



LIFE AND ACCIDENT AND HEALTH COMPANIES - ASSOCIATION EDITION

## ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2016  
OF THE CONDITION AND AFFAIRS OF THE

## American Modern Life Insurance Company

NAIC Group Code	0869 (Current)	0869 (Prior)	NAIC Company Code	65811	Employer's ID Number	86-6052181
Organized under the Laws of	Ohio		State of Domicile or Port of Entry		OH	
Country of Domicile	United States of America					
Incorporated/Organized	12/12/1956		Commenced Business	01/03/1957		
Statutory Home Office	1300 East Ninth Street (Street and Number)		Cleveland , OH, US 44114 (City or Town, State, Country and Zip Code)			
Main Administrative Office	400 Robert Street North (Street and Number)		651-665-3500 (Area Code) (Telephone Number)			
St. Paul , MN, US 55101-2098 (City or Town, State, Country and Zip Code)						
Mail Address	400 Robert Street North (Street and Number or P.O. Box)		St. Paul , MN, US 55101-2098 (City or Town, State, Country and Zip Code)			
Primary Location of Books and Records	400 Robert Street North (Street and Number)		651-665-5678 (Area Code) (Telephone Number)			
St. Paul , MN, US 55101-2098 (City or Town, State, Country and Zip Code)						
Internet Website Address	www.securian.com					
Statutory Statement Contact	Nicholas David Boehland (Name)		651-665-5678 (Area Code) (Telephone Number)			
nicholas.boehland@securian.com (E-mail Address)		651-665-7938 (FAX Number)				

## OFFICERS

President & CEO William Michael Gould  
Secretary Mark James Geldernick

Treasurer David John LePlavy

**OTHER**

OTHER		
DIRECTORS OR TRUSTEES		
Barbara Ann Baumann, Second Vice President	David John LePlavy	Warren John Zaccaro
William Michael Gould	Gary Roger Christensen	Suzette Louise Huovinen
Kristi Jo Nelson		
Daniel Patrick Preiner		

State of Minnesota \_\_\_\_\_ SS: \_\_\_\_\_  
County of Ramsey \_\_\_\_\_

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

the enclosed statement.



requested by various regulators in lieu of or in addition  
  
David John LePlave

Subscribed and sworn to before me this  
01 day of February 2017

a. Is this an original filing? .....

b. If no,

1. State the amendment number.....
2. Date filed .....
3. Number of pages attached .....

Yes [ X ] No [ ]

Helen H. Pham  
Helen H. Pham  
Notary Public

Mark James Geldernick  
Secretary

Helen H. Pham  
Notary Public  
January 31, 2020

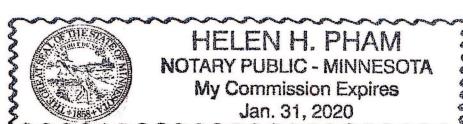
Mark James Geldernick  
Secretary

William Michael Gould  
President & CEO

William Michael Gou  
President & CEO

- a. Is this an original filing? .....
- b. If no,
  - 1. State the amendment number.....
  - 2. Date filed .....
  - 3. Number of pages attached .....

Yes [ X ] No [ ]





**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Alabama

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		63,539			63,539
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		63,539			63,539
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		47,369			47,369
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		47,369			47,369
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial						
16. Unpaid December 31, prior year .....		4		9,215				4		9,215
17. Incurred during current year .....		10		40,227				10		40,227
Settled during current year:										
18.1 By payment in full .....		12		47,369				12		47,369
18.2 By payment on compromised claims .....										
18.3 Totals paid .....		12		47,369				12		47,369
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		12		47,369				12		47,369
19. Unpaid Dec. 31, current year (16+17-18.6) .....		2		2,073				2		2,073
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....		2,022	(a)	12,068,061				2,022		12,068,061
21. Issued during year .....		396		2,623,314				396		2,623,314
22. Other changes to in force (Net) .....		(1,153)		(7,213,683)				(1,153)		(7,213,683)
23. In force December 31 of current year .....		1,265	(a)	7,477,692				1,265		7,477,692

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	855	1,869		376	(60)
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	855	1,869		376	(60)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Alaska

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

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

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Arizona

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		19,932			19,932
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		19,932			19,932
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		47,535			47,535
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		47,535			47,535
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial						
16. Unpaid December 31, prior year .....		2	.99,887					2	.99,887	
17. Incurred during current year .....			(52,352)							(.52,352)
Settled during current year:										
18.1 By payment in full .....		2	.47,535					2	.47,535	
18.2 By payment on compromised claims .....										
18.3 Totals paid .....		2	.47,535					2	.47,535	
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		2	.47,535					2	.47,535	
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....		84	(a) 2,778,468					.84	2,778,468	
21. Issued during year .....										
22. Other changes to in force (Net) .....		(29)	(873,019)					(29)	(873,019)	
23. In force December 31 of current year .....		55	(a) 1,905,448					55	1,905,448	

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	12,379	12,170		4,993	4,100
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	12,379	12,170		4,993	4,100
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Arkansas

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

1 DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	2 Ordinary	3 Credit Life (Group and Individual)	4 Group	5 Industrial	5 Total
1. Life insurance .....		74,067			74,067
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		74,067			74,067
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		60,364			60,364
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		60,364			60,364
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 Ordinary	2 No.	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....			2	51,650					2	51,650
17. Incurred during current year .....			3	8,714					3	8,714
Settled during current year:										
18.1 By payment in full .....			5	60,364					5	60,364
18.2 By payment on compromised claims .....										
18.3 Totals paid .....			5	60,364					5	60,364
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....			5	60,364					5	60,364
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....			846	(a) 14,309,426	No. of Policies				846	14,309,426
21. Issued during year .....			15	38,903					15	38,903
22. Other changes to in force (Net) .....			(524)	(10,044,804)					(524)	(10,044,804)
23. In force December 31 of current year .....			337	(a) 4,303,524					337	4,303,524

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Dividends Paid Or Credited On Direct Business	3 Direct Losses Paid	4 Direct Losses Incurred
24. Group Policies (b) .....				
24.1 Federal Employees Health Benefits Plan premium (b) .....				
24.2 Credit (Group and Individual) .....	57,426	81,353		55,048
24.3 Collectively renewable policies (b) .....				30,975
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:				
25.1 Non-cancelable (b) .....				
25.2 Guaranteed renewable (b) .....				
25.3 Non-renewable for stated reasons only (b) .....				
25.4 Other accident only .....				
25.5 All other (b) .....				
25.6 Totals (sum of Lines 25.1 to 25.5) .....	57,426	81,353		55,048
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....				30,975

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF California

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		102,786			102,786
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		102,786			102,786
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		55,472			55,472
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		55,472			55,472
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary	Credit Life (Group and Individual)		Group	Industrial	Total				
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....		2		50,494					2	50,494
17. Incurred during current year .....				4,978						4,978
Settled during current year:										
18.1 By payment in full .....		2		55,472					2	55,472
18.2 By payment on compromised claims .....										
18.3 Totals paid .....		2		55,472					2	55,472
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		2		55,472					2	55,472
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....			329	(a) 13,250,554	No. of Policies				329	13,250,554
21. Issued during year .....										
22. Other changes to in force (Net) .....		(98)		(4,627,639)					(98)	(4,627,639)
23. In force December 31 of current year .....		231	(a) 8,622,915						231	8,622,915

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	64,793	64,166		38,558	8,752
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	64,793	64,166		38,558	8,752
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Colorado

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		57,876			57,876
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		57,876			57,876
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		157,949			157,949
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		157,949			157,949
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial						
16. Unpaid December 31, prior year .....		3		131,267					3	131,267
17. Incurred during current year .....				26,683						26,683
Settled during current year:										
18.1 By payment in full .....		3		157,949					3	157,949
18.2 By payment on compromised claims .....										
18.3 Totals paid .....		3		157,949					3	157,949
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		3		157,949					3	157,949
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....			308	(a) 10,958,929					308	10,958,929
21. Issued during year .....										
22. Other changes to in force (Net) .....			(107)	(3,595,577)					(107)	(3,595,577)
23. In force December 31 of current year .....			201	(a) 7,363,351					201	7,363,351

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	61,239	60,574		41,962	4,176
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	61,239	60,574		41,962	4,176
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Connecticut

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		41,744			41,744
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		41,744			41,744
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary	Credit Life (Group and Individual)		Group	Industrial	Total				
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....		1						1		
Settled during current year:										
18.1 By payment in full .....		1						1		
18.2 By payment on compromised claims .....										
18.3 Totals paid .....		1						1		
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		1						1		
19. Unpaid Dec. 31, current year (16+17-18.6) .....								1		
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....		505	(a)	4,121,751	No. of Policies				505	4,121,751
21. Issued during year .....		189		1,436,256				189		1,436,256
22. Other changes to in force (Net) .....		(125)		(1,587,397)				(125)		(1,587,397)
23. In force December 31 of current year .....		569	(a)	3,970,610				569		3,970,610

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	57,841	51,433		15,459	5,060
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	57,841	51,433		15,459	5,060
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF District of Columbia

**DURING THE YEAR 2016**

NAIC Group Code 0869

NAIC Company Code 65811

## LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4)					
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4)					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3)					
8. Grand Totals (Lines 6.5 plus 7.4)					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals					
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)					

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

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

....., current year \$ .....

## ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

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



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Florida

**DURING THE YEAR 2016**

NAIC Group Code 0869

NAIC Company Code 65811

## LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....						
2. Annuity considerations .....						
3. Deposit-type contract funds .....			XXX			
4. Other considerations .....					XXX	
5. Totals (Sum of Lines 1 to 4)						
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit .....						
6.2 Applied to pay renewal premiums .....						
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						
6.4 Other .....						
6.5 Totals (Sum of Lines 6.1 to 6.4)						
Annuities:						
7.1 Paid in cash or left on deposit .....						
7.2 Applied to provide paid-up annuities .....						
7.3 Other .....						
7.4 Totals (Sum of Lines 7.1 to 7.3)						
8. Grand Totals (Lines 6.5 plus 7.4)						
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits .....						
10. Matured endowments .....						
11. Annuity benefits .....						
12. Surrender values and withdrawals for life contracts .....						
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....						
14. All other benefits, except accident and health .....						
15. Totals						
DETAILS OF WRITE-INS						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....						
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind. Polis. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>						No. of Policies				
20. In force December 31, prior year .....				2 (a) .....	18,789				2	18,789
21. Issued during year .....					(8,523)					(8,523)
22. Other changes to in force (Net) .....										
23. In force December 31 of current year .....				2 (a) .....	10,266				2	10,266

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

## ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Georgia

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		22,497			22,497
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		22,497			22,497
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		82,041			82,041
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		82,041			82,041
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial						
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....		7	.99,175					7	.99,175	
Settled during current year:										
18.1 By payment in full .....		6	.82,041					6	.82,041	
18.2 By payment on compromised claims .....										
18.3 Totals paid .....		6	.82,041					6	.82,041	
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		6	.82,041					6	.82,041	
19. Unpaid Dec. 31, current year (16+17-18.6) .....		1	17,134					1	17,134	
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....		1,087	(a) 8,561,323					1,087	8,561,323	
21. Issued during year .....		168	1,457,043					168	1,457,043	
22. Other changes to in force (Net) .....		(592)	(4,706,193)					(592)	(4,706,193)	
23. In force December 31 of current year .....		663	(a) 5,312,172					663	5,312,172	

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	9,906	37,294		9,832	6,529
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	9,906	37,294		9,832	6,529
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Idaho

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		71,759			71,759
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		71,759			71,759
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		131,459			131,459
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		131,459			131,459
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial						
16. Unpaid December 31, prior year .....			4	99,510					4	99,510
17. Incurred during current year .....			1	31,950					1	31,950
Settled during current year:										
18.1 By payment in full .....			5	131,459					5	131,459
18.2 By payment on compromised claims .....			5	131,459					5	131,459
18.3 Totals paid .....			5	131,459					5	131,459
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....			5	131,459					5	131,459
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....			224	(a) 7,431,974					224	7,431,974
21. Issued during year .....										
22. Other changes to in force (Net) .....			(68)	(2,470,648)					(68)	(2,470,648)
23. In force December 31 of current year .....			156	(a) 4,961,326					156	4,961,326

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	53,337	52,697		45,296	50,973
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	53,337	52,697		45,296	50,973
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Illinois

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		122,679			122,679
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		122,679			122,679
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		196,274			196,274
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		196,274			196,274
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year .....		6	149,087						6	149,087
17. Incurred during current year .....		14	47,188						14	47,188
Settled during current year:										
18.1 By payment in full .....		20	196,274						20	196,274
18.2 By payment on compromised claims .....										
18.3 Totals paid .....		20	196,274						20	196,274
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		20	196,274						20	196,274
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					6 No. of Policies					
20. In force December 31, prior year .....		834	(a) 22,802,799						834	22,802,799
21. Issued during year .....		20	228,736						20	228,736
22. Other changes to in force (Net) .....		(485)	(13,758,861)						(485)	(13,758,861)
23. In force December 31 of current year .....		369	(a) 9,272,675						369	9,272,675

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	62,872	67,451		27,340	(9,907)
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	62,872	67,451		27,340	(9,907)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Indiana

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		68,880			68,880
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		68,880			68,880
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		216,775			216,775
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		216,775			216,775
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial						
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....		.11		216,775					.11	.216,775
Settled during current year:										
18.1 By payment in full .....		.11		216,775					.11	.216,775
18.2 By payment on compromised claims .....		.11		216,775					.11	.216,775
18.3 Totals paid .....		.11		216,775					.11	.216,775
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		.11		216,775					.11	.216,775
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....			.3,053	(a) 27,690,777					.3,053	27,690,777
21. Issued during year .....			.360	3,325,690					.360	3,325,690
22. Other changes to in force (Net) .....			(1,283)	(13,665,589)					(1,283)	(13,665,589)
23. In force December 31 of current year .....			2,130	(a) 17,350,877					2,130	17,350,877

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	69,379	203,546		103,126	39,296
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	69,379	203,546		103,126	39,296
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Iowa

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		86,197			86,197
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		86,197			86,197
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		64,596			64,596
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		64,596			64,596
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial						
16. Unpaid December 31, prior year .....			5	128,205					5	128,205
17. Incurred during current year .....			2	(63,609)					2	(63,609)
Settled during current year:										
18.1 By payment in full .....			7	64,596					7	64,596
18.2 By payment on compromised claims .....										
18.3 Totals paid .....			7	64,596					7	64,596
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....			7	64,596					7	64,596
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....			466	(a) 12,719,241					466	12,719,241
21. Issued during year .....										
22. Other changes to in force (Net) .....			(152)	(4,660,470)					(152)	(4,660,470)
23. In force December 31 of current year .....			314	(a) 8,058,771					314	8,058,771

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	76,355	75,738		28,789	(15,319)
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	76,355	75,738		28,789	(15,319)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Kansas

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		18,624			18,624
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		18,624			18,624
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....					No. of Policies					
				47 (a)	1,117,752				.47	1,117,752
21. Issued during year .....				26	119,708				.26	119,708
22. Other changes to in force (Net) .....				(15)	(186,840)				(15)	(186,840)
23. In force December 31 of current year .....				58 (a)	1,050,620				58	1,050,620

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	12,048	10,470		784	.6
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	12,048	10,470		784	6
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Kentucky

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		41,378			41,378
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		41,378			41,378
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		42,431			42,431
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		42,431			42,431
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial						
16. Unpaid December 31, prior year .....		6						6		
17. Incurred during current year .....		(4)		42,431				(4)		42,431
Settled during current year:										
18.1 By payment in full .....		2		42,431				2		42,431
18.2 By payment on compromised claims .....		2		42,431				2		42,431
18.3 Totals paid .....		2		42,431				2		42,431
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		2		42,431				2		42,431
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....		13	(a)	258,973				13		258,973
21. Issued during year .....										
22. Other changes to in force (Net) .....		(4)		(60,406)				(4)		(60,406)
23. In force December 31 of current year .....		9	(a)	198,567				9		198,567

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	1	1		(1)	(208,001)
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	1	1		(1)	(208,001)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Louisiana

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

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

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Maryland

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					5 (a)	7,401	No. of Policies			
20. In force December 31, prior year .....									5	7,401
21. Issued during year .....										
22. Other changes to in force (Net) .....					(5)	(7,401)			(5)	(7,401)
23. In force December 31 of current year .....					(a)					

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....			10		
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....			10		
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					(6)

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Massachusetts

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		(4)			(4)
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		(4)			(4)
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary	<b>Credit Life (Group and Individual)</b>		Group	Industrial	Total				
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>				No. of Policies						
20. In force December 31, prior year .....		39	(a)	105,295				39	105,295	
21. Issued during year .....										
22. Other changes to in force (Net) .....		(25)	(83,241)					(25)	(83,241)	
23. In force December 31 of current year .....		14	(a)	22,054				14	22,054	

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	(7)	1,143		1,381	(2,031)
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	(7)	1,143		1,381	(2,031)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....	(7)	1,143		1,381	(2,031)

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Michigan

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		125,563			125,563
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		125,563			125,563
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		217,797			217,797
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		217,797			217,797
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial						
16. Unpaid December 31, prior year .....		4		21,006				4		21,006
17. Incurred during current year .....		24		196,791				24		196,791
Settled during current year:										
18.1 By payment in full .....		28		217,797				28		217,797
18.2 By payment on compromised claims .....										
18.3 Totals paid .....		28		217,797				28		217,797
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		28		217,797				28		217,797
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....		3,811	(a)	40,393,084				3,811		40,393,084
21. Issued during year .....		152		1,462,297				152		1,462,297
22. Other changes to in force (Net) .....		(1,843)		(19,940,824)				(1,843)		(19,940,824)
23. In force December 31 of current year .....		2,120	(a)	21,914,558				2,120		21,914,558

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	60,241	235,388		278,061	95,419
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	60,241	235,388		278,061	95,419
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Minnesota

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		213,965			213,965
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		213,965			213,965
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		305,376			305,376
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		305,376			305,376
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary	Credit Life (Group and Individual)		Group	Industrial	Total				
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....		2		100,000				2		100,000
17. Incurred during current year .....		11		205,376				11		205,376
Settled during current year:										
18.1 By payment in full .....		13		305,376				13		305,376
18.2 By payment on compromised claims .....										
18.3 Totals paid .....		13		305,376				13		305,376
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		13		305,376				13		305,376
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....		931	(a)	27,075,428	No. of Policies				931	27,075,428
21. Issued during year .....		1	(a)	8,990				1		8,990
22. Other changes to in force (Net) .....		(183)		(5,468,579)				(183)		(5,468,579)
23. In force December 31 of current year .....		749	(a)	21,615,840				749		21,615,840

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	161,087	158,372		80,639	64,252
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	161,087	158,372		80,639	64,252
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Mississippi

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		22,811			22,811
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		22,811			22,811
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		5,263			5,263
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		5,263			5,263
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial						
16. Unpaid December 31, prior year .....			1	2,376					1	2,376
17. Incurred during current year .....			1	2,887					1	2,887
Settled during current year:										
18.1 By payment in full .....			2	5,263					2	5,263
18.2 By payment on compromised claims .....										
18.3 Totals paid .....			2	5,263					2	5,263
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....			2	5,263					2	5,263
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....			415	(a) 2,837,115					415	2,837,115
21. Issued during year .....			118	700,316					118	700,316
22. Other changes to in force (Net) .....			(206)	(1,591,808)					(206)	(1,591,808)
23. In force December 31 of current year .....			327	(a) 1,945,623					327	1,945,623

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	6,734	12,006		546	(3,344)
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	6,734	12,006		546	(3,344)
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....				0	and number of persons insured under indemnity only products .....
				0	



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Missouri

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		1,957,039			1,957,039
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		1,957,039			1,957,039
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		733,512			733,512
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		733,512			733,512
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year .....		13	168,344						13	168,344
17. Incurred during current year .....		95	592,977						95	592,977
Settled during current year:										
18.1 By payment in full .....		106	733,512						106	733,512
18.2 By payment on compromised claims .....										
18.3 Totals paid .....		106	733,512						106	733,512
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		106	733,512						106	733,512
19. Unpaid Dec. 31, current year (16+17-18.6) .....		2	27,809						2	27,809
<b>POLICY EXHIBIT</b>					5 No. of Policies					
20. In force December 31, prior year .....		18,749	(a) 155,974,949						18,749	155,974,949
21. Issued during year .....		9,896	74,260,625						9,896	74,260,625
22. Other changes to in force (Net) .....		(10,255)	(78,326,264)						(10,255)	(78,326,264)
23. In force December 31 of current year .....		18,390	(a) 151,909,310						18,390	151,909,310

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	1,254,343	1,352,411		370,748	449,656
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	1,254,343	1,352,411		370,748	449,656
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2016

NAIC Group Code 0869

NAIC Company Code 65811

## LIFE INSURANCE

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....			15,967			15,967
2. Annuity considerations .....						
3. Deposit-type contract funds .....			XXX		XXX	
4. Other considerations .....						
5. Totals (Sum of Lines 1 to 4)			15,967			15,967
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						
6.2 Applied to pay renewal premiums .....						
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						
6.4 Other .....						
6.5 Totals (Sum of Lines 6.1 to 6.4)						
Annuities:						
7.1 Paid in cash or left on deposit .....						
7.2 Applied to provide paid-up annuities .....						
7.3 Other .....						
7.4 Totals (Sum of Lines 7.1 to 7.3)						
8. Grand Totals (Lines 6.5 plus 7.4)						
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....						
10. Matured endowments .....						
11. Annuity benefits .....						
12. Surrender values and withdrawals for life contracts .....						
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....						
14. All other benefits, except accident and health .....						
15. Totals						
<b>DETAILS OF WRITE-INS</b>						
1301. .....						
1302. .....						
1303. .....						
1398. Summary of Line 13 from overflow page .....						
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6)										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....					No. of Policies					
117 (a) 2,350,299									117	2,350,299
21. Issued during year .....										
22. Other changes to in force (Net) .....										
(41) (821,643)									(41)	(821,643)
23. In force December 31 of current year										
					76 (a) 1,528,656				76	1,528,656

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

## ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	9,514	10,035		21,459	(3,554)
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	9,514	10,035		21,459	(3,554)

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Nebraska

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		45,250			45,250
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		45,250			45,250
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		26,787			26,787
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		26,787			26,787
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial						
16. Unpaid December 31, prior year .....		2	26,787					2	26,787	
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....		2	26,787					2	26,787	
18.2 By payment on compromised claims .....										
18.3 Totals paid .....		2	26,787					2	26,787	
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		2	26,787					2	26,787	
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....		181	(a) 5,085,257					181	5,085,257	
21. Issued during year .....										
22. Other changes to in force (Net) .....		(56)	(1,805,658)					(56)	(1,805,658)	
23. In force December 31 of current year .....		125	(a) 3,279,599					125	3,279,599	

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	45,897	45,137		39,953	26,108
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	45,897	45,137		39,953	26,108
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Nevada

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		12,876			12,876
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		12,876			12,876
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary	<b>Credit Life (Group and Individual)</b>		Group	Industrial	Total				
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....			1	.91,395					1	.91,395
17. Incurred during current year .....				8,699						8,699
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....		1		100,093					1	100,093
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....			55	(a) 1,684,188					.55	1,684,188
21. Issued during year .....										
22. Other changes to in force (Net) .....		(17)		(464,277)					(17)	(464,277)
23. In force December 31 of current year .....		38	(a)	1,219,912					38	1,219,912

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	5,329	5,422			(667)
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	5,329	5,422			(667)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF New Mexico

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		(699)			(699)
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		(699)			(699)
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary	Credit Life (Group and Individual)		Group	Industrial	Total				
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....										
			2 (a)	53,500	No. of Policies				2	53,500
21. Issued during year .....										
22. Other changes to in force (Net) .....			(1)	(45,354)					(1)	(45,354)
23. In force December 31 of current year .....			1 (a)	8,145					1	8,145

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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

**NONE**



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF New York

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		370,500			.370,500
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		370,500			370,500
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		463,447			.463,447
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		463,447			463,447
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year .....			2	64,853					2	64,853
17. Incurred during current year .....			16	400,610					16	400,610
Settled during current year:										
18.1 By payment in full .....			17	463,447					17	.463,447
18.2 By payment on compromised claims .....										
18.3 Totals paid .....			17	463,447					17	.463,447
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....			17	463,447					17	.463,447
19. Unpaid Dec. 31, current year (16+17-18.6) .....			1	2,016					1	2,016
<b>POLICY EXHIBIT</b>					6 No. of Policies					
20. In force December 31, prior year .....			3,058	(a) 66,716,068					3,058	66,716,068
21. Issued during year .....			649	16,297,657					649	16,297,657
22. Other changes to in force (Net) .....			(1,341)	(30,374,285)					(1,341)	(30,374,285)
23. In force December 31 of current year .....			2,366	(a) 52,639,441					2,366	52,639,441

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	130,689	229,832			
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	130,689	229,832			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....				207,278	151,740

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



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF North Carolina

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		(11)			(11)
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		(11)			(11)
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					6 No. of Policies					
20. In force December 31, prior year .....			1 (a)	3,469					1 3,469	
21. Issued during year .....										
22. Other changes to in force (Net) .....			(1)	(3,469)					(1) (3,469)	
23. In force December 31 of current year .....			(a)							

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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

**NONE**



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF North Dakota

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		23,427			23,427
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		23,427			23,427
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		50,041			50,041
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		50,041			50,041
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	Credit Life (Group and Individual)		Group		Industrial		Total	
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....			1	50,041					1	50,041
Settled during current year:										
18.1 By payment in full .....			1	50,041					1	50,041
18.2 By payment on compromised claims .....										
18.3 Totals paid .....			1	50,041					1	50,041
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....			1	50,041					1	50,041
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....				131 (a) 3,919,123					131	3,919,123
21. Issued during year .....										
22. Other changes to in force (Net) .....			(26)	(1,051,619)					(26)	(1,051,619)
23. In force December 31 of current year .....			105 (a)	2,867,504					105	2,867,504

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	22,670	22,413		10,001	8,410
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	22,670	22,413		10,001	8,410
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Ohio

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		1,127,320			1,127,320
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		1,127,320			1,127,320
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		911,249			911,249
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		911,249			911,249
<b>DETAILS OF WRITE-INS</b>					
1301. ....					
1302. ....					
1303. ....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....		20		375,621				20		375,621
17. Incurred during current year .....		108		550,366				108		550,366
Settled during current year:										
18.1 By payment in full .....		123		911,249				123		911,249
18.2 By payment on compromised claims .....										
18.3 Totals paid .....		123		911,249				123		911,249
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		123		911,249				123		911,249
19. Unpaid Dec. 31, current year (16+17-18.6) .....		5		14,738				5		14,738
<b>POLICY EXHIBIT</b>				No. of Policies						
20. In force December 31, prior year .....		6,751		(a) 149,712,767				6,751		149,712,767
21. Issued during year .....		1,340		39,497,312				1,340		39,497,312
22. Other changes to in force (Net) .....		(3,268)		(70,972,245)				(3,268)		(70,972,245)
23. In force December 31 of current year .....		4,823	(a)	118,237,833				4,823		118,237,833

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	1,371,375	1,442,384		962,785	869,745
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	1,371,375	1,442,384		962,785	869,745
(b) For health business on indicated lines report: Number of persons insured under PPO managed care products .....	0				
insured under indemnity only products .....	0				

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



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Oklahoma

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year .....										
17. Incurred during current year Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					5 No. of Policies					
20. In force December 31, prior year .....			1 (a) .....	21,745					1 .....	21,745
21. Issued during year .....			2 .....	54,020					2 .....	54,020
22. Other changes to in force (Net) .....				(4,251)						(4,251)
23. In force December 31 of current year .....			3 (a) .....	71,514					3 .....	71,514

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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

**NONE**



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Oregon

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		167,637			167,637
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		167,637			167,637
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		245,496			245,496
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		245,496			245,496
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary	Credit Life (Group and Individual)		Group	Industrial	Total					
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount	
16. Unpaid December 31, prior year .....		4		113,763				4		113,763	
17. Incurred during current year .....		5		131,733				5		131,733	
Settled during current year:											
18.1 By payment in full .....		9		245,496				9		245,496	
18.2 By payment on compromised claims .....											
18.3 Totals paid .....		9		245,496				9		245,496	
18.4 Reduction by compromise .....											
18.5 Amount rejected .....											
18.6 Total settlements .....		9		245,496				9		245,496	
19. Unpaid Dec. 31, current year (16+17-18.6) .....											
<b>POLICY EXHIBIT</b>											
20. In force December 31, prior year .....				682	(a)	26,610,069	No. of Policies			682	26,610,069
21. Issued during year .....											
22. Other changes to in force (Net) .....				(226)		(9,403,831)				(226)	(9,403,831)
23. In force December 31 of current year .....				456	(a)	17,206,238				456	17,206,238

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	150,626	148,846		80,875	87,277
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	150,626	148,846		80,875	87,277
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Pennsylvania

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		36,486			36,486
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		36,486			36,486
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		33,991			33,991
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		33,991			33,991
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial						
16. Unpaid December 31, prior year .....			1						1	
17. Incurred during current year .....			3	33,991					3	33,991
Settled during current year:										
18.1 By payment in full .....			3	33,991					3	33,991
18.2 By payment on compromised claims .....										
18.3 Totals paid .....			3	33,991					3	33,991
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....			3	33,991					3	33,991
19. Unpaid Dec. 31, current year (16+17-18.6) .....			1							1
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....			225	(a) 6,147,159					225	6,147,159
21. Issued during year .....			102	2,460,637					102	2,460,637
22. Other changes to in force (Net) .....			43	(1,683,885)					43	(1,683,885)
23. In force December 31 of current year .....			370	(a) 6,923,911					370	6,923,911

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	9,073	(7,725)		21,850	46,991
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	9,073	(7,725)		21,850	46,991
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Rhode Island

### DURING THE YEAR 2016

NAIC Group Code 0869

NAIC Company Code 65811

## LIFE INSURANCE

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....						
2. Annuity considerations .....						
3. Deposit-type contract funds .....			XXX			
4. Other considerations .....					XXX	
5. Totals (Sum of Lines 1 to 4)						
DIRECT DIVIDENDS TO POLICYHOLDERS						
Life insurance:						
6.1 Paid in cash or left on deposit .....						
6.2 Applied to pay renewal premiums .....						
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						
6.4 Other .....						
6.5 Totals (Sum of Lines 6.1 to 6.4)						
Annuities:						
7.1 Paid in cash or left on deposit .....						
7.2 Applied to provide paid-up annuities .....						
7.3 Other .....						
7.4 Totals (Sum of Lines 7.1 to 7.3)						
8. Grand Totals (Lines 6.5 plus 7.4)						
DIRECT CLAIMS AND BENEFITS PAID						
9. Death benefits .....						
10. Matured endowments .....						
11. Annuity benefits .....						
12. Surrender values and withdrawals for life contracts .....						
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....						
14. All other benefits, except accident and health .....						
15. Totals						
DETAILS OF WRITE-INS						
1301. ....						
1302. ....						
1303. ....						
1398. Summary of Line 13 from overflow page .....						
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)						

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

(a) Includes Individual Credit Life Insurance prior year \$ \_\_\_\_\_, current year \$ \_\_\_\_\_

....., current year \$ .....

## ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....	.....	.....	.....	.....	.....
24.1 Federal Employees Health Benefits Plan premium (b) .....	.....	.....	.....	.....	.....
24.2 Credit (Group and Individual) .....	.....	.....	.....	.....	.....
24.3 Collectively renewable policies (b) .....	.....	.....	.....	.....	.....
24.4 Medicare Title XVIII exempt from state taxes or fees	.....	.....	.....	.....	.....
Other Individual Policies:					
25.1 Non-cancelable (b) .....	.....	.....	.....	.....	.....
25.2 Guaranteed renewable (b) .....	.....	.....	.....	.....	.....
25.3 Non-renewable for stated reasons only (b) .....	.....	.....	.....	.....	.....
25.4 Other accident only .....	.....	.....	.....	.....	.....
25.5 All other (b) .....	.....	.....	.....	.....	.....
25.6 Totals (sum of Lines 25.1 to 25.5) .....	.....	.....	.....	.....	.....
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	.....	.....	.....	.....	.....

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



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF South Carolina

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					5 No. of Policies					
20. In force December 31, prior year .....			1 (a)	1,245					1	1,245
21. Issued during year .....										
22. Other changes to in force (Net) .....			(1)	(1,245)					(1)	(1,245)
23. In force December 31 of current year .....			(a)							

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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

**NONE**



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF South Dakota

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		14,888			14,888
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		14,888			14,888
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....			58 (a)	1,511,832	No. of Policies				.58	1,511,832
21. Issued during year .....										
22. Other changes to in force (Net) .....		(16)	(547,484)						(16)	(547,484)
23. In force December 31 of current year .....		42 (a)	964,349						42	964,349

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	12,984	13,266		3,811	-(19,749)
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	12,984	13,266		3,811	-(19,749)
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Tennessee

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		58,785			58,785
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		58,785			58,785
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		37,671			37,671
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		37,671			37,671
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial						
16. Unpaid December 31, prior year .....			5	35,357					5	35,357
17. Incurred during current year .....			4	2,315					4	2,315
Settled during current year:										
18.1 By payment in full .....			9	37,671					9	37,671
18.2 By payment on compromised claims .....										
18.3 Totals paid .....			9	37,671					9	37,671
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....			9	37,671					9	37,671
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....									988	7,537,977
21. Issued during year .....			988	(a) 7,537,977					105	371,098
22. Other changes to in force (Net) .....			105	371,098						
23. In force December 31 of current year .....			(583)	(3,253,588)					(583)	(3,253,588)
			510	(a) 4,655,486					510	4,655,486

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	22,381	32,698		32,884	14,421
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	22,381	32,698		32,884	14,421
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Texas

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		1,756			1,756
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		1,756			1,756
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		3,219			3,219
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		3,219			3,219
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial						
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....		1	3,219					1	3,219	
Settled during current year:										
18.1 By payment in full .....		1	3,219					1	3,219	
18.2 By payment on compromised claims .....		1	3,219					1	3,219	
18.3 Totals paid .....		1	3,219					1	3,219	
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		1	3,219					1	3,219	
19. Unpaid Dec. 31, current year (16+17-18.6) .....		1	3,219					1	3,219	
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....		33 (a)	591,442	No. of Policies					33	591,442
21. Issued during year .....		(9)	(229,937)						(9)	(229,937)
22. Other changes to in force (Net) .....		24 (a)	361,505						24	361,505

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	5	5			
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	5	5			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Utah

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS		1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....			16,980			16,980
2. Annuity considerations .....			XXX		XXX	
3. Deposit-type contract funds .....						
4. Other considerations .....						
5. Totals (Sum of Lines 1 to 4) .....			16,980			16,980
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>						
Life insurance:						
6.1 Paid in cash or left on deposit .....						
6.2 Applied to pay renewal premiums .....						
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....						
6.4 Other .....						
6.5 Totals (Sum of Lines 6.1 to 6.4) .....						
Annuities:						
7.1 Paid in cash or left on deposit .....						
7.2 Applied to provide paid-up annuities .....						
7.3 Other .....						
7.4 Totals (Sum of Lines 7.1 to 7.3) .....						
8. Grand Totals (Lines 6.5 plus 7.4) .....						
<b>DIRECT CLAIMS AND BENEFITS PAID</b>						
9. Death benefits .....			910			910
10. Matured endowments .....						
11. Annuity benefits .....						
12. Surrender values and withdrawals for life contracts .....						
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....						
14. All other benefits, except accident and health .....						
15. Totals .....			910			910
<b>DETAILS OF WRITE-INS</b>						
1301. .....						
1302. .....						
1303. .....						
1398. Summary of Line 13 from overflow page .....						
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....						

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	1 No.	2 Amount	Credit Life (Group and Individual)		5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
			3 No. of Ind.Pols. & Gr. Certifs.	4 Amount						
16. Unpaid December 31, prior year .....			2	24,530					2	24,530
17. Incurred during current year .....			1	(23,620)					1	(23,620)
Settled during current year:										
18.1 By payment in full .....			3	910					3	910
18.2 By payment on compromised claims .....										
18.3 Totals paid .....			3	910					3	910
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....			3	910					3	910
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....			57 (a)	2,197,240					57	2,197,240
21. Issued during year .....										
22. Other changes to in force (Net) .....			(15)	(548,481)					(15)	(548,481)
23. In force December 31 of current year .....			42 (a)	1,648,759					42	1,648,759

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	8,907	8,757			
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	8,907	8,757			
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					(709)

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



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

DIRECT BUSINESS IN THE STATE OF Vermont

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					
2. Annuity considerations .....					
3. Deposit-type contract funds .....		XXX		XXX	
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....					
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

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

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....					
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....					
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Virginia

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		(172)			(172)
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		(172)			(172)
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		1,477			1,477
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		1,477			1,477
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year .....			1	1,287					1	1,287
17. Incurred during current year .....			2	11,920					2	11,920
Settled during current year:										
18.1 By payment in full .....			1	1,477					1	1,477
18.2 By payment on compromised claims .....										
18.3 Totals paid .....			1	1,477					1	1,477
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....			1	1,477					1	1,477
19. Unpaid Dec. 31, current year (16+17-18.6) .....			2	11,730					2	11,730
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....			116	(a)	521,322				116	521,322
21. Issued during year .....										
22. Other changes to in force (Net) .....			(79)	(338,055)					(79)	(338,055)
23. In force December 31 of current year .....			37	(a)	183,267				37	183,267

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	(647)	3,539		14,472	7,989
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	(647)	3,539		14,472	7,989
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Washington

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		195,518			195,518
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		195,518			195,518
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		267,373			267,373
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		267,373			267,373
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial						
16. Unpaid December 31, prior year .....			5	138,207					5	138,207
17. Incurred during current year .....			4	129,166					4	129,166
Settled during current year:										
18.1 By payment in full .....			9	267,373					9	267,373
18.2 By payment on compromised claims .....										
18.3 Totals paid .....			9	267,373					9	267,373
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....			9	267,373					9	267,373
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....			763	(a) 30,606,453					763	30,606,453
21. Issued during year .....										
22. Other changes to in force (Net) .....			(259)	(11,055,507)					(259)	(11,055,507)
23. In force December 31 of current year .....			504	(a) 19,550,946					504	19,550,946

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	170,279	169,179		134,629	48,376
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	170,279	169,179		134,629	48,376
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF West Virginia

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		22,606			22,606
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		22,606			22,606
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		106,353			106,353
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		106,353			106,353
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial						
16. Unpaid December 31, prior year .....			4	23,962				4		23,962
17. Incurred during current year .....			15	82,391				15		82,391
Settled during current year:										
18.1 By payment in full .....			19	106,353				19		106,353
18.2 By payment on compromised claims .....										
18.3 Totals paid .....			19	106,353				19		106,353
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....			19	106,353				19		106,353
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....			976	(a) 7,763,518				976		7,763,518
21. Issued during year .....			76	2,237,992				76		2,237,992
22. Other changes to in force (Net) .....			(496)	(4,326,760)				(496)		(4,326,760)
23. In force December 31 of current year .....			556	(a) 5,674,750				556		5,674,750

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	(5,399)	23,092		19,697	32,919
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	(5,399)	23,092		19,697	32,919
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Wisconsin

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		139,018			139,018
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		139,018			139,018
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		278,465			278,465
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		278,465			278,465
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial						
16. Unpaid December 31, prior year .....		7		193,077				7		193,077
17. Incurred during current year .....		7		114,912				7		114,912
Settled during current year:										
18.1 By payment in full .....		13		278,465				13		278,465
18.2 By payment on compromised claims .....										
18.3 Totals paid .....		13		278,465				13		278,465
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		13		278,465				13		278,465
19. Unpaid Dec. 31, current year (16+17-18.6) .....		1		29,524				1		29,524
<b>POLICY EXHIBIT</b>										
20. In force December 31, prior year .....				No. of Policies						
21. Issued during year .....		792	(a)	24,151,434				792		24,151,434
22. Other changes to in force (Net) .....		22		675,264				22		675,264
23. In force December 31 of current year .....		(254)		(8,291,734)				(254)		(8,291,734)
		560	(a)	16,534,964				560		16,534,964

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	112,124	110,495		120,448	54,800
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	112,124	110,495		120,448	54,800
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Wyoming

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		5,959			5,959
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		5,959			5,959
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....					
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....					
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	Ordinary	<b>Credit Life (Group and Individual)</b>		Group	Industrial	Total				
	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
16. Unpaid December 31, prior year .....										
17. Incurred during current year .....										
Settled during current year:										
18.1 By payment in full .....										
18.2 By payment on compromised claims .....										
18.3 Totals paid .....										
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....										
19. Unpaid Dec. 31, current year (16+17-18.6) .....										
<b>POLICY EXHIBIT</b>					No. of Policies					
20. In force December 31, prior year .....			30 (a)	882,570					30	882,570
21. Issued during year .....			(9)	(300,880)					(9)	(300,880)
22. Other changes to in force (Net) .....			21 (a)	581,690					21	581,690

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	6,303	6,451		1,754	4,899
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	6,303	6,451		1,754	4,899
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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



**ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY**

DIRECT BUSINESS IN THE STATE OF Grand Total

NAIC Group Code 0869

DURING THE YEAR 2016

NAIC Company Code 65811

**LIFE INSURANCE**

<b>DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS</b>	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....		5,365,421			5,365,421
2. Annuity considerations .....		XXX		XXX	
3. Deposit-type contract funds .....					
4. Other considerations .....					
5. Totals (Sum of Lines 1 to 4) .....		5,365,421			5,365,421
<b>DIRECT DIVIDENDS TO POLICYHOLDERS</b>					
Life insurance:					
6.1 Paid in cash or left on deposit .....					
6.2 Applied to pay renewal premiums .....					
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					
6.4 Other .....					
6.5 Totals (Sum of Lines 6.1 to 6.4) .....					
Annuities:					
7.1 Paid in cash or left on deposit .....					
7.2 Applied to provide paid-up annuities .....					
7.3 Other .....					
7.4 Totals (Sum of Lines 7.1 to 7.3) .....					
8. Grand Totals (Lines 6.5 plus 7.4) .....					
<b>DIRECT CLAIMS AND BENEFITS PAID</b>					
9. Death benefits .....		4,790,691			4,790,691
10. Matured endowments .....					
11. Annuity benefits .....					
12. Surrender values and withdrawals for life contracts .....					
13. Aggregate write-ins for miscellaneous direct claims and benefits paid .....					
14. All other benefits, except accident and health .....					
15. Totals .....		4,790,691			4,790,691
<b>DETAILS OF WRITE-INS</b>					
1301. .....					
1302. .....					
1303. .....					
1398. Summary of Line 13 from overflow page .....					
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above) .....					

<b>DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED</b>	1 No.	2 Amount	3 No. of Ind.Pols. & Gr. Certifs.	4 Amount	5 No. of Certifs.	6 Amount	7 No.	8 Amount	9 No.	10 Amount
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total					
16. Unpaid December 31, prior year .....		108		2,099,877					108	2,099,877
17. Incurred during current year .....		343		2,895,933					343	2,895,933
Settled during current year:										
18.1 By payment in full .....		435		4,790,691					435	4,790,691
18.2 By payment on compromised claims .....										
18.3 Totals paid .....		435		4,790,691					435	4,790,691
18.4 Reduction by compromise .....										
18.5 Amount rejected .....										
18.6 Total settlements .....		435		4,790,691					435	4,790,691
19. Unpaid Dec. 31, current year (16+17-18.6) .....		16		205,118					16	205,118
<b>POLICY EXHIBIT</b>				No. of Policies						
20. In force December 31, prior year .....		48,788		(a) 702,550,765					48,788	702,550,765
21. Issued during year .....		13,637		147,255,858					13,637	147,255,858
22. Other changes to in force (Net) .....		(23,807)		(318,401,953)					(23,807)	(318,401,953)
23. In force December 31 of current year .....		38,618	(a)	531,404,670					38,618	531,404,670

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

**ACCIDENT AND HEALTH INSURANCE**

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b) .....					
24.1 Federal Employees Health Benefits Plan premium (b) .....					
24.2 Credit (Group and Individual) .....	4,092,939	4,741,917		2,774,835	1,849,518
24.3 Collectively renewable policies (b) .....					
24.4 Medicare Title XVIII exempt from state taxes or fees Other Individual Policies:					
25.1 Non-cancelable (b) .....					
25.2 Guaranteed renewable (b) .....					
25.3 Non-renewable for stated reasons only (b) .....					
25.4 Other accident only .....					
25.5 All other (b) .....					
25.6 Totals (sum of Lines 25.1 to 25.5) .....	4,092,939	4,741,917		2,774,835	1,849,518
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6) .....					

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

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY  
**FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE**

**INTEREST MAINTENANCE RESERVE**

	1 Amount
1. Reserve as of December 31, Prior Year .....	(208,502)
2. Current year's realized pre-tax capital gains/(losses) of \$ 31,736 transferred into the reserve net of taxes of \$ 10,790	20,946
3. Adjustment for current year's liability gains/(losses) released from the reserve .....	
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3) .....	(187,556)
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4) .....	(9,163)
6. Reserve as of December 31, current year (Line 4 minus Line 5)	(178,393)

**AMORTIZATION**

Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	4 Balance Before Reduction for Current Year's Amortization (Cols. 1 + 2 + 3)
1. 2016 .....	(10,253)	1,090		(9,163)
2. 2017 .....	(46,142)	2,262		(43,880)
3. 2018 .....	(57,399)	2,367		(55,032)
4. 2019 .....	(47,749)	2,493		(45,256)
5. 2020 .....	(27,756)	2,639		(25,117)
6. 2021 .....	1,042	2,744		3,786
7. 2022 .....	5,038	2,577		7,615
8. 2023 .....	8,334	2,053		10,387
9. 2024 .....	9,714	1,487		11,201
10. 2025 .....	1,182	922		2,104
11. 2026 .....	(2,202)	312		(1,890)
12. 2027 .....	(1,582)			(1,582)
13. 2028 .....	(899)			(899)
14. 2029 .....	(4,402)			(4,402)
15. 2030 .....	(5,101)			(5,101)
16. 2031 .....	(5,507)			(5,507)
17. 2032 .....	(5,016)			(5,016)
18. 2033 .....	(6,741)			(6,741)
19. 2034 .....	(7,385)			(7,385)
20. 2035 .....	(6,292)			(6,292)
21. 2036 .....	486			486
22. 2037 .....	150			150
23. 2038 .....	(6)			(6)
24. 2039 .....	(16)			(16)
25. 2040 .....				
26. 2041 .....				
27. 2042 .....				
28. 2043 .....				
29. 2044 .....				
30. 2045 .....				
31. 2046 and Later				
32. Total (Lines 1 to 31)	(208,502)	20,946		(187,556)

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

## ASSET VALUATION RESERVE

	Default Component			Equity Component			7 Total Amount (Cols. 3 + 6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1 + 2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4 + 5)	
1. Reserve as of December 31, prior year .....	25,781		25,781				25,781
2. Realized capital gains/(losses) net of taxes - General Account .....							
3. Realized capital gains/(losses) net of taxes - Separate Accounts .....							
4. Unrealized capital gains/(losses) net of deferred taxes - General Account .....				160,281		160,281	160,281
5. Unrealized capital gains/(losses) net of deferred taxes - Separate Accounts .....							
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves .....							
7. Basic contribution .....	10,131		10,131				10,131
8. Accumulated balances (Lines 1 through 5 - 6 + 7) .....	35,913		35,913	160,281		160,281	196,193
9. Maximum reserve .....	58,301		58,301				58,301
10. Reserve objective .....	40,993		40,993				40,993
11. 20% of (Line 10 - Line 8) .....	1,016		1,016	(32,056)		(32,056)	(31,040)
12. Balance before transfers (Lines 8 + 11) .....	36,929		36,929	128,224		128,224	165,153
13. Transfers .....							
14. Voluntary contribution .....							
15. Adjustment down to maximum/up to zero .....				(128,224)		(128,224)	(128,224)
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	36,929		36,929				36,929

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
LONG-TERM BONDS												
1.	1 2 3 4 5 6 7 8 9.	Exempt Obligations	17,206,718	XXX	XXX	17,206,718	0.0000		0.0000		0.0000	
2.		Highest Quality	9,329,224	XXX	XXX	9,329,224	0.0004	3,732	0.0023	21,457	0.0030	27,988
3.		High Quality	3,368,182	XXX	XXX	3,368,182	0.0019	6,400	0.0058	19,535	0.0090	30,314
4.		Medium Quality		XXX	XXX		0.0093		0.0230		0.0340	
5.		Low Quality		XXX	XXX		0.0213		0.0530		0.0750	
6.		Lower Quality		XXX	XXX		0.0432		0.1100		0.1700	
7.		In or Near Default		XXX	XXX		0.0000		0.2000		0.2000	
8.		Total Unrated Multi-class Securities Acquired by Conversion		XXX	XXX		XXX		XXX		XXX	
9.		Total Long-Term Bonds (Sum of Lines 1 through 8)	29,904,124	XXX	XXX	29,904,124	XXX	10,131	XXX	40,993	XXX	58,301
PREFERRED STOCK												
10.	1 2 3 4 5 6 7	Highest Quality		XXX	XXX		0.0004		0.0023		0.0030	
11.		High Quality		XXX	XXX		0.0019		0.0058		0.0090	
12.		Medium Quality		XXX	XXX		0.0093		0.0230		0.0340	
13.		Low Quality		XXX	XXX		0.0213		0.0530		0.0750	
14.		Lower Quality		XXX	XXX		0.0432		0.1100		0.1700	
15.		In or Near Default		XXX	XXX		0.0000		0.2000		0.2000	
16.		Affiliated Life with AVR		XXX	XXX		0.0000		0.0000		0.0000	
17.		Total Preferred Stocks (Sum of Lines 10 through 16)		XXX	XXX		XXX		XXX		XXX	
SHORT - TERM BONDS												
18.	1 2 3 4 5 6 7	Exempt Obligations	378,669	XXX	XXX	378,669	0.0000		0.0000		0.0000	
19.		Highest Quality		XXX	XXX		0.0004		0.0023		0.0030	
20.		High Quality		XXX	XXX		0.0019		0.0058		0.0090	
21.		Medium Quality		XXX	XXX		0.0093		0.0230		0.0340	
22.		Low Quality		XXX	XXX		0.0213		0.0530		0.0750	
23.		Lower Quality		XXX	XXX		0.0432		0.1100		0.1700	
24.		In or Near Default		XXX	XXX		0.0000		0.2000		0.2000	
25.		Total Short - Term Bonds (Sum of Lines 18 through 24)	378,669	XXX	XXX	378,669	XXX		XXX		XXX	
DERIVATIVE INSTRUMENTS												
26.	1 2 3 4 5 6 7	Exchange Traded		XXX	XXX		0.0004		0.0023		0.0030	
27.		Highest Quality		XXX	XXX		0.0004		0.0023		0.0030	
28.		High Quality		XXX	XXX		0.0019		0.0058		0.0090	
29.		Medium Quality		XXX	XXX		0.0093		0.0230		0.0340	
30.		Low Quality		XXX	XXX		0.0213		0.0530		0.0750	
31.		Lower Quality		XXX	XXX		0.0432		0.1100		0.1700	
32.		In or Near Default		XXX	XXX		0.0000		0.2000		0.2000	
33.		Total Derivative Instruments		XXX	XXX		XXX		XXX		XXX	
34.		Total (Lines 9 + 17 + 25 + 33)	30,282,793	XXX	XXX	30,282,793	XXX	10,131	XXX	40,993	XXX	58,301

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
31		MORTGAGE LOANS										
		In Good Standing:										
35.		Farm Mortgages - CM1 - Highest Quality .....				XXX		0.0010		0.0050		0.0065
36.		Farm Mortgages - CM2 - High Quality .....				XXX		0.0035		0.0100		0.0130
37.		Farm Mortgages - CM3 - Medium Quality .....				XXX		0.0060		0.0175		0.0225
38.		Farm Mortgages - CM4 - Low Medium Quality .....				XXX		0.0105		0.0300		0.0375
39.		Farm Mortgages - CM5 - Low Quality .....				XXX		0.0160		0.0425		0.0550
40.		Residential Mortgages - Insured or Guaranteed .....				XXX		0.0003		0.0006		0.0010
41.		Residential Mortgages - All Other .....				XXX		0.0013		0.0030		0.0040
42.		Commercial Mortgages - Insured or Guaranteed .....				XXX		0.0003		0.0006		0.0010
43.		Commercial Mortgages - All Other - CM1 - Highest Quality .....				XXX		0.0010		0.0050		0.0065
44.		Commercial Mortgages - All Other - CM2 - High Quality .....				XXX		0.0035		0.0100		0.0130
45.		Commercial Mortgages - All Other - CM3 - Medium Quality .....				XXX		0.0060		0.0175		0.0225
46.		Commercial Mortgages - All Other - CM4 - Low Medium Quality .....				XXX		0.0105		0.0300		0.0375
47.		Commercial Mortgages - All Other - CM5 - Low Quality .....				XXX		0.0160		0.0425		0.0550
Overdue, Not in Process:												
48.		Farm Mortgages .....				XXX		0.0420		0.0760		0.1200
49.		Residential Mortgages - Insured or Guaranteed .....				XXX		0.0005		0.0012		0.0020
50.		Residential Mortgages - All Other .....				XXX		0.0025		0.0058		0.0090
51.		Commercial Mortgages - Insured or Guaranteed .....				XXX		0.0005		0.0012		0.0020
52.		Commercial Mortgages - All Other .....				XXX		0.0420		0.0760		0.1200
In Process of Foreclosure:												
53.		Farm Mortgages .....				XXX		0.0000		0.1700		0.1700
54.		Residential Mortgages - Insured or Guaranteed .....				XXX		0.0000		0.0040		0.0040
55.		Residential Mortgages - All Other .....				XXX		0.0000		0.0130		0.0130
56.		Commercial Mortgages - Insured or Guaranteed .....				XXX		0.0000		0.0040		0.0040
57.		Commercial Mortgages - All Other .....				XXX		0.0000		0.1700		0.1700
58.		Total Schedule B Mortgages (Sum of Lines 35 through 57)				XXX		XXX		XXX		XXX
59.		Schedule DA Mortgages				XXX		0.0030		0.0100		0.0130
60.		Total Mortgage Loans on Real Estate (Lines 58 + 59)				XXX		XXX		XXX		XXX

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
1.		COMMON STOCK										
2.		Unaffiliated - Public		XXX	XXX		0.0000		0.1300 (a)		0.1300 (a)	
3.		Unaffiliated - Private		XXX	XXX		0.0000		0.1600		0.1600	
4.		Federal Home Loan Bank		XXX	XXX		0.0000		0.0050		0.0080	
4.		Affiliated - Life with AVR	12,540,010	XXX	XXX	12,540,010	0.0000		0.0000		0.0000	
5.		Affiliated - Investment Subsidiary:										
6.		Fixed Income - Exempt Obligations					XXX		XXX		XXX	
7.		Fixed Income - Highest Quality					XXX		XXX		XXX	
8.		Fixed Income - High Quality					XXX		XXX		XXX	
9.		Fixed Income - Medium Quality					XXX		XXX		XXX	
10.		Fixed Income - Low Quality					XXX		XXX		XXX	
11.		Fixed Income - Lower Quality					XXX		XXX		XXX	
12.		Fixed Income - In/Near Default					XXX		XXX		XXX	
13.		Unaffiliated Common Stock - Public					0.0000		0.1300 (a)		0.1300 (a)	
14.		Unaffiliated Common Stock - Private					0.0000		0.1600		0.1600	
15.		Real Estate					(b)		(b)		(b)	
16.		Affiliated - Certain Other (See SVO Purposes and Procedures Manual)		XXX	XXX		0.0000		0.1300		0.1300	
16.		Affiliated - All Other		XXX	XXX		0.0000		0.1600		0.1600	
17.		Total Common Stock (Sum of Lines 1 through 16)	12,540,010			12,540,010	XXX		XXX		XXX	
18.		REAL ESTATE										
19.		Home Office Property (General Account only)					0.0000		0.0750		0.0750	
20.		Investment Properties					0.0000		0.0750		0.0750	
21.		Properties Acquired in Satisfaction of Debt					0.0000		0.1100		0.1100	
21.		Total Real Estate (Sum of Lines 18 through 20)					XXX		XXX		XXX	
22.		OTHER INVESTED ASSETS										
22.		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS										
23.	1	Exempt Obligations		XXX	XXX		0.0000		0.0000		0.0000	
24.	2	Highest Quality		XXX	XXX		0.0004		0.0023		0.0030	
25.	3	High Quality		XXX	XXX		0.0019		0.0058		0.0090	
26.	4	Medium Quality		XXX	XXX		0.0093		0.0230		0.0340	
27.	5	Low Quality		XXX	XXX		0.0213		0.0530		0.0750	
28.	6	Lower Quality		XXX	XXX		0.0432		0.1100		0.1700	
29.		In or Near Default		XXX	XXX		0.0000		0.2000		0.2000	
29.		Total with Bond Characteristics (Sum of Lines 22 through 28)		XXX	XXX		XXX		XXX		XXX	

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
30.	1	Highest Quality .....		XXX	XXX		0.0004		0.0023		0.0030	
31.	2	High Quality .....		XXX	XXX		0.0019		0.0058		0.0090	
32.	3	Medium Quality .....		XXX	XXX		0.0093		0.0230		0.0340	
33.	4	Low Quality .....		XXX	XXX		0.0213		0.0530		0.0750	
34.	5	Lower Quality .....		XXX	XXX		0.0432		0.1100		0.1700	
35.	6	In or Near Default .....		XXX	XXX		0.0000		0.2000		0.2000	
36.		Affiliated Life with AVR .....		XXX	XXX		0.0000		0.0000		0.0000	
37.		Total with Preferred Stock Characteristics (Sum of Lines 30 through 36)		XXX	XXX		XXX		XXX		XXX	
33		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing Affiliated:										
	38.	Mortgages - CM1 - Highest Quality .....			XXX		0.0010		0.0050		0.0065	
	39.	Mortgages - CM2 - High Quality .....			XXX		0.0035		0.0100		0.0130	
	40.	Mortgages - CM3 - Medium Quality .....			XXX		0.0060		0.0175		0.0225	
	41.	Mortgages - CM4 - Low Medium Quality .....			XXX		0.0105		0.0300		0.0375	
	42.	Mortgages - CM5 - Low Quality .....			XXX		0.0160		0.0425		0.0550	
	43.	Residential Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0006		0.0010	
	44.	Residential Mortgages - All Other .....			XXX		0.0013		0.0030		0.0040	
	45.	Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0003		0.0006		0.0010	
		Overdue, Not in Process Affiliated:										
	46.	Farm Mortgages .....			XXX		0.0420		0.0760		0.1200	
	47.	Residential Mortgages - Insured or Guaranteed .....			XXX		0.0005		0.0012		0.0020	
	48.	Residential Mortgages - All Other .....			XXX		0.0025		0.0058		0.0090	
	49.	Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0005		0.0012		0.0020	
	50.	Commercial Mortgages - All Other .....			XXX		0.0420		0.0760		0.1200	
		In Process of Foreclosure Affiliated:										
	51.	Farm Mortgages .....			XXX		0.0000		0.1700		0.1700	
	52.	Residential Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0040		0.0040	
	53.	Residential Mortgages - All Other .....			XXX		0.0000		0.0130		0.0130	
	54.	Commercial Mortgages - Insured or Guaranteed .....			XXX		0.0000		0.0040		0.0040	
	55.	Commercial Mortgages - All Other .....			XXX		0.0000		0.1700		0.1700	
	56.	Total Affiliated (Sum of Lines 38 through 55) .....			XXX		XXX		XXX		XXX	
	57.	Unaffiliated - In Good Standing With Covenants .....			XXX		(c)		(c)		(c)	
	58.	Unaffiliated - In Good Standing Defeased With Government Securities .....			XXX		0.0010		0.0050		0.0065	
	59.	Unaffiliated - In Good Standing Primarily Senior .....			XXX		0.0035		0.0110		0.0130	
	60.	Unaffiliated - In Good Standing All Other .....			XXX		0.0060		0.0175		0.0225	
	61.	Unaffiliated - Overdue, Not in Process .....			XXX		0.0420		0.0760		0.1200	
	62.	Unaffiliated - In Process of Foreclosure .....			XXX		0.0000		0.1700		0.1700	
	63.	Total Unaffiliated (Sum of Lines 57 through 62) .....			XXX		XXX		XXX		XXX	
	64.	Total with Mortgage Loan Characteristics (Lines 56 + 63) .....			XXX		XXX		XXX		XXX	

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

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

Line Number	NAIC Designation	Description	1 Book/Adjusted Carrying Value	2 Reclassify Related Party Encumbrances	3 Add Third Party Encumbrances	4 Balance for AVR Reserve Calculations (Cols. 1 + 2 + 3)	Basic Contribution		Reserve Objective		Maximum Reserve	
							5 Factor	6 Amount (Cols. 4 x 5)	7 Factor	8 Amount (Cols. 4 x 7)	9 Factor	10 Amount (Cols. 4 x 9)
65.		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCK										
66.		Unaffiliated Public .....		XXX	XXX		0.0000		0.1300 (a)		0.1300 (a)	
67.		Unaffiliated Private .....		XXX	XXX		0.0000		0.1600		0.1600	
68.		Affiliated Life with AVR .....		XXX	XXX		0.0000		0.0000		0.0000	
69.		Affiliated Certain Other (See SVO Purposes & Procedures Manual) .....		XXX	XXX		0.0000		0.1300		0.1300	
70.		Affiliated Other - All Other .....		XXX	XXX		0.0000		0.1600		0.1600	
		Total with Common Stock Characteristics (Sum of Lines 65 through 69)		XXX	XXX		XXX		XXX		XXX	
71.		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE										
72.		Home Office Property (General Account only) .....					0.0000		0.0750		0.0750	
73.		Investment Properties .....					0.0000		0.0750		0.0750	
74.		Properties Acquired in Satisfaction of Debt .....					0.0000		0.1100		0.1100	
		Total with Real Estate Characteristics (Sum of Lines 71 through 73)					XXX		XXX		XXX	
75.		LOW INCOME HOUSING TAX CREDIT INVESTMENTS										
76.		Guaranteed Federal Low Income Housing Tax Credit .....					0.0003		0.0006		0.0010	
77.		Non-guaranteed Federal Low Income Housing Tax Credit .....					0.0063		0.0120		0.0190	
78.		Guaranteed State Low Income Housing Tax Credit .....					0.0003		0.0006		0.0010	
79.		Non-guaranteed State Low Income Housing Tax Credit .....					0.0063		0.0120		0.0190	
80.		All Other Low Income Housing Tax Credit .....					0.0273		0.0600		0.0975	
		Total LIHTC (Sum of Lines 75 through 79)					XXX		XXX		XXX	
81.		ALL OTHER INVESTMENTS										
82.		NAIC 1 Working Capital Finance Investments .....		XXX			0.0000		0.0037		0.0037	
83.		NAIC 2 Working Capital Finance Investments .....		XXX			0.0000		0.0120		0.0120	
84.		Other Invested Assets - Schedule BA .....		XXX			0.0000		0.1300		0.1300	
85.		Other Short-Term Invested Assets - Schedule DA .....		XXX			0.0000		0.1300		0.1300	
		Total All Other (Sum of Lines 81, 82, 83 and 84)		XXX			XXX		XXX		XXX	
		Total Other Invested Assets - Schedules BA & DA (Sum of Lines 29, 37, 64, 70, 74, 80 and 85)					XXX		XXX		XXX	

(a) Times the company's weighted average portfolio beta (Minimum .10, Maximum .20).

(b) Determined using the same factors and breakdowns used for directly owned real estate.

(c) This will be the factor associated with the risk category determined in the company generated worksheet.

Asset Valuation Reserve Replications (Synthetic) Assets

**N O N E**

Schedule F - Claims

**N O N E**

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

**SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT**

	Total		Group Accident and Health		Credit Accident and Health (Group and Individual)		Collectively Renewable		Other Individual Contracts									
	1 Amount	2 %							11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %		
<b>PART 1. - ANALYSIS OF UNDERWRITING OPERATIONS</b>																		
1. Premiums written .....	1,286,964	XXX		XXX	1,286,964	XXX		XXX		XXX		XXX		XXX		XXX		XXX
2. Premiums earned .....	2,101,157	XXX		XXX	2,101,157	XXX		XXX		XXX		XXX		XXX		XXX		XXX
3. Incurred claims .....	855,452	40.7			855,452	40.7												
4. Cost containment expenses .....																		
5. Incurred claims and cost containment expenses (Lines 3 and 4) .....	855,452	40.7			855,452	40.7												
6. Increase in contract reserves .....																		
7. Commissions (a) .....	63,066	3.0			63,066	3.0												
8. Other general insurance expenses .....	783,881	37.3			783,881	37.3												
9. Taxes, licenses and fees .....	196,089	9.3			196,089	9.3												
10. Total other expenses incurred .....	1,043,036	49.6			1,043,036	49.6												
11. Aggregate write-ins for deductions .....																		
12. Gain from underwriting before dividends or refunds .....	202,669	9.6			202,669	9.6												
13. Dividends or refunds .....																		
14. Gain from underwriting after dividends or refunds .....	202,669	9.6			202,669	9.6												
<b>DETAILS OF WRITE-INS</b>																		
1101. ....																		
1102. ....																		
1103. ....																		
1198. Summary of remaining write-ins for Line 11 from overflow page .....																		
1199. Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above) .....																		

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

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

**SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)**

	1 Total	2 Group Accident and Health	3 Credit Accident and Health (Group and Individual)	4 Collectively Renewable	Other Individual Contracts				
					5 Non-Cancelable	6 Guaranteed Renewable	7 Non-Renewable for Stated Reasons Only	8 Other Accident Only	9 All Other
<b>PART 2. - RESERVES AND LIABILITIES</b>									
A. Premium Reserves:									
1. Unearned premiums .....	2,621,055			2,621,055					
2. Advance premiums .....									
3. Reserve for rate credits .....									
4. Total premium reserves, current year .....	2,621,055			2,621,055					
5. Total premium reserves, prior year .....	3,435,248			3,435,248					
6. Increase in total premium reserves .....	(814,193)			(814,193)					
B. Contract Reserves:									
1. Additional reserves (a) .....									
2. Reserve for future contingent benefits .....									
3. Total contract reserves, current year .....									
4. Total contract reserves, prior year .....									
5. Increase in contract reserves .....									
C. Claim Reserves and Liabilities:									
1. Total current year .....	1,652,886			1,652,886					
2. Total prior year .....	2,019,689			2,019,689					
3. Increase .....	(366,803)			(366,803)					

PART 3. - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES									
1. Claims paid during the year:									
1.1 On claims incurred prior to current year .....	950,880			950,880					
1.2 On claims incurred during current year .....	271,375			271,375					
2. Claim reserves and liabilities, December 31, current year:									
2.1 On claims incurred prior to current year .....	1,002,399			1,002,399					
2.2 On claims incurred during current year .....	650,487			650,487					
3. Test:									
3.1 Lines 1.1 and 2.1 .....	1,953,279			1,953,279					
3.2 Claim reserves and liabilities, December 31, prior year .....	2,019,689			2,019,689					
3.3 Line 3.1 minus Line 3.2 .....	(66,410)			(66,410)					

PART 4. - REINSURANCE									
A. Reinsurance Assumed:									
1. Premiums written .....	45,389			45,389					
2. Premiums earned .....	45,389			45,389					
3. Incurred claims .....	296,872			296,872					
4. Commissions .....	9,194			9,194					
B. Reinsurance Ceded:									
1. Premiums written .....	2,679,666			2,679,666					
2. Premiums earned .....	2,686,149			2,686,149					
3. Incurred claims .....	1,290,938			1,290,938					
4. Commissions .....	1,174,679			1,174,679					

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

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY  
**SCHEDULE H - PART 5 - HEALTH CLAIMS**

	1 Medical	2 Dental	3 Other	4 Total
<b>A. Direct:</b>				
1. Incurred Claims .....			1,849,518	1,849,518
2. Beginning Claim Reserves and Liabilities .....			4,654,315	4,654,315
3. Ending Claim Reserves and Liabilities .....			3,728,998	3,728,998
4. Claims Paid			2,774,835	2,774,835
<b>B. Assumed Reinsurance:</b>				
5. Incurred Claims.....			296,872	296,872
6. Beginning Claim Reserves and Liabilities .....			197,044	197,044
7. Ending Claim Reserves and Liabilities .....			108,221	108,221
8. Claims Paid			385,695	385,695
<b>C. Ceded Reinsurance:</b>				
9. Incurred Claims.....			1,290,939	1,290,939
10. Beginning Claim Reserves and Liabilities .....			3,015,720	3,015,720
11. Ending Claim Reserves and Liabilities .....			2,305,510	2,305,510
12. Claims Paid			2,001,149	2,001,149
<b>D. Net:</b>				
13. Incurred Claims.....			855,451	855,451
14. Beginning Claim Reserves and Liabilities .....			1,835,639	1,835,639
15. Ending Claim Reserves and Liabilities .....			1,531,709	1,531,709
16. Claims Paid			1,159,381	1,159,381
<b>E. Net Incurred Claims and Cost Containment Expenses:</b>				
17. Incurred Claims and Cost Containment Expenses			855,451	855,451
18. Beginning Reserves and Liabilities .....			1,835,638	1,835,638
19. Ending Reserves and Liabilities .....			1,531,709	1,531,709
20. Paid Claims and Cost Containment Expenses			1,159,380	1,159,380

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

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

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Amount of In Force at End of Year	8 Reserve	9 Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
0399999. Total General Account - U.S. Affiliates											
0699999. Total General Account - Non-U.S. Affiliates											
0799999. Total General Account - Affiliates											
.....60242.....61-1316749.....04/12/1999.....SOUTHERN FINANCIAL LIFE INS CO				KY	CO/G	1,552,138	1,129	33,961	1,971		
0899999. General Account - U.S. Non-Affiliates						1,552,138	1,129	33,961	1,971		
1099999. Total General Account - Non-Affiliates						1,552,138	1,129	33,961	1,971		
1199999. Total General Account						1,552,138	1,129	33,961	1,971		
1499999. Total Separate Accounts - U.S. Affiliates											
1799999. Total Separate Accounts - Non-U.S. Affiliates											
1899999. Total Separate Accounts - Affiliates											
2199999. Total Separate Accounts - Non-Affiliates											
2299999. Total Separate Accounts											
2399999. Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)						1,552,138	1,129	33,961	1,971		
2499999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)											
9999999 - Totals						1,552,138	1,129	33,961	1,971		

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

**SCHEDULE S - PART 1 - SECTION 2**

Reinsurance Assumed Accident and Health Insurance Listed by Reinsured Company as of December 31, Current Year

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsured	5 Domiciliary Jurisdiction	6 Type of Reinsurance Assumed	7 Premiums	8 Unearned Premiums	9 Reserve Liability Other Than for Unearned Premiums	10 Reinsurance Payable on Paid and Unpaid Losses	11 Modified Coinsurance Reserve	12 Funds Withheld Under Coinsurance
0399999. Total - U.S. Affiliates											
0699999. Total - Non-U.S. Affiliates											
0799999. Total - Affiliates											
.....60242 ..61-1316749 ...04/12/1999 ...SOUTHERN FINANCIAL LIFE INS CO .....	KY		CO/G			45,389		100,549	7,672		
0899999. U.S. Non-Affiliates						45,389		100,549	7,672		
1099999. Total - Non-Affiliates						45,389		100,549	7,672		
1199999. Total U.S. (Sum of 0399999 and 0899999)						45,389		100,549	7,672		
1299999. Total Non-U.S. (Sum of 0699999 and 0999999)											
9999999 - Totals						45,389		100,549	7,672		

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

**SCHEDULE S - PART 2**

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domiciliary Jurisdiction	6 Paid Losses	7 Unpaid Losses
0399999. Total Life and Annuity - U.S. Affiliates						
0699999. Total Life and Annuity - Non-U.S. Affiliates						
0799999. Total Life and Annuity - Affiliates						
93793 .. 86-0420759 .. 05/06/1999 .. MIAMI VALLEY INSURANCE COMPANY ..				AZ ..		1,055
97381 .. 86-0441303 .. 10/19/2001 .. US BANCORP INS CO ..				VT ..	115,670	246,288
0899999. Life and Annuity - U.S. Non-Affiliates					115,670	247,343
00000 .. 98-0558492 .. 01/01/1994 .. DEVONSHIRE TCI INSURANCE COMPANY LTD ..				TCA ..	2,702	67,551
00000 .. AA-0052804 .. 06/28/2006 .. FIRST OKLAHOMA LIFE & CASUALTY REINS CO LTD ..				TCA ..		1,673
00000 .. 98-1132003 .. 10/01/2013 .. FIRST LIFE & CASUALTY REINSURANCE COMPANY, LTD ..				TCA ..	48,859	5,884
00000 .. AA-0051293 .. 07/01/2008 .. INDEPENDENT BANKERS LIFE REINS CO OF INDIANA LTD ..				TCA ..		10,520
00000 .. AA-0040087 .. 07/01/2008 .. CASTLETON FINANCIAL INS CO LTD ..				VGB ..	2,336	1,442
0999999. Life and Annuity - Non-U.S. Non-Affiliates					53,897	87,070
1099999. Total Life and Annuity - Non-Affiliates					169,567	334,413
1199999. Total Life and Annuity					169,567	334,413
1499999. Total Accident and Health - U.S. Affiliates						
1799999. Total Accident and Health - Non-U.S. Affiliates						
1899999. Total Accident and Health - Affiliates						
93793 .. 86-0420759 .. 05/06/1999 .. MIAMI VALLEY INSURANCE COMPANY ..				AZ ..	245	467
97381 .. 86-0441303 .. 10/19/2001 .. US BANCORP INS CO ..				VT ..	48,377	300,826
1999999. Accident and Health - U.S. Non-Affiliates					48,622	301,293
00000 .. 98-0558492 .. 01/01/1994 .. DEVONSHIRE TCI INSURANCE COMPANY LTD ..				TCA ..	42,855	146,084
00000 .. AA-0052804 .. 06/28/2006 .. FIRST OKLAHOMA LIFE & CASUALTY REINS CO LTD ..				TCA ..	4,542	
00000 .. 98-1132003 .. 10/01/2013 .. FIRST LIFE & CASUALTY REINSURANCE COMPANY, LTD ..				TCA ..	20,026	
00000 .. AA-0051293 .. 07/01/2008 .. INDEPENDENT BANKERS LIFE REINS CO OF INDIANA LTD ..				TCA ..	4,630	
00000 .. AA-0040087 .. 07/01/2008 .. CASTLETON FINANCIAL INS CO LTD ..				VGB ..	503	
2099999. Accident and Health - Non-U.S. Non-Affiliates					72,556	146,084
2199999. Total Accident and Health - Non-Affiliates					121,178	447,377
2299999. Total Accident and Health					121,178	447,377
2399999. Total U.S. (Sum of 0399999, 0899999, 1499999 and 1999999)					164,292	548,636
2499999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999 and 2099999)					126,453	233,154
9999999 Totals - Life, Annuity and Accident and Health					290,745	781,790

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

## SCHEDULE S - PART 3 - SECTION 1

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11 Premiums	Outstanding Surplus Relief		14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year		12 Current Year	13 Prior Year		
0399999.			Total General Account - Authorized U.S. Affiliates											
0699999.			Total General Account - Authorized Non-U.S. Affiliates											
0799999.			Total General Account - Authorized Affiliates											
82627	.06-0839705	01/01/2013	SWISS RE LIFE & HEALTH AMERICA INC.	CT	CAT/G.	CL					109			
37273	.39-1338397	01/01/2013	AXIS INSURANCE COMPANY	IL	CAT/G.	CL					73			
16535	.36-4233459	01/01/2013	ZURICH AMERICAN INSURANCE COMPANY	NY	CAT/G.	CL					98			
93572	.43-1235868	01/01/2013	RGA REINSURANCE COMPANY	MO	CAT/G.	CL					106			
10227	.13-4924125	01/01/2013	MUNICH REINSURANCE AMERICA, INC.	DE	CAT/G.	CL					41			
23043	.04-1543470	01/01/2014	LIBERTY MUTUAL INSURANCE COMPANY	MA	CAT/G.	CL					16			
0899999.			General Account - Authorized U.S. Non-Affiliates								443			
00000	AA-1120337	01/01/2016	ASPEN INSURANCE UK LIMITED	GBR	CAT/G.	CL					66			
00000	AA-1120055	01/01/2014	LLOYD's UNDERWRITER SYNDICATE NO. AFB 3623	GBR	CAT/G.	CL					49			
00000	AA-1126033	01/01/2013	LLOYD's UNDERWRITER SYNDICATE NO. HIS 0033	GBR	CAT/G.	CL					42			
00000	AA-1126609	01/01/2013	LLOYD's UNDERWRITER SYNDICATE NO. AWU 0609	GBR	CAT/G.	CL					9			
00000	AA-1126005	01/01/2014	LLOYD's UNDERWRITER SYNDICATE NO. PEM 4000	GBR	CAT/G.	CL					10			
00000	AA-1120158	01/01/2015	LLOYD's UNDERWRITER SYNDICATE NO. ACA 2014	GBR	CAT/G.	CL					9			
00000	AA-1120085	01/01/2014	LLOYD's UNDERWRITER SYNDICATE NO. AWU 1274	GBR	CAT/G.	CL					7			
00000	AA-1127084	01/01/2014	LLOYD's UNDERWRITER SYNDICATE NO. CS 1084	GBR	CAT/G.	CL					4			
00000	AA-1126382	01/01/2014	LLOYD's UNDERWRITER SYNDICATE NO. HDU 0382	GBR	CAT/G.	CL					7			
00000	AA-1128003	01/01/2014	LLOYD's UNDERWRITER SYNDICATE NO. SJC 2003	GBR	CAT/G.	CL					7			
00000	AA-1127861	01/01/2013	LLOYD's UNDERWRITER SYNDICATE NO. ANV 1861	GBR	CAT/G.	CL					10			
00000	AA-1120048	01/01/2015	LLOYD's UNDERWRITER SYNDICATE NO. ANV 5820	GBR	CAT/G.	CL					6			
00000	AA-1120106	01/01/2015	LLOYD's UNDERWRITER SYNDICATE NO. APL 1969	GBR	CAT/G.	CL					2			
00000	AA-1120124	01/01/2013	LLOYD's UNDERWRITER SYNDICATE NO. SII 1945	GBR	CAT/G.	CL					25			
00000	AA-1120064	01/01/2015	LLOYD's UNDERWRITER SYNDICATE NO. CVS 1919	GBR	CAT/G.	CL					7			
00000	AA-1126510	01/01/2013	LLOYD's UNDERWRITER SYNDICATE NO. KLN 510	GBR	CAT/G.	CL					23			
00000	AA-1120075	01/01/2013	LLOYD's UNDERWRITER SYNDICATE NO. ARK 4020	GBR	CAT/G.	CL					16			
00000	AA-1126780	01/01/2014	LLOYD's UNDERWRITER SYNDICATE NO. ADV 0780	GBR	CAT/G.	CL					3			
00000	AA-1127301	01/01/2014	LLOYD's UNDERWRITER SYNDICATE NO. SCC 1301	GBR	CAT/G.	CL					4			
00000	AA-1120163	01/01/2016	LLOYD's UNDERWRITER SYNDICATE NO. VSM 5678	GBR	CAT/G.	CL					6			
00000	AA-1128897	01/01/2015	LLOYD's UNDERWRITER SYNDICATE NO. BRT 2987	GBR	CAT/G.	CL					10			
00000	AA-1120090	01/01/2016	LLOYD's UNDERWRITER SYNDICATE NO. ASP 4711	GBR	CAT/G.	CL					7			
00000	AA-1120104	01/01/2014	LLOYD's UNDERWRITER SYNDICATE NO. AAL 2012	GBR	CAT/G.	CL					30			
00000	AA-1126006	01/01/2014	LLOYD's UNDERWRITER SYNDICATE NO. LIB 4472	GBR	CAT/G.	CL					25			
00000	AA-1128001	01/01/2014	LLOYD's UNDERWRITER SYNDICATE NO. AML 2001	GBR	CAT/G.	CL					6			
00000	AA-1120113	01/01/2016	LLOYD's UNDERWRITER SYNDICATE NO. HAM 3334	GBR	CAT/G.	CL					6			
00000	AA-1120071	01/01/2014	LLOYD's UNDERWRITER SYNDICATE NO. NVA 2007	GBR	CAT/G.	CL					1			
00000	AA-1120103	01/01/2015	LLOYD's UNDERWRITER SYNDICATE NO. WRB 1967	GBR	CAT/G.	CL					3			
0999999.			General Account - Authorized Non-U.S. Non-Affiliates								400			
1099999.			Total General Account - Authorized Non-Affiliates								843			
1199999.			Total General Account Authorized								843			
1499999.			Total General Account - Unauthorized U.S. Affiliates											
1799999.			Total General Account - Unauthorized Non-U.S. Affiliates											
1899999.			Total General Account - Unauthorized Affiliates											
93793	.86-0420759	05/06/1999	MIAMI VALLEY INSURANCE COMPANY	AZ	CO/G.	CL	831,047	31,525	71,099		(2,293)			
97381	.86-0441303	10/19/2001	US BANCORP INS CO	VT	CO/G.	CL	170,691,685	3,912	18,514		1,832,587			
1999999.			General Account - Unauthorized U.S. Non-Affiliates				171,522,732	35,437	89,613		1,830,294			
00000	98-0558492	01/01/1994	DEVONSHIRE TCI INSURANCE COMPANY LTD	TCA	CO/G.	CL	54,397,717	266	1,128		513,770			
00000	AA-0052804	06/28/2006	FIRST OKLAHOMA LIFE & CASUALTY REINS CO LTD	TCA	CO/G.	CL	1,924,342	52,224	117,800		(9,606)			
00000	98-1132003	10/01/2013	FIRST LIFE & CASUALTY REINSURANCE COMPANY, LTD	TCA	CO/G.	CL	76,654,730	107,761	308,899		995,086			1,312,798
00000	AA-0051293	07/01/2008	INDEPENDENT BANKERS LIFE REINS CO OF INDIANA LTD	TCA	CO/G.	CL	9,742,210	104,281	177,449		13,856			
00000	AA-0040087	07/01/2008	CASTLETON FINANCIAL INS CO LTD	VGB	CO/G.	CL	1,335,839	16,938	26,582		5,675			
2099999.			General Account - Unauthorized Non-U.S. Non-Affiliates				144,054,838	281,470	631,858		1,518,781			1,312,798
2199999.			Total General Account - Unauthorized Non-Affiliates				315,577,570	316,907	721,471		3,349,075			1,312,798
2299999.			Total General Account Unauthorized				315,577,570	316,907	721,471		3,349,075			1,312,798

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

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

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Amount in Force at End of Year	Reserve Credit Taken		11	Outstanding Surplus Relief	14 Modified Coinsurance Reserve	15 Funds Withheld Under Coinsurance
								9 Current Year	10 Prior Year				
2599999. Total General Account - Certified U.S. Affiliates													
2899999. Total General Account - Certified Non-U.S. Affiliates													
2999999. Total General Account - Certified Affiliates													
3299999. Total General Account - Certified Non-Affiliates													
3399999. Total General Account Certified													
3499999. Total General Account Authorized, Unauthorized and Certified							315,577,570	316,907	721,471	3,349,918			1,312,798
3799999. Total Separate Accounts - Authorized U.S. Affiliates													
4099999. Total Separate Accounts - Authorized Non-U.S. Affiliates													
4199999. Total Separate Accounts - Authorized Affiliates													
4499999. Total Separate Accounts - Authorized Non-Affiliates													
4599999. Total Separate Accounts Authorized													
4899999. Total Separate Accounts - Unauthorized U.S. Affiliates													
5199999. Total Separate Accounts - Unauthorized Non-U.S. Affiliates													
5299999. Total Separate Accounts - Unauthorized Affiliates													
5599999. Total Separate Accounts - Unauthorized Non-Affiliates													
5699999. Total Separate Accounts Unauthorized													
5999999. Total Separate Accounts - Certified U.S. Affiliates													
6299999. Total Separate Accounts - Certified Non-U.S. Affiliates													
6399999. Total Separate Accounts - Certified Affiliates													
6699999. Total Separate Accounts - Certified Non-Affiliates													
6799999. Total Separate Accounts Certified													
6899999. Total Separate Accounts Authorized, Unauthorized and Certified													
6999999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)							171,522,732	35,437	89,613	1,830,737			
7099999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999)							144,054,838	281,470	631,858	1,519,181			1,312,798
9999999 - Totals							315,577,570	316,907	721,471	3,349,918			1,312,798

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

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

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

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Company	5 Domi- ciliary Juris- diction	6 Type of Reinsurance Ceded	7 Type of Business Ceded	8 Premiums	9 Unearned Premiums (Estimated)	10 Reserve Credit Taken Other than for Unearned Premiums	Outstanding Surplus Relief		13 Modified Coinsurance Reserve	14 Funds Withheld Under Coinsurance
										11 Current Year	12 Prior Year		
0399999.	Total General Account - Authorized U.S. Affiliates												
0699999.	Total General Account - Authorized Non-U.S. Affiliates												
0799999.	Total General Account - Authorized Affiliates												
1099999.	Total General Account - Authorized Non-Affiliates												
1199999.	Total General Account Authorized												
1499999.	Total General Account - Unauthorized U.S. Affiliates												
1799999.	Total General Account - Unauthorized Non-U.S. Affiliates												
1899999.	Total General Account - Unauthorized Affiliates												
93793	.86-0420759	.05/06/1999	MIAMI VALLEY INSURANCE COMPANY	AZ	CO/G...	CAH...	(627)	.211	1,006,819				4,298
97381	.86-0441303	.10/19/2001	US BANCORP INS CO	VT	CO/G...	CAH...	1,212,311	3,652	316,211				
1999999.	General Account - Unauthorized U.S. Non-Affiliates							1,211,684	3,863	1,323,030			4,298
00000	.98-0558492	.01/01/1994	DEVONSHIRE TCI INSURANCE COMPANY LTD	TCA	CO/G...	CAH...	753,825			413,925			
00000	.AA-0052804	.06/28/2006	FIRST OKLAHOMA LIFE & CASUALTY REINS CO LTD	TCA	CO/G...	CAH...	(2,742)						55,427
00000	.98-1132003	.10/01/2013	FIRST LIFE & CASUALTY REINS CO, LTD	TCA	CO/G...	CAH...	701,188						1,363,298
00000	.AA-0051293	.07/01/2008	INDEPENDENT BANKERS LIFE REINS CO OF INDIANA LTD	TCA	CO/G...	CAH...	10,023						246,884
00000	.AA-0040087	.07/01/2008	CASTLETON FINANCIAL INS CO LTD	VGB	CO/G...	CAH...	5,687						21,354
2099999.	General Account - Unauthorized Non-U.S. Non-Affiliates							1,467,981		413,925			1,686,963
2199999.	Total General Account - Unauthorized Non-Affiliates							2,679,665	3,863	1,736,955			1,691,261
2299999.	Total General Account Unauthorized							2,679,665	3,863	1,736,955			1,691,261
2599999.	Total General Account - Certified U.S. Affiliates												
2899999.	Total General Account - Certified Non-U.S. Affiliates												
2999999.	Total General Account - Certified Affiliates												
3299999.	Total General Account - Certified Non-Affiliates												
3399999.	Total General Account Certified												
3499999.	Total General Account Authorized, Unauthorized and Certified							2,679,665	3,863	1,736,955			1,691,261
3799999.	Total Separate Accounts - Authorized U.S. Affiliates												
4099999.	Total Separate Accounts - Authorized Non-U.S. Affiliates												
4199999.	Total Separate Accounts - Authorized Affiliates												
4499999.	Total Separate Accounts - Authorized Non-Affiliates												
4599999.	Total Separate Accounts Authorized												
4899999.	Total Separate Accounts - Unauthorized U.S. Affiliates												
5199999.	Total Separate Accounts - Unauthorized Non-U.S. Affiliates												
5299999.	Total Separate Accounts - Unauthorized Affiliates												
5599999.	Total Separate Accounts - Unauthorized Non-Affiliates												
5699999.	Total Separate Accounts Unauthorized												
5999999.	Total Separate Accounts - Certified U.S. Affiliates												
6299999.	Total Separate Accounts - Certified Non-U.S. Affiliates												
6399999.	Total Separate Accounts - Certified Affiliates												
6699999.	Total Separate Accounts - Certified Non-Affiliates												
6799999.	Total Separate Accounts Certified												
6899999.	Total Separate Accounts Authorized, Unauthorized and Certified												
6999999.	Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2599999, 3099999, 3799999, 4299999, 4899999, 5399999, 5999999 and 6499999)							1,211,684	3,863	1,323,030			4,298
7099999.	Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2899999, 3199999, 4099999, 4399999, 5199999, 5499999, 6299999 and 6599999)							1,467,981		413,925			1,686,963
9999999.	Totals							2,679,665	3,863	1,736,955			1,691,261

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

**SCHEDULE S - PART 4**

## Reinsurance Ceded to Unauthorized Companies

1 NAIC Company Code	2 ID Number	3 Effective Date	4 Name of Reinsurer	5 Reserve Credit Taken	6 Paid and Unpaid Losses Recoverable (Debit)	7 Other Debits	8 Total (Cols.5+6+7)	9 Letters of Credit	10 Issuing or Confirming Bank Reference Number (a)	11 Trust Agreements	12 Funds Deposited by and Withheld from Reinsurers	13 Other	14 Miscellaneous Balances (Credit)	15 Sum of Cols. 9+11+12+13 +14 but not in Excess of Col. 8	
0399999. Total General Account - Life and Annuity U.S. Affiliates									XXX						
0699999. Total General Account - Life and Annuity Non-U.S. Affiliates									XXX						
0799999. Total General Account - Life and Annuity Affiliates									XXX						
.93793 .86-0420759 05/06/1999 MIAMI VALLEY INSURANCE COMPANY				.31,525	.1,055	.34	.32,614			.2,973,676				.24	.32,614
.97381 .86-0441303 10/19/2001 US BANCORP INS CO				.3,912	.361,958	.80,928	.446,798			.2,399,823				.232,898	.446,798
0899999. General Account - Life and Annuity U.S. Non-Affiliates				35,437	363,013	80,962	479,412		XXX	5,373,499				.232,922	.479,412
.00000 .98-0558492 01/01/1994 DEVONSHIRE TCI INSURANCE COMPANY LTD				.266	.70,253	.144,267	.214,786			.606,116				.84,868	.214,786
.00000 .AA-0052804 06/28/2006 FIRST OKLAHOMA LIFE & CASUALTY REINS CO LTD				.52,224	.1,673	.2,647	.56,544			.380,105				.695	.56,544
.00000 .98-1132003 10/01/2013 FIRST LIFE & CASUALTY REINSURANCE COMPANY, LTD				107,761	54,743	.82,204	.244,708			.185,665				.28,140	.213,805
.00000 .AA-0051293 07/01/2008 INDEPENDENT BANKERS LIFE REINS CO OF INDIANA LTD				104,281	10,520	1,968	.116,769			.169,164				.920	.116,769
.00000 .AA-0040087 07/01/2008 CASTLETON FINANCIAL INS CO LTD				.16,938	.3,778	.658	.21,374			.81,974				.324	.21,374
0999999. General Account - Life and Annuity Non-U.S. Non-Affiliates				281,470	140,967	231,744	.654,181		XXX	1,423,024				.114,947	.623,278
1099999. Total General Account - Life and Annuity Non-Affiliates				316,907	503,980	312,706	1,133,593		XXX	6,796,523				.347,869	.1,102,690
1199999. Total General Account Life and Annuity				316,907	503,980	312,706	1,133,593		XXX	6,796,523				.347,869	.1,102,690
1499999. Total General Account - Accident and Health U.S. Affiliates									XXX						
1799999. Total General Account - Accident and Health Non-U.S. Affiliates									XXX						
1899999. Total General Account - Accident and Health Affiliates									XXX						
.93793 .86-0420759 05/06/1999 MIAMI VALLEY INSURANCE COMPANY				1,007,030	.712	.32	.1,007,774			.1,007,774					.1,007,774
.97381 .86-0441303 10/19/2001 US BANCORP INS CO				319,863	349,203	.63,582	.732,648			.544,472				.188,176	.732,648
1999999. General Account - Accident and Health U.S. Non-Affiliates				1,326,893	349,915	63,614	.1,740,422		XXX	1,552,246				.188,176	.1,740,422
.00000 .98-0558492 01/01/1994 DEVONSHIRE TCI INSURANCE COMPANY LTD				413,925	.188,939	.145,819	.748,683			.628,111				.119,572	.748,683
.00000 .AA-0052804 06/28/2006 FIRST OKLAHOMA LIFE & CASUALTY REINS CO LTD					.4,542	.3,744	.8,286			.8,286				.8,286	
.00000 .98-1132003 10/01/2013 FIRST LIFE & CASUALTY REINSURANCE COMPANY, LTD					20,026	.70,058	.90,084			.82,778				.7,306	.90,084
.00000 .AA-0051293 07/01/2008 INDEPENDENT BANKERS LIFE REINS CO OF INDIANA LTD					.4,630	.16,346	.20,976			.20,976				.20,976	
.00000 .AA-0040087 07/01/2008 CASTLETON FINANCIAL INS CO LTD					.503	.1,522	.2,025			.2,025				.2,025	
2099999. General Account - Accident and Health Non-U.S. Non-Affiliates				413,925	218,640	237,499	.870,054		XXX	.743,176				.126,878	.870,054
2199999. Total General Account - Accident and Health Non-Affiliates				1,740,818	568,555	301,103	.2,610,476		XXX	2,295,422				.315,054	.2,610,476
2299999. Total General Account Accident and Health				1,740,818	568,555	301,103	.2,610,476		XXX	2,295,422				.315,054	.2,610,476
2399999. Total General Account				2,057,725	1,072,535	613,809	3,744,069		XXX	9,091,945				.662,923	.3,713,166
2699999. Total Separate Accounts - U.S. Affiliates									XXX						
2999999. Total Separate Accounts - Non-U.S. Affiliates									XXX						
3099999. Total Separate Accounts - Affiliates									XXX						
3399999. Total Separate Accounts - Non-Affiliates									XXX						
3499999. Total Separate Accounts									XXX						
3599999. Total U.S. (Sum of 0399999, 0899999, 1499999, 1999999, 2699999 and 3199999)				1,362,330	712,928	144,576	.2,219,834		XXX	.6,925,745				.421,098	.2,219,834
3699999. Total Non-U.S. (Sum of 0699999, 0999999, 1799999, 2099999, 2999999 and 3299999)				695,395	359,607	469,233	.1,524,235		XXX	.2,166,200				.241,825	.1,493,332
9999999 - Totals				2,057,725	1,072,535	613,809	3,744,069		XXX	9,091,945				.662,923	.3,713,166

(a) Issuing or Confirming Bank Reference Number	Letters of Credit Code	American Bankers Association (ABA) Routing Number	Issuing or Confirming Bank Name	Letters of Credit Amount

**NONE**

Schedule S - Part 5

**N O N E**

Schedule S - Part 5 - Bank Footnote

**N O N E**

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

**SCHEDULE S - PART 6**Five Year Exhibit of Reinsurance Ceded Business  
(000 OMITTED)

	1 2016	2 2015	3 2014	4 2013	5 2012
<b>A. OPERATIONS ITEMS</b>					
1. Premiums and annuity considerations for life and accident and health contracts .....	6,030	9,017	10,813	11,536	14,179
2. Commissions and reinsurance expense allowances .....	2,601	3,230	4,347	4,778	5,472
3. Contract claims .....	3,362	9,272	7,893	7,949	11,577
4. Surrender benefits and withdrawals for life contracts .....					
5. Dividends to policyholders .....					
6. Reserve adjustments on reinsurance ceded .....	(36)	1,517	322	15	(104)
7. Increase in aggregate reserve for life and accident and health contracts .....					
<b>B. BALANCE SHEET ITEMS</b>					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected .....	646	1,206	1,307	879	1,156
9. Aggregate reserves for life and accident and health contracts .....	2,058	3,065	4,998	6,031	8,217
10. Liability for deposit-type contracts .....					
11. Contract claims unpaid .....	782	2,680	2,104	1,370	2,500
12. Amounts recoverable on reinsurance .....	291	310	605	636	613
13. Experience rating refunds due or unpaid .....					523
14. Policyholders' dividends (not included in Line 10) .....					
15. Commissions and reinsurance expense allowances due .....					
16. Unauthorized reinsurance offset .....	31				66
17. Offset for reinsurance with Certified Reinsurers .....					
<b>C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
18. Funds deposited by and withheld from (F) .....					
19. Letters of credit (L) .....					
20. Trust agreements (T) .....	9,092	9,997	14,784	17,105	20,857
21. Other (O) .....					
<b>D. REINSURANCE WITH CERTIFIED REINSURERS (DEPOSITS BY AND FUNDS WITHHELD FROM)</b>					
22. Multiple Beneficiary Trust .....					
23. Funds deposited by and withheld from (F) .....					
24. Letters of credit (L) .....					
25. Trust agreements (T) .....					
26. Other (O) .....					

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

**SCHEDULE S - PART 7**

Restatement of Balance Sheet to Identify Net Credit for Ceded Reinsurance

	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
<b>ASSETS (Page 2, Col. 3)</b>			
1. Cash and invested assets (Line 12) .....	43,452,352		43,452,352
2. Reinsurance (Line 16) .....	607,336	(607,336)	
3. Premiums and considerations (Line 15) .....	104,803	646,482	751,285
4. Net credit for ceded reinsurance .....	XXX	2,769,466	2,769,466
5. All other admitted assets (balance) .....	512,888		512,888
6. Total assets excluding Separate Accounts (Line 26) .....	44,677,379	2,808,612	47,485,991
7. Separate Account assets (Line 27) .....			
8. Total assets (Line 28) .....	44,677,379	2,808,612	47,485,991
<b>LIABILITIES, CAPITAL AND SURPLUS (Page 3)</b>			
9. Contract reserves (Lines 1 and 2) .....	9,409,904	2,057,725	11,467,629
10. Liability for deposit-type contracts (Line 3) .....			
11. Claim reserves (Line 4) .....	803,349	781,790	1,585,139
12. Policyholder dividends/reserves (Lines 5 through 7) .....			
13. Premium & annuity considerations received in advance (Line 8) .....			
14. Other contract liabilities (Line 9) .....	322,458		322,458
15. Reinsurance in unauthorized companies (Line 24.02 minus inset amount) .....	30,903	(30,903)	
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.03 minus inset amount) .....			
17. Reinsurance with Certified Reinsurers (Line 24.02 inset amount) .....			
18. Funds held under reinsurance treaties with Certified Reinsurers (Line 24.03 inset amount) .....			
19. All other liabilities (balance) .....	3,582,991		3,582,991
20. Total liabilities excluding Separate Accounts (Line 26) .....	14,149,605	2,808,612	16,958,217
21. Separate Account liabilities (Line 27) .....			
22. Total liabilities (Line 28) .....	14,149,605	2,808,612	16,958,217
23. Capital & surplus (Line 38) .....	30,527,774	XXX	30,527,774
24. Total liabilities, capital & surplus (Line 39) .....	44,677,379	2,808,612	47,485,991
<b>NET CREDIT FOR CEDED REINSURANCE</b>			
25. Contract reserves .....	2,057,725		
26. Claim reserves .....	781,790		
27. Policyholder dividends/reserves .....			
28. Premium & annuity considerations received in advance .....			
29. Liability for deposit-type contracts .....			
30. Other contract liabilities .....			
31. Reinsurance ceded assets .....	607,336		
32. Other ceded reinsurance recoverables .....			
33. Total ceded reinsurance recoverables .....	3,446,851		
34. Premiums and considerations .....	646,482		
35. Reinsurance in unauthorized companies .....	30,903		
36. Funds held under reinsurance treaties with unauthorized reinsurers .....			
37. Reinsurance with Certified Reinsurers .....			
38. Funds held under reinsurance treaties with Certified Reinsurers .....			
39. Other ceded reinsurance payables/offsets .....			
40. Total ceded reinsurance payable/offsets .....	677,385		
41. Total net credit for ceded reinsurance .....	2,769,466		

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

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

Allocated by States and Territories

States, Etc.		Direct Business Only					
		1 Life (Group and Individual)	2 Annuities (Group and Individual)	3 Disability Income (Group and Individual)	4 Long-Term Care (Group and Individual)	5 Deposit-Type Contracts	6 Totals
1. Alabama	AL	63,539		855			64,394
2. Alaska	AK						
3. Arizona	AZ	19,932		12,379			32,311
4. Arkansas	AR	74,067		57,426			131,493
5. California	CA	102,786		64,793			167,579
6. Colorado	CO	57,876		61,239			119,115
7. Connecticut	CT	41,744		57,841			99,585
8. Delaware	DE						
9. District of Columbia	DC						
10. Florida	FL						
11. Georgia	GA	22,497		9,906			32,403
12. Hawaii	HI						
13. Idaho	ID	71,759		53,337			125,096
14. Illinois	IL	122,679		62,872			185,551
15. Indiana	IN	68,880		69,379			138,259
16. Iowa	IA	86,197		76,355			162,552
17. Kansas	KS	18,624		12,048			30,672
18. Kentucky	KY	41,378		1			41,379
19. Louisiana	LA						
20. Maine	ME						
21. Maryland	MD						
22. Massachusetts	MA	(4)		(7)			(11)
23. Michigan	MI	125,563		60,241			185,804
24. Minnesota	MN	213,965		161,087			375,052
25. Mississippi	MS	22,811		6,734			29,545
26. Missouri	MO	1,957,039		1,254,343			3,211,382
27. Montana	MT	15,967		9,514			25,481
28. Nebraska	NE	45,250		45,897			91,147
29. Nevada	NV	12,876		5,329			18,205
30. New Hampshire	NH						
31. New Jersey	NJ						
32. New Mexico	NM	(699)					(699)
33. New York	NY	370,500		130,689			501,189
34. North Carolina	NC	(11)					(11)
35. North Dakota	ND	23,427		22,670			46,097
36. Ohio	OH	1,127,320		1,371,375			2,498,695
37. Oklahoma	OK						
38. Oregon	OR	167,637		150,626			318,263
39. Pennsylvania	PA	36,486		9,073			45,559
40. Rhode Island	RI						
41. South Carolina	SC						
42. South Dakota	SD	14,888		12,984			27,872
43. Tennessee	TN	58,785		22,381			81,166
44. Texas	TX	1,756		5			1,761
45. Utah	UT	16,980		8,907			25,887
46. Vermont	VT						
47. Virginia	VA	(172)		(647)			(819)
48. Washington	WA	195,518		170,279			365,797
49. West Virginia	WV	22,606		(5,399)			17,207
50. Wisconsin	WI	139,018		112,124			251,142
51. Wyoming	WY	5,959		6,303			12,262
52. American Samoa	AS						
53. Guam	GU						
54. Puerto Rico	PR						
55. U.S. Virgin Islands	VI						
56. Northern Mariana Islands	MP						
57. Canada	CAN						
58. Aggregate Other Alien	OT						
59. Total		5,365,421		4,092,939			9,458,360

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

**SCHEDULE Y**  
**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domi- ciliary Loca- tion	10 Rela- tionship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner- ship Provide Per- centage	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re- quired? (Y/N)	16 *
			41-1792781				ADVANTUS CAPITAL MANAGEMENT, INC.	MN	NIA	SECURIAN FINANCIAL GROUP, INC.	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			35-2125376				ALLIED SOLUTIONS, LLC	IN	NIA	MINNESOTA LIFE INSURANCE COMPANY	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
		0869	65811	86-6052181			AMERICAN MODERN LIFE INSURANCE COMPANY	OH	RE	MINNESOTA LIFE INSURANCE COMPANY	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	Y	
			36-4418695				ASSET ALLOCATION & MANAGEMENT COMPANY LLC	IL	NIA	SECURIAN AAM HOLDINGS LLC	Ownership	66.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			41-1612506				C.R.I. SECURITIES, LLC	MN	NIA	ENTERPRISE HOLDING CORPORATION	Ownership	50.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	.1
			52-1657498				CAPITAL FINANCIAL GROUP, INC.	MD	NIA	SECURIAN FINANCIAL GROUP, INC.	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			41-1919755				CAPITOL CITY PROPERTY MANAGEMENT, INC.	MN	NIA	SECURIAN FINANCIAL GROUP, INC.	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			41-1658115				ENTERPRISE HOLDING COMPANY	MN	NIA	MINNESOTA LIFE INSURANCE COMPANY	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	Y	
			52-1321340				H. BECK, INC.	MD	NIA	SECURIAN FINANCIAL GROUP, INC.	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			47-4991843				LOWERTOWN CAPITAL, LLC	DE	NIA	SECURIAN FINANCIAL GROUP, INC.	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			27-2123801				MARKETVIEW PROPERTIES II, LLC	MN	NIA	MINNESOTA LIFE INSURANCE COMPANY	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			45-4174429				MARKETVIEW PROPERTIES III, LLC	MN	NIA	MINNESOTA LIFE INSURANCE COMPANY	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			45-4174567				MARKETVIEW PROPERTIES IV, LLC	MN	NIA	MINNESOTA LIFE INSURANCE COMPANY	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			27-1769315				MARKETVIEW PROPERTIES, LLC	MN	NIA	MINNESOTA LIFE INSURANCE COMPANY	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			41-1872681				MCM FUNDING 1997-1, INC.	MN	NIA	ENTERPRISE HOLDING CORPORATION	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			41-1917565				MCM FUNDING 1998-1, INC.	MN	NIA	ENTERPRISE HOLDING CORPORATION	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			41-1630884				MIMLIC FUNDING, INC.	MN	NIA	ENTERPRISE HOLDING CORPORATION	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
		0869	66168	41-0417830			MINNESOTA LIFE INSURANCE COMPANY	MN	UDP	SECURIAN FINANCIAL GROUP, INC.	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			41-1919754				MINNESOTA MUTUAL COMPANIES, INC.	MN	UIP	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			41-1412668				OAKLEAF SERVICE CORPORATION	MN	NIA	ENTERPRISE HOLDING CORPORATION	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			41-1598541				OCHS, INC.	MN	NIA	SECURIAN FINANCIAL GROUP, INC.	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			36-2259815				PERSONAL FINANCE COMPANY, LLC	DE	NIA	MINNESOTA LIFE INSURANCE COMPANY	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			41-2016575				ROBERT STREET PROPERTY MANAGEMENT, INC.	MN	NIA	SECURIAN FINANCIAL GROUP, INC.	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			90-0481794				SECURIAN AAM HOLDINGS LLC	DE	NIA	MINNESOTA LIFE INSURANCE COMPANY	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
							SECURIAN CANADA, INC.	CAN	NIA	SECURIAN HOLDING COMPANY, INC.	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
		0869	10054	41-1741988			SECURIAN CASUALTY COMPANY	MN	IA	SECURIAN FINANCIAL GROUP, INC.	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	
			41-1919752				SECURIAN FINANCIAL GROUP, INC.	DE	UIP	SECURIAN HOLDING COMPANY	Ownership	100.00	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N	

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

**SCHEDULE Y**  
**PART 1A - DETAIL OF INSURANCE HOLDING COMPANY SYSTEM**

1 Group Code	2 Group Name	3 NAIC Company Code	4 ID Number	5 Federal RSSD	6 CIK	7 Name of Securities Exchange if Publicly Traded (U.S. or International)	8 Names of Parent, Subsidiaries Or Affiliates	9 Domi-ciliary Loca-tion	10 Relation-ship to Reporting Entity	11 Directly Controlled by (Name of Entity/Person)	12 Type of Control (Ownership, Board, Management, Attorney-in-Fact, Influence, Other)	13 If Control is Owner-ship Provide Percent-age	14 Ultimate Controlling Entity(ies)/Person(s)	15 Is an SCA Filing Re-quired? (Y/N)	16 *
			41-1486060			SECURIAN FINANCIAL SERVICES, INC.	MN	NIA	SECURIAN FINANCIAL GROUP, INC.	Ownership.....	100.000	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N		
			41-1919753			SECURIAN HOLDING COMPANY	DE	UIP	MINNESOTA MUTUAL COMPANIES, INC.	Ownership.....	100.000	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N		
						SECURIAN HOLDING COMPANY CANADA, INC.	CAN	NIA	SECURIAN FINANCIAL GROUP, INC.	Ownership.....	100.000	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N		
.0869	Minnesota Mutual Group	93742	41-1412669			SECURIAN LIFE INSURANCE COMPANY	MN	IA	MINNESOTA LIFE INSURANCE COMPANY	Ownership.....	100.000	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	Y		
			03-0388793	3089752		SECURIAN TRUST COMPANY, NA		NIA	SECURIAN FINANCIAL GROUP, INC.	Ownership.....	100.000	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N		
			41-1972962			SECURIAN VENTURES, INC.	MN	NIA	SECURIAN FINANCIAL GROUP, INC.	Ownership.....	100.000	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N		
.0869	Minnesota Mutual Group	74365	62-0754973			SOUTHERN PIONEER LIFE INSURANCE COMPANY	AR	DS	AMERICAN MODERN LIFE INSURANCE COMPANY	Ownership.....	100.000	POLICYHOLDERS OF MINNESOTA MUTUAL COMPANIES, INC.	N		

Asterisk	Explanation
1	There are no voting right preferences between the 50% owners.

## ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

**SCHEDULE Y**  
**PART 2 - SUMMARY OF INSURER'S TRANSACTIONS WITH ANY AFFILIATES**

1 NAIC Company Code	2 ID Number	3 Names of Insurers and Parent, Subsidiaries or Affiliates	4 Shareholder Dividends	5 Capital Contributions	6 Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	7 Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	8 Management Agreements and Service Contracts	9 Income/ (Disbursements) Incurred Under Reinsurance Agreements	10 *	11 Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	12	13 Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
.66168	41-0417830	MINNESOTA LIFE INSURANCE COMPANY	16,379,661	(54,925,000)			94,018,287	23,373,386		(64,667,505)	14,178,829	(137,984,642)
36-2259815		PERSONAL FINANCE COMPANY, LLC					(16,169,473)			72,616,120	56,446,647	
41-1792781		ADVANTUS CAPITAL MANAGEMENT, INC.	(25,000,000)				(12,932,301)				(37,932,301)	
41-1486060		SECURIAN FINANCIAL SERVICES, INC.					(38,588,730)				(38,588,730)	
41-1612506		C.R.I. SECURITIES, LLC					5,769,811				5,769,811	
.93742	41-142669	SECURIAN LIFE INSURANCE COMPANY		55,000,000			(53,651,803)	(23,373,386)			(22,025,189)	137,984,642
10054	41-1741988	SECURIAN CASUALTY COMPANY					50,834,198				50,834,198	
41-1741986		SECURIAN FINANCIAL NETWORK, INC.					(50,078)				(50,078)	
41-1919755		CAPITOL CITY PROPERTY MANAGEMENT, INC.					8,638,452				8,638,452	
41-1919754		MINNESOTA MUTUAL COMPANIES, INC.	1,600,000				(1,515,062)				84,938	
41-1919753		SECURIAN HOLDING COMPANY					(91,911)				(91,911)	
41-1919752		SECURIAN FINANCIAL GROUP, INC.	26,225,000				8,762,065				27,038,450	
03-0388793		SECURIAN TRUST COMPANY, NA					(4,235,128)				(4,235,128)	
41-1972962		SECURIAN VENTURES, INC.	(2,000,000)				(1,501,193)				(3,501,193)	
41-2016575		ROBERT STREET PROPERTY MANAGEMENT, INC.					(63,274)				(63,274)	
35-2125376		ALLIED SOLUTIONS, LLC	(12,000,000)				(41,875,834)				(53,875,834)	
52-1657498		CAPITAL FINANCIAL GROUP, INC.					1,015,116				1,015,116	
52-1321340		H. BECK, INC.					658,242				658,242	
41-1598541		OCHS, INC.	(825,000)				2,616,886				1,791,886	
27-1769315		MARKETVIEW PROPERTIES, LLC										
27-2123801		MARKETVIEW PROPERTIES II, LLC										
45-4174429		MARKETVIEW PROPERTIES III, LLC					(438)				(438)	
45-4174567		MARKETVIEW PROPERTIES IV, LLC		(75,000)			(172,640)				(247,640)	
.65811	86-6052181	AMERICAN MODERN LIFE INSURANCE COMPANY					(1,722,608)				(1,722,608)	
74365	62-0754973	SOUTHERN PIONEER LIFE INSURANCE COMPANY					(804,343)				(804,343)	
90-0481794		SECURIAN AAM HOLDINGS, LLC	(4,375,000)				1,220,348				(3,154,652)	
36-4418695		ASSET ALLOC & MGMT					1,367				1,367	
41-1630884		MIMLIC FUNDING	(4,661)				(159,956)				(4,661)	
41-1741986		DELAWARE VALLEY									(159,956)	
9999999 Control Totals									XXX			

**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of WAIVED to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.

		Responses
<b>MARCH FILING</b>		
1.	Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	YES
2.	Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	YES
3.	Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	YES
4.	Will an actuarial opinion be filed by March 1?	YES
<b>APRIL FILING</b>		
5.	Will Management's Discussion and Analysis be filed by April 1?	YES
6.	Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?	YES
7.	Will the Adjustment Form (if required) be filed with the state of domicile and the NAIC by April 1?	YES
8.	Will the Supplemental Investment Risks Interrogatories be filed by April 1?	YES
<b>JUNE FILING</b>		
9.	Will an audited financial report be filed by June 1?	YES
10.	Will Accountant's Letter of Qualifications be filed with the state of domicile and electronically with the NAIC by June 1?	YES
<b>AUGUST FILING</b>		
11.	Will the regulator-only (non-public) Communication of Internal Control Related Matters Noted in Audit be filed with the state of domicile and electronically with the NAIC (as a regulator-only non-public document) by August 1?	YES
<p>The following supplemental reports are required to be filed as part of your annual statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of NO to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter SEE EXPLANATION and provide an explanation following the interrogatory questions.</p>		
<b>MARCH FILING</b>		
12.	Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	NO
13.	Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	NO
14.	Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	NO
15.	Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	NO
16.	Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed with the state of domicile and electronically with the NAIC by March 1?	NO
17.	Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	NO
18.	Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	NO
19.	Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	NO
20.	Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
21.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	NO
22.	Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	NO
23.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
24.	Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	NO
25.	Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	NO
26.	Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	NO

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

27.	Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	.....	NO
28.	Will the actuarial opinion required by the Modified Guaranteed Annuity Model Regulation be filed with the state of domicile and electronically with the NAIC by March 1?	.....	NO
29.	Will the Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	.....	NO
30.	Will the Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	.....	NO
31.	Will the Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	.....	NO
32.	Will the Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII be filed with the state of domicile and electronically with the NAIC by March 1?	.....	NO
33.	Will the Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities be filed with the state of domicile and electronically with the NAIC by March 1?	.....	NO
34.	Will the Worker's Compensation Carve-Out Supplement be filed by March 1?	.....	NO
35.	Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?	.....	YES
36.	Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?	.....	NO
37.	Will an approval from the reporting entity's state of domicile for relief related to the five-year rotation requirement for lead audit partner be filed electronically with the NAIC by March 1?	.....	NO
38.	Will an approval from the reporting entity's state of domicile for relief related to the one-year cooling off period for independent CPA be filed electronically with the NAIC by March 1?	.....	NO
39.	Will an approval from the reporting entity's state of domicile for relief related to the Requirements for Audit Committees be filed electronically with the NAIC by March 1?	.....	NO
40.	Will the confidential Regulatory Asset Adequacy Issues Summary (RAAIS) required by Actuarial Opinion and Memorandum Regulation (Model 822), Section 7A(5) be filed with the state of domicile by March 15?	.....	YES

APRIL FILING

41. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1? ..... NO

42. Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1? ..... NO

43. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1? ..... YES

44. Will the Accident and Health Policy Experience Exhibit be filed by April 1? ..... YES

45. Will the Analysis of Annuity Operations by Lines of Business be filed with the state of domicile and the NAIC by April 1? ..... NO

46. Will the Analysis of Increase in Annuity Reserves During the Year be filed with the state of domicile and the NAIC by April 1? ..... NO

47. Will the Supplemental Health Care Exhibit (Parts 1, 2 and 3) be filed with the state of domicile and the NAIC by April 1? ..... NO

48. Will the regulator only (non-public) Supplemental Health Care Exhibit's Expense Allocation Report be filed with the state of domicile and the NAIC by April 1? ..... NO

49. Will the confidential Actuarial Memorandum required by Actuarial Guideline XXXVIII 8D be filed with the state of domicile by April 30? ..... NO

50. Will the Supplemental XXX/AXXX Reinsurance Exhibit be filed with the state of domicile and the NAIC by April 1? ..... NO

## AUGUST FILING

51. Will Management's Report of Internal Control Over Financial Reporting be filed with the state of domicile by August 1? ..... NO

Explanations:

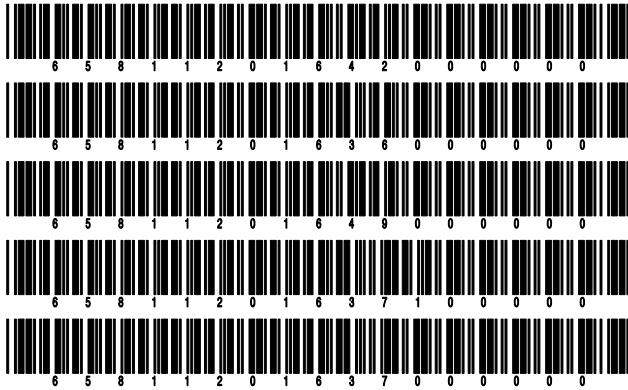
- 12. Not applicable
- 13. Not applicable
- 14. Not applicable
- 15. Not applicable
- 16. Not applicable
- 17. Not applicable
- 18. Not applicable
- 19. Not applicable
- 20. Not applicable
- 21. Not applicable
- 22. Not applicable
- 23. Not applicable
- 24. Not applicable
- 25. Not applicable
- 26. Not applicable
- 27. Not applicable
- 28. Not applicable
- 29. Not applicable
- 30. Not applicable
- 31. Not applicable
- 32. Not applicable
- 33. Not applicable
- 34. Not applicable
- 36. Not applicable
- 37. Not applicable
- 38. Not applicable
- 39. Not applicable
- 41. Not applicable
- 42. Not applicable
- 45. Not applicable
- 46. Not applicable
- 47. Not applicable
- 48. Not applicable
- 49. Not applicable
- 50. Not applicable

30. Not applicable

51. The Company's direct parent, Minnesota Life Insurance Company, will file. The Company is not required to file because it does not meet the premium materiality threshold.

### Bar Codes:

12. SIS Stockholder Information Supplement [Document Identifier 420]
13. Medicare Supplement Insurance Experience Exhibit [Document Identifier 360]
14. Trusteed Surplus Statement [Document Identifier 490]
15. Participating Opinion for Exhibit 5 [Document Identifier 371]
16. Non-Guaranteed Opinion for Exhibit 5 [Document Identifier 370]



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

17. Actuarial Opinion on X-Factors [Document Identifier 442]  


6 5 8 1 1 2 0 1 6 4 4 2 0 0 0 0 0 0
18. Actuarial Opinion on Separate Accounts Funding Guaranteed Minimum Benefit [Document Identifier 443]  


6 5 8 1 1 2 0 1 6 4 4 3 0 0 0 0 0 0
19. Actuarial Opinion on Synthetic Guaranteed Investment Contracts [Document Identifier 444]  


6 5 8 1 1 2 0 1 6 4 4 4 0 0 0 0 0 0
20. Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 445]  


6 5 8 1 1 2 0 1 6 4 4 5 0 0 0 0 0 0
21. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV [Document Identifier 446]  


6 5 8 1 1 2 0 1 6 4 4 6 0 0 0 0 0 0
22. Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI [Document Identifier 447]  


6 5 8 1 1 2 0 1 6 4 4 7 0 0 0 0 0 0
23. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI [Document Identifier 448]  


6 5 8 1 1 2 0 1 6 4 4 8 0 0 0 0 0 0
24. Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) [Document Identifier 449]  


6 5 8 1 1 2 0 1 6 4 4 9 0 0 0 0 0 0
25. C-3 RBC Certifications Required Under C-3 Phase I [Document Identifier 450]  


6 5 8 1 1 2 0 1 6 4 5 0 0 0 0 0 0 0
26. C-3 RBC Certifications Required Under C-3 Phase II [Document Identifier 451]  


6 5 8 1 1 2 0 1 6 4 5 1 0 0 0 0 0 0
27. Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities [Document Identifier 452]  


6 5 8 1 1 2 0 1 6 4 5 2 0 0 0 0 0 0
28. Modified Guaranteed Annuity Model Regulation [Document Identifier 453]  


6 5 8 1 1 2 0 1 6 4 5 3 0 0 0 0 0 0
29. Actuarial Certifications Related to Hedging required by Actuarial Guideline XLIII [Document Identifier 436]  


6 5 8 1 1 2 0 1 6 4 5 4 0 0 0 0 0 0
30. Financial Officer Certification Related to Clearly Defined Hedging Strategy required by Actuarial Guideline XLIII [Document Identifier 437]  


6 5 8 1 1 2 0 1 6 4 5 5 0 0 0 0 0 0
31. Management Certification That the Valuation Reflects Management's Intent required by Actuarial Guideline XLIII [Document Identifier 438]  


6 5 8 1 1 2 0 1 6 4 5 6 0 0 0 0 0 0
32. Actuarial Certification Related to the Reserves required by Actuarial Guideline XLIII [Document Identifier 439]  


6 5 8 1 1 2 0 1 6 4 5 7 0 0 0 0 0 0
33. Actuarial Certification regarding the use of 2001 Preferred Class Tables required by the Model Regulation Permitting the Recognition of Preferred Mortality Tables for Use in Determining Minimum Reserve Liabilities [Document Identifier 454]  


6 5 8 1 1 2 0 1 6 4 5 8 0 0 0 0 0 0
34. Workers' Compensation Carve-Out Supplement [Document Identifier 495]  


6 5 8 1 1 2 0 1 6 4 5 9 0 0 0 0 0 0
35. Medicare Part D Coverage Supplement [Document Identifier 365]  


6 5 8 1 1 2 0 1 6 4 6 0 0 0 0 0 0 0
36. Relief from the five-year rotation requirement for lead audit partner [Document Identifier 224]  


6 5 8 1 1 2 0 1 6 4 6 1 0 0 0 0 0 0
37. Relief from the one-year cooling off period for independent CPA [Document Identifier 225]  


6 5 8 1 1 2 0 1 6 4 6 2 0 0 0 0 0 0
38. Relief from the Requirements for Audit Committees [Document Identifier 226]  

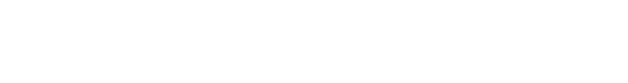

6 5 8 1 1 2 0 1 6 4 6 3 0 0 0 0 0 0
39. Long-Term Care Experience Reporting Forms [Document Identifier 306]  


6 5 8 1 1 2 0 1 6 4 6 4 0 0 0 0 0 0
40. Interest-Sensitive Life Insurance Products Report Forms [Document Identifier 280]  


6 5 8 1 1 2 0 1 6 4 6 5 0 0 0 0 0 0
41. Analysis of Annuity Operations by Lines of Business [Document Identifier 510]  


6 5 8 1 1 2 0 1 6 4 6 6 0 0 0 0 0 0
42. Analysis of Increase in Annuity Reserves During the Year [Document Identifier 515]  


6 5 8 1 1 2 0 1 6 4 6 7 0 0 0 0 0 0
43. Supplemental Health Care Exhibit (Parts 1, 2 and 3) [Document Identifier 216]  


6 5 8 1 1 2 0 1 6 4 6 8 0 0 0 0 0 0
44. Supplemental Health Care Exhibit's Expense Allocation Report [Document Identifier 217]  


6 5 8 1 1 2 0 1 6 4 6 9 0 0 0 0 0 0

ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY  
**SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES**

- 49. Actuarial Memorandum Required by Actuarial Guideline XXXVIII 8D  
[Document Identifier 435]
- 50. Supplemental XXX/AXXX Reinsurance Exhibit [Document Identifier 345]
- 51. Management's Report of Internal Control Over Financial Reporting  
[Document Identifier 223]



ANNUAL STATEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY  
**OVERFLOW PAGE FOR WRITE-INS**



SUPPLEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY

**SCHEDULE O SUPPLEMENT**

For The Year Ended December 31, 2016  
(To Be Filed by March 1)

Of The American Modern Life Insurance Company  
ADDRESS (City, State and Zip Code) Cleveland, OH 44114  
NAIC Group Code 0869 NAIC Company Code 65811 Employer's Identification Number (FEIN) 86-6052181

**SUPPLEMENTAL SCHEDULE O - PART 1**

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

**Section A - Group Accident and Health**

Years in Which Losses Were Incurred	Cumulative Net Amounts Paid Policyholders				
	1 2012	2 2013	3 2014	4 2015	5 2016(a)
1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XXX	XX			
5. 2015	XXX	XX	XXX		
6. 2016	XXX	XXX	XXX	XXX	

**Section B - Other Accident and Health**

1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XX	XX			
5. 2015	XXX	XX	XXX		
6. 2016	XXX	XX	XXX	XXX	

**Section C - Credit Accident and Health**

1. Prior	1,102	(74)	(690)	(1,214)	179
2. 2012	932	569	312	243	106
3. 2013	XXX	661	443	338	187
4. 2014	XXX	XXX	605	394	219
5. 2015	XXX	XXX	XXX	248	260
6. 2016	XXX	XXX	XXX	XXX	271

**Section D -**

1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XX	XX			
5. 2015	XX	XX	XXX		
6. 2016	XXX	XX	XXX	XXX	

**Section E -**

1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XX	XX			
5. 2015	XX	XX	XXX		
6. 2016	XXX	XX	XXX	XXX	

**Section F -**

1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XX	XX			
5. 2015	XX	XX	XXX		
6. 2016	XXX	XX	XXX	XXX	

**Section G -**

1. Prior					
2. 2012					
3. 2013	XXX				
4. 2014	XX	XX			
5. 2015	XX	XX	XXX		
6. 2016	XXX	XX	XXX	XXX	

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

Supplement Schedule O - Part 2 Section A

**N O N E**

Supplement Schedule O - Part 2 Section B

**N O N E**

Supplement Schedule O - Part 2 Section C

**N O N E**

Supplement Schedule O - Part 2 Section D

**N O N E**

Supplement Schedule O - Part 2 Section E

**N O N E**

Supplement Schedule O - Part 2 Section F

**N O N E**

Supplement Schedule O - Part 2 Section G

**N O N E**

SUPPLEMENT FOR THE YEAR 2016 OF THE AMERICAN MODERN LIFE INSURANCE COMPANY  
**SCHEDULE O SUPPLEMENT**

**SUPPLEMENTAL SCHEDULE O - PART 3**

Development of Incurred Losses  
 (\$000 OMITTED)

**Section A - Group Accident and Health**

Years in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
	1 2012	2 2013	3	4 2015	5 2016
1. 2012 .....				XXX .....	XXX .....
2. 2013 .....	XXX .....				XXX .....
3. 2014 .....	XXX .....	XXX .....			
4. 2015 .....	XXX .....	XXX .....	XXX .....		
5. 2016 .....	XXX .....	XXX .....	XXX .....	XXX .....	XXX .....

**Section B - Other Accident and Health**

1. 2012 .....				XXX .....	XXX .....
2. 2013 .....	XXX .....				XXX .....
3. 2014 .....	XXX .....				
4. 2015 .....	XXX .....	XXX .....	XXX .....		
5. 2016 .....	XXX .....	XXX .....		XXX .....	

**Section C - Credit Accident and Health**

1. 2012 .....	2,743 .....	2,166 .....	2,094 .....	XXX .....	XXX .....
2. 2013 .....	XXX .....	1,914 .....	1,553 .....	1,647 .....	XXX .....
3. 2014 .....	XXX .....	XXX .....	1,769 .....	1,436 .....	1,428 .....
4. 2015 .....	XXX .....	XXX .....	XXX .....	1,007 .....	787 .....
5. 2016 .....	XXX .....	XXX .....	XXX .....	XXX .....	922 .....

**Section D -**

1. 2012 .....				XXX .....	XXX .....
2. 2013 .....	XXX .....				XXX .....
3. 2014 .....	XXX .....				
4. 2015 .....	XXX .....	XXX .....	XXX .....		
5. 2016 .....	XXX .....	XXX .....		XXX .....	

**Section E -**

1. 2012 .....				XXX .....	XXX .....
2. 2013 .....	XXX .....				XXX .....
3. 2014 .....	XXX .....				
4. 2015 .....	XXX .....	XXX .....	XXX .....		
5. 2016 .....	XXX .....	XXX .....		XXX .....	

**Section F -**

1. 2012 .....				XXX .....	XXX .....
2. 2013 .....	XXX .....				XXX .....
3. 2014 .....	XXX .....				
4. 2015 .....	XXX .....	XXX .....	XXX .....		
5. 2016 .....	XXX .....	XXX .....		XXX .....	

**Section G -**

1. 2012 .....				XXX .....	XXX .....
2. 2013 .....	XXX .....				XXX .....
3. 2014 .....	XXX .....				
4. 2015 .....	XXX .....	XXX .....	XXX .....		
5. 2016 .....	XXX .....	XXX .....		XXX .....	

**SCHEDULE O SUPPLEMENT**  
**SUPPLEMENTAL SCHEDULE O - PART 4**

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

**Section A - Group Accident and Health**

Years in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at End of Year				
	1 2012	2 2013	3 2014	4 2015	5 2016
1. 2012 .....					
2. 2013 .....	XXX				
3. 2014 .....	XXX	XX			
4. 2015 .....	XXX	XXX	XXX		
5. 2016 .....	XXX	XXX	XXX	XXX	XXX

**Section B - Other Accident and Health**

1. 2012 .....					
2. 2013 .....	XXX				
3. 2014 .....	XXX				
4. 2015 .....	XX	X	X		
5. 2016 .....	XXX	XX	XXX	XXX	XXX

**Section C - Credit Accident and Health**

1. 2012 .....	2,743	2,166	2,094	2,173	2,209
2. 2013 .....	XXX	1,914	1,553	1,647	1,772
3. 2014 .....	XXX	XXX	1,769	1,436	1,428
4. 2015 .....	XXX	XXX	XXX	1,007	787
5. 2016 .....	XXX	XXX	XXX	XXX	922

**Section D -**

1. 2012 .....					
2. 2013 .....	XXX				
3. 2014 .....	XXX				
4. 2015 .....	XX	X	X		
5. 2016 .....	XXX	XX	XXX	XXX	XXX

**Section E -**

1. 2012 .....					
2. 2013 .....	XXX				
3. 2014 .....	XXX				
4. 2015 .....	XX	X	X		
5. 2016 .....	XXX	XX	XXX	XXX	XXX

**Section F -**

1. 2012 .....					
2. 2013 .....	XXX				
3. 2014 .....	XXX				
4. 2015 .....	XX	X	X		
5. 2016 .....	XXX	XX	XXX	XXX	XXX

**Section G -**

1. 2012 .....					
2. 2013 .....	XXX				
3. 2014 .....	XXX				
4. 2015 .....	XX	X	X		
5. 2016 .....	XXX	XX	XXX	XXX	XXX

**SUPPLEMENTAL SCHEDULE O - PART 5**

(\$000 OMITTED)

**Reserve and Liability Methodology - Exhibits 6 and 8**

Line of Business	1 Methodology	2 Amount
1. Industrial Life .....		
2. Ordinary Life .....		
3. Individual Annuity .....		
4. Supplementary Contracts .....		
5. Credit Life .....	Standard factor .....	469
6. Group Life .....		
7. Group Annuities .....		
8. Group Accident and Health .....		
9. Credit Accident and Health .....	Standard factor .....	1,653
10. Other Accident and Health .....		
11. Total .....		2,122

## ALPHABETICAL INDEX

### **ANNUAL STATEMENT BLANK**

Analysis of Increase in Reserves During The Year	7
Analysis of Operations By Lines of Business	6
Asset Valuation Reserve Default Component	30
Asset Valuation Reserve Equity	32
Asset Valuation Reserve Replications (Synthetic) Assets	35
Asset Valuation Reserve	29
Assets	2
Cash Flow	5
Exhibit 1 - Part 1 - Premiums and Annuity Considerations for Life and Accident and Health Contracts	9
Exhibit 1 - Part 2 - Dividends and Coupons Applied, Reinsurance Commissions and Expense	10
Exhibit 2 - General Expenses	11
Exhibit 3 - Taxes, Licenses and Fees (Excluding Federal Income Taxes)	11
Exhibit 4 - Dividends or Refunds	11
Exhibit 5 - Aggregate Reserve for Life Contracts	12
Exhibit 5 - Interrogatories	13
Exhibit 5A - Changes in Bases of Valuation During The Year	13
Exhibit 6 - Aggregate Reserves for Accident and Health Contracts	14
Exhibit 7 - Deposit-Type Contracts	15
Exhibit 8 - Claims for Life and Accident and Health Contracts - Part 1	16
Exhibit 8 - Claims for Life and Accident and Health Contracts - Part 2	17
Exhibit of Capital Gains (Losses)	8
Exhibit of Life Insurance	25
Exhibit of Net Investment Income	8
Exhibit of Nonadmitted Assets	18
Exhibit of Number of Policies, Contracts, Certificates, Income Payable and Account Values	27
Five-Year Historical Data	22
Form for Calculating the Interest Maintenance Reserve (IMR)	28
General Interrogatories	20
Jurat Page	1
Liabilities, Surplus and Other Funds	3
Life Insurance (State Page)	24
Notes To Financial Statements	19
Overflow Page For Write-ins	55
Schedule A - Part 1	E01
Schedule A - Part 2	E02
Schedule A - Part 3	E03
Schedule A - Verification Between Years	SI02
Schedule B - Part 1	E04
Schedule B - Part 2	E05
Schedule B - Part 3	E06
Schedule B - Verification Between Years	SI02
Schedule BA - Part 1	E07
Schedule BA - Part 2	E08
Schedule BA - Part 3	E09
Schedule BA - Verification Between Years	SI03
Schedule D - Part 1	E10
Schedule D - Part 1A - Section 1	SI05
Schedule D - Part 1A - Section 2	SI08
Schedule D - Part 2 - Section 1	E11
Schedule D - Part 2 - Section 2	E12
Schedule D - Part 3	E13
Schedule D - Part 4	E14
Schedule D - Part 5	E15
Schedule D - Part 6 - Section 1	E16
Schedule D - Part 6 - Section 2	E16
Schedule D - Summary By Country	SI04
Schedule D - Verification Between Years	SI03
Schedule DA - Part 1	E17
Schedule DA - Verification Between Years	SI10

**ANNUAL STATEMENT BLANK (Continued)**

Schedule DB - Part A - Section 1 .....	E18
Schedule DB - Part A - Section 2 .....	E19
Schedule DB - Part A - Verification Between Years .....	SI11
Schedule DB - Part B - Section 1 .....	E20
Schedule DB - Part B - Section 2 .....	E21
Schedule DB - Part B - Verification Between Years .....	SI11
Schedule DB - Part C - Section 1 .....	SI12
Schedule DB - Part C - Section 2 .....	SI13
Schedule DB - Part D - Section 1 .....	E22
Schedule DB - Part D - Section 2 .....	E23
Schedule DB - Verification .....	SI14
Schedule DL - Part 1 .....	E24
Schedule DL - Part 2 .....	E25
Schedule E - Part 1 - Cash .....	E26
Schedule E - Part 2 - Cash Equivalents .....	E27
Schedule E - Part 3 - Special Deposits .....	E28
Schedule E - Verification Between Years .....	SI15
Schedule F .....	36
Schedule H - Accident and Health Exhibit - Part 1 .....	37
Schedule H - Part 2, Part 3 and Part 4 .....	38
Schedule H - Part 5 - Health Claims .....	39
Schedule S - Part 1 - Section 1 .....	40
Schedule S - Part 1 - Section 2 .....	41
Schedule S - Part 2 .....	42
Schedule S - Part 3 - Section 1 .....	43
Schedule S - Part 3 - Section 2 .....	44
Schedule S - Part 4 .....	45
Schedule S - Part 5 .....	46
Schedule S - Part 6 .....	47
Schedule S - Part 7 .....	48
Schedule T - Part 2 Interstate Compact .....	50
Schedule T - Premiums and Annuity Considerations .....	49
Schedule Y - Information Concerning Activities of Insurer Members of a Holding Company Group .....	51
Schedule Y - Part 1A - Detail of Insurance Holding Company System .....	52
Schedule Y - Part 2 - Summary of Insurer's Transactions With Any Affiliates .....	53
Summary Investment Schedule .....	SI01
Summary of Operations .....	4
Supplemental Exhibits and Schedules Interrogatories .....	54