



ANNUAL STATEMENT

For the Year Ended December 31, 2018

of the Condition and Affairs of the

First Catholic Slovak Ladies Association Of The U.S.A.

NAIC Group Code..... 0, 0
(Current Period) (Prior Period)

NAIC Company Code..... 56332

Employer's ID Number..... 34-0220540

Organized under the Laws of OH

State of Domicile or Port of Entry OH

Country of Domicile US

Incorporated/Organized..... October 20, 1899

Commenced Business..... January 1, 1892

Statutory Home Office

24950 Chagrin Boulevard .. Beachwood .. OH .. US .. 44122-5634
(Street and Number) (City or Town, State, Country and Zip Code)

800-464-4642

(Area Code) (Telephone Number)

Main Administrative Office

24950 Chagrin Boulevard .. Beachwood .. OH .. US .. 44122-5634
(Street and Number) (City or Town, State, Country and Zip Code)

800-464-4642

(Area Code) (Telephone Number)

Mail Address

24950 Chagrin Boulevard .. Beachwood .. OH .. US .. 44122-5634
(Street and Number or P. O. Box) (City or Town, State, Country and Zip Code)

800-464-4642

(Area Code) (Telephone Number)

Primary Location of Books and Records

24950 Chagrin Boulevard .. Beachwood .. OH .. US .. 44122-5634
(Street and Number) (City or Town, State, Country and Zip Code)

800-464-4642

(Area Code) (Telephone Number)

Internet Web Site Address

WWW.FCSLA.ORG

216-468-1017

Statutory Statement Contact

Frank Rando
(Name)
frando@fcsla.org
(E-Mail Address)

216-468-8003

(Fax Number)

OFFICERS

Name	Title
1. Cynthia Maria Maleski	National President
3. Stephen C Hudak	National Treasurer

Name	#
2. Kimberly A Graham	4.

Name	Title
	National Secretary

OTHER

DIRECTORS OR TRUSTEES

Msgr. Peter M Polando
Lawrence M Golofski
Barbara A Sekerak

Cynthia Maria Maleski
Joann Skvarek Banvich
Dennis L Povondra

Jeanette E Palanca
Virginia A Holmes
Dorothy L Urbanowicz

Sue Ann M Seich
Barbara Novotny Waller

State of..... Ohio
County of.... Cuyahoga

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

(Signature)
Cynthia Maria Maleski
1. (Printed Name)
National President
(Title)

(Signature)
Kimberly A Graham
2. (Printed Name)
National Secretary
(Title)

(Signature)
Stephen C Hudak
3. (Printed Name)
National Treasurer
(Title)

Subscribed and sworn to before me
This _____ day of _____ 2019

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 []

ASSETS

	Current Year			Prior Year
	1 Assets	2 Nonadmitted Assets	3 Net Admitted Assets (Cols. 1 - 2)	4 Net Admitted Assets
1. Bonds (Schedule D).....	930,029,467		930,029,467	875,438,853
2. Stocks (Schedule D):				
2.1 Preferred stocks.....	2,201,328		2,201,328	2,253,102
2.2 Common stocks.....	5,968,624		5,968,624	8,116,385
3. Mortgage loans on real estate (Schedule B):				
3.1 First liens.....	690,151		690,151	1,620,970
3.2 Other than first liens.....			0	
4. Real estate (Schedule A):				
4.1 Properties occupied by the company (less \$.....0 encumbrances).....	5,020,345		5,020,345	5,191,497
4.2 Properties held for the production of income (less \$.....0 encumbrances).....			0	
4.3 Properties held for sale (less \$.....0 encumbrances).....			0	
5. Cash (\$....10,017,128, Schedule E-Part 1), cash equivalents (\$....6,000,000, Schedule E-Part 2) and short-term investments (\$.....0, Schedule DA).....	16,017,128		16,017,128	40,944,639
6. Contract loans (including \$.....0 premium notes).....	2,671,332		2,671,332	2,720,799
7. Derivatives (Schedule DB).....			0	
8. Other invested assets (Schedule BA).....	14,063,849		14,063,849	14,189,808
9. Receivables for securities.....			0	
10. Securities lending reinvested collateral assets (Schedule DL).....			0	
11. Aggregate write-ins for invested assets.....	0	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	976,662,225	0	976,662,225	950,476,054
13. Title plants less \$.....0 charged off (for Title insurers only).....			0	
14. Investment income due and accrued.....	13,778,071		13,778,071	13,445,412
15. Premiums and considerations:				
15.1 Uncollected premiums and agents' balances in the course of collection.....	9,663		9,663	12,162
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due (including \$.....0 earned but unbilled premiums).....			0	
15.3 Accrued retrospective premiums (\$.....0) and contracts subject to redetermination (\$.....0).....			0	
16. Reinsurance:				
16.1 Amounts recoverable from reinsurers.....			0	
16.2 Funds held by or deposited with reinsured companies.....			0	
16.3 Other amounts receivable under reinsurance contracts.....			0	
17. Amounts receivable relating to uninsured plans.....			0	
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0	
18.2 Net deferred tax asset.....			0	
19. Guaranty funds receivable or on deposit.....			0	
20. Electronic data processing equipment and software.....	93,987		93,987	53,230
21. Furniture and equipment, including health care delivery assets (\$.....0).....	5,249	5,249	0	
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0	
23. Receivables from parent, subsidiaries and affiliates.....			0	
24. Health care (\$.....0) and other amounts receivable.....			0	
25. Aggregate write-ins for other-than-invested assets.....	314,159	314,159	0	0
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25).....	990,863,354	319,408	990,543,946	963,986,858
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0	
28. TOTAL (Lines 26 and 27).....	990,863,354	319,408	990,543,946	963,986,858

DETAILS OF WRITE-INS

1101.....			0	
1102.....			0	
1103.....			0	
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....	0	0	0	0
2501. Prepaid Pension.....	27,117	27,117	0	
2502. Prepaid expenses.....	287,042	287,042	0	
2503.....			0	
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	314,159	314,159	0	0

First Catholic Slovak Ladies Association Of The U.S.A.

LIABILITIES, SURPLUS AND OTHER FUNDS

	1 Current Year	2 Prior Year
1. Aggregate reserve for life contracts (Exhibit 5, Line 9999999) (including \$.....0 Modco Reserve).....	840,190,000	818,024,001
2. Aggregate reserve for accident and health contracts (Exhibit 6, Line 16, Col. 1) (including \$.....0 Modco Reserve).....	.....	.....
3. Liability for deposit-type contracts (Exhibit 7, Line 14, Col. 1) (including \$.....0 Modco Reserve).....	28,041,807	24,377,319
4. Contract claims:		
4.1 Life (Exhibit 8, Part 1, Line 4.4, Column 1 less sum of Columns 9, 10 and 11).....	3,519,428	2,579,058
4.2 Accident and health (Exhibit 8, Part 1, Line 4.4, sum of Columns 9, 10 and 11).....	.....	.....
5. Refunds due and unpaid (Exhibit 4, Line 10).....	.....	.....
6. Provision for refunds payable in following calendar year-estimated amounts:		
6.1 Apportioned for payment.....	1,400,000	1,400,000
6.2 Not yet apportioned.....	.....	.....
7. Premiums and annuity considerations for life and accident and health contracts received in advance less \$.....0 discount; including \$.....0 accident and health premiums (Exhibit 1, Part 1, Col. 1, sum of Lines 4 and 14).....	438,303	498,271
8. Contract liabilities not included elsewhere:		
8.1 Surrender values on canceled contracts.....	.....	.....
8.2 Other amounts payable on reinsurance including \$.....0 assumed and \$.....0 ceded.....	.....	.....
8.3 Interest Maintenance Reserve (IMR, Line 6).....	1,138,053	1,396,825
9. Commissions to fieldworkers due or accrued-life and annuity contracts \$....53,599 ; accident and health \$.....0 and deposit-type contract funds \$.....0.....	53,599	75,396
10. Commissions and expense allowances payable on reinsurance assumed.....	.....	.....
11. General expenses due or accrued (Exhibit 2, Line 12, Col. 7).....	2,430,165	2,156,947
12. Transfers to Separate Accounts due or accrued (net) (including \$.....0 accrued for expense allowances recognized in reserves).....	.....	.....
13. Taxes, licenses and fees due or accrued (Exhibit 3, Line 8, Col. 6).....	30,000	700
14. Unearned investment income.....	.....	.....
15. Amounts withheld or retained by Society as agent or trustee.....	.....	.....
16. Amounts held for fieldworkers' account, including \$.....0 fieldworkers' credit balances.....	.....	.....
17. Remittances and items not allocated.....	.....	.....
18. Net adjustment in assets and liabilities due to foreign exchange rates.....	.....	.....
19. Liability for benefits for employees and fieldworkers if not included above.....	695,344	430,736
20. Borrowed money \$.....0 and interest thereon \$.....0.....	.....	.....
21. Miscellaneous liabilities:		
21.1 Asset valuation reserve (AVR, Line 16, Col. 7).....	7,874,230	8,985,756
21.2 Reinsurance in unauthorized and certified (\$.....0) companies.....	.....	.....
21.3 Funds held under reinsurance treaties with unauthorized and certified (\$.....0) reinsurers.....	.....	.....
21.4 Payable to subsidiaries and affiliates.....	.....	.....
21.5 Drafts outstanding.....	.....	.....
21.6 Funds held under coinsurance.....	.....	.....
21.7 Derivatives.....	.....	.....
21.8 Payable for securities.....	.....	.....
21.9 Payable for securities lending.....	.....	.....
22. Aggregate write-ins for liabilities.....	350,316	433,132
23. Total liabilities excluding Separate Accounts business (Lines 1 to 22).....	886,161,245	860,358,141
24. From Separate Accounts statement.....	.....	.....
25. Total liabilities (Lines 23 and 24).....	886,161,245	860,358,141
26. Aggregate write-ins for other than liabilities and surplus funds.....	0	0
27. Surplus notes.....	0	0
28. Aggregate write-ins for surplus funds.....	0	0
29. Unassigned funds.....	104,382,697	103,628,715
30. Total (Lines 26 through 29) (Page 4, Line 47) (including \$.....0 in Separate Accounts statement).....	104,382,697	103,628,715
31. Totals (Lines 25 + 30) (Page 2, Line 28, Col. 3).....	990,543,943	963,986,856

DETAILS OF WRITE-INS

2201. ANNA HURBAN & OTHER SCHOLARSHIP FUNDS.....	200,112	142,023
2202. DEVELOPMENT FUND.....	104,075	166,752
2203. OTHER.....	41,678	16,227
2298. Summary of remaining write-ins for Line 22 from overflow page.....	4,451	108,130
2299. Totals (Lines 2201 through 2203 plus 2298) (Line 22 above).....	350,316	433,132
2601. .....	.....	.....
2602. .....	.....	.....
2603. .....	.....	.....
2698. Summary of remaining write-ins for Line 26 from overflow page.....	0	0
2699. Totals (Lines 2601 through 2603 plus 2698) (Line 26 above).....	0	0
2801. .....	.....	.....
2802. .....	.....	.....
2803. .....	.....	.....
2898. Summary of remaining write-ins for Line 28 from overflow page.....	0	0
2899. Totals (Lines 2801 through 2803 plus 2898) (Line 28 above).....	0	0

First Catholic Slovak Ladies Association Of The U.S.A.

SUMMARY OF OPERATIONS

	1 Current Year	2 Prior Year
1. Premiums and annuity considerations for life and accident and health contracts (Exhibit 1, Part 1, Line 20.4, Col. 1).....	37,981,276	41,864,840
2. Considerations for supplementary contracts with life contingencies.....	.....	.....
3. Net investment income (Exhibit of Net Investment Income, Line 17).....	46,767,303	46,875,464
4. Amortization of Interest Maintenance Reserve (IMR, Line 5).....	224,285	264,888
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....	.....	.....
6. Commissions and expense allowances on reinsurance ceded (Exhibit 1, Part 2, Line 26.1, Col. 1).....	.....	.....
7. Reserve adjustments on reinsurance ceded.....	.....	.....
8. Miscellaneous Income:		
8.1 Income from fees associated with investment management, administration and contract guarantees from Separate Accounts.....	.....	.....
8.2 Charges and fees for deposit-type contracts.....	.....	.....
8.3 Aggregate write-ins for miscellaneous income.....	139,442	13,700
9. Totals (Lines 1 to 8.3).....	85,112,306	89,018,892
10. Death benefits.....	7,880,741	6,829,995
11. Matured endowments (excluding guaranteed annual pure endowments).....	25,456	31,854
12. Annuity benefits.....	25,094,403	21,870,464
13. Disability benefits and benefits under accident and health contracts, including premiums waived \$.....0	.....	.....
14. Surrender benefits and withdrawals for life contracts.....	10,573,965	10,120,283
15. Interest and adjustments on contract or deposit-type contracts funds.....	3,991,393	2,401,758
16. Payments on supplementary contracts with life contingencies.....	.....	.....
17. Increase in aggregate reserve for life and accident and health contracts.....	22,166,002	30,322,816
18. Totals (Lines 10 to 17).....	69,731,960	71,577,170
19. Commissions on premiums, annuity considerations and deposit-type contract funds (direct business only) (Exhibit 1, Part 2, Line 31, Col. 1 less Col. 5).....	1,079,872	1,128,672
20. Commissions and expense allowances on reinsurance assumed (Exhibit 1, Part 2, Line 26.2, Col. 1 less Col. 5).....	.....	.....
21. General insurance expenses and fraternal expenses (Exhibit 2, Line 10, Cols. 1, 2, 3, 4 and 6).....	9,954,749	10,211,809
22. Insurance taxes, licenses and fees (Exhibit 3, Line 6, Cols. 1, 2, 3 and 5).....	345,496	478,148
23. Increase in loading on deferred and uncollected premiums.....	.....	.....
24. Net transfers to or (from) Separate Accounts net of reinsurance.....	.....	.....
25. Aggregate write-ins for deductions.....	0	0
26. Totals (Lines 18 to 25).....	81,112,077	83,395,799
27. Net gain from operations before refunds to members (Line 9 minus Line 26).....	4,000,229	5,623,093
28. Refunds to members (Exhibit 4, Line 17, Cols. 1 + 2).....	1,357,634	1,367,408
29. Net gain from operations after refunds to members and before realized capital gains (losses) (Line 27 minus Line 28).....	2,642,595	4,255,685
30. Net realized capital gains (losses) less capital gains tax of \$.....0 (excluding \$....(34,486) transferred to the IMR).....	(526,834)	(71,412)
31. Net income (Lines 29 + 30).....	2,115,761	4,184,273
SURPLUS ACCOUNT		
32. Surplus, December 31, previous year (Page 3, Line 30, Col. 2).....	103,628,715	98,390,931
33. Net income from operations (Line 31).....	2,115,761	4,184,273
34. Change in net unrealized capital gains (losses) less capital gains tax of \$.....0	(2,104,209)	1,865,193
35. Change in net unrealized foreign exchange capital gain (loss).....	.....	.....
36. Change in nonadmitted assets.....	(144,095)	106,751
37. Change in liability for reinsurance in unauthorized and certified companies.....	.....	.....
38. Change in reserve on account of change in valuation basis (increase) or decrease.....	.....	.....
39. Change in asset valuation reserve.....	1,111,526	(918,433)
40. Surplus (contributed to) withdrawn from Separate Accounts during period.....	.....	.....
41. Other changes in surplus in Separate Accounts statement.....	.....	.....
42. Change in surplus notes.....	.....	.....
43. Cumulative effect of changes in accounting principles.....	.....	.....
44. Change in surplus as a result of reinsurance.....	.....	.....
45. Aggregate write-ins for gains and losses in surplus.....	(225,000)	0
46. Net change in surplus for the year (Lines 33 through 45).....	753,983	5,237,783
47. Surplus December 31, current year (Lines 32 + 46) (Page 3, Line 30).....	104,382,697	103,628,715

DETAILS OF WRITE-INS

08.301. Cookbook income.....	7,906	9,643
08.302. Miscellaneous.....	131,536	4,057
08.303. .....	.....	.....
08.398. Summary of remaining write-ins for Line 8.3 from overflow page.....	0	0
08.399. Totals (Lines 08.301 through 08.303 plus 08.398) (Line 8.3 above).....	139,442	13,700
2501. .....	.....	.....
2502. .....	.....	.....
2503. .....	.....	.....
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	0	0
4501. Prior period 401K adjustment.....	(225,000)	.....
4502. .....	.....	.....
4503. .....	.....	.....
4598. Summary of remaining write-ins for Line 45 from overflow page.....	0	0
4599. Totals (Lines 4501 through 4503 plus 4598) (Line 45 above).....	(225,000)	0

CASH FLOW

	1 Current Year	2 Prior Year
CASH FROM OPERATIONS		
1. Premiums collected net of reinsurance.....	37,923,807	41,879,097
2. Net investment income.....	52,412,557	51,792,857
3. Miscellaneous income.....	139,442	13,700
4. Total (Lines 1 through 3).....	90,475,806	93,685,654
5. Benefit and loss related payments.....	46,625,588	40,281,123
6. Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts.....	.....	.....
7. Commissions, expenses paid and aggregate write-ins for deductions.....	11,181,651	11,517,450
8. Dividends paid to policyholders.....	1,357,634	1,367,408
9. Federal and foreign income taxes paid (recovered) net of \$.....0 tax on capital gains (losses).....	.....	.....
10. Total (Lines 5 through 9).....	59,164,873	53,165,981
11. Net cash from operations (Line 4 minus Line 10).....	31,310,933	40,519,673
CASH FROM INVESTMENTS		
12. Proceeds from investments sold, matured or repaid:	.....	.....
12.1 Bonds.....	55,167,135	59,189,584
12.2 Stocks.....	124,506	1,078,127
12.3 Mortgage loans.....	923,577	497,555
12.4 Real estate.....	.....	235,000
12.5 Other invested assets.....	.....	.....
12.6 Net gains or (losses) on cash, cash equivalents and short-term investments.....	.....	.....
12.7 Miscellaneous proceeds.....	.....	.....
12.8 Total investment proceeds (Lines 12.1 to 12.7).....	56,215,218	61,000,267
13. Cost of investments acquired (long-term only):	.....	.....
13.1 Bonds.....	116,016,018	87,281,576
13.2 Stocks.....	54	76,828
13.3 Mortgage loans.....	.....	.....
13.4 Real estate.....	6,300	52,219
13.5 Other invested assets.....	.....	.....
13.6 Miscellaneous applications.....	.....	.....
13.7 Total investments acquired (Lines 13.1 to 13.6).....	116,022,372	87,410,624
14. Net increase (decrease) in contract loans and premium notes.....	(49,467)	(127,987)
15. Net cash from investments (Line 12.8 minus Lines 13.7 minus Line 14).....	(59,757,687)	(26,282,369)
CASH FROM FINANCING AND MISCELLANEOUS SOURCES		
16. Cash provided (applied):	.....	.....
16.1 Surplus notes, capital notes.....	.....	.....
16.2 Capital and paid in surplus, less treasury stock.....	.....	.....
16.3 Borrowed funds.....	.....	.....
16.4 Net deposits on deposit-type contracts and other insurance liabilities.....	3,664,488	1,278,201
16.5 Dividends to stockholders.....	.....	.....
16.6 Other cash provided (applied).....	(145,244)	172,347
17. Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6).....	3,519,244	1,450,548
RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18. Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17).....	(24,927,510)	15,687,851
19. Cash, cash equivalents and short-term investments:	.....	.....
19.1 Beginning of year.....	40,944,638	25,256,787
19.2 End of year (Line 18 plus Line 19.1).....	16,017,128	40,944,638

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

20.0001
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ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

	1	Insurance						8	9
		2	3	4	5	6	7		
	Total	Life Insurance	Individual Annuities	Supplementary Contracts	Accident and Health	Aggregate of All Other Lines of Business	Total (Columns 2 through 6)	Fraternal	Expense
1. Premiums and annuity considerations for life and accident and health contracts.....	37,981,276	3,737,265	34,244,011				37,981,276		
2. Considerations for supplementary contracts with life contingencies.....	0						0		
3. Net investment income.....	46,767,303	16,368,556	30,398,747				46,767,303		
4. Amortization of interest maintenance reserve (IMR).....	224,285	224,285	-				224,285		
5. Separate Accounts net gain from operations excluding unrealized gains or losses.....	0						0		
6. Commissions and expense allowances on reinsurance ceded.....	0						0		
7. Reserve adjustments on reinsurance ceded.....	0						0		
8. Miscellaneous Income:									
8.1 Fees associated with income from investment management, administration and contract guarantees from Separate Accounts.....	0						0		
8.2 Charges and fees for deposit-type contracts.....	0						0		
8.3 Aggregate write-ins for miscellaneous income.....	139,442	139,442	0	0	0	0	139,442	0	0
9. Totals (Lines 1 to 8.3).....	85,112,306	20,469,548	64,642,758	0	0	0	85,112,306	0	0
10. Death benefits.....	7,880,741	7,880,741	-	-	-		7,880,741		
11. Matured endowments (excluding guaranteed annual pure endowments).....	25,456	25,456	-	-	-		25,456		
12. Annuity benefits.....	25,094,403	-	25,094,403	-	-		25,094,403		
13. Disability benefits and benefits under accident and health contracts, including premiums waived \$.....0	0	-	-	-	-		0		
14. Surrender benefits and withdrawals for life contracts.....	10,573,965	3,855,846	6,718,119	-	-		10,573,965		
15. Interest and adjustments on contract or deposit-type contract funds.....	3,991,393	387,893	3,593,895	9,605	-		3,991,393		
16. Payments on supplementary contracts with life contingencies.....	0	-	-	-	-		0		
17. Increase in aggregate reserve for life and accident and health contracts.....	22,166,002	1,122,001	21,044,001	-	-		22,166,002		
18. Totals (Lines 10 to 17).....	69,731,960	13,271,937	56,450,418	9,605	0	0	69,731,960	0	0
19. Commissions on premiums and annuity considerations and deposit-type funds (direct business only).....	1,079,872	221,035	858,837				1,079,872		
20. Commissions and expense allowances on reinsurance assumed.....	0						0		
21. General insurance expenses and fraternal expenses.....	9,954,749	3,445,262	2,296,841				5,742,103	4,212,646	
22. Insurance taxes, licenses and fees.....	345,496	172,748	172,748				345,496		
23. Increase in loading on deferred and uncollected premiums.....	0						0		
24. Net transfers to or (from) Separate Accounts net of reinsurance.....	0						0		
25. Aggregate write-ins for deductions.....	0	0	0	0	0	0	0	0	0
26. Totals (Lines 18 to 25).....	81,112,077	17,110,982	59,778,844	9,605	0	0	76,899,431	4,212,646	
27. Net gain from operations before refunds to members (Line 9 minus Line 26).....	4,000,229	3,358,566	4,863,914	(9,605)	0	0	8,212,875	(4,212,646)	
28. Refunds to members.....	1,357,635	1,357,635					1,357,635		
29. Net gain from operations after refunds to members and before realized capital gains or (losses) (Line 27 minus Line 28).....	2,642,594	2,000,931	4,863,914	(9,605)	0	0	6,885,240	(4,212,646)	

DETAILS OF WRITE-INS

ANALYSIS OF INCREASE IN RESERVES DURING THE YEAR

	1 Total	2 Life Insurance	3 Annuities	4 Supplementary Contracts
Involving Life or Disability Contingencies (Reserves)				
(Net of Reinsurance Ceded)				
1. Reserve December 31, prior year.....	818,024,001	297,638,001	520,386,000	
2. Tabular net premiums or considerations.....	38,307,091	4,063,080	34,244,011	
3. Present value of disability claims incurred.....	0			XXX.....
4. Tabular interest.....	33,187,459	11,912,907	21,274,552	
5. Tabular less actual reserve released.....	646,090		646,090	
6. Increase in reserve on account of change in valuation basis.....	0			
6.1 Change in excess of VM-20 deterministic/stochastic reserve over net premium reserve.....	0		XXX.....	XXX.....
7. Other increases (net).....	0			
8. Totals (Lines 1 to 7).....	890,164,641	313,613,988	576,550,653	0
9. Tabular cost.....	5,120,988	5,120,988		XXX.....
10. Reserves released by death.....	5,453,011	5,453,011	XXX.....	XXX.....
11. Reserves released by other terminations (net).....	4,279,989	4,279,989		
12. Annuity, supplementary contract and disability payments involving life contingencies.....	35,120,653		35,120,653	
13. Net transfers to or (from) Separate Accounts.....	0			
14. Total deductions (Lines 9 to 13).....	49,974,641	14,853,988	35,120,653	0
15. Reserve December 31, current year.....	840,190,000	298,760,000	541,430,000	0

EXHIBIT OF NET INVESTMENT INCOME

	1 Collected During Year	2 Earned During Year
1. U.S. government bonds.....	(a).....36,034	.....35,822
1.1 Bonds exempt from U.S. tax.....	(a) -	-
1.2 Other bonds (unaffiliated).....	(a).....44,041,741	.....44,383,334
1.3 Bonds of affiliates.....	(a) -	-
2.1 Preferred stocks (unaffiliated).....	(b).....126,419	.....128,342
2.11 Preferred stocks of affiliates.....	(b) -	-
2.2 Common stocks (unaffiliated).....	.....193,801	.....188,707
2.21 Common stocks of affiliates.....	-	-
3. Mortgage loans.....	(c).....57,080	.....57,080
4. Real estate.....	(d).....371,134	.....371,134
5. Contract loans.....	.....188,539	.....188,539
6. Cash, cash equivalents and short-term investments.....	(e).....305,026	.....299,475
7. Derivative instruments.....	(f) -	-
8. Other invested assets.....	.....1,049,750	.....1,049,750
9. Aggregate write-ins for investment income.....	.....0	.....0
10. Total gross investment income.....	.....46,369,525	.....46,702,183
11. Investment expenses.....	(g).....197,698	
12. Investment taxes, licenses and fees, excluding federal income taxes.....	(g).....(440,271)	
13. Interest expense.....	(h)	
14. Depreciation on real estate and other invested assets.....	(i).....177,454	
15. Aggregate write-ins for deductions from investment income.....	.....0	
16. Total deductions (Lines 11 through 15).....	.....(65,119)	
17. Net investment income (Line 10 minus Line 16).....	.....46,767,302	

DETAILS OF WRITE-INS

0901.....		
0902.....		
0903.....		
0998. Summary of remaining write-ins for Line 9 from overflow page.....	.....0	.....0
0999. Totals (Lines 0901 through 0903 plus 0998) (Line 9 above).....	.....0	.....0
1501.....		
1502.....		
1503.....		
1598. Summary of remaining write-ins for Line 15 from overflow page.....	.....0	.....0
1599. Totals (Lines 1501 through 1503 plus 1598) (Line 15 above).....	.....0	.....0

- (a) Includes \$....328,861 accrual of discount less \$....5,996,820 amortization of premium and less \$....1,323,704 paid for accrued interest on purchases.
- (b) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued dividends on purchases.
- (c) Includes \$.....0 accrual of discount less \$....7,242 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (d) Includes \$.....0 for company's occupancy of its own buildings; and excludes \$.....0 interest on encumbrances.
- (e) Includes \$.....0 accrual of discount less \$.....0 amortization of premium and less \$.....0 paid for accrued interest on purchases.
- (f) Includes \$.....0 accrual of discount less \$.....0 amortization of premium.
- (g) Includes \$.....0 investment expenses and \$.....0 investment taxes, licenses and fees, excluding federal income taxes, attributable to segregated and Separate Accounts.
- (h) Includes \$.....0 interest on surplus notes and \$.....0 interest on capital notes.
- (i) Includes \$....177,454 depreciation on real estate and \$.....0 depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

	1 Realized Gain (Loss) on Sales or Maturity	2 Other Realized Adjustments	3 Total Realized Capital Gain (Loss) (Columns 1 + 2)	4 Change in Unrealized Capital Gain (Loss)	5 Change in Unrealized Foreign Exchange Capital Gain (Loss)
1. U.S. government bonds.....	.....1		.....1		
1.1 Bonds exempt from U.S. tax.....			.....0		
1.2 Other bonds (unaffiliated).....	.....(31,732)	.....(558,716)	.....(590,448)		
1.3 Bonds of affiliates.....			.....0		
2.1 Preferred stocks (unaffiliated).....	.....(2,756)	.....(11,518)	.....(14,274)		
2.11 Preferred stocks of affiliates.....			.....0		
2.2 Common stocks (unaffiliated).....	.....43,402		.....43,402	.....(2,104,211)	
2.21 Common stocks of affiliates.....			.....0		
3. Mortgage loans.....			.....0		
4. Real estate.....			.....0		
5. Contract loans.....			.....0		
6. Cash, cash equivalents and short-term investments.....			.....0		
7. Derivative instruments.....			.....0		
8. Other invested assets.....			.....0		
9. Aggregate write-ins for capital gains (losses).....	.....0	.....0	.....0	.....0	.....0
10. Total capital gains (losses).....	.....8,914	.....(570,234)	.....(561,320)	.....(2,104,211)	.....0

DETAILS OF WRITE-INS

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

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

	1 Total	Insurance					7 Fraternal	8 Expense
		2 Life Insurance	3 Individual Annuities	4 Accident and Health	5 Aggregate of All Other Lines of Business	6 Total (Columns 2 through 5)		
FIRST YEAR (other than single)								
1. Uncollected.....	0					0		
2. Deferred and accrued.....	0					0		
3. Deferred, accrued & uncollected:								
3.1 Direct.....	0					0		
3.2 Reinsurance assumed.....	0					0		
3.3 Reinsurance ceded.....	0					0		
3.4 Net (Line 1 + Line 2).....	0	0	0	0	0	0	0	0
4. Advance.....	0					0		
5. Line 3.4 - Line 4.....	0	0	0	0	0	0	0	0
6. Collected during year:								
6.1 Direct.....	18,936,827	114,909	18,821,918			18,936,827		
6.2 Reinsurance assumed.....	0					0		
6.3 Reinsurance ceded.....	0					0		
6.4 Net.....	18,936,827	114,909	18,821,918	0	0	18,936,827	0	0
7. Line 5 + Line 6.4.....	18,936,827	114,909	18,821,918	0	0	18,936,827	0	0
8. Prior year (uncollected + deferred and accrued - advance).....	0					0		
9. First year premiums and considerations:								
9.1 Direct.....	18,936,827	114,909	18,821,918			18,936,827		
9.2 Reinsurance assumed.....	0					0		
9.3 Reinsurance ceded.....	0					0		
9.4 Net (Line 7 - Line 8).....	18,936,827	114,909	18,821,918	0	0	18,936,827	0	0
SINGLE								
10. Single premiums and considerations:								
10.1 Direct.....	909,009	909,009				909,009		
10.2 Reinsurance assumed.....	0					0		
10.3 Reinsurance ceded.....	0					0		
10.4 Net.....	909,009	909,009	0	0	0	909,009	0	0
RENEWAL								
11. Uncollected.....	9,663	9,663				9,663		
12. Deferred and accrued.....	0					0		
13. Deferred, accrued & uncollected:								
13.1 Direct.....	9,663	9,663				9,663		
13.2 Reinsurance assumed.....	0					0		
13.3 Reinsurance ceded.....	0					0		
13.4 Net (Line 11 + Line 12).....	9,663	9,663	0	0	0	9,663	0	0
14. Advance.....	438,303	438,303				438,303		
15. Line 13.4 - Line 14.....	(428,640)	(428,640)	0	0	0	(428,640)	0	0
16. Collected during year:								
16.1 Direct.....	18,403,787	2,981,694	15,422,093			18,403,787		
16.2 Reinsurance assumed.....	0	-	-			0		
16.3 Reinsurance ceded.....	325,816	325,816	-			325,816		
16.4 Net.....	18,077,971	2,655,878	15,422,093	0	0	18,077,971	0	0
17. Line 15 + Line 16.4.....	17,649,331	2,227,238	15,422,093	0	0	17,649,331	0	0
18. Prior year (uncollected + deferred and accrued - advance).....	(486,109)	(486,109)	0	0	0	(486,109)		
19. Renewal premiums and considerations:								
19.1 Direct.....	18,461,256	3,039,163	15,422,093			18,461,256		
19.2 Reinsurance assumed.....	0					0		
19.3 Reinsurance ceded.....	325,816	325,816	-			325,816		
19.4 Net (Line 17 - Line 18).....	18,135,440	2,713,347	15,422,093	0	0	18,135,440	0	0
TOTAL								
20. Total premiums and annuity considerations:								
20.1 Direct.....	38,307,092	4,063,081	34,244,011	0	0	38,307,092	0	0
20.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0
20.3 Reinsurance ceded.....	325,816	325,816	0	0	0	325,816	0	0
20.4 Net (Lines 9.4 + 10.4 + 19.4).....	37,981,276	3,737,265	34,244,011	0	0	37,981,276	0	0

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

	1	Total	Insurance					7	8
			2 Life Insurance	3 Individual Annuities	4 Accident and Health	5 Aggregate of All Other Lines of Business	6 Total (Columns 2 through 5)		
REFUNDS APPLIED (included in Part 1)									
21. To pay renewal premiums		10,870	10,870				10,870		
22. All other		1,132,184	1,132,184				1,132,184		
REINSURANCE COMMISSIONS AND EXPENSE ALLOWANCES INCURRED									
23. First year (other than single):									
23.1 Reinsurance ceded		0					0		
23.2 Reinsurance assumed		0					0		
23.3 Net ceded less assumed		0	0	0	0	0	0	0	0
24. Single:									
24.1 Reinsurance ceded		0					0		
24.2 Reinsurance assumed		0					0		
24.3 Net ceded less assumed		0	0	0	0	0	0	0	0
25. Renewal:									
25.1 Reinsurance ceded		0					0		
25.2 Reinsurance assumed		0					0		
25.3 Net ceded less assumed		0	0	0	0	0	0	0	0
26. Totals:									
26.1 Reinsurance ceded (Page 6, Line 6)		0	0	0	0	0	0	0	0
26.2 Reinsurance assumed		0	0	0	0	0	0	0	0
26.3 Net ceded less assumed		0	0	0	0	0	0	0	0
COMMISSIONS INCURRED (direct business only)									
27. First year (other than single)		652,721	90,363	.562,358			652,721		
28. Single		87,022	87,022	-			87,022		
29. Renewal		340,129	43,650	296,479			340,129		
30. Deposit-type contract funds		0					0		
31. Totals (to agree with Page 6, Line 19)		1,079,872	.221,035	.858,837	0	0	1,079,872	0	0

Annual Statement for the year 2018 of the **First Catholic Slovak Ladies Association Of The U.S.A.**
EXHIBIT 2 - GENERAL EXPENSES

	Insurance				5	6	7			
	1	Accident and Health		4 Aggregate of All Other Lines of Business						
		2 Cost Containment	3 All Other							
1. Rent.....	379,709	-	-	-	-	-	379,709			
2. Salaries and wages.....	2,355,208	-	-	-	-	218,232	2,573,440			
3.11 Insured benefit plans for employees.....	444,422	-	-	-	-	34,917	479,339			
3.12 Insured benefit plans for fieldworkers.....	-	-	-	-	-	-	0			
3.21 Uninsured benefit plans for employees.....	-	-	-	-	-	-	0			
3.22 Uninsured benefit plans for fieldworkers.....	-	-	-	-	-	-	0			
3.31 Other employee welfare.....	-	-	-	-	-	-	0			
3.32 Other fieldworker welfare.....	-	-	-	-	-	-	0			
4.1 Legal fees and expenses.....	57,592	-	-	-	-	-	57,592			
4.2 Medical examination fees.....	50,064	-	-	-	-	-	50,064			
4.3 Inspection report fees.....	-	-	-	-	-	-	0			
4.4 Fees of public accountants and consulting actuaries.....	337,724	-	-	-	-	-	337,724			
4.5 Expense of investigation and settlement of certificate claims.....	-	-	-	-	-	-	0			
5.1 Traveling expenses.....	82,714	-	-	-	-	20,679	103,393			
5.2 Advertising.....	337,417	-	-	-	-	16,759	354,176			
5.3 Postage, express, telegraph and telephone.....	231,685	-	-	-	-	-	231,685			
5.4 Printing and stationery.....	33,366	-	-	-	-	-	33,366			
5.5 Cost or depreciation of furniture and equipment.....	17,741	-	-	-	-	-	17,741			
5.6 Rental of equipment.....	-	-	-	-	-	-	0			
5.7 Cost or depreciation of EDP equipment and software.....	40,673	-	-	-	-	-	40,673			
5.8 Lodge supplies less \$.....0 from sales.....	-	-	-	-	-	-	0			
6.1 Books and periodicals.....	15,252	-	-	-	-	-	15,252			
6.2 Bureau and association dues.....	30,182	-	-	-	-	-	30,182			
6.3 Insurance, except on real estate.....	51,994	-	-	-	-	-	51,994			
6.4 Miscellaneous losses.....	-	-	-	-	-	-	0			
6.5 Collection and bank service charges.....	100,293	-	-	-	-	-	100,293			
6.6 Sundry general expenses.....	321,318	-	-	-	-	-	321,318			
7.1 Field expense allowance.....	-	-	-	-	-	-	0			
7.2 Fieldworkers' balances charged off (less \$.....0 recovered).....	-	-	-	-	-	-	0			
7.3 Field conferences other than local meetings.....	10,515	-	-	-	-	-	10,515			
8.1 Official publications.....	-	-	-	-	-	483,645	483,645			
8.2 Expense of supreme lodge meetings.....	164,623	-	-	-	-	-	164,623			
9.1 Real estate expenses.....	-	-	-	-	197,698	-	197,698			
9.2 Investment expenses not included elsewhere.....	-	-	-	-	-	-	0			
9.3 Aggregate write-ins for expenses.....	679,610	0	0	0	0	3,438,413	4,118,023			
10. General expenses incurred.....	5,742,102	0	0	0	197,698	(a) 4,212,645	(b) 10,152,445			
11. General expenses unpaid December 31, prior year.....	1,186,694	-	-	-	-	970,253	2,156,947			
12. General expenses unpaid December 31, current year.....	375,040	-	-	-	-	2,055,125	2,430,165			
13. General expenses paid during year (Lines 10 + 11 - 12).....	6,553,756	0	0	0	197,698	3,127,773	9,879,227			

DETAILS OF WRITE-INS

09.301	Data Processing.....	490,419	-	-	-	-	490,419
09.302	Repairs - Supplies.....	33,643	-	-	-	-	33,643
09.303	Temporary Help.....	155,548	-	-	-	-	155,548
09.398	Summary of remaining write-ins for Line 9.3 from overflow page.....	0	0	0	0	0	3,438,413
09.399	Totals (Lines 09.301 through 09.303 plus 09.398)(Line 9.3 above).....	679,610	0	0	0	0	4,118,023

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

1. Charitable \$.....295,897; 2. Institutional \$.....0; 3. Recreational and Health \$.....0; 4. Educational \$....269,685

5. Religious \$.....0; 6. Membership \$....3,373,435; 7. Other \$....273,628; 8. Total \$....4,212,645

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

EXHIBIT 3 - TAXES, LICENSES AND FEES

	Insurance			4	5	6
	1 Life	2 Accident and Health	3 Aggregate of All Other Lines of Business	Investment	Fraternal	Total
1. Real estate taxes.....	-	-	-	(440,271)	-	(440,271)
2. State insurance department licenses and fees.....	147,219	-	-	-	-	147,219
3. Other state taxes, including \$.....0 for employee benefits.....	4,911	-	-	-	-	4,911
4. U.S. Social Security taxes.....	191,299	-	-	-	-	191,299
5. All other taxes.....	2,067	-	-	-	-	2,067
6. Taxes, licenses and fees Incurred.....	345,496	0	0	(440,271)	0	(94,775)
7. Taxes, licenses and fees unpaid December 31, prior year.....	30,000	-	-	700	-	700
8. Taxes, licenses and fees unpaid December 31, current year.....	315,496	0	0	(439,571)	0	(124,075)
9. Taxes, licenses and fees paid during year (Lines 6 + 7 - 8).....	-	-	-	-	-	-

EXHIBIT 4 - DIVIDENDS OR REFUNDS

	1 Life	2 Accident and Health
1. Applied to pay renewal premiums.....	10,870	-
2. Applied to shorten the endowment or premium-paying period.....	-	-
3. Applied to provide paid-up additions.....	1,132,184	-
4. Applied to provide paid-up annuities.....	-	-
5. Total (Lines 1 to 4).....	1,143,054	0
6. Paid in cash.....	65,829	-
7. Left on deposit.....	148,751	-
8. Aggregate write-ins for dividend or refund.....	0	0
9. Total (Lines 5 to 8).....	1,357,634	0
10. Amount due and unpaid.....	-	-
11. Provision for dividends or refunds payable in the following calendar year.....	1,400,000	-
12. Terminal dividends.....	-	-
13. Provision for deferred dividend contracts.....	-	-
14. Amount provisionally held for deferred dividend contracts not included in Line 13.....	-	-
15. Total (Line 10 through Line 14).....	1,400,000	0
16. Total from prior year.....	1,400,000	-
17. Total dividends or refunds (Line 9 + 15 - 16).....	1,357,634	0

DETAILS OF WRITE-INS

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

First Catholic Slovak Ladies Association Of The U.S.A.

EXHIBIT 5 - AGGREGATE RESERVE FOR LIFE CONTRACTS

1 Valuation Standard	2 Total	3 Industrial	4 Ordinary	5 Credit (Group and Individual)	6 Group
Life Insurance:					
0100001. AE 4% @ AE 2.5%.....	117,018			117,018	
0100002. AE 3.5% @ AE 2.5%.....	1,424,109			1,424,109	
0100003. AM 2.5% @ AE 2.5%.....	8,714,022			8,714,022	
0100004. AM 3% @ AE 2.5%.....	1,324,472			1,324,472	
0100005. AM 3.5% @ AE 2.5%.....	135,789			135,789	
0100006. AE 3.0% - Curtate.....	759,852			759,852	
0100007. 1941 CSO 2.5%.....	2,423,522			2,423,522	
0100008. 1941 CSO 3% - Curtate.....	1,008,323			1,008,323	
0100009. 1958 CSO 2.5%.....	18,173,153			18,173,153	
0100010. 1958 CSO 4% @ 58 CSO 2.5%.....	4,696,965			4,696,965	
0100011. 1958 CSO 4.5%.....	736,429			736,429	
0100012. 1980 CSO D 5.5% @ 80 CSOA 4.5%.....	46,724,809			46,724,809	
0100013. 1980 CSO 5% @ 80 CSO M/F/S/NS 4.5%.....	16,273,999			16,273,999	
0100014. 1980 CSO D 6%.....	17,502,631			17,502,631	
0100015. 1980 CSO 4.5% @ 80 CSO M/F/S/NS 4.5%.....	43,036,821			43,036,821	
0100016. 1980 CSO 4%.....	226,034			226,034	
0100017. 2001 CSO 4.5%.....	3,227,102			3,227,102	
0100018. 2001 CSO 4.0%.....	70,028,520			70,028,520	
0100019. 1980 CSO A/F 5.5% Curtate.....	13,544,825			13,544,825	
0100020. 2001 CSO 4.0% Special S/U.....	24,269,034			24,269,034	
0100021. 2001 CSO 3.75%.....	447,348			447,348	
0100022. 2001 CSO 3.5%.....	11,249,359			11,249,359	
0100023.	0				
0100024.	0				
0100025. Provision for Post Mortem.....	12,950,000			12,950,000	
0100026. Rounding.....	.521			.521	
0199997. Totals (Gross).....	298,994,657	0	298,994,657	0	0
0199998. Reinsurance ceded.....	253,657			253,657	
0199999. Totals (Net).....	298,741,000	0	298,741,000	0	0

Annuities (excluding supplementary contracts with life contingencies):

0200001. Individual Deferred Annuities.....	536,249,973	XXX.....	536,249,973	XXX.....	
0200002. Single Premium Immediate Annuities - with life contingencies.....	5,179,693	XXX.....	5,179,693	XXX.....	
0200003. Rounding.....	.334	XXX.....	.334	XXX.....	
0299997. Totals (Gross).....	541,430,000	XXX.....	541,430,000	XXX.....	0
0299999. Totals (Net).....	541,430,000	XXX.....	541,430,000	XXX.....	0

Accidental Death Benefits:

0400001.	0				
0400002. Accidental Death Benefits.....	10,000			10,000	
0499997. Totals (Gross).....	10,000	0	10,000	0	0
0499999. Totals (Net).....	10,000	0	10,000	0	0

Miscellaneous Reserves:

0700001. Waiver of Premiums After Age 80 Under OL.....	8,520			8,520	
0700002. Rounding.....	.480			.480	
0799997. Totals (Gross).....	9,000	0	9,000	0	0
0799999. Totals (Net).....	9,000	0	9,000	0	0
9999999. Totals (Net) - Page 3, Line 1.....	840,190,000	0	840,190,000	0	0

Annual Statement for the year 2018 of the **First Catholic Slovak Ladies Association Of The U.S.A.**
EXHIBIT 5 - INTERROGATORIES

1.1 Has the reporting entity ever issued both participating and non-participating contracts?

Yes [] No [X]

1.2 If not, state which kind is issued

PARTICIPATING

2.1 Does the reporting entity at present issue both participating and non-participating contracts?

Yes [] No [X]

2.2 If not, state which kind is issued

PARTICIPATING

3. Does the reporting entity at present issue or have in force contracts that contain non-guaranteed elements?

Yes [X] No []

If so, attach a statement that contains the determination procedures, answers to the interrogatories and an actuarial opinion as described in the instructions.

4. Has the reporting entity any assessment or stipulated premium contracts in force? If so, state:

Yes [] No [X]

4.1 Amount of insurance: \$.....

4.2 Amount of reserve: \$.....

4.3 Basis of reserve:

4.4 Basis of regular assessments:

4.5 Basis of special assessments:

4.6 Assessments collected during year: \$.....

5. If the contract loan interest rate guaranteed in any one or more of its currently issued contracts is less than 5%, not in advance, state the contract loan rate guarantees on any such contracts.

6. Does the reporting entity hold reserves for any annuity contracts that are less than the reserves that would be held on a standard basis?

Yes [] No [X]

6.1 If so, state the amount of reserve on such contracts on the basis actually held: \$.....

6.2 That would have been held (on an exact or approximate basis) using the actual ages of the annuitants; the interest rate(s) used in 6.1; and the same mortality basis used by the reporting entity for the valuation of comparable annuity benefits issued to standard lives. If the reporting entity has no comparable annuity benefits for standard lives to be valued, the mortality basis shall be the table most recently approved by the state of domicile for valuing individual annuity benefits:

\$.....

Attach statement of methods employed in their valuation.

7. Does the reporting entity have any Synthetic GIC contracts or agreements in effect as of December 31 of the current year?

Yes [] No [X]

7.1 If yes, state the total dollar amount of assets covered by these contracts or agreements: \$.....

7.2 Specify the basis (fair value, amortized cost, etc.) for determining the amount:

7.3 State the amount of reserves established for this business: \$.....

7.4 Identify where the reserves are reported in the blank.

8. Does the reporting entity have any Contingent Deferred Annuity contracts or agreements in effect as of December 31 of the current year?

Yes [] No [X]

8.1 If yes, state the total dollar amount of account value covered by these contracts or agreements: \$.....

8.2 State the amount of reserves established for this business: \$.....

8.3 Identify where the reserves are reported in the blank.

9. Does the reporting entity have any Guaranteed Lifetime Income Benefit contracts, agreements or riders in effect as of December 31 of the current year?

Yes [] No [X]

9.1 If yes, state the total dollar amount of any account value associated with these contracts, agreements or riders: \$.....

9.2 State the amount of reserves established for this business: \$.....

9.3 Identify where the reserves are reported in the blank.

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

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

NONE

EXHIBIT 6 - AGGREGATE RESERVES FOR ACCIDENT AND HEALTH CONTRACTS

	1 Total	2 Collectively Renewable	Other Individual Contracts			
			3 Non- Cancelable	4 Guaranteed Renewable	5 Non-Renewable for Stated Reasons Only	6 Other Accident Only
ACTIVE LIFE RESERVE						
1. Unearned premium reserves.....	0					
2. Additional contract reserves (a).....	0					
3. Additional actuarial reserves-Asset/Liability analysis.....	0					
4. Reserve for future contingent benefits.....	0					
5. Aggregate write-ins for reserves.....	0	0	0	0	0	0
6. Totals (Gross).....	0	0	0	0	0	0
7. Reinsurance ceded.....	0					
8. Totals (Net).....	0	0	0	0	0	0

CLAIM RESERVE

9. Present value of amounts not yet due on claims.....	0					
10. Additional actuarial reserves-Asset/Liability analysis.....	0					
11. Reserve for future contingent benefits.....	0					
12. Aggregate write-ins for reserves.....	0	0	0	0	0	0
13. Totals (Gross).....	0	0	0	0	0	0
14. Reinsurance ceded.....	0					
15. Totals (Net).....	0	0	0	0	0	0
16. TOTAL (Net).....	0	0	0	0	0	0
17. TABULAR FUND INTEREST.....	0					

DETAILS OF WRITE-INS

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

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

EXHIBIT 7 - DEPOSIT-TYPE CONTRACTS

	1 Total	2 Guaranteed Interest Contracts	3 Annuities Certain	4 Supplemental Contracts	5 Dividend Accumulations or Refunds	6 Premium and Other Deposit Funds
1. Balance at beginning of the year before reinsurance.....	24,377,319		19,407,522	343,998	4,625,799	
2. Deposits received during the year.....	10,760,046		10,585,839	25,456	148,751	
3. Investment earnings credited to the account.....	1,078,668		890,115	9,605	178,948	
4. Other net change in reserves.....	0		-	-	-	
5. Fees and other charges assessed.....	0		-	-	-	
6. Surrender charges.....	0		-	-	-	
7. Net surrender or withdrawal payments.....	8,174,226		7,882,059	56,126	236,041	
8. Other net transfers to or (from) Separate Accounts.....	0					
9. Balance at the end of the current year before reinsurance (Lines 1 + 2 + 3 + 4 - 5 - 6 - 7 - 8).....	28,041,807	0	23,001,417	322,933	4,717,457	0
10. Reinsurance balance at the beginning of the year.....	0					
11. Net change in reinsurance assumed.....	0					
12. Net change in reinsurance ceded.....	0					
13. Reinsurance balance at the end of the year (Lines 10 + 11 - 12).....	0	0	0	0	0	0
14. Net balance at the end of current year after reinsurance (Lines 9 + 13).....	28,041,807	0	23,001,417	322,933	4,717,457	0

EXHIBIT 8 - PART 1 - CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

Liability End of Current Year

	1 Total	2 Industrial Life	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Due and unpaid:											
1.1 Direct.....	2,349,428			2,349,428							
1.2 Reinsurance assumed.....	0										
1.3 Reinsurance ceded.....	0										
1.4 Net.....	2,349,428	0	2,349,428	0	0	0	0	0	0	0	0
2. In course of settlement:											
2.1 Resisted:											
2.11 Direct.....	0										
2.12 Reinsurance assumed.....	0										
2.13 Reinsurance ceded.....	0										
2.14 Net.....	0	0	(b).....0	(b).....0	0	(b).....0	(b).....0	0	0	0	0
2.2 Other:											
2.21 Direct.....	0										
2.22 Reinsurance assumed.....	0										
2.23 Reinsurance ceded.....	0										
2.24 Net.....	0	0	(b).....0	(b).....0	0	(b).....0	(b).....0	0	(b).....0	(b).....0	(b).....0
3. Incurred but unreported:											
3.1 Direct.....	1,170,000			1,170,000							
3.2 Reinsurance assumed.....	0										
3.3 Reinsurance ceded.....	0										
3.4 Net.....	1,170,000	0	(b).....0	(b).....0	0	(b).....0	(b).....0	0	(b).....0	(b).....0	(b).....0
4. Totals:											
4.1 Direct.....	3,519,428	0	3,519,428	0	0	0	0	0	0	0	0
4.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0	0
4.4 Net.....	3,519,428	(a).....0	(a).....0	0	0	0	(a).....0	0	0	0	0

(a) Including matured endowments (but not guaranteed annual pure endowments) unpaid amounting to \$.....0 in Column 2, \$....31,854 in Column 3 and \$.....0 in Column 7.

(b) Include only portion of disability and accident and health claim liabilities applicable to assumed "accrued" benefits. Reserves (including reinsurance assumed and net of reinsurance ceded) for unaccrued benefits for Ordinary Life Insurance \$.....0, Individual Annuities \$.....0, Credit Life (Group and Individual) \$.....0, and Group Life \$.....0,

are included in Page 3, Line 1, (See Exhibit 5, Section on Disability Disabled Lives); and for Group Accident and Health \$.....0, Credit (Group and Individual) Accident and Health \$.....0 and Other Accident and Health \$.....0

are included in Page 3, Line 2, (See Exhibit 6, Claim Reserve).

EXHIBIT 8 - PART 2 - CONTRACT CLAIMS FOR LIFE AND ACCIDENT AND HEALTH CONTRACTS

Incurred During the Year

	1 Total	2 Industrial Life (a)	Ordinary			6 Credit Life (Group and Individual)	Group		Accident and Health		
			3 Life Insurance (b)	4 Individual Annuities	5 Supplementary Contracts		7 Life Insurance (c)	8 Annuities	9 Group	10 Credit (Group and Individual)	11 Other
1. Settlements during the year:											
1.1 Direct.....	32,063,563		6,969,160	25,094,403							
1.2 Reinsurance assumed.....	0		-	-							
1.3 Reinsurance ceded.....	3,333		3,333	-							
1.4 Net.....	(d). 32,060,230	0	6,965,827	25,094,403	0	0	0	0	0	0	0
2. Liability December 31, current year from Part 1:											
2.1 Direct.....	3,519,428	0	3,519,428	0	0	0	0	0	0	0	0
2.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0
2.3 Reinsurance ceded.....	0	0	0	0	0	0	0	0	0	0	0
2.4 Net.....	3,519,428	0	3,519,428	0	0	0	0	0	0	0	0
3. Amounts recoverable from reinsurers Dec. 31, current year.....	0										
4. Liability December 31, prior year:											
4.1 Direct.....	2,579,058		2,579,058								
4.2 Reinsurance assumed.....	0										
4.3 Reinsurance ceded.....	0										
4.4 Net.....	2,579,058	0	2,579,058	0	0	0	0	0	0	0	0
5. Amounts recoverable from reinsurers December 31, prior year.....	0										
6. Incurred benefits:											
6.1 Direct.....	33,003,933	0	7,909,530	25,094,403	0	0	0	0	0	0	0
6.2 Reinsurance assumed.....	0	0	0	0	0	0	0	0	0	0	0
6.3 Reinsurance ceded.....	3,333	0	3,333	0	0	0	0	0	0	0	0
6.4 Net.....	33,000,600	0	7,906,197	25,094,403	0	0	0	0	0	0	0

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

(b) Including matured endowments (but not guaranteed annual pure endowments) amounting to \$....25,456 in Line 1.1, \$....25,456 in Line 1.4, \$....25,456 in Line 6.1 and \$....25,456 in line 6.4.

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

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

Annual Statement for the year 2018 of the **First Catholic Slovak Ladies Association Of The U.S.A.**
EXHIBIT OF NONADMITTED ASSETS

	1 Current Year Total Nonadmitted Assets	2 Prior Year Total Nonadmitted Assets	3 Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1. Bonds (Schedule D).....			0
2. Stocks (Schedule D):			0
2.1 Preferred stocks.....			0
2.2 Common stocks.....			0
3. Mortgage loans on real estate (Schedule B):			0
3.1 First liens.....			0
3.2 Other than first liens.....			0
4. Real estate (Schedule A):			0
4.1 Properties occupied by the company.....			0
4.2 Properties held for the production of income.....			0
4.3 Properties held for sale.....			0
5. Cash (Schedule E-Part 1), cash equivalents (Schedule E-Part 2) and short-term investments (Schedule DA).....			0
6. Contract loans.....			0
7. Derivatives (Schedule DB).....			0
8. Other invested assets (Schedule BA).....			0
9. Receivables for securities.....			0
10. Securities lending reinvested collateral assets (Schedule DL).....			0
11. Aggregate write-ins for invested assets.....	0	0	0
12. Subtotals, cash and invested assets (Lines 1 to 11).....	0	0	0
13. Title plants (for Title insurers only).....			0
14. Investment income due and accrued.....			0
15. Premiums and considerations:			0
15.1 Uncollected premiums and agents' balances in the course of collection.....			0
15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due.....			0
15.3 Accrued retrospective premiums and contracts subject to redetermination.....			0
16. Reinsurance:			0
16.1 Amounts recoverable from reinsurers.....			0
16.2 Funds held by or deposited with reinsured companies.....			0
16.3 Other amounts receivable under reinsurance contracts.....			0
17. Amounts receivable relating to uninsured plans.....			0
18.1 Current federal and foreign income tax recoverable and interest thereon.....			0
18.2 Net deferred tax asset.....			0
19. Guaranty funds receivable or on deposit.....			0
20. Electronic data processing equipment and software.....		3,976	3,976
21. Furniture and equipment, including health care delivery assets.....	5,249	5,922	673
22. Net adjustment in assets and liabilities due to foreign exchange rates.....			0
23. Receivables from parent, subsidiaries and affiliates.....			0
24. Health care and other amounts receivable.....			0
25. Aggregate write-ins for other-than-invested assets.....	314,159	165,415	(148,744)
26. Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 through 25).....	319,408	175,313	(144,095)
27. From Separate Accounts, Segregated Accounts and Protected Cell Accounts.....			0
28. TOTALS (Lines 26 and 27).....	319,408	175,313	(144,095)

DETAILS OF WRITE-INS

1101.....			0
1102.....			0
1103.....			0
1198. Summary of remaining write-ins for Line 11 from overflow page.....	0	0	0
1199. Totals (Lines 1101 through 1103 plus 1198) (Line 11 above).....	0	0	0
2501. Prepaid expenses.....	287,042	149,300	(137,742)
2502. Prepaid Pension.....	27,117	16,115	(11,002)
2503.....			0
2598. Summary of remaining write-ins for Line 25 from overflow page.....	0	0	0
2599. Totals (Lines 2501 through 2503 plus 2598) (Line 25 above).....	314,159	165,415	(148,744)

NOTES TO FINANCIAL STATEMENTS**Note 1 – Summary of Significant Accounting Policies and Going Concern****A. Accounting Practices**

	SSAP #	F/S Page	F/S Line #	2018	2017
NET INCOME					
(1) Company state basis (Page 4, Line 31, Columns 1 & 2)	XXX	XXX	XXX	\$ 2,115,761	\$ 4,184,273
(2) State Prescribed Practice that are an increase/(decrease) from NAIC SAP					
				\$	\$
(3) State Permitted Practice that are an increase/(decrease) from NAIC SAP				\$	\$
				\$	\$
(4) NAIC SAP (1 – 2 – 3 = 4)	XXX	XXX	XXX	\$ 2,115,761	\$ 4,184,273
SURPLUS					
(5) Company state basis (Page 3, Line 30, Columns 1 & 2)	XXX	XXX	XXX	\$ 104,382,697	\$ 103,628,715
(6) State Prescribed Practice that are an increase/(decrease) from NAIC SAP					
				\$	\$
(7) State Permitted Practice that are an increase/(decrease) from NAIC SAP				\$	\$
				\$	\$
(8) NAIC SAP (5 – 6 – 7 = 8)	XXX	XXX	XXX	\$ 104,382,697	\$ 103,628,715

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

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

C. Accounting Policy

The life and annuity premiums are recognized as income when earned. Expenses incurred in connection with acquiring new insurance are charged to operations as incurred. The amount of dividends to be paid to policyholders is determined annually by the Association's Board of Directors. The aggregate amount of policyholders' dividends is related to actual interest, mortality, morbidity, and expense experience for the year and judgment as to the appropriate level of statutory surplus to be retained by the Association. In addition, the Association uses the following accounting policies:

- (1) Basis for Short-Term Investments
Short-term investments are stated at amortized cost.
- (2) Basis for Bonds, Mandatory Convertible Securities, SVO-Identified Investments and Amortization Method
Bonds not backed by other loans are stated at amortized cost using the interest method, except that bonds with a NAIC rating of "6" are valued at fair market
- (3) Basis for Common Stocks
Common Stocks are stated at market.
- (4) Basis for Preferred Stocks
Preferred stocks are stated at cost, except for stocks designated as "4, 5, or 6", which are stated at market.
- (5) Basis for Mortgage Loans
Mortgage loans - recorded at aggregate carrying value less accrued interest: Other Investments: Equity basis
- (6) Basis for Loan-Backed Securities and Adjustment Methodology
Loan-backed securities are stated at amortized cost or the lower of amortized cost or fair value, using the retrospective method.
- (7) Accounting Policies for Investments in Subsidiaries, Controlled and Affiliated Entities
None
- (8) Accounting Policies for Investments in Joint Ventures, Partnerships and Limited Liability Entities
None
- (9) Accounting Policies for Derivatives
None.
- (10) Anticipated Investment Income Used in Premiums Deficiency Calculation
None.
- (11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss/Claim Adjustment Expenses for A&H Contracts
Unpaid losses and loss adjustment expenses include an amount determined from individual case estimates and loss reports and an amount, based on past experience, for losses incurred but not reported. Such liabilities are necessarily based on assumptions and estimates and while management believes the amount is adequate, the ultimate liability may be in excess of or less than the amount provided. The methods for making such estimates and for establishing the resulting liability is continually reviewed and any adjustments are reflected in the period determined.
- (12) Changes in the Capitalization Policy and Predefined Thresholds from Prior Period
The Association has not modified its capitalization policy from the prior period. Real estate, furniture and fixtures are recorded at cost less depreciation over its estimated useful life. Electronic data processing equipment and software are recorded at cost and amortized over a three-year period.
- (13) Method Used to Estimate Pharmaceutical Rebate Receivables
Not Applicable.

D. Going Concern
Not Applicable

NOTES TO FINANCIAL STATEMENTS**Note 2 – Accounting Changes and Correction of Errors**

During 2018 the association established a \$225,000 liability for prior year adjustments in the calculation of the association's 401K contributions. The adjustment for \$225,000 is reflected on the current year statement as a liability and reduction of surplus.

Note 3 – Business Combinations and Goodwill

A. Statutory Purchase Method - Not Applicable

B. Statutory Merger

In 2017, the association accounted for two statutory mergers; Polish Union of the United States of America (PUNA), a Pennsylvania fraternal benefit society on June 1st, 2017; and the Polish Woman's Alliance of America (PWAA), an Illinois fraternal benefit society on July 1st, 2017. The combination was recorded in the 2017 annual filing.

C. Assumption Reinsurance - Not Applicable

D. Impairment Loss - Not Applicable

Note 4 – Discontinued Operations - None**Note 5 – Investments**

A. Mortgage Loans, including Mezzanine Real Estate Loans

(1) Maximum and Minimum Lending Rates

The maximum and minimum lending rates for mortgage loans during 2018 were by category: Multi-family commercial loans 5.625% - 6.375%

(2) The maximum percentage of any one loan to the value of security at the time of the loan, exclusive of insured or guaranteed or purchase money mortgage was: 54.3%

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

Current Year	Prior Year
\$	\$

(4) Age Analysis of Mortgage Loans and Identification of Mortgage Loans in which the Insurer is a Participant or Co-Lender in a Mortgage Loan Agreement:

	Farm	Residential		Commercial		Mezzanine	Total			
		Insured	All Other	Insured	All Other					
a. Current Year										
1. Recorded Investment (All)										
(a) Current	\$	\$	\$	\$	\$ 690,151	\$	\$ 690,151			
(b) 30-59 Days Past Due	\$	\$	\$	\$	\$	\$	\$			
(c) 60-89 Days Past Due	\$	\$	\$	\$	\$	\$	\$			
(d) 90-179 Days Past Due	\$	\$	\$	\$	\$	\$	\$			
(e) 180+ Days Past Due	\$	\$	\$	\$	\$	\$	\$			
2. Accruing Interest 90-179 Days Past Due										
(a) Recorded Investment	\$	\$	\$	\$	\$	\$	\$			
(b) Interest Accrued	\$	\$	\$	\$	\$	\$	\$			
3. Accruing Interest 180+ Days Past Due										
(a) Recorded Investment	\$	\$	\$	\$	\$	\$	\$			
(b) Interest Accrued	\$	\$	\$	\$	\$	\$	\$			
4. Interest Reduced										
(a) Recorded Investment	\$	\$	\$	\$	\$	\$	\$			
(b) Number of Loans										
(c) Percent Reduced	%	%	%	%	%	%	%			
5. Participant or Co-Lender in a Mortgage Loan Agreement										
(a) Recorded Investment	\$	\$	\$	\$	\$	\$	\$			
b. Prior Year										
1. Recorded Investment (All)										
(a) Current	\$	\$	\$	\$	\$ 1,620,970	\$	\$ 1,620,970			
(b) 30-59 Days Past Due	\$	\$	\$	\$	\$	\$	\$			
(c) 60-89 Days Past Due	\$	\$	\$	\$	\$	\$	\$			
(d) 90-179 Days Past Due	\$	\$	\$	\$	\$	\$	\$			
(e) 180+ Days Past Due	\$	\$	\$	\$	\$	\$	\$			

NOTES TO FINANCIAL STATEMENTS

	Farm	Residential		Commercial		Mezzanine	Total
		Insured	All Other	Insured	All Other		
2. Accruing Interest 90-179 Days Past Due							
(a) Recorded Investment	\$	\$	\$	\$	\$	\$	\$
(b) Interest Accrued	\$	\$	\$	\$	\$	\$	\$
3. Accruing Interest 180+ Days Past Due							
(a) Recorded Investment	\$	\$	\$	\$	\$	\$	\$
(b) Interest Accrued	\$	\$	\$	\$	\$	\$	\$
4. Interest Reduced							
(a) Recorded Investment	\$	\$	\$	\$	\$	\$	\$
(b) Number of Loans							
(c) Percent Reduced	%	%	%	%	%	%	%
5. Participant or Co-Lender in a Mortgage Loan Agreement							
(a) Recorded Investment	\$	\$	\$	\$	\$	\$	\$

(5) Investment in Impaired Loans With or Without Allowance for Credit Losses and Impaired Loans Subject to a Participant or Co-Lender Mortgage Loan Agreement for which the Reporting Entity is Restricted from Unilaterally Foreclosing on the Mortgage Loan:

	Farm	Residential		Commercial		Mezzanine	Total
		Insured	All Other	Insured	All Other		
a. Current Year							
1. With Allowance for Credit Losses	\$	\$	\$	\$	\$	\$	\$
2. No Allowance for Credit Losses							
3. Total (1 + 2)	\$	\$	\$	\$	\$	\$	\$
4. Subject to a Participant or Co-Lender Mortgage Loan Agreement for which the Reporting Entity is Restricted from Unilaterally Foreclosing on the Mortgage Loan							
b. Prior Year							
1. With Allowance for Credit Losses	\$	\$	\$	\$	\$	\$	\$
2. No Allowance for Credit Losses	\$	\$	\$	\$	\$	\$	\$
3. Total (1 + 2)	\$	\$	\$	\$	\$	\$	\$
4. Subject to a Participant or Co-Lender Mortgage Loan Agreement for which the Reporting Entity is Restricted from Unilaterally Foreclosing on the Mortgage Loan	\$	\$	\$	\$	\$	\$	\$

(6) Investment in Impaired Loans – Average Recorded Investment, Interest Income Recognized, Recorded Investment on Nonaccrual Status and Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting:

	Farm	Residential		Commercial		Mezzanine	Total
		Insured	All Other	Insured	All Other		
a. Current Year							
1. Average Recorded Investment							
2. Interest Income Recognized							
3. Recorded Investments on Nonaccrual Status							
4. Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting							
b. Prior Year							
1. Average Recorded Investment							
2. Interest Income Recognized							
3. Recorded Investments on Nonaccrual Status							
4. Amount of Interest Income Recognized Using a Cash-Basis Method of Accounting							

NOTES TO FINANCIAL STATEMENTS

(7) Allowances for Credit Balances:

	Current Year	Prior Year
a. Balance at beginning of period	\$	\$
b. Additions charged to operations		
c. Direct write-downs charged against the allowances		
d. Recoveries of amounts previously charged off		
e. Balance at end of period	\$	\$

(8) Mortgage Loans Derecognized as a Result of Foreclosure:

	Current Year
a. Aggregate amount of mortgage loans derecognized	\$
b. Real estate collateral recognized	
c. Other collateral recognized	
d. Receivables recognized from a government guarantee of the foreclosed mortgage loan	\$

(9) Policy for Recognizing Interest Income on Impaired Loans

B. Debt Restructuring-None

C. Reverse Mortgages-None

D. Loan-Backed Securities-None

E. Dollar Repurchase Agreements and/or Securities Lending Transactions-None

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing-None

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing
Repurchase Transactions – Cash Provider – Overview of Secured Borrowing Transactions
None

H. Repurchase Agreements Transactions Accounted for as a Sale
Repurchase Transaction – Cash Taker – Overview of Sale Transactions
None

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale
Repurchase Transaction – Cash Provider – Overview of Sale Transactions
None

J. Real Estate-None

K. Low-Income Housing Tax Credits (LIHTC)-None

L. Restricted Assets-None

M. Working Capital Finance Investments-None

N. Offsetting and Netting of Assets and Liabilities-None

O. Structured Notes-None

P. 5GI Securities-None

Q. Short Sales-None

R. Prepayment Penalty and Acceleration Fees

	General Account	Separate Account
(1) Number of CUSIPs	4	
(2) Aggregate Amount of Investment Income	\$ 220,375	\$

NOTES TO FINANCIAL STATEMENTS**Note 6 – Joint Ventures, Partnerships and Limited Liability Companies - None****Note 7 – Investment Income**

A. The bases, by category of investment income, for excluding (nonadmitting) any investment income due and accrued:

Due and accrued income was excluded from surplus on the following bases: All investment income due and accrued with the amounts that are over 90 days past due.

B. The total amount excluded:

The total amount excluded was \$0.00

Note 8 – Derivative Instruments- None**Note 9 – Income Taxes-Not Applicable****Note 10 – Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties-Not Applicable****Note 11 – Debt**

The Association has a line of credit for cash management purposes and may borrow up to \$20,000,000. The balance on December 31, 2018 is \$-0 and December 31, 2017 was \$0.

Note 12 – Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan

(1) Change in Benefit Obligation

	Overfunded		Underfunded	
	2018	2017	2018	2017
a. Pension Benefits				
1. Benefit obligation at beginning of year	\$ 696,787	\$ 651,867	\$	\$
2. Service cost	13,404	13,404		
3. Interest cost	32,820	30,511		
4. Contribution by plan participants				
5. Actuarial gain (loss)	(6,329)	21,355		
6. Foreign currency exchange rate changes				
7. Benefits paid	80,956	71,669		
8. Plan amendments	3,679	(51,319)		
9. Business combinations, divestitures, curtailments, settlements and special termination benefits				
10. Benefit obligation at end of year	\$ 652,047	\$ 696,787	\$	\$
	Overfunded		Underfunded	
b. Postretirement Benefits	2018	2017	2018	2017
1. Benefit obligation at beginning of year	\$	\$	\$ 430,736	\$ 351,054
2. Service cost			18,627	
3. Interest cost				100
4. Contribution by plan participants				
5. Actuarial gain (loss)			17,692	34,648
6. Foreign currency exchange rate changes				
7. Benefits paid				17,000
8. Plan amendments				(61,934)
9. Business combinations, divestitures, curtailments, settlements and special termination benefits				
10. Benefit obligation at end of year	\$	\$	\$ 467,055	\$ 430,736
	Overfunded		Underfunded	
c. Special or Contractual Benefits per SSAP No. 11	2018	2017	2018	2017
1. Benefit obligation at beginning of year	\$	\$	\$	\$
2. Service cost				
3. Interest cost				
4. Contribution by plan participants				
5. Actuarial gain (loss)				
6. Foreign currency exchange rate changes				
7. Benefits paid				
8. Plan amendments				
9. Business combinations, divestitures, curtailments, settlements and special termination benefits				
10. Benefit obligation at end of year	\$	\$	\$	\$

NOTES TO FINANCIAL STATEMENTS

(2) Change in Plan Assets

	Pension Benefits		Postretirement Benefits		Special or Contractual Benefits per SSAP No. 11	
	2018	2017	2018	2017	2018	2017
a. Fair value of plan assets at beginning of year	\$ 712,902	\$ 644,915	\$	\$	\$	\$
b. Actual return on plan assets	(12,014)	106,871				
c. Foreign currency exchange rate changes						
d. Reporting entity contribution	77,472	45,551				
e. Plan participants' contributions						
f. Benefits paid	99,196	84,435				
g. Business combinations, divestitures and settlements						
h. Fair value of plan assets at end of year	\$ 679,164	\$ 712,902	\$	\$	\$	\$

(3) Funded Status

	Pension Benefits		Postretirement Benefits	
	2018	2017	2018	2017
a. Components				
1. Prepaid benefit costs	\$	\$	\$	\$
2. Overfunded plans assets	\$ 27,117	\$ 16,115	\$	\$
3. Accrued benefit costs	\$	\$	\$ 467,055	\$ 430,736
4. Liability for pension benefits	\$	\$	\$	\$
b. Assets and liabilities recognized				
1. Assets (nonadmitted)	\$ 27,117	\$ 16,115	\$	\$
2. Liabilities recognized	\$	\$	\$	\$
c. Unrecognized liabilities	\$	\$	\$	\$

(4) Components of Net Periodic Benefit Cost

	Pension Benefits		Postretirement Benefits		Special or Contractual Benefits per SSAP No. 11	
	2018	2017	2018	2017	2018	2017
a. Service cost	\$ 13,404	\$ 13,404	\$ 18,627	\$ 18,303	\$	\$
b. Interest cost	32,820	30,511	19,788	16,453		
c. Expected return on plan assets	(41,850)	(40,025)	(19,788)	(17,553)		
d. Transition asset or obligation						
e. Gains and losses	13,011	47,513	27,549	12,924		
f. Prior service cost or credit						
g. Gain or loss recognized due to a settlement curtailment						
h. Total net periodic benefit cost	\$ 17,385	\$ 51,403	\$ 46,176	\$ 30,127	\$	\$

(5) Amounts in Unassigned Funds (Surplus) Recognized as Components of Net Periodic Benefit Cost

	Pension Benefits		Postretirement Benefits	
	2018	2017	2018	2017
a. Items not yet recognized as a component of net periodic cost – prior year	\$	\$	\$	\$
b. Net transition asset or obligation recognized				
c. Net prior service cost or credit arising during the period				
d. Net prior service cost or credit recognized				
e. Net gain and loss arising during the period				
f. Net gain and loss recognized				
g. Items not yet recognized as a component of net periodic cost – current period	\$	\$	\$	\$

NOTES TO FINANCIAL STATEMENTS

(6) Amounts in Unassigned Funds (Surplus) Expected to be Recognized in the Next Fiscal Year as Components of Net Periodic Benefit Cost

	Pension Benefits		Postretirement Benefits	
	2018	2017	2018	2017
a. Net transition asset or obligations	\$	\$	\$	\$
b. Net prior service cost or credit	\$	\$	\$	\$
c. Net recognized gains and losses	\$	\$	\$	\$

(7) Amounts in Unassigned Funds (Surplus) that have not yet been Recognized as Components of Net Periodic Benefit Cost

	Pension Benefits		Postretirement Benefits	
	2018	2017	2018	2017
a. Net transition asset or obligations	\$	\$	\$	\$
b. Net prior service cost or credit	\$	\$	\$	\$
c. Net recognized gains and losses	\$	\$	\$	\$

(8) Weighted-Average Assumptions Used to Determine Net Periodic Benefit Cost as of December 31

FCSLA-Defined Post Retirement Plan	2018	2017
a. Weighted-average discount rate	5.0%	5.0%
b. Expected long-term rate of return on plan assets	5.0%	5.0%
c. Rate of compensation increase	%	%
Weighted-average assumptions used to determine projected benefit obligations as of December 31		
d. Weighted-average discount rate	5.0%	5.0%
e. Rate of compensation increase	%	%

PWAA Defined Pension Benefit Plan	2018	2017
a. Weighted-average discount rate	5.0%	5.0%
b. Expected long-term rate of return on plan assets	6.0%	6.0%
c. Rate of compensation increase	%	%
Weighted-average assumptions used to determine projected benefit obligations as of December 31		
d. Weighted-average discount rate	5.0%	5.0%
e. Rate of compensation increase	%	%

(9) Accumulated Benefit Obligation for Defined Benefit Pension Plans

The accumulated benefit obligation pension plan which was acquired from the merger with Polish Woman's Alliance of America in 2017 was \$652,047 for the current year and \$696,787 for the prior year.

(10) For Postretirement Benefits Other Than Pensions, the Assumed Health Care Cost Trend Rate(s)

(11) Assumed health care cost trend rates have a significant effect on the amounts reported for the health care plans. A one-percentage point change in assumed health care cost trend rates would have the following effects:

	1 Percentage Point Increase	1 Percentage Point Decrease
a. Effect on total of service and interest cost components	\$	\$
b. Effect on postretirement benefit obligation	\$	\$

(12) The following estimated future payments, which reflect expected future service, as appropriate, are expected to be paid in the year indicated:

Year(s)	Amount
a. 2019	\$ 94,848
b. 2020	\$ 94,800
c. 2021	\$ 91,552
d. 2022	\$ 87,816
e. 2023	\$ 86,448
f. 2024 through 2028	\$ 390,586

(13) Estimate of Contributions Expected to be Paid to the Plan

\$50,000

(14) Amounts and Types of Securities Included in Plan Assets
Not Applicable

NOTES TO FINANCIAL STATEMENTS

(15) Alternative Method Used to Amortize Prior Service Amounts or Net Gains and Losses
Not Applicable

(16) Substantive Comment Used to Account for Benefit Obligation
Not Applicable

(17) Cost of Providing Special or Contractual Termination Benefits Recognized
Not Applicable

(18) Significant Change in the Benefit Obligation or Plan Assets
None

(19) Amount and Time Plan Assets Expected to be Returned
Not Applicable

(20) Accumulated Postretirement and Pension Benefit Obligation and Fair Value of Plan Assets for Defined Postretirement and Pension Benefit Plans
The accumulated benefit for the combined Postretirement benefit and Pension Benefit obligation is \$1,119,102 for the current year and \$1,127,523 for the prior year. The accumulated Postretirement plan liability of \$467,055 for current year and \$430,727 for the prior year is recognized in the Statement of Liabilities. The accumulated benefit obligation pension plan which was acquired from the merger with Polish Woman's Alliance of America in 2017 was \$652,047 for the current year and \$697,787 for the prior year. Plan Assets on the Pension Plan for the current year is \$679,164. The Pension plan is overfunded by \$27,117 for 2018, which the society has recognized as a non-admitted asset.

(21) Full Transition Surplus Impact of SSAP 102
Not Applicable

B. Investment Policies and Strategies

The principal goal is to provide both long-term security and long-term stability while providing the funds necessary to meet the current anticipated benefits.

C. Fair Value of Plan Assets**(1) Fair Value Measurements of Plans Assets at Reporting Date**

Description for each class of plan assets	(Level 1)	(Level 2)	(Level 3)	Total
Mutual Funds, ETF's & Closed End Funds	\$ 107,397	\$	\$	\$ 107,397
Bonds & Other Fixed Income	\$ 17,732	\$	\$	\$ 17,732
Cash & Money Markets	\$ 134,642	\$	\$	\$ 134,642
Equities and Options	\$ 419,393	\$	\$	\$ 419,393
Total Plan Assets	\$ 679,164	\$	\$	\$ 679,164

(2) Valuation Technique(s) and Inputs Used to Measure Fair Value**D. Basis Used to Determine Expected Long-Term Rate-of-Return****E. Defined Contribution Plans**

The association sponsors a defined-contribution plan for employees who are eligible to participate. Eligibility is based on the employee completing one year of service. Employee contributions to the plan are limited to maximum amount allowed by the Internal Revenue Service (under 50 \$18,500 in 2018 and \$24,500 in 2018 for age 50 and above). The employee contributions are always 100% vested. The Association matching contribution for the plan was \$114,779 and \$109,652 for 2018 and 2017, respectively. During 2018 the association established a \$225,000 liability for prior year adjustment in the calculation of the association's 401K contributions.

F. Multiemployer Plans

None

G. Consolidated/Holding Company Plans

None

H. Postemployment Benefits and Compensated Absences

None

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

(1) Recognition of the Existence of the Act
Not Applicable

(2) Effects of the Subsidy in Measuring the Net Postretirement Benefit Cost
Not Applicable

(3) Disclosure of Gross Benefit Payments
Not Applicable

NOTES TO FINANCIAL STATEMENTS

Note 13 – Capital and Surplus, Shareholder's Dividend Restrictions and Quasi-Reorganizations

- (1) Number of Share and Par or State Value of Each Class -Not Applicable
- (2) Dividend Rate, Liquidation Value and Redemption Schedule of Preferred Stock Issues-Not Applicable
- (3) Dividend Restrictions-Not Applicable
- (4) Dates and Amounts of Dividends Paid-Not Applicable
- (5) Profits that may be Paid as Ordinary Dividends to Stockholders-Not Applicable
- (6) Restrictions Plans on Unassigned Funds (Surplus) - Not Applicable
- (7) Amount of Advances to Surplus not Repaid-None
- (8) Amount of Stock Held for Special Purposes-None
- (9) Reasons for Changes in Balance of Special Surplus Funds from Prior Period-None
- (10) The Portion of Unassigned Funds (Surplus) Represented or Reduced by Unrealized Gains and Losses is: \$(2,104,209).
- (11) The Reporting Entity Issued the Following Surplus Debentures or Similar Obligations-None
- (12) The impact of any restatement due to prior quasi-reorganizations is as follows-None
- (13) Effective Date of Quasi-Reorganization for a Period of Ten Years Following Reorganization-None

Note 14 – Liabilities, Contingencies and Assessments - None

Note 15 – Leases - None

Note 16 – Information about Financial Instruments with Off-Balance Sheet Risk and Financial Instruments with Concentrations of Credit Risk-None

Note 17 – Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities-None

Note 18 – Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans-None

Note 19 – Direct Premium Written/Produced by Managing General Agents/Third Party Administrators-None

Note 20 – Fair Value Measurements

A. Fair Value Measurements

- (1) Fair Value Measurements at Reporting Date

Description for Each Type of Asset or Liability	Level 1	Level 2	Level 3	Net Asset Value (NAV)	Total
Assets at Fair Value					
Common Stocks-Industrial & Mlsc.	\$ 5,968,624	\$	\$	\$	\$ 5,968,624
Total	\$ 5,968,624	\$	\$	\$	\$ 5,968,624
Liabilities at Fair Value					
	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$

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

Description	Beginning Balance at 1/1/2018	Transfers Into Level 3	Transfers Out of Level 3	Total Gains and (Losses) Included in Net Income	Total Gains and (Losses) Included in Surplus	Purchases	Issuances	Sales	Settlem-ents	Ending Balance at 12/31/2018
a. Assets	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
b. Liabilities	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$
Total	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$

Not Applicable

- (3) Policies when Transfers Between Levels are Recognized

- (4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement
Fair market values are provided by NAIC

- (5) Fair Value Disclosures
None

NOTES TO FINANCIAL STATEMENTS

B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements

Not Applicable

C. Fair Value Level

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
BONDS	\$ 934,202,589	\$ 930,029,467	\$ 1,900,520	\$ 932,302,069	\$	\$	\$
PREFERRED STOCKS	\$ 2,201,328	\$ 2,201,328	\$ 13,982	\$ 2,187,346	\$	\$	\$
COMMON STOCKS	\$ 5,968,624	\$ 5,968,624	\$ 5,968,624	\$	\$	\$	\$
MORTGAGE LOANS	\$ 690,151	\$	\$	\$	\$	\$	\$ 690,151
CASH & SHORT-TERM INVESTMENTS	\$ 16,017,127	\$ 16,017,127	\$ 16,017,127	\$	\$	\$	\$
OTHER INVESTED ASSETS	\$ 16,055,080	\$ 14,063,851	\$	\$ 16,055,080	\$	\$	\$
TOTAL	\$ 974,444,748	\$ 968,280,398	\$ 23,900,253	\$ 950,544,495	\$	\$	\$

D. Not Practicable to Estimate Fair Value

None

E. NAV Practical Expedient Investments

None

Note 21 – Other Items-None**Note 22 – Events Subsequent**

On January 29, 2019, Pacific Gas & Electric (PCG) filed for bankruptcy. The Association impaired the bond and preferred stock holdings of PCG to their respective market values at December 31, 2018. This impairment represented a realized loss of \$558,716 on the bond holding and \$11,518 on the preferred stock holding. The total impairment of \$570,234 was included in net realized capital losses in the Summary of Operations.

Note 23 – Reinsurance

A. Ceded Reinsurance Report

Section1 – General Interrogatories

(1) Are any of the reinsurers listed in Schedule S as non-affiliated, owned in excess of 10% or controlled, either directly or indirectly, by the company or by any representative, officer, trustee, or director of the company? Yes [] No [X]
If yes, give full details.

(2) Have any policies issued by the company been reinsured with a company chartered in a country other than the United States (excluding U.S. Branches of such companies) that is owned in excess of 10% or controlled directly or indirectly by an insured, a beneficiary, a creditor or any other person not primarily engaged in the insurance business? Yes [] No [X]
If yes, give full details.

Section 2 – Ceded Reinsurance Report – Part A

(1) Does the company have any reinsurance agreements in effect under which the reinsurer may unilaterally cancel any reinsurance for reasons other than for nonpayment of premium or other similar credits? Yes [] No [X]
a. If yes, what is the estimated amount of the aggregate reduction in surplus of a unilateral cancellation by the reinsurer as of the date of this statement, for those agreements in which cancellation results in a net obligation of the reporting entity to the reinsurer, and for which such obligation is not presently accrued? Where necessary, the reporting entity may consider the current or anticipated experience of the business reinsured in making this estimate. \$
b. What is the total amount of reinsurance credits taken, whether as an asset or as a reduction of liability, for these agreements in this statement? \$

(2) Does the reporting entity have any reinsurance agreements in effect such that the amount of losses paid or accrued through the statement date may result in a payment to the reinsurer of amounts that, in aggregate and allowing for offset of mutual credits from other reinsurance agreements with the same reinsurer, exceed the total direct premium collected under the reinsured policies? Yes [] No [X]
If yes, give full details.

Section 3 – Ceded Reinsurance Report – Part B

(1) What is the estimated amount of the aggregate reduction in surplus, (for agreements other than those under which the reinsurer may unilaterally cancel for reasons other than for nonpayment of premium or other similar credits that are reflected in Section 2 above) of termination of ALL reinsurance agreements, by either party, as of the date of this statement? Where necessary, the company may consider the current or anticipated experience of the business reinsured in making this estimate. \$253,657

(2) Have any new agreements been executed or existing agreements amended, since January 1 of the year of this statement, to include policies or contracts that were in force or which had existing reserves established by the company as of the effective date of the agreement? Yes [] No [X]
If yes, what is the amount of reinsurance credits, whether an asset or a reduction of liability, taken for such new agreements or amendments? \$

NOTES TO FINANCIAL STATEMENTS

- B. Uncollectible Reinsurance - Not Applicable
- C. Commutation of Ceded Reinsurance - Not Applicable
- D. Certified Reinsurer Rating Downgraded or Status Subject to Revocation - Not Applicable
- E. Reinsurance of variable annuity contracts/certificates with an affiliated captive reinsurer - Not Applicable
- F. Reinsurance Agreement with Affiliated Captive Reinsurer - Not Applicable
- G. Ceding Entities That Utilize Captive Reinsurers to Assume Reserves Subject to the XXX/AXXX Captive Framework - Not Applicable

Note 24 – Retrospectively Rated Contracts and Contracts Subject to Redetermination - Not Applicable

Note 25 – Change in Incurred Losses and Loss Adjustment Expenses - Not Applicable

Note 26 – Intercompany Pooling Arrangements - Not Applicable

Note 27 – Structured Settlements - Not Applicable

Note 28 – Health Care Receivables - Not Applicable

Note 29 – Participating Policies

- A. Approximately 95% of life business is participating.
- B. Dividends are accounted for as shown in Exhibit 4.
- C. The Association paid dividends in the amount of \$1,357,634.
- D. The Association did not allocate any additional income to participating policies.

Note 30 – Premium Deficiency Reserves

1.	Liability carried for premium deficiency reserve:	<u>\$0</u>
2.	Date of most recent evaluation of this liability:	
3.	Was anticipated investment income utilized in the calculation?	Yes [] No []

Note 31 – Reserves for Life Contracts and Annuity Contracts

- (1) Reserve Practices
The Association waives deduction of deferred fractional premiums upon death of insured and returns any portion of final premium beyond the date of death. A reserve for this is provided in Exhibit 5. Surrender values are not promised in excess of the legally computed reserves.
- (2) Valuation of Substandard Policies
Extra premiums are charged for substandard policies issued.
- (3) Amount of Insurance Where Gross Premiums are Less than the Net Premiums
Not Applicable
- (4) Method Used to Determine Tabular Interest, Reserves Released, and Cost
The tabular Interest (page 7, line 4) has been determined from the basic data for the calculation of policy reserves. The Tabular Actual Reserve Released (page7, line 5) has been determined from the basic data for the calculation of policy reserves and the actual reserves released. The Tabular Cost (page7, line9) has been determined by formula as described in the instructions for page.
- (5) Method of Determination of Tabular Interest on Funds not Involving Life Contingencies
Tabular Interest on accumulated dividends is equal to full year's interest on the beginning balance. Tabular interest on supplementary contracts without life contingencies is equal to a full years interest on the principal left on deposit. In both cases, Tabular interest as calculated as stated previously is adjusted in case of withdrawal of deposit during the year.
- (6) Details for Other Changes
None

NOTES TO FINANCIAL STATEMENTS**Note 32 – Analysis of Annuity Actuarial Reserves and Deposit Type Liabilities by Withdrawal Characteristics**

	General Accounts	Separate Account with Guarantees	Separate Account Nonguaranteed	Total	% of Total
A. Subject to Discretionary Withdrawal:					
(1) With market value adjustment	\$	\$	\$	\$	%
(2) At book value less current surrender charge of 5% or more	85,422,390			85,422,390	15.0%
(3) At fair value					%
(4) Total with market value adjustment or at fair value (total of 1 through 3)	\$ 85,422,390	\$	\$	\$ 85,422,390	15.0%
(5) At book value without adjustment (minimal or no charge or adjustment)	455,868,307			455,868,307	80.1%
B. Not subject to discretionary withdrawal	28,181,110			28,181,110	4.9%
C. Total (gross: direct + assumed)	569,471,807			569,471,807	100.0%
D. Reinsurance ceded					
E. Total (net) (C) - (D)	\$ 569,471,807	\$	\$	\$ 569,471,807	

F. Life and Accident & Health Annual Statement:

(1) Exhibit 5, Annuities section, Total (net)	\$ 536,250,307
(2) Exhibit 5, Supplementary contracts with life contingencies section, Total (net)	5,179,693
(3) Exhibit 7, Deposit-type contracts, Line 14, Column 1	28,041,807
(4) Subtotal	\$ 569,471,807
Separate Accounts Statement:	
(5) Exhibit 3, Line 0299999, Column 2	\$
(6) Exhibit 3, Line 0399999, Column 2	
(7) Policyholder dividend and coupon accumulations	
(8) Policyholder premiums	
(9) Guaranteed interest contracts	
(10) Other contract deposit funds	
(11) Subtotal	\$
(12) Combined Total	\$ 569,471,807

Note 33 – Premium and Annuity Considerations Deferred and Uncollected

A. Deferred and uncollected life insurance premiums and annuity considerations as of end of December 31, 2018 were:

	Gross	Net of Loading
(1) Industrial	\$	\$
(2) Ordinary new business		
(3) Ordinary renewal	9,663	9,663
(4) Credit life		
(5) Group life		
(6) Group annuity		
(7) Totals	\$ 9,663	\$ 9,663

Note 34 – Separate Accounts-None**Note 35 – Loss/Claim Adjustment Expenses-None**

GENERAL INTERROGATORIES**PART 1 - COMMON INTERROGATORIES****GENERAL**

1.1 Is the reporting entity a member of an Insurance Holding Company System consisting of two or more affiliated persons, one or more of which is an insurer? Yes [] No [X]
If yes, complete Schedule Y, Parts 1, 1A and 2.

1.2 If yes, did the reporting entity register and file with its domiciliary State Insurance Commissioner, Director or Superintendent or with such regulatory official of the state of domicile of the principal insurer in the Holding Company System, a registration statement providing disclosure substantially similar to the standards adopted by the National Association of Insurance Commissioners (NAIC) in its Model Insurance Holding Company System Regulatory Act and model regulations pertaining thereto, or is the reporting entity subject to standards and disclosure requirements substantially similar to those required by such Act and regulations? Yes [] No [] N/A [X]

1.3 State regulating?

1.4 Is the reporting entity publicly traded or a member of publicly traded group? Yes [] No [X]

1.5 If the response to 1.4 is yes, provide the CIK (Central Index Key) code issued by the SEC for the entity/group.

2.1 Has any change been made during the year of this statement in the charter, by-laws, articles of incorporation, or deed of settlement of the reporting entity? Yes [] No [X]

2.2 If yes, date of change:

3.1 State as of what date the latest financial examination of the reporting entity was made or is being made. 12/31/2013

3.2 State the as of date that the latest financial examination report became available from either the state of domicile or the reporting entity. This date should be the date of the examined balance sheet and not the date the report was completed or released. 12/31/2013

3.3 State as of what date the latest financial examination report became available to other states or the public from either the state of domicile or the reporting entity. This is the release date or completion date of the examination report and not the date of the examination (balance sheet date). 12/31/2013

3.4 By what department or departments?
OHIO DEPARTMENT OF INSURANCE

3.5 Have all financial statement adjustments within the latest financial examination report been accounted for in a subsequent financial statement filed with departments? Yes [] No [] N/A [X]

3.6 Have all of the recommendations within the latest financial examination report been complied with? Yes [X] No [] N/A []

4.1 During the period covered by this statement, did any agent, broker, sales representative, non-affiliated sales/service organization or any combination thereof under common control (other than salaried employees of the reporting entity) receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.11 sales of new business? Yes [] No [X]
4.12 renewals? Yes [] No [X]

4.2 During the period covered by this statement, did any sales/service organization owned in whole or in part by the reporting entity or an affiliate, receive credit or commissions for or control a substantial part (more than 20 percent of any major line of business measured on direct premiums) of:

4.21 sales of new business? Yes [] No [X]
4.22 renewals? Yes [] No [X]

5.1 Has the reporting entity been a party to a merger or consolidation during the period covered by this statement? Yes [] No [X]
If the answer is YES, complete and file the merger history data file with the NAIC.

5.2 If yes, provide the name of entity, NAIC company code, and state of domicile (use two letter state abbreviation) for any entity that has ceased to exist as a result of the merger or consolidation.

1	2 NAIC Company Code	3 State of Domicile
Name of Entity		

6.1 Has the reporting entity had any Certificates of Authority, licenses or registrations (including corporate registration, if applicable) suspended or revoked by any governmental entity during the reporting period? Yes [] No [X]

6.2 If yes, give full information:

7.1 Does any foreign (non-United States) person or entity directly or indirectly control 10% or more of the reporting entity? Yes [] No [X]

7.2 If yes,

7.21 State the percentage of foreign control _____ %

7.22 State the nationality(s) of the foreign person(s) or entity(s); or if the entity is a mutual or reciprocal, the nationality of its manager or attorney-in-fact and identify the type of entity(s) (e.g., individual, corporation, government, manager or attorney-in-fact).

1 Nationality	2 Type of Entity

8.1 Is the company a subsidiary of a bank holding company regulated with the Federal Reserve Board? Yes [] No [X]

8.2 If response to 8.1 is yes, please identify the name of the bank holding company.

8.3 Is the company affiliated with one or more banks, thrifts or securities firms? Yes [] No [X]

8.4 If the response to 8.3 is yes, please provide below the names and locations (city and state of the main office) of any affiliates regulated by a federal financial regulatory services agency [i.e. the Federal Reserve Board (FRB), the Office of the Comptroller of the Currency (OCC), the Federal Deposit Insurance Corporation (FDIC) and the Securities Exchange Commission (SEC)] and identify the affiliate's primary federal regulator.

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

9. What is the name and address of the independent certified public accountant or accounting firm retained to conduct the annual audit?
H2R CPA 875 Greentree Road, Seven Parkway Center, Suite 1000, Pittsburgh, PA 15220

10.1 Has the insurer been granted any exemptions to the prohibited non-audit services provided by the certified independent public accountant requirements as allowed in Section 7H of the Annual Financial Reporting Model Regulation (Model Audit Rule), or substantially similar state law or regulation? Yes [] No [X]

10.2 If the response to 10.1 is yes, provide information related to this exemption:

10.3 Has the insurer been granted any exemptions related to other requirements of the Annual Financial Reporting Model Regulation as allowed for in Section 18A of the Model Regulation, or substantially similar state law or regulation? Yes [] No [X]

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

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

GENERAL INTERROGATORIES**PART 1 - COMMON INTERROGATORIES**

10.6 If the response to 10.5 is no or n/a, please explain:

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

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

12.11	Name of real estate holding company	0
12.12	Number of parcels involved	\$ 0
12.13	Total book/adjusted carrying value	\$ 0

12.2 If yes, provide explanation

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

BOARD OF DIRECTORS

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

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

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

FINANCIAL

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

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

20.11 To directors or other officers	\$ 0
20.12 To stockholders not officers	\$ 0
20.13 Trustees, supreme or grand (Fraternal only)	\$ 0

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

20.21 To directors or other officers	\$ 0
20.22 To stockholders not officers	\$ 0
20.23 Trustees, supreme or grand (Fraternal only)	\$ 0

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

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

21.21 Rented from others	\$ 0
21.22 Borrowed from others	\$ 0
21.23 Leased from others	\$ 0
21.24 Other	\$ 0

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

22.2 If answer is yes:

22.21 Amount paid as losses or risk adjustment	\$ 0
22.22 Amount paid as expenses	\$ 0
22.23 Other amounts paid	\$ 0

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

23.2 If yes, indicate any amounts receivable from parent included in the Page 2 amount: \$ 0

GENERAL INTERROGATORIES**PART 1 - COMMON INTERROGATORIES****INVESTMENT**

24.01	Were all the stocks, bonds and other securities owned December 31 of current year, over which the reporting entity has exclusive control, in the actual possession of the reporting entity on said date (other than securities lending programs addressed in 24.03)?	Yes [X] No []								
24.02	If no, give full and complete information, relating thereto:									
24.03	For security lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet (an alternative is to reference Note 17 where this information is also provided).									
24.04	Does the company's security lending program meet the requirements for a conforming program as outlined in the <i>Risk-Based Capital Instructions</i> ?	Yes [] No [] N/A [X]								
24.05	If answer to 24.04 is yes, report amount of collateral for conforming programs.	\$ _____ 0								
24.06	If answer to 24.04 is no, report amount of collateral for other programs	\$ _____ 0								
24.07	Does your securities lending program require 102% (domestic securities) and 105% (foreign securities) from the counterparty at the outset of the contract?	Yes [] No [] N/A [X]								
24.08	Does the reporting entity non-admit when the collateral received from the counterparty falls below 100%?	Yes [] No [] N/A [X]								
24.09.	Does the reporting entity or the reporting entity's securities lending agent utilize the Master Securities Lending Agreement (MSLA) to conduct securities lending?	Yes [] No [] N/A [X]								
24.10	For the reporting entity's security lending program, state the amount of the following as of December 31 of the current year:									
24.101	Total fair value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:	\$ _____ 0								
24.102	Total book adjusted/carrying value of reinvested collateral assets reported on Schedule DL, Parts 1 and 2:	\$ _____ 0								
24.103	Total payable for securities lending reported on the liability page:	\$ _____ 0								
25.1	Were any of the stocks, bonds or other assets of the reporting entity owned at December 31 of the current year not exclusively under the control of the reporting entity or has the reporting entity sold or transferred any assets subject to a put option contract that is current in force? (Exclude securities subject to Interrogatory 21.1 and 24.03.)	Yes [X] No []								
25.2	If yes, state the amount thereof at December 31 of the current year:									
25.21	Subject to repurchase agreements	\$ _____ 0								
25.22	Subject to reverse repurchase agreements	\$ _____ 0								
25.23	Subject to dollar repurchase agreements	\$ _____ 0								
25.24	Subject to reverse dollar repurchase agreements	\$ _____ 0								
25.25	Placed under option agreements	\$ _____ 0								
25.26	Letter stock or securities restricted as sale – excluding FHLB Capital Stock	\$ _____ 0								
25.27	FHLB Capital Stock	\$ _____ 0								
25.28	On deposit with states	\$ _____ 1,080,405								
25.29	On deposit with other regulatory bodies	\$ _____ 0								
25.30	Pledged as collateral – excluding collateral pledged to an FHLB	\$ _____ 25,563,692								
25.31	Pledged as collateral to FHLB – including assets backing funding agreements	\$ _____ 0								
25.32	Other	\$ _____ 0								
25.3	For category (25.26) provide the following:									
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; width: 33.33%;">1 Nature of Restriction</th> <th style="text-align: center; width: 33.33%;">2 Description</th> <th style="text-align: center; width: 33.33%;">3 Amount</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td style="text-align: right;">\$ _____</td> </tr> </tbody> </table>	1 Nature of Restriction	2 Description	3 Amount			\$ _____			
1 Nature of Restriction	2 Description	3 Amount								
		\$ _____								
26.1	Does the reporting entity have any hedging transactions reported on Schedule DB?	Yes [] No [X]								
26.2	If yes, has a comprehensive description of the hedging program been made available to the domiciliary state? If no, attach a description with this statement.	Yes [] No [] N/A [X]								
27.1	Were any preferred stocks or bonds owned as of December 31 of the current year mandatorily convertible into equity, or, at the option of the issuer, convertible into equity?	Yes [] No [X]								
27.2	If yes, state the amount thereof at December 31 of the current year:	\$ _____ 0								
28.	Excluding items in Schedule E-Part 3-Special Deposits, real estate, mortgage loans and investments held physically in the reporting entity's offices, vaults or safety deposit boxes, were all stocks, bonds and other securities, owned throughout the current year held pursuant to a custodial agreement with a qualified bank or trust company in accordance with Section 1, III - General Examination Considerations, F. Outsourcing of Critical Functions, Custodial or Safekeeping Agreements of the NAIC <i>Financial Condition Examiners Handbook</i> ?	Yes [X] No []								
28.01	For agreements that comply with the requirements of the NAIC <i>Financial Condition Examiners Handbook</i> , complete the following:									
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; width: 33.33%;">1 Name of Custodian(s)</th> <th style="text-align: center; width: 33.33%;">2 Custodian's Address</th> <th style="text-align: center; width: 33.33%;">3</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">PNC INSTITUTIONAL INVESTMENTS</td> <td style="text-align: center;">1900 EAST 9 ST BY-YB13., CLEVELAND OH 44114</td> <td></td> </tr> </tbody> </table>	1 Name of Custodian(s)	2 Custodian's Address	3	PNC INSTITUTIONAL INVESTMENTS	1900 EAST 9 ST BY-YB13., CLEVELAND OH 44114				
1 Name of Custodian(s)	2 Custodian's Address	3								
PNC INSTITUTIONAL INVESTMENTS	1900 EAST 9 ST BY-YB13., CLEVELAND OH 44114									
28.02	For all agreements that do not comply with the requirements of the NAIC <i>Financial Condition Examiners Handbook</i> , provide the name, location and a complete explanation									
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; width: 33.33%;">1 Name(s)</th> <th style="text-align: center; width: 33.33%;">2 Location(s)</th> <th style="text-align: center; width: 33.33%;">3 Complete Explanation(s)</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> </tr> </tbody> </table>	1 Name(s)	2 Location(s)	3 Complete Explanation(s)						
1 Name(s)	2 Location(s)	3 Complete Explanation(s)								
28.03	Have there been any changes, including name changes, in the custodian(s) identified in 28.01 during the current year?	Yes [] No [X]								
28.04	If yes, give full and complete information relating thereto:									
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; width: 25%;">1 Old Custodian</th> <th style="text-align: center; width: 25%;">2 New Custodian</th> <th style="text-align: center; width: 25%;">3 Date of Change</th> <th style="text-align: center; width: 25%;">4 Reason</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>	1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason					
1 Old Custodian	2 New Custodian	3 Date of Change	4 Reason							
28.05	Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ("...that have access to the investment accounts", "... handle securities").									
	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; width: 50%;">1 Name of Firm or Individual</th> <th style="text-align: center; width: 50%;">2 Affiliation</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> </tr> </tbody> </table>	1 Name of Firm or Individual	2 Affiliation							
1 Name of Firm or Individual	2 Affiliation									

GENERAL INTERROGATORIES**PART 1 - COMMON INTERROGATORIES**

28.0597 For those firms/individuals listed in the table for Question 28.05, do any firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") manage more than 10% of the reporting entity's assets?

Yes [] No []

28.0598 For firms/individuals unaffiliated with the reporting entity (i.e. designated with a "U") listed in the table for Question 28.05, does the total assets under management aggregate to more than 50% of the reporting entity's assets?

Yes [] No []

28.06 For those firms or individuals listed in the table for 28.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1 Central Registration Depository Number	2 Name of Firm or Individual	3 Legal Entity Identifier (LEI)	4 Registered With	5 Investment Management Agreement (IMA) Filed

29.1 Does the reporting entity have any diversified mutual funds reported in Schedule D-Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5 (b) (1)])?

Yes [X] No []

29.2 If yes, complete the following schedule:

1 CUSIP	2 Name of Mutual Fund	3 Book/Adjusted Carrying Value
01859M 30 9	AB HIGH INCOME C	\$ 46,956
27829C 10 5	EATON VANCE TX-MG GL B-W	\$ 71,952
27829F 10 8	EATON VANCE TXMGDGLDVEIN	\$ 12,309
453320 10 3	AMERICAN FUNDS INC A	\$ 72,550
56062F 47 5	MAINSTAY:MK EM DB A	\$ 62,146
72369G 10 8	PIONEER GL HI YLD A	\$ 60,713
880208 10 3	TEMPLETON GL BOND A	\$ 44,395
29.2999 TOTAL		\$ 371,020

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

1 Name of Mutual Fund (from above table)	2 Name of Significant Holding of the Mutual Fund	3 Amount of Mutual Fund's Book/Adjusted Carrying Value Attributable to the Holding	4 Date of Valuation
AB HIGH INCOME C	US 10yr (Cbt) 0% 20/02/2019	\$ 4,625	12/31/2018
EATON VANCE TX-MG GL B-W	Microsoft Corp	\$ 2,950	12/31/2018
EATON VANCE TXMGDGLDVEIN	Alphabet Inc Class C	\$ 455	12/31/2018
AMERICAN FUNDS INC A	United States Treasury Bills 0.39%	\$ 2,278	12/31/2018
MAINSTAY:MK EM DB A	PT Pertamina	\$ 3,070	12/31/2018
PIONEER GL HI YLD A	Zero% 31dec21	\$ 984	12/31/2018
TEMPLETON GL BOND A	Mexico (United Mexico States)	\$ 3,742	12/31/2018

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

		1 Statement (Admitted) Value	2 Fair Value	3 Excess of Statement over Fair Value (-), or Fair Value over Statement (+)
30.1	Bonds	\$ 930,029,467	\$ 934,202,583	\$ 4,173,116
30.2	Preferred Stocks	\$ 2,201,328	\$ 2,074,887	\$ (126,441)
30.3	Totals	\$ 932,230,796	\$ 936,277,470	\$ 4,046,674

30.4 Describe the sources or methods utilized in determining the fair values:

USED NAIC'S YEAR END VALUATION & PNC FINANCIAL'S MARKET PRICES FOR ITEMS NOT LISTED BY NAIC

Yes [X] No []

31.1 Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?

Yes [X] No []

31.2 If the answer to 31.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?

Yes [X] No []

31.3 If the answer to 31.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:

32.1 Have all the filing requirements of the *Purposes and Procedures Manual of the NAIC Investment Analysis Office* been followed?

Yes [X] No []

32.2 If no, list exceptions:

33. By self-designating 5GI securities, the reporting entity is certifying the following elements for each self-designation 5GI security:

- Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available.
- Issuer or obligor is current on all contracted interest and principal payments.
- The insurer has an actual expectation of ultimate payment of all contracted interest and principal.

Yes [] No [X]

Has the reporting entity self-designated 5GI securities?

34. By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security:

- The security was purchased prior to January 1, 2018.
- The reporting entity is holding capital commensurate with the NAIC Designation reported for the security.
- The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as an NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators.
- The reporting entity is not permitted to share this credit rating of the PL security with the SVO.

Yes [] No [X]

Has the reporting entity self-designated PLGI securities?

OTHER

35.1 Amount of payments to trade associations, service organizations and statistical or rating bureaus, if any?

\$ 60,852

GENERAL INTERROGATORIES**PART 1 - COMMON INTERROGATORIES**

35.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
A.M. BEST	\$ 23,300
AMERICAN FRATERNAL ALLIANCE	\$ 20,000

36.1 Amount of payments for legal expenses, if any?

\$ 57,592

36.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1 Name	2 Amount Paid
Calfee, Halter & Griswold LLP	\$ 31,140
Squire Patton Boggs (US) LLP	\$ 21,873

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

\$ 0

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

1 Name	2 Amount Paid
	\$

GENERAL INTERROGATORIES**PART 2 – FRATERNAL INTERROGATORIES**

1.1	Does the reporting entity have any direct Medicare Supplement Insurance in force?	Yes [] No [X]
1.2	If yes, indicate premium earned on U.S. business only.	\$ _____
1.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance Experience Exhibit?	\$ _____
1.31 Reason for excluding:		
1.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien not included in Item (1.2) above.	\$ _____
1.5	Indicate total incurred claims on all Medicare Supplement insurance.	\$ _____
1.6	Individual policies:	
Most current three years:		
1.61	Total premium earned	\$ _____
1.62	Total incurred claims	\$ _____
1.63	Number of covered lives	\$ _____
All years prior to most current three years:		
1.64	Total premium earned	\$ _____
1.65	Total incurred claims	\$ _____
1.66	Number of covered lives	\$ _____
1.7	Group policies:	
Most current three years:		
1.71	Total premium earned	\$ _____
1.72	Total incurred claims	\$ _____
1.73	Number of covered lives	\$ _____
All years prior to most current three years:		
1.74	Total premium earned	\$ _____
1.75	Total incurred claims	\$ _____
1.76	Number of covered lives	\$ _____
2.1	Does the reporting entity have Separate Accounts?	Yes [] No [X]
2.2	If yes, has a Separate Accounts statement been filed with this Department	Yes [] No [] N/A[X]
2.3	What portion of capital and surplus funds of the reporting entity covered by assets in the Separate Accounts statement, is not currently distributable from the Separate Accounts to the general account for use by the general account?	\$ _____
2.4	State the authority under which Separate Accounts are maintained:	
2.5	Was any of the reporting entity's Separate Accounts business reinsured as of December 31?	Yes [] No [X]
2.6	Has the reporting entity assumed by reinsurance any Separate Accounts business as of December 31?	Yes [] No [X]
2.7	If the reporting entity has assumed Separate Accounts business, how much, if any, reinsurance assumed receivable for reinsurance of Separate Accounts reserve expense allowances is included as a negative amount in the liability for "Transfers to Separate Accounts due or accrued (net)"?	\$ _____
3.	Is the reporting entity organized and conducted on the lodge system, with ritualistic form of work and representative form of government?	Yes [X] No []
4.	How often are meetings of the subordinate branches required to be held?	<u>REGULARLY</u>
5.	How are the subordinate branches represented in the supreme or governing body?	<u>BY DELEGATES</u>
6.	What is the basis of representation in the governing body?	<u>ONE DELEGATE FOR EVERY 25-150 MEMBERS, SCALED UPWARD WITH MAXIMUM OF 10 DELEGATES</u>
7.1	How often are regular meetings of the governing body held?	<u>EVERY 4TH YEAR</u>
7.2	When was the last regular meeting of the governing body held?	10/05/2015
7.3	When and where will the next regular or special meeting of the governing body be held?	<u>OCTOBER 2019-TAMPA FL</u>
7.4	How many members of the governing body attended the last regular meeting?	336
7.5	How many of the same were delegates of the subordinate branches?	315
8.	How are the expenses of the governing body defrayed?	<u>OPERATIONS</u>
9.	When and by whom are the officers and directors elected?	<u>THE DELEGATES ELECT THE NATIONAL PRESIDENT AND BOARD OF DIRECTORS AT THE CONVENTION EVERY 4TH YEAR. THE NATIONAL PRESIDENT HIRES THE NATIONAL SECRETARY AND NATIONAL TREASURER.</u>
10.	What are the qualifications for membership?	<u>AS PER THE BYLAWS</u>
11.	What are the limiting ages for admission?	<u>ONE DAY TO 90 YEARS</u>
12.	What is the minimum and maximum insurance that may be issued on any one life?	<u>MINIMUM \$2,000 - MAXIMUM-\$4,000,000</u>
13.	Is a medical examination required before issuing a benefit certificate to applicants?	Yes [X] No []
14.	Are applicants admitted to membership without filing an application with and becoming a member of a local branch by ballot and initiation?	Yes [] No [X]
15.1	Are notices of the payments required sent to the members?	Yes [X] No [] N/A []
15.2	If yes, do the notices state the purpose for which the money is to be used?	Yes [X] No []

GENERAL INTERROGATORIES**PART 2 – FRATERNAL INTERROGATORIES**

16.	What proportion of first and subsequent year's payments may be used for management expenses?																											
16.11	First Year	%																										
16.12	Subsequent Years	%																										
17.1	Is any part of the mortuary, disability, emergency or reserve fund, or the accretions from or payments for the same, used for expenses?	Yes [] No [X]																										
17.2	If so, what amount and for what purpose?	\$																										
18.1	Does the reporting entity pay an old age disability benefit?	Yes [] No [X]																										
18.2	If yes, at what age does the benefit commence?																											
19.1	Has the constitution or have the laws of the reporting entity been amended during the year?	Yes [] No [X]																										
19.2	If yes, when?																											
20.	Have you filed with this Department all forms of benefit certificates issued, a copy of the constitution and all of the laws, rules and regulations in force at the present time?	Yes [X] No []																										
21.1	State whether all or a portion of the regular insurance contributions were waived during the current year under premium-paying certificates on account of meeting attained age or membership requirements?	Yes [X] No []																										
21.2	If so, was an additional reserve included in Exhibit 5?	Yes [X] No [] N/A []																										
21.3	If yes, explain																											
<u>MEMBERS UPON ATTAINING AGE 80 UNDER CERTAIN WHOLE LIFE CERTIFICATES HAVE SUBSEQUENT PREMIUMS WAIVED.</u>																												
22.1	Has the reporting entity reinsured, amalgamated with, or absorbed any company, order, society, or association during the year?	Yes [] No [X]																										
22.2	If yes, was there any contract agreement, or understanding, written or oral, expressed or implied, by means of which any officer, director, trustee, or any other person, or firm, corporation, society or association, received or is to receive any fee, commission, emolument, or compensation of any nature whatsoever in connection with, on an account of such reinsurance, amalgamation, absorption, or transfer of membership or funds?	Yes [] No [] N/A [X]																										
23.	Has any present or former officer, director, trustee, incorporator, or any other persons, or any firm, corporation, society or association, any claims of any nature whatsoever against this reporting entity, which is not included in the liabilities on Page 3 of this statement?	Yes [] No [X]																										
24.	For reporting entities having sold annuities to another insurer where the insurer purchasing the annuities has obtained a release of liability from the claimant (payee) as the result of the purchase of an annuity from the reporting entity only:																											
24.1	Amount of loss reserves established by these annuities during the current year:	\$																										
24.2	List the name and location of the insurance company purchasing the annuities and the statement value on the purchase date of the annuities.																											
<table border="1"> <thead> <tr> <th>1</th> <th>2</th> </tr> <tr> <th>P&C Insurance Company and Location</th> <th>Statement Value on Purchase Date of Annuities (i.e., Present Value)</th> </tr> </thead> <tbody> <tr> <td></td> <td>\$</td> </tr> </tbody> </table>		1	2	P&C Insurance Company and Location	Statement Value on Purchase Date of Annuities (i.e., Present Value)		\$																					
1	2																											
P&C Insurance Company and Location	Statement Value on Purchase Date of Annuities (i.e., Present Value)																											
	\$																											
25.1	Do you act as a custodian for health savings accounts?	Yes [] No [X]																										
25.2	If yes, please provide the amount of custodial funds held as of the reporting date.	\$																										
25.3	Do you act as an administrator for health savings accounts?	Yes [] No [X]																										
25.4	If yes, please provide the balance of the funds administered as of the reporting date.	\$																										
26.1	Does the reporting entity have outstanding assessments in the form of liens against policy benefits that have increased surplus?	Yes [] No [X]																										
26.2	If yes, what is the date(s) of the original lien and the total outstanding balance of liens that remain in surplus?																											
<table border="1"> <thead> <tr> <th>Date</th> <th>Outstanding Lien Amount</th> </tr> <tr> <td></td> <td>\$</td> </tr> </thead> </table>		Date	Outstanding Lien Amount		\$																							
Date	Outstanding Lien Amount																											
	\$																											
27.1	Are any of the captive affiliates reported on Schedule S, Part 3, authorized reinsurers?	Yes [] No [X] N/A []																										
27.2	If the answer to 27.1 is yes, please provide the following:																											
<table border="1"> <thead> <tr> <th rowspan="2">1 Company Name</th> <th rowspan="2">2 NAIC Company Code</th> <th rowspan="2">3 Domiciliary Jurisdiction</th> <th rowspan="2">4 Reserve Credit</th> <th colspan="3">Assets Supporting Reserve Credit</th> </tr> <tr> <th>5 Letters of Credit</th> <th>6 Trust Agreements</th> <th>7 Other</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td></td> <td>\$</td> <td>\$</td> <td>\$</td> </tr> </tbody> </table>		1 Company Name	2 NAIC Company Code	3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit			5 Letters of Credit	6 Trust Agreements	7 Other				\$	\$	\$											
1 Company Name	2 NAIC Company Code					3 Domiciliary Jurisdiction	4 Reserve Credit	Assets Supporting Reserve Credit																				
		5 Letters of Credit	6 Trust Agreements	7 Other																								
			\$	\$	\$																							
28.	Provide the following for individual ordinary life insurance* policies (U.S. business only) for the current year (prior to reinsurance assumed or ceded).																											
28.1	Direct Premiums Written	\$ 4,063,080																										
28.2	Total Incurred Claims	\$ 7,880,741																										
28.3	Number of Covered Lives	103,564																										
<table border="1"> <thead> <tr> <th colspan="4">*Ordinary Life Insurance Includes</th> </tr> </thead> <tbody> <tr> <td colspan="4">Term (whether full underwriting, limited underwriting, jet issue, "short form app")</td> </tr> <tr> <td colspan="4">Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")</td> </tr> <tr> <td colspan="4">Variable Life (with or without secondary guarantee)</td> </tr> <tr> <td colspan="4">Universal Life (with or without secondary guarantee)</td> </tr> <tr> <td colspan="4">Variable Universal Life (with or without secondary guarantee)</td> </tr> </tbody> </table>				*Ordinary Life Insurance Includes				Term (whether full underwriting, limited underwriting, jet issue, "short form app")				Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")				Variable Life (with or without secondary guarantee)				Universal Life (with or without secondary guarantee)				Variable Universal Life (with or without secondary guarantee)				
*Ordinary Life Insurance Includes																												
Term (whether full underwriting, limited underwriting, jet issue, "short form app")																												
Whole Life (whether full underwriting, limited underwriting, jet issue, "short form app")																												
Variable Life (with or without secondary guarantee)																												
Universal Life (with or without secondary guarantee)																												
Variable Universal Life (with or without secondary guarantee)																												
29	Is the reporting entity licensed or chartered, registered, qualified, eligible, or writing business in at least two states?	Yes [X] No []																										
29.1	If no, does the reporting entity assume reinsurance business that covers risks residing in at least one state other than the state of domicile of the reporting insurer?	Yes [] No []																										

FIVE-YEAR HISTORICAL DATA

Show amounts in whole dollars only, no cents; show percentages to one decimal place, i.e. 17.6.

\$000 omitted for amounts of life insurance

	1 2018	2 2017	3 2016	4 2015	5 2014
Life Insurance in Force (Exhibit of Life Insurance)					
1. Total (Line 21, Column 2).....	1,139,772	1,145,799	1,153,285	1,032,803	1,043,296
1.1 Total in force for which VM-20 deterministic/stochastic reserves are calculated.....			XXX	XXX	XXX
New Business Issued (Exhibit of Life Insurance)					
2. Total (Line 2, Column 2).....	18,695	14,586	16,869	18,764	13,777
Premium Income (Exhibit 1, Part 1)					
3. Life insurance - first year (Line 9.4, Column 2).....	114,909	83,760	81,995	101,398	84,735
4. Life insurance - single and renewal (Lines 10.4 and 19.4, Column 2).....	3,622,356	3,923,990	3,746,570	6,404,683	4,600,287
5. Annuity (Line 20.4, Column 3).....	34,244,011	37,857,090	54,921,006	37,274,122	28,344,740
6. Accident and health (Line 20.4, Column 4).....					
7. Aggregate of all other lines of business (Line 20.4, Column 5).....					
8. Total (Line 20.4, Column 1).....	37,981,276	41,864,840	58,749,571	43,780,203	33,029,762
Balance Sheet Items (Pages 2 and 3)					
9. Total admitted assets excluding Separate Accounts business (Page 2, Line 26, Col. 3).....	990,543,946	963,986,858	925,431,511	815,628,609	781,260,866
10. Total liabilities excluding Separate Accounts business (Page 3, Line 23).....	886,161,245	860,358,141	827,039,579	719,966,222	688,716,869
11. Aggregate reserve for life certificates and contracts (Page 3, Line 1).....	840,190,000	818,024,001	787,701,183	689,142,000	657,806,000
11.1 Excess VM-20 deterministic/stochastic reserve over NPR, related to Line 1.1.....			XXX	XXX	XXX
12. Aggregate reserve for accident and health certificates (Page 3, Line 2).....					
13. Deposit-type contract funds (Page 3, Line 3).....	28,041,807	24,377,319	22,127,729	17,120,109	13,803,415
14. Asset valuation reserve (Page 3, Line 21.1).....	7,874,230	8,985,756	8,067,323	6,456,298	7,538,835
15. Surplus (Page 3, Line 30).....	104,382,697	103,628,715	98,390,931	95,662,388	92,544,021
Cash Flow (Page 5)					
16. Net cash from operations (Line 11).....	31,310,933	40,519,673	48,242,623	38,800,096	27,981,267
Risk-Based Capital Analysis					
17. Total adjusted capital.....	112,956,927	103,628,715	107,158,254	102,808,686	101,380,356
18. 50% of the calculated RBC amount.....	9,432,968	8,602,622	8,208,244	8,287,849	10,563,511
Percentage Distribution of Cash, Cash Equivalent and Invested Assets					
(Page 2, Col. 3) (Line No. ÷ Page 2, Line 12, Col. 3) x 100.0					
19. Bonds (Line 1).....	95.2	92.1	93.5	93.9	93.4
20. Stocks (Lines 2.1 and 2.2).....	0.8	1.1	1.0	0.8	1.0
21. Mortgage loans on real estate (Lines 3.1 and 3.2).....	0.1	0.2	0.2		
22. Real estate (Lines 4.1, 4.2 and 4.3).....	0.5	0.5	0.6	0.7	0.7
23. Cash, cash equivalents and short-term investments (Line 5).....	1.6	4.3	2.8	2.8	3.0
24. Contract loans (Line 6).....	0.3	0.3	0.3	0.4	0.4
25. Derivatives (Line 7).....					
26. Other invested assets (Line 8).....	1.4	1.5	1.6	1.4	1.5
27. Receivable for securities (Line 9).....					
28. Securities lending reinvested collateral assets (Line 10).....					
29. Aggregate write-ins for invested assets (Line 11).....					
30. Cash, cash equivalents and invested assets (Line 12).....	100.0	100.0	100.0	100.0	100.0
Investments in Subsidiaries and Affiliates					
31. Affiliated bonds (Schedule D Summary, Line 12, Col. 1).....					
32. Affiliated preferred stock (Schedule D Summary, Line 18, Col. 1).....					
33. Affiliated common stock (Schedule D Summary, Line 24, Col. 1).....					
34. Affiliated short-term investments (subtotals included in Sch. DA, Verif., Col. 5, Line 10).....					
35. Affiliated mortgage loans on real estate.....					
36. All other affiliated.....					
37. Total of above Lines 31 to 36.....	0	0	0	0	0
38. Total investment in parent included in Lines 31 to 36 above.....					
Total Nonadmitted Assets and Admitted Assets					
39. Total nonadmitted assets (Page 2, Line 28, Col. 2).....	319,408	175,313	282,064	222,833	282,660
40. Total admitted assets (Page 2, Line 28, Col. 3).....	990,543,946	963,986,858	925,431,511	815,628,609	781,260,866
Investment Data					
41. Net investment income (Exhibit of Net Investment Income, Line 17).....	46,767,302	46,875,463	44,861,063	40,141,626	40,552,448
42. Realized capital gains (losses) (Page 4, Line 30, Column 1).....	(526,834)	(71,412)	3,626	(51,383)	45,432
43. Unrealized capital gains (losses) (Page 4, Line 34, Column 1).....	(2,104,209)	1,865,193	1,178,355	(1,031,620)	267,236
44. Total of above Lines 41, 42 and 43.....	44,136,259	48,669,244	46,043,044	39,058,623	40,865,116

FIVE-YEAR HISTORICAL DATA

(Continued)

	1 2018	2 2017	3 2016	4 2015	5 2014
Benefits and Reserve Increases (Page 6)					
45. Total certificate benefits - life (Lines 10, 11, 12, 13 and 14, Column 7 less Line 13, Column 5).....	43,574,565	38,852,596	42,778,168	34,932,921	38,695,344
46. Total certificate benefits - accident and health (Line 13, Column 5).....	.....	.....	.....	.....	.....
47. Increase in life reserves (Line 17, Column 2).....	1,122,001	1,582,834	88,073	2,854,295	(1,664,000)
48. Increase in accident and health reserves (Line 17, Column 5).....	.....	.....	.....	.....	.....
49. Refunds to members (Line 28, Column 1).....	1,357,635	1,367,407	1,358,435	1,457,056	2,641,572
Operating Percentages					
50. Insurance expense percent (Page 6, Column 1, Lines 19, 20 and 21 less Line 6, Column 1) ÷ (Page 6 Column 1, Line 1) x 100.0.....	29.1	27.1	18.9	21.9	27.4
51. Lapse percent [(Exhibit of Life Insurance, Column 2, Lines 14 and 15) ÷ 1/2 (Exhibit of Life Insurance, Column 2, Lines 1 and 21)] x 100.0.....	1.4	1.4	1.7	2.5	3.1
52. Accident and health loss percent (Schedule H, Part 1, Lines 5 and 6, Column 2).....	.....	.....	.....	.....	.....
53. A&H cost containment percent (Schedule H, Part 1, Line 4, Column 2).....	.....	.....	.....	.....	.....
54. Accident and health expense percent excluding cost containment expenses (Schedule H, Part 1, Line 10, Column 2).....	.....	.....	.....	.....	.....
Accident and Health Reserve Adequacy					
55. Incurred losses on prior years' claims (Schedule H, Part 3, Line 3.1, Column 1).....	.....	.....	.....	.....	.....
56. Prior years' liability and reserve (Schedule H, Part 3, Line 3.2, Column 1).....	.....	.....	.....	.....	.....
Net Gains from Operations After Refunds to Members by Lines of Business (Page 6, Line 29)					
57. Life Insurance (Column 2).....	2,000,931	3,061,925	2,209,103	2,184,759	2,510,944
58. Annuity (Column 3).....	4,863,914	5,331,795	5,105,395	4,782,979	5,322,489
59. Supplementary contracts (Column 4).....	(9,605)	(21,165)	(10,383)	(15,641)	(12,374)
60. Accident and health (Column 5).....	.....	.....	.....	.....	.....
61. Aggregate of all other lines of business (Column 6).....	.....	.....	.....	.....	.....
62. Fraternal (Column 8).....	(4,212,646)	(4,116,869)	(3,816,839)	(3,893,089)	(3,733,727)
63. Expense (Column 9).....	.....	.....	.....	.....	.....
64. Total (Column 1).....	2,642,594	4,255,686	3,487,276	3,059,008	4,087,332

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

Yes No

If no, please explain:

First Catholic Slovak Ladies Association Of The U.S.A.**EXHIBIT OF LIFE INSURANCE**

(\$000 Omitted for Amounts of Life Insurance)

	1 Number of Certificates	2 Amount of Insurance
1. In force end of prior year.....	131,798	1,145,799
2. Issued during year.....	802	18,695
3. Reinsurance assumed.....		
4. Revived during year.....	1	1
5. Increased during year (net).....		
6. Subtotals, Lines 2 to 5.....	803	18,696
7. Additions by refunds during year.....	XXX.....	3,762
8. Aggregate write-ins for increases.....	788	1,790
9. Totals (Line 1 plus Line 6 to Line 8).....	133,389	1,170,047
Deductions During Year:		
10. Death.....	2,702	8,988
11. Maturity.....	392	1,969
12. Disability.....		
13. Expiry.....	.85	.524
14. Surrender.....	1,621	13,026
15. Lapse.....	.86	3,482
16. Conversion.....		
17. Decreased (net).....	(2)	1,759
18. Reinsurance.....		
19. Aggregate write-ins for decreases.....	0	527
20. Totals (Lines 10 to 19).....	4,884	30,275
21. In force end of year (a) (Line 9 minus Line 20).....	128,505	1,139,772
22. Reinsurance ceded end of year.....	XXX.....	52,381
23. Line 21 minus Line 22.....	XXX.....	1,087,391

DETAILS OF WRITE-INS

0801. OTHER ADJUSTMENT.....	788	1,790
0802.		
0803.		
0898. Summary of remaining write-ins for Line 8 from overflow page.....	0	0
0899. Totals (Lines 0801 through 0803 plus 0898) (Line 8 above).....	788	1,790
1901. OTHER ADJUSTMENT.....		527
1902.		
1903.		
1998. Summary of remaining write-ins for Line 19 from overflow page.....	0	0
1999. Totals (Lines 1901 through 1903 plus 1998) (Line 19 above).....	0	527

(a) Paid-up insurance included in the final totals of Line 21 (including additions to certificates) number of certificates.....119,222 , amount, \$.....780,202,196.
 Additional accidental death benefits included in life certificates were in amount \$.....0. Does the society collect any contributions from members for general expenses of the society under fully paid-up certificates? Yes [] No [X]
 If not, how are such expenses met?.....

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

	1 Supplementary Contracts (Involving Life Contingencies)	2 Supplementary Contracts (Not Involving Life Contingencies)	3 Individual Annuities	4 Accident & Health Insurance
1. In force end of prior year.....		241	15,462	
2. Issued during year.....		232	588	
3. Reinsurance assumed.....				
4. Increased during year (net).....				
5. Totals (Lines 1 to 4).....	0	473	16,050	0
Deduction during year:				
6. Decreased during year (net).....		269	607	
7. Reinsurance ceded.....				
8. Totals (Lines 6 and 7).....	0	269	607	0
9. In force end of year (Line 5 minus Line 8).....	0	204	15,443	0
10. Amount on deposit.....		322,933	564,431,417	XXX.....
Income now payable:				
11. Amount of income payable.....				XXX.....
Deferred fully paid:				
12. Account balance.....	XXX.....	XXX.....		XXX.....
Deferred not fully paid:				
13. Account balance.....	XXX.....	XXX.....		XXX.....

First Catholic Slovak Ladies Association Of The U.S.A.

SCHEDULE T - PREMIUMS AND ANNUITY CONSIDERATIONS (b)

Allocated by States and Territories

States, Etc.	1 Active Status (a)	Direct Business Only					
		Life Contracts		4 Accident and Health Insurance Premiums, Including Policy, Mem- bership and Other Fees	5 Other Considerations	6 Total Columns 2 through 5	7 Deposit-Type Contracts
		2 Life Insurance Premiums	3 Annuity Considerations				
1. Alabama.....	AL.....	1,069	17,400			18,469	3
2. Alaska.....	AK.....	1,187	4,150			5,337	-
3. Arizona.....	AZ.....	7,965	101,125			109,090	31
4. Arkansas.....	AR.....	138	47,723			47,861	-
5. California.....	CA.....	20,747	1,366,403			1,387,150	-
6. Colorado.....	CO.....	22,208	676,883			699,091	-
7. Connecticut.....	CT.....	5,572	150,896			156,468	780
8. Delaware.....	DE.....	823	1,200			2,023	-
9. District of Columbia.....	DC.....	839	5,500			6,339	-
10. Florida.....	FL.....	20,768	195,279			216,047	192
11. Georgia.....	GA.....	4,242	60,078			64,320	16
12. Hawaii.....	HI.....	-	23,000			23,000	-
13. Idaho.....	ID.....	-	79,347			79,347	-
14. Illinois.....	IL.....	137,396	1,078,646			1,216,042	12,594
15. Indiana.....	IN.....	44,091	272,411			316,502	9,777
16. Iowa.....	IA.....	284,019	2,455,339			2,739,358	4,825
17. Kansas.....	KS.....	44,595	1,070,080			1,114,675	3,358
18. Kentucky.....	KY.....	1,209	12,000			13,209	2
19. Louisiana.....	LA.....	-	-			0	-
20. Maine.....	ME.....	17,343	-			17,343	1
21. Maryland.....	MD.....	6,886	31,790			38,676	22
22. Massachusetts.....	MA.....	5,799	2,597,215			2,603,014	18
23. Michigan.....	MI.....	39,252	161,090			200,342	4,168
24. Minnesota.....	MN.....	331,334	2,595,073			2,926,407	3,141
25. Mississippi.....	MS.....	N.....	-			0	-
26. Missouri.....	MO.....	4,273	183,900			188,173	17
27. Montana.....	MT.....	12,030	-			12,030	-
28. Nebraska.....	NE.....	352,647	5,989,425			6,342,072	11,942
29. Nevada.....	NV.....	2,109	271,344			273,453	-
30. New Hampshire.....	NH.....	N.....	-			0	-
31. New Jersey.....	NJ.....	69,231	255,245			324,476	4,240
32. New Mexico.....	NM.....	1,465	-			1,465	20
33. New York.....	NY.....	59,725	1,925,411			1,985,136	1,260
34. North Carolina.....	NC.....	9,561	3,550			13,111	4
35. North Dakota.....	ND.....	48,931	124,270			173,201	3,627
36. Ohio.....	OH.....	377,449	4,859,144			5,236,593	42,490
37. Oklahoma.....	OK.....	610	-			610	-
38. Oregon.....	OR.....	528	15,200			15,728	-
39. Pennsylvania.....	PA.....	658,073	4,382,071			5,040,144	42,162
40. Rhode Island.....	RI.....	4,229	161,296			165,525	-
41. South Carolina.....	SC.....	2,534	117,551			120,085	19
42. South Dakota.....	SD.....	21,663	142,663			164,326	935
43. Tennessee.....	TN.....	14,708	4,958			19,666	2
44. Texas.....	TX.....	20,608	324,852			345,460	894
45. Utah.....	UT.....	-	22,000			22,000	-
46. Vermont.....	VT.....	1,445	-			1,445	-
47. Virginia.....	VA.....	7,931	26,200			34,131	19
48. Washington.....	WA.....	2,998	46,406			49,404	64
49. West Virginia.....	WV.....	709	269,000			269,709	258
50. Wisconsin.....	WI.....	202,487	2,116,896			2,319,383	2,990
51. Wyoming.....	WY.....	-	-			0	-
52. American Samoa.....	AS.....	N.....	-			0	-
53. Guam.....	GU.....	N.....	-			0	-
54. Puerto Rico.....	PR.....	N.....	-			0	-
55. US Virgin Islands.....	VI.....	N.....	-			0	-
56. Northern Mariana Islands.....	MP.....	N.....	-			0	-
57. Canada.....	CAN.....	N.....	-			0	-
58. Aggregate Other Alien.....	OT.....	XXX.....	0	0	0	0	0
59. Subtotal.....		XXX.....	2,873,426	34,244,010	0	37,117,436	149,871
60. Reporting entity contributions for employee benefit plans.....		XXX.....	-	-	-	0	-
61. Dividends or refunds applied to purchase paid-up additions and annuities.....		XXX.....	1,132,184	-	-	1,132,184	-
62. Dividends or refunds applied to shorten endowment or premium paying period.....		XXX.....	-	-	-	0	-
63. Premium or annuity considerations waived under disability or other contract provisions.....		XXX.....	-	-	-	0	-
64. Aggregate other amounts not allocable by State.....		XXX.....	0	0	0	0	0
65. Totals (Direct Business).....		XXX.....	4,005,610	34,244,010	0	38,249,620	149,871
66. Plus reinsurance assumed.....		XXX.....	-	-	-	0	-
67. Totals (All Business).....		XXX.....	4,005,610	34,244,010	0	38,249,620	149,871
68. Less reinsurance ceded.....		XXX.....	325,816	-	-	325,816	-
69. Totals (All Business) less reinsurance ceded.....		XXX.....	3,679,794	34,244,010	(b).....0	37,923,804	149,871

DETAILS OF WRITE-INS

58001.....	XXX.....					0	
58002.....	XXX.....					0	
58003.....	XXX.....					0	
58998. Summ. of remaining write-ins for line 58 from overflow page.....	XXX.....	0	0	0	0	0	0
58999. Total (Lines 58001 thru 58003 plus 58998) (Line 58 above).....	XXX.....	0	0	0	0	0	0

(a) Active Status Counts:

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG..... 49
 E - Eligible - Reporting entities eligible or approved to write surplus lines in the state..... 0

R - Registered - Non-domiciled RRGs..... 0
 Q - Qualified - Qualified or accredited reinsurer..... 0
 N - None of the above - Not allowed to write business in the state..... 8

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

Life Insurance Premiums and Annuity Considerations are
based on funds Collected.

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

SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP
PART 1 – ORGANIZATIONAL CHART

2018 ALPHABETICAL INDEX
FRATERNAL ANNUAL STATEMENT BLANK

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