAL STATEMENTS

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

NOTE 31 – RESERVES FOR LIFE CONTRACTS AND DEPOSIT-TYPE 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

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 market value adjustment	$	$	$	$	%
	(2)	At book value less current surrender charge of 5% or more	27,203,246			27,203,246	10.654%
	(3)	At fair value	52,109,192			52,109,192	20.408%
	(4)	Total with market value adjustment or at fair value (total of 1 through 3)	79,312,438			79,312,438	31.062%
	(5)	At book value without adjustment (minimal or no charge or adjustment)	176,026,349			176,026,349	68.938%
B.	Not subject to discretionary withdrawal						%
C.	Total (gross: direct + assumed)		255,338,787			255,338,787	100.000%
D.	Reinsurance ceded						
E.	Total (net (C) - (D)		$ 255,338,787	$	$	$ 255,338,787	

F. Life and Accident & Health Annual Statement:

(1)	Exhibit 5, Annuities, Total (net)	$ 211,292,677
(2)	Exhibit 5, Supplementary contracts with life contingencies, Total (net)	
(3)	Exhibit 7, Deposit-type contracts, Line 14, Column 1	44,046,110

NOTES TO FINANCIAL STATEMENTS

(4)	Subtotal	$ 255,338,787
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	$ 255,338,787

NOTE 33 – PREMIUM AND ANNUITY CONSIDERATIONS DEFERRED AND UNCOLLECTED

N/A

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 [X] No [ ]

2.2 If yes, date of change: 01/01/2015

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 name of 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 Company 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 with 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 the response to 8.3 is yes, please provide below 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 other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [ ] No [X]

10.4 If the response to 10.3 is yes, provide information related to this exemption:

10.5 Has the reporting entity established an Audit Committee in compliance with the domiciliary state insurance laws? Yes [X] No [ ] N/A [ ]

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

10.6 If the response 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 MILLER & NEWBERG INC. 8717 WEST 110TH ST, SUITE 530 OVERLAND PARK KS 66210

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	0
12.13	Total book/adjusted carrying value	$ 0

12.2 If yes, provide explanation

13. **FOR UNITED STATES BRANCES 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

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 subordinator committee thereof? Yes [X] No [ ]

17. Does the reporting entity keep a complete permanent record of the proceedings of its Board of Directors an all subordinator 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 [ ]

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 reporting 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	$ 0
21.22	Borrowed from others	$ 0
21.23	Leased from others	$ 0
21.24	Other	$ 0

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	$ 0
22.22	Amount paid as expenses	$ 0
22.23	Other amounts paid	$ 0

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

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: $ 0

INVESTMENT

24.01 Were all of 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. $ 0

24.06 If answer to 24.04 is no, report amount of collateral for other programs $ 0

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: $ 0

24.102 Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2: $ 0

24.103 Total payable for securities lending reported on the liability page: $ 0

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 current 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 of the current year:

25.21	Subject to repurchase agreements	$ 0
25.22	Subject to reverse repurchase agreements	$ 0
25.23	Subject to dollar repurchase agreements	$ 0
25.24	Subject to reverse dollar repurchase agreements	$ 0
25.25	Placed under option agreements	$ 0
25.26	Letter stock or securities restricted as sale – excluding FHLB Capital Stock	$ 0
25.27	FHLB Capital Stock	$ 0
25.28	On deposit with states	$ 0
25.29	On deposit with other regulatory bodies	$ 0
25.30	Pledged as collateral – excluding collateral pledged to an FHLB	$ 0
25.31	Pledged as collateral to FHLB – including assets backing funding agreements	$ 0
25.32	Other	$ 0

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 of the current year: $ 0

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

1 Name of Custodian(s)	2 Custodian 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, broker/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:

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

1 Central Registration Depository	2 Name(s)	3 Address

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

29.2 If yes, complete the following schedule:

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

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

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

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

		1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1	Bonds	337,753,840	338,727,941	974,101
30.2	Preferred Stocks	0	3,072	3,072
30.3	Totals	337,753,840	338,731,013	977,173

30.4 Describe the sources or methods utilized in determining 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 reliance 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 Investment Analysis Office* been followed? Yes [X] No [ ]

32.2 If no, list exceptions:

OTHER

33.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any? $ 14,650

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	$ 9,075

34.1 Amount of payments for legal expenses, if any? $ 118,198

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
BUCHANAN INGERSOLL & ROONEY	$ 86,557

35.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any? $ 0

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

1 Name	2 Amount Paid
	$

GENERAL INTERROGATORIES

PART 2 – LIFE INTERROGATORIES

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force?	Yes [ ] No [X]
1.2	If yes, indicate premium earned on U.S. business only.	$
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?	$
	1.31 Reason for excluding:	
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2 above.	$
1.5	Indicate total incurred claims on all Medicare Supplement insurance.	$
1.6	Individual policies:	
	Most current three years:	
	1.61 Total premium earned	$
	1.62 Total incurred claims	$
	1.63 Number of covered lives	$
	All years prior to most current three years:	
	1.64 Total premium earned	$
	1.65 Total incurred claims	$
	1.66 Number of covered lives	$
1.7	Group policies:	
	Most current three years:	
	1.71 Total premium earned	$
	1.72 Total incurred claims	$
	1.73 Number of covered lives	$
	All years prior to most current three years:	
	1.74 Total premium earned	$
	1.75 Total incurred claims	$
	1.76 Number of covered lives	$
2.1	Does the 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 OVER 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?	08/01/2014
7.3	When and where will the next regular or special meeting of the governing body be held?	
	TO BE DETERMINED	
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	

GENERAL INTERROGATORIES

PART 2 – LIFE INTERROGATORIES

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 year's payments may be used for management expenses?

16.11 First Year _____ %

16.12 Subsequent Years _____ %

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 all of the laws, rules and regulations in force at the present time? 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, on an 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 where 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: $ _____

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 accounts? 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]

GENERAL INTERROGATORIES

PART 2 – LIFE INTERROGATORIES

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

1	2	3	4	Assets Supporting Reserve Credit		
				5	6	7
Company Name	NAIC Company Code	Domiciliary Jurisdiction	Reserve Credit	Letters of Credit	Trust Agreements	Other
	0					

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 Premiums Written $

29.2 Total Incurred Claims $

29.3 Number of Covered Lives

*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 2015	2 2014	3 2013	4 2012	5 2011
	Life Insurance in Force (Exhibit of Life Insurance)					
1.	Total (Line 21, Column 2)	332,340	334,473	335,092	333,570	330,337
	New Business Issued (Exhibit of Life Insurance)					
2.	Total (Line 2, Column 2)	5,621	6,548	8,626	9,294	7,111
	Premium Income (Exhibit 1, Part 1)					
3.	Life insurance - first year (Line 9.4, Column 2)	23,768	31,364	30,463	28,382	22,970
4.	Life insurance - single and renewal (Lines 10.4 and 19.4, Column 2)	1,517,952	1,497,693	1,484,606	1,532,357	1,394,064
5.	Annuity (Line 20.4, Column 3)	17,031,541	15,341,389	20,701,238	18,090,136	14,055,956
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)	18,573,261	16,870,446	22,216,307	19,650,874	15,472,990
	Balance Sheet Items (Pages 2 and 3)					
9.	Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3)	366,868,306	351,426,549	336,431,292	305,479,561	285,105,807
10.	Total liabilities excluding Separate Accounts business (Page 3, Line 23)	340,470,890	327,276,867	313,749,681	284,832,989	266,121,790
11.	Aggregate reserve for life certificates and contracts (Page 3, Line 1)	287,620,117	274,860,000	261,839,000	243,149,000	227,605,000
12.	Aggregate reserve for accident and health certificates (Page 3, Line 2)					
13.	Deposit-type contract funds (Page 3, Line 3)	44,046,110	42,849,920	40,717,575	29,587,520	26,045,653
14.	Asset valuation reserve (Page 3, Line 21.1)	2,191,650	2,311,775	2,461,429	2,350,068	2,145,008
15.	Surplus (Page 3, Line 30)	26,397,416	24,149,682	22,681,610	20,646,572	18,984,017
	Cash Flow (Page 5)					
16.	Net cash from operations (Line 11)	15,390,930	13,751,899	20,265,954	17,231,769	2,543,980
	Risk-Based Capital Analysis					
17.	Total Adjusted Capital	28,789,066	26,661,457	25,143,039	23,196,640	21,329,025
18.	50% of the Calculated RBC Amount	3,373,467	2,789,667	5,003,178	3,620,987	3,262,383
	Percentage Distribution of Cash, Cash Equivalent and Invested Assets (Page 2, Col. 3) (Line No. ÷ Page 2, Line 12, Col. 3) x 100.0					
19.	Bonds (Line 1)	93.2	89.5	90.4	93.2	90.5
20.	Stocks (Lines 2.1 and 2.2)	0.6	1.0	1.8	1.3	2.0
21.	Mortgage loans on real estate (Lines 3.1 and 3.2)	0.3	0.4	0.4	0.5	0.6
22.	Real estate (Lines 4.1, 4.2 and 4.3)	0.7	0.7	0.7	0.8	0.9
23.	Cash, cash equivalents and short-term investments (Line 5)	3.4	5.2	3.3	2.6	1.9
24.	Contract loans (Line 6)	0.3	0.3	0.3	0.3	0.4
25.	Derivatives (Line 7)					
26.	Other invested assets (Line 8)	1.5	2.9	3.0	1.2	3.8
27.	Receivable for securities (Line 9)	0.0				
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)	662,075	600,804	593,623	559,432	394,606
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	662,075	600,804	593,623	559,432	394,606
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)	14,172	550	6,964	29,537	39,360
40.	Total admitted assets (Page 2, Line 28, Col. 3)	366,868,306	351,426,549	336,431,292	305,479,561	285,105,807
	Investment Data					
41.	Net investment income (Exhibit of Net Investment Income, Line 17)	15,210,049	14,710,566	14,149,981	13,393,552	13,294,943
42.	Realized capital gains (losses) (Page 4, Line 30, Column 1)	(638,711)	690,629	553,505	198,857	(1,269,681)
43.	Unrealized capital gains (losses) (Page 4, Line 34, Column 1)	409,181	(723,683)	192,118	364,955	964,771
44.	Total of above Lines 41, 42 and 43	14,980,519	14,677,512	14,895,604	13,957,364	12,990,033

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2015	2 2014	3 2013	4 2012	5 2011
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)	16,101,327	14,123,835	13,203,965	13,360,161	23,605,607
46. Total Certificate Benefits - Accident and Health (Line 13, Column 5)					
47. Increase in Life Reserves (Line 17, Column 2)	1,183,440	678,000	1,083,000	725,000	200,000
48. Increase in Accident and Health Reserves (Line 17, Column 5)					
49. Refunds to Members (Line 28, Column 1)	411,659	405,722	405,055	397,288	393,805
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	17.8	18.1	14.0	14.5	17.1
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	2.3	1.9	2.2	7.7	2.4
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)	1,981,370	1,133,637	1,958,823	1,215,338	1,036,748
58. Annuity (Column 3)	1,182,559	1,298,668	308,099	859,344	90,690
59. Supplementary Contracts (Column 4)					
60. Accident and Health (Column 5)					
61. Aggregate of All Other Lines of Business (Column 6)					
62. Fraternal (Column 8)	(1,010,384)	(1,063,820)	(811,287)	(753,348)	
63. Expense (Column 9)					
64. Total (Column 1)	2,153,545	1,368,485	1,455,635	1,321,334	1,127,438

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	57,914	334,473
2.	Issued during year	386	5,621
3.	Reinsurance assumed		
4.	Revived during year	110	2,073
5.	Increased during year (net)	147	3,103
6.	Subtotals, Lines 2 to 5	643	10,797
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)	58,557	345,270
	Deductions During Year:		
10.	Death	1,019	2,336
11.	Maturity	43	40
12.	Disability		
13.	Expiry	173	2,180
14.	Surrender	421	1,641
15.	Lapse	315	6,188
16.	Conversion	4	545
17.	Decreased (net)		
18.	Reinsurance		
19.	Aggregate write-ins for decreases	0	0
20.	Totals (Lines 10 to 19)	1,975	12,930
21.	In force end of year (b) (Line 9 minus 20)	56,582	332,340
22.	Reinsurance ceded end of year	XXX	10,687
23.	Line 21 minus Line 22	XXX	321,653
	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			5,564	
2.	Issued during year			499	
3.	Reinsurance assumed				
4.	Increased during year (net)				
5.	TOTALS (Lines 1 to 4)	0	0	6,063	0
	Deduction during year:				
6.	Decreased during year (net)			314	
7.	Reinsurance ceded				
8.	TOTALS (Lines 6 and 7)	0	0	314	0
9.	In force end of year (Line 5 minus Line 8)	0	0	5,749	0
10.	Amount on deposit				XXX
	Income now payable:				
11.	Amount of income payable			1,816,173	XXX
	Deferred fully paid:				
12.	Account balance	XXX	XXX	4,894,347	XXX
	Deferred not fully paid:				
13.	Account balance	XXX	XXX	200,992,217	XXX

SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS

Allocated by States and Territories

States, Etc.	1 Active Status	Direct Business					
		Life Contracts		4	5	6	7
		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		507,655			507,655	
4. Arkansas AR	N					0	
5. California CA	N					0	
6. Colorado CO	L	12	56,900			56,912	
7. Connecticut CT	L	23,816	24,825			48,641	
8. Delaware DE	N					0	
9. District of Columbia DC	N					0	
10. Florida FL	L	8,760	875,645			884,405	
11. Georgia GA	L					0	
12. Hawaii HI	N					0	
13. Idaho ID	N					0	
14. Illinois IL	L	90,882	3,614,386			3,705,268	
15. Indiana IN	L	8,341	323,084			331,425	
16. Iowa IA	L		679,091			679,091	
17. Kansas KS	N					0	
18. Kentucky KY	L					0	
19. Louisiana LA	N					0	
20. Maine ME	N					0	
21. Maryland MD	L	42	4,000			4,042	
22. Massachusetts MA	L	2,342	21,000			23,342	
23. Michigan MI	L	41,849	961,037			1,002,886	
24. Minnesota MN	L	3,005	583,075			586,080	
25. Mississippi MS	N					0	
26. Missouri MO	L	347	61,801			62,148	
27. Montana MT	N					0	
28. Nebraska NE	L		65,000			65,000	
29. Nevada NV	L		25,000			25,000	
30. New Hampshire NH	N					0	
31. New Jersey NJ	L	66,907	477,743			544,650	
32. New Mexico NM	N					0	
33. New York NY	L	66,395	407,650			474,045	
34. North Carolina NC	L					0	
35. North Dakota ND	N					0	
36. Ohio OH	L	390,972	1,881,642			2,272,614	
37. Oklahoma OK	N					0	
38. Oregon OR	N					0	
39. Pennsylvania PA	L	822,373	5,921,592			6,743,965	
40. Rhode Island RI	N					0	
41. South Carolina SC	L					0	
42. South Dakota SD	N					0	
43. Tennessee TN	L		15,407			15,407	
44. Texas TX	L	191				191	
45. Utah UT	N					0	
46. Vermont VT	N					0	
47. Virginia VA	L	4,375	850			5,225	
48. Washington WA	N					0	
49. West Virginia WV	L	4,347	5,500			9,847	
50. Wisconsin WI	L	6,189	518,660			524,849	
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	1,541,145	17,031,541	0	0	18,572,686	0
90. Reporting entity contributions for employee benefit plans	XXX					0	
91. Dividends or refunds applied to purchase paid-up additions and annuities	XXX					0	
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	1,541,145	17,031,541	0	0	18,572,686	0
96. Plus Reinsurance Assumed	XXX					0	
97. Totals (All Business)	XXX	1,541,145	17,031,541	0	0	18,572,686	0
98. Less Reinsurance Ceded	XXX					0	
99. Totals (All Business) less reinsurance ceded	XXX	1,541,145	17,031,541	(b) 0	0	18,572,686	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 II
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

2015 ALPHABETICAL INDEX
FRATERNAL ANNUAL STATEMENT BLANK